





ABOUT THIS MANUAL

This publication has been developed as part of the project Empowering Emotion-Focused Therapy Practice in Europe known as EmpoweringEFT@EU project (Erasmus+ Project reference: 2020-1-PT01-KA202-078724). We are grateful for the funding provided by the Erasmus+ KA2 - Cooperation for innovation and the exchange of good practices, KA202 - Strategic Partnerships for Vocational Training. We would like to recognize the importance and the expertise gathered by the EmpoweringEFT@EU project team and associated partners, and other worldwide experts in Emotion Focused Therapy (EFT), who provided valuable insights for this document (through participating in the EmpoweringEFT@EU interviews to EFT experts or we acknowledge outputs). contributions provided by the EFT trainees (also through participating in interviews or feedback assessment of training) involved in the EmpoweringEFT@EU training and dissemination initiatives. The valuable feedback received from all these colleagues throughout the three years of this project, allowed our team to develop the present document as Intellectual Output 4: Good Practice Guide for Emotion Focused Therapy Training.

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Note: If you wish to refer to this document, please use the following:

Salgado, J., Cunha, C., Elliott, R., Jodar-Anchía, R., Timulak, L., Auszra, L., Herrmann, I., & the EmpoweringEFT@EU project team (2023). Good Practice Guide for Emotion-Focused Therapy Training (English version). Maia. Ed. UMAIA. eISBN: @

Available at: https://emotionfocusedtherapy.eu/project-outputs/ Retrieved at: [insert the date you downloaded it].

1. Introduction and Overview



This manual is intended to provide the user with valuable guidance on how to plan, prepare, conduct, and sustain training in EFT (Emotion-Focused Therapy). It begins with the general idea that the best structure for Emotion-Focused Therapy (EFT) training will depend on the specific goals and objectives of the training, its context/setting, the level of experience of the participants (e.g. trainees), and the specific contents being taught. Thus, this manual is designed as a tool that can be easily adapted to varying specific training circumstances.

It is based on a previous document, with the title "A Framework of Competencies for Emotion-Focused Therapy Training", developed as the first Intellectual Output (IO1) within the EmpoweringEFT@EU project [Empowering Emotion-Focused Therapy Practice in Europe, an Erasmus+ Project with reference N.° 2020-1-PT01-KA202-078724]. In that document (IO1), the basic foundations and the training competencies necessary to conduct an effective training program in EFT were laid out by Elliott et al. (2022b). In the current manual/good practice guide (IO4 of the EmpoweringEFT@EU project), the goal is to provide a more hands-on approach that will support the development of effective and attractive training programs and sessions that aim to develop the best competencies for EFT practice. Thus, this document is articulated with other documents (Intellectual Outputs) produced by the EmpoweringEFT@EU project team, namely: the Therapist Competencies for Emotion-Focused Therapy Practice (an Appendix that was developed as the basis for all subsequent documents of this project; Elliott et al., 2021), a Framework of Competencies for Emotion-Focused Therapy Training (IO1; Elliott et al., 2022b), the EFT Supervisor Competency Framework (IO2; Elliott et al., 2022a) and a Good Practice Guide for EFT Supervision (IO5; Jodar-Anchia, et al., 2023), all freely available through the project website (www.emotionfocusedtherapy.eu).

After this Introduction and overview, we provide a synthesis of the framework for EFT training (IO1, in section 2), and present a summary of the principles and competencies that guide psychotherapy training in the modality of EFT. Then, we contrast the perspectives of EFT experts and the perspective of EFT trainees, and review main motivations, positive experiences and challenges reported in the journey of learning EFT (section 3). Section 4 develops a set of recommendations and good practices for conducting effective in-person and online training in EFT and to grow positive learning and practice communities in this modality. The last section of this guide (section 5) reflects upon a pilot workshop to train EFT trainers and facilitators and the "training secrets" shared during that experience. Finally, we close the current contribution with an illustration of a training curricula for foundational training in EFT, based on the experience provided by the Portuguese EFT institute (SPTFE - Sociedade Portuguesa de Terapia Focada nas Emoções) in 2022/2023, following the training model of the Scottish EFT Institute (see Supplemental material).

We hope this document may be a contribution to further the discussion on EFT training practices, so that this psychotherapy modality and its worldwide community keep showing the vitality, rigor and capacity for growth and innovation that has characterized its history until today.

















The present section is a summary of the Framework of Competencies for Emotion Focused Therapy Training (proposed by Elliott et al., 2022b), developed as IO1 of the EmpoweringEFT@EU project, and follows its main sections. IO1 was based upon the knowledge shared by the several experts in this team and other expert trainers that were interviewed during this project. We start by situating EFT training and the general characteristics of EFT trainers. Then, we focus on the organization of the didactic part of the training, the skills practice segments as the best opportunity to involve trainees in experiential learning that is the hallmark of EFT training and finalize with some considerations regarding the assessment of EFT training. We also highlight the importance of informal network meetings (among other training or dissemination initiatives), as a way to keep local communities of trainees and EFT therapists engaged with each other and nurtured in their interest for EFT.

2.0. Situating training in EFT

EFT training takes place in various contexts such as EFT institutes, academic, professional, and research settings [1]. Not only does the context vary, but so also do the goals of the training, its specific format, and the previous background of the trainees. All these elements should make a difference in planning and delivering the training.

Despite this variety, there are some common characteristics of EFT training. Key features include understanding EFT theory and principles of practice, as well as viewing video-recorded examples of good practice. There are many resources available, such as the APA video series on psychotherapy, to aid in this process. Training also involves experiencing EFT as both a therapist and a client, through skills practice with other trainees in a safe environment (i.e., engaging both in the role/position of client, working with one's own experiences in skills practice and being in the role/position of therapist, to acquire mastery in the delivery of EFT). Additionally, EFT training values the personal growth and development of the trainee, as it is based on an experiential and humanistic approach.

The most typical modality of training to become an EFT therapist is based on workshops of progressive proficiency. Nevertheless, training in EFT may use all other sorts of modalities, including readings/self-study, practice/supervision, personal work, research, and informal network meetings.

The training can take multiple forms, which can be organized according to a development pathway of EFT proficiency and certification (as therapist, supervisor, or trainer). Simpler and briefer forms of training are available as tasters, lectures, and brief workshops. Then, we have foundational training, which corresponds to what has been labeled as Level 1 and Level 2workshops or analog forms of training (Masterclasses or University-embedded classes). These workshops or classes combine the following elements: (a) didactic presentations; (b) examples/videos (embedded in the didactic presentations); (c) experiential exercises/skill practice; (d) opportunities for group discussion/self-reflection/integration of learning.

[1] We acknowledge the diverse array of organizations responsible for hosting EFT training events. However, to simplify references to these various entities and enhance readability, we will primarily employ the term 'institute' as a term encompassing all such organizations.















After the foundational training, the trainee may proceed to therapeutic practice and supervision, until completing accreditation as a certified EFT therapist (level C according to ISEFT standards, available at www.iseft.org). The final stages of EFT training include training and accreditation as an EFT supervisor (level D) and as an EFT trainer (level E). Additional training standards can be applicable, especially in countries which have adopted the training standards prescribed by overarching organizations regulating the practice of psychotherapy (more on this below).

EFT training should be organized around humanistic learning environments, which entail safety, and trust to experiment and to expose one's vulnerabilities; fostering engagement and opportunities to learn, and grow; developing a sense of responsibility, and setting adequate and good boundaries; establishing adequate resources and competencies at all levels, ensuring a genuinely supportive structure.

2.1. General Characteristics of EFT Trainers

There are different types of trainers. The main ones are the following: Accredited EFT trainers; trainers-in-training; facilitators that help with the experiential part of the training. An EFT trainer should have previous extensive practice as an EFT therapist and supervisor, which necessarily entails mastery of EFT theory and practice. Experience in graduate teaching and evaluation, and experience in EFT therapy research is also very useful.

To effectively deliver EFT training, one must possess a variety of skills. The first skill is the ability to invite, welcome, and intrigue participants, making them excited and motivated to learn EFT. Secondly, the trainer must have the ability to instruct and communicate theory and practice with clarity and concision, ensuring that the participants understand the material. Thirdly, the trainer must be able to model and exemplify EFT in their delivery of the training, providing a clear and practical example for the participants to follow as well as in the experiential practice where the trainer has to demonstrate an expert skill as EFT therapist. Fourthly, the trainer must be able to entertain, engage, inspire, and maintain the interest of the participants using clips, jokes, and interactive activities. Fifthly, the trainer must be able to hold, support, encourage and empathize with the participants, creating a safe and supportive learning environment. Lastly, the trainer must be responsive, creative, flexible, and culturally sensitive in adapting to the specific needs of participants and training settings.

2.2. Didactic Training

An EFT trainer should be proficient in different dimensions of the training didactics, namely, proficiency in the contents, in the form of delivery of those contents, in fostering trainees' motivation and interest, and in managing group dynamics.

Proficiency in Contents. A first goal of any training is to deliver relevant information in a clear, effective way so that trainees understand it. Thus, EFT trainers need to master theoretical and practical information in areas such as: the field of psychotherapy, and humanistic-experiential therapies; EFT theory (including its conceptual tools and clinical applications); the provision of EFT (including perceptual/conceptual skills, relational skills and intervention skills); and EFT

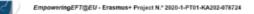














case formulation/conceptualization.

Proficiency in the process of training: Delivery, motivation, and group dynamics. When delivering the training, the trainer should be systematic, comprehensive, and coherent, without losing flexibility and responsiveness to the trainees' needs, being attentive to the various levels of previous knowledge. Contents should be exemplified in various formats, including video; and intervention skills should be modeled (the trainer should demonstrate an expert skill as an EFT therapist). Trainers should also be able to promote the trainees' agency and sustain their motivation. The trainer should also be proficient in facilitating the trainee group dynamic and handling the most common group/trainee difficulties during the experiential skills practice, so it will be conducive to trainees' learning (more on this below).

2.3. Organizing and Facilitating Experiential Exercises/Skill Practice

One distinctive feature of EFT training is the weight it attributes to experiential exercises and skills practice that trainees need to go through, as therapists-in-training, but also as human beings. Experiential exercises require that trainees work at an appropriate level on their personal issues and emotional experiences, as a way of self-reflection or by assuming the role/position of a client. This occurs mainly by using their own experiences to go through an experiential learning/change process that embodies the change process of EFT clients, sometimes termed "real play" skills practice (to contrast with role-play exercises, which involve fictional situations or fictional clients). Thus, this section complements the previous one by detailing key aspects of implementing those forms of practice.

Exercise formats: A taxonomy of experiential exercises. Experiential exercises can be broadly categorized into five types: (1) personal development exercises, which focus on self-awareness, self-knowledge, personal growth, empathy, and overcoming therapist blocks; (2) therapeutic presence exercises, which focus on general presence and self-disclosure; (3) therapeutic alliance building exercises; (4) empathy exercises; and (5) task facilitation exercises.

Checking resources for experiential exercises. The trainer must create appropriate conditions for experiential exercises or skills practice by assessing its suitability for the training context, taking into consideration the group size, availability of appropriate facilities such as number of rooms, number of (co-)facilitators, length and types of exercises, and defining appropriate timing for each aspect of the exercise, including instructions, starting the exercise, closing, debriefing, and group discussion.

Promoting a collaborative and safe environment for experiential work. To ensure a collaborative and safe environment for experiential work, trainers must work actively to create it, by fostering a suitable level of motivation and engagement, providing appropriate challenges within the trainees' zone of proximal development, being attentive and responsive to sensitive issues such as dual relationships in the group or vulnerabilities brought to the surface during personal work, facilitating productive group discussions for trainees to formulate their own observations and achievements, and participating in the formation of groups by taking into account different issues such as gender, culture, and level of experience.

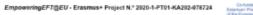














Providing Clear Instructions. When conducting experiential exercises, the trainer should clearly outline the specific goals, provide a rationale, address any trainee concerns, provide clear instructions and establish roles for each member. During this phase of the process, trainers should be fully present, use self-disclosure as a model for trainee attitude and openness, and support the work of co-facilitators and the learning process of trainers-in-training (e.g., shadowers and facilitators).

Facilitating the experiential work. After setting up the experiential "real-play" exercises in a small group (where one trainee will share a real personal issue or difficulty and another trainee will occupy the role of therapist, while other trainees will be observers or "helpers"/surrogate therapists), the trainer should be largely but not exclusively oriented to the trainee engaged in the client role. Nevertheless, the trainer should also consider the needs of trainees in the role of therapist, which include facilitating the development of clinical competencies within their zone of proximal development. A distinction between the didactic purpose of the exercise (more centered in the trainee assuming the role of the therapist) and the therapeutic task (centered in the trainees' experience in the client role) must be kept in mind, deciding when to stick to the intended task and when to suggest new tasks/processes. The trainer must also keep the right balance between supporting and leading, providing feedback and modeling (modeling should demonstrate an expert level of therapist skill). Group dynamics need to be considered so that the trainer can address difficulties that may emerge, including disruptive processes such as confrontation or withdrawal ruptures and conflicts among group members. When these occur the trainer should attempt to debrief the small exercise groups and facilitate learning in the large training group by linking experiential learning with didactic content.

2.4. Assessment in EFT Training

In EFT training, assessment supports the overarching goal of co-creating a developmental path for trainees that enhances their qualities and skills as EFT therapists and eventually provides evidence of their mastery of the competencies for EFT practice. Ideally, learning outcomes should be framed in terms of trainee/therapist competencies that should be met (e.g. At the end of this training, each trainee should be able to...). Then, the final goal of the summative assessment of training and supervision is to be checked against therapists' competencies (see the Appendix EFT Therapist Competency Framework and the EFT Supervisor Competency Framework - IO2).

Philosophy of assessment in EFT training. When conducting assessment of EFT trainees, the trainer should follow a neo-humanistic stance, providing sensitive but genuine feedback about trainee performance, promoting trainee self-awareness and skills, while being faithful to the constraints imposed by the features of EFT and by general guidelines of good clinical practice. Ways and domains of assessment. The trainer will assess trainees in varying ways, ranging from more informal to more formal modes of assessment. These later ones can also be either formative or summative. The trainer should cover different domains of the trainee competencies, including conceptual knowledge about specific aspects of EFT, and the performance, including the here-and-now presence, of the trainee in the therapist role.

















Trainer sensitivity to training contexts and competency in different forms of assessment. The trainer must customize the assessment procedures to align with the specific training objectives, level of training, training context, and requirements of involved organizations. The trainer should maintain a balance between facilitating and assessing, always adhering to humanistic values and professional standards. To evaluate conceptual and perceptual knowledge, the trainer should be proficient in using a variety of methods, including the ability to apply this knowledge to real-world cases. This may include expertise in using different forms of assessment such as multiple-choice or closed questions for objective content, open-ended questions for reflective evaluation, applied exercises based on videos (of real therapy sessions) or demonstrations, reflective essays, and clinical/scientific writing such as clinical formulation or case studies. Additionally, the trainer should be proficient in assessing and providing feedback on trainees' clinical formulation skills, relational skills during skill practice or therapy sessions, and personal development through experiential assignments and reflection on personal experiences. The trainer should also be able to combine these different forms of assessment to create comprehensive and complex evaluations.

2.5. Informal Network Meetings

EFT Network Meetings are informal training opportunities that provide support for local EFT communities. They are usually sponsored by a local EFT institute and are typically free or low-cost, either held in-person or online. They vary from 2 to 5 hours in length, are held monthly to quarterly, and scheduled on weekends or evenings. Useful elements for EFT Network Meetings include book studies, intervision/peer supervision, watching EFT videos (always popular!), peer skill practice, informal networking, EFT news/features, and formal presentations on elements of EFT practice or theory. Logistics include finding a physical space or online platform, managing membership, and providing resources such as money and time/energy to organize and promote the event. The Scottish EFT Institute Network Meetings serve as an example of this type of event (http://www.eft-scotland.org/?page_id=45).







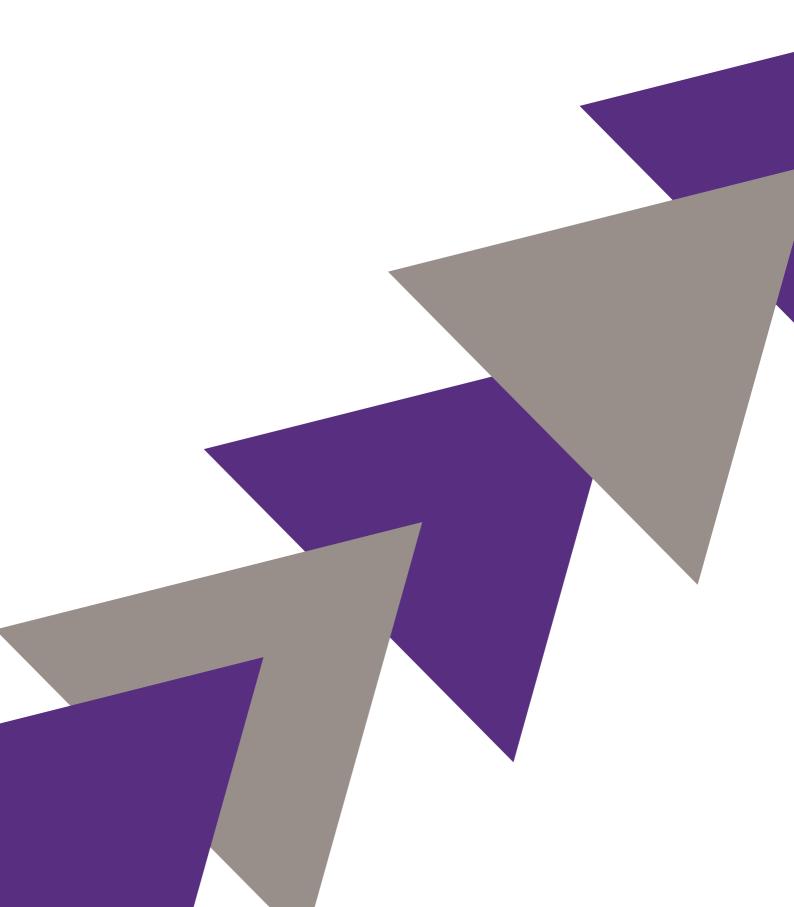








3. From the experts to the trainees in EFT: Completing the Gestalt



We have been reviewing the ideal aspects of EFT training as proposed by the experts and members of the EmpoweringEFT@EU team. In this section, however, we place an added focus now on the journey of EFT trainees. Thus, we start by reviewing main findings from the EmpoweringEFT@EU interviews to EFT experts and then shift the focus to EFT trainees. We highlight qualitative studies conducted by members of the EmpoweringEFT@EU team, which focused on and explored the experiences and perspectives of trainers regarding their process of learning EFT, including their main motivations, positive experiences and challenges.

3.1. Listening to the experts on EFT training: Contributions from the EmpoweringEFT@EU interviews

During the course of the EmpoweringEFT@EU project, the team decided to conduct interviews specifically designed to gather knowledge from EFT experts on training and supervision (called the EmpoweringEFT@EU interviews). We went on to interview online several EFT experts worldwide, as an opportunity to collect their insights and knowledge on EFT training, as well as their perspectives upon their journey and the most effective practices and challenges experienced from training several generations of EFT therapists worldwide. We have interviewed the originators and co-developers of EFT, that we termed the first generation of EFT expert trainers (based in North America), and also interviewed other EFT trainers (trained by the former) who work to disseminate, train and do research in EFT in different countries and cultures (geographically spread to other parts of the world).

Although we have interviewed more than twenty EFT experts already (and we aim to keep conducting these interviews even after the termination of this project), we refer readers to upcoming contributions for more details on this (as we plan to publish that study in the future). We would like to acknowledge, though, the contributions of the EmpoweringEFT@EU team and especially of several master students or PhD students who analyzed a subsample of these interviews in their dissertations (some contributions had a focus on the perspectives of experts on EFT training while others had a focus on EFT supervision; some interviews gathered the perspectives and experiences of EFT trainers or trainees/supervisees; e.g.[1] [2] [3] Almeida, 2022; Barbosa, 2023; Lima, 2022; Lopes, 2021; Reisinho, 2022; Rodrigues et al., 2023).

We synthesize the main findings from a subsample of these EFT experts (eight experts interviewed first, between 2021-2022), carried out by Almeida (2022). The main results of these interviews show that an empathic and safe relationship between trainer (and co-facilitators) and trainees is essential for the proper functioning of the training and for the agreement upon goals and activities throughout the training in EFT. The main challenges these experts faced in the provision of EFT training has been: 1) Managing trainees with different levels of development and experience within EFT, 2) Balancing positive feedback while at the same time pointing out areas of growth according to trainees' difficulties, and 3) Addressing trainees' blocks (e.g. to express therapist empathy in the form of empathic attunement, addressing difficulties in shifting perspectives and adopting the EFT stance, for trainees who have experienced training in other psychotherapy modalities). These experts also acknowledge that EFT proves to be a complex model to learn, when compared to other approaches, which can create added difficulty in the learning process for new therapists. According to these partici-

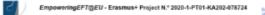














-pants, online training (during the COVID pandemic lockdowns) revealed no significant disadvantages when compared to face-to-face training, due to the similarities in the quality of learning between both and due to allowing greater international dissemination of EFT.

3.2. Listening to the EFT trainees: Positive experiences and challenges in the process of learning until reaching accreditation as EFT therapists

Even though the few studies exploring the perspective of psychotherapy trainees provide evidence that learning a modality of psychotherapy is usually a stressful process (Folkes-Skinner, 2010), learning the modality of EFT may be even more. The initial focus groups with EFT students and trainees that were conducted in the preparation of the Learning EFT book (Elliott et al., 2004), showed that EFT trainees consider that EFT is a complex therapy to learn and that training in this modality is "sometimes stressful, pressurized, and anxiety provoking" (p. 312). Thus, given what is stated above, the complexity of EFT and EFT training is a realization that is shared by both EFT trainers and trainees.

We now review a prior qualitative study conducted by members of the EmpoweringEFT@EU team, which focused upon and explored the experiences and perspectives of EFT trainees regarding their process of learning EFT. The authors (Qiu et al., 2020) recruited ten EFT therapists for individuals: eight counseling psychologists, one clinical psychologist and one psychotherapist (five male and five female, with a mean age of 43 years old; all accredited practitioners in Ireland before receiving EFT training and progressing through certification as EFT therapists). They were all interviewed to explore their experiences of learning EFT, namely through a combination of didactic training, experiential exercises, supervision, and other methods (e.g. self-study and research involvement). The interview also addressed their main motivations, positive experiences, and challenges.

Motivations. Qiu et al. (2020) found several reasons advanced by these trainee therapists for pursuing increasing opportunities for learning EFT, namely: i) they reported prior exposure to EFT, as evidenced by most of the participants; ii) they perceived advantages and benefits for their clinical work through using EFT (as an effective way to help clients process emotions at a deeper level or as a flexible approach to work effectively with clients with complex presentations); iii) the approach was experienced as congruent with their understanding of clinical work; and iv) the training and qualification in this modality, received by taking part in EFT research, was experienced as an opportunity for growth and professional development.

Positive experiences. Besides the challenges and difficulties, these authors (Qiu et al., 2020) also explored positive experiences related to learning EFT, summarized in Table 1.

Table 1. Positive Aspects of Learning EFT (Qiu et al., 2020, p. 317-318)

Didactic Learning

Watching videos is a helpful part in didactic learning.

Didactic training provides rational, diagrams or models that develop better understanding of EFT.

Trainer's personal training style facilitates trainees' engagement in learning.

Combining theories, videos and space for questions provides a well-balanced, interactive training.

















Written learning material increases therapists' understanding.

Experiential Exercises

Therapists gain confidence in developing their personal EFT style by observing different trainers/facilitators.

Positive experiences appear by being in a client role in real play, by being in a therapist role in real play, and by having a trainer/facilitator take over the therapist role in real play.

Therapists felt emotionally safe during real play.

Therapists acknowledge the power and effectiveness of EFT by observing other therapists' emotional growth during real play.

Supervision

Therapists gained rich learning by bringing their session recordings to supervision.

Therapists became more confident in conducting EFT by developing competencies and own mastery of EFT during supervision. Supervisor's competencies of providing constructive feedback contributed to therapists' learning during supervision.

Therapists felt supported by having a space to discuss challenges and receive guidance on clinical work.

Research, Self-study and other methods

Therapists got chances to learn more about EFT and attend supervision by involvement in research projects.

Therapists got opportunity to keep in touch with EFT and gained increased ability to skillfully conduct pure EFT with clients,

Therapists gained more confidence in learning and practicing EFT when seeing ongoing research on EFT.

Self-study helped therapists learn EFT.

Therapists experienced positive post-training outcomes.

Therapists felt increasingly motivated and enthusiastic to learn more about EFT.

The combination of different training parts helped learn EFT in an effective way.

Challenges. According to the analysis conducted by Qiu et al. (2020), these certified EFT therapists also experienced specific challenges or difficulties while learning this modality, namely:

- **Challenges related to Didactic Learning**: Some of therapists found EFT too complicated and technical to grasp initially; also, when they were previously trained as Person-centered therapists, it was challenging to learn a more directive EFT approach theory.
- Challenges related to being in a Therapist Role during Experiential Exercises (=skill practice during training): Almost all the therapists experienced some difficulties related to being in a therapist role, namely:
 - Difficulties to attune to client's emotions while keeping track and staying focused on the EFT task;
 - Fear of being judged as incompetent by more qualified, fellow therapists/trainees.;
 - Experiential exercises are anxiety inducing.
 - EFT requires a conceptual shift from a more interpretative interpersonal stance to a focus on clients' emotional processes.
- Challenges related to being in a Client Role during Experiential Exercises: Most of the
 therapists experienced a specific difficulty related to being in a client role, among the
 following:
 - O Difficulties related to showing ones' real-life issues and vulnerabilities in a small professional community with people who know each other;
 - Men may feel pressured to show more emotional expression than they are comfortable

















- o with;
- Therapists may feel afraid of entering in contact with and/or find it hard to stop processing painful emotions;
- o Therapists who had previous real-play experiences may feel afraid of entering the client role with therapists who haven't mastered EFT.
- Challenges in relation to Trainers/Facilitators during Experiential Exercises: Some therapists experienced specific difficulties in relation to the EFT trainers/facilitators, namely:
 - Self-doubt when comparing to experienced EFT trainers/facilitators;
 - Therapists felt a negative experience in moments of unclear expectations or unspoken challenges;
 - Corrective feedback from the training team can be experienced as hurtful.
- Challenges in relation to Supervision: Several therapists reported experiencing specific difficulties in relation to supervision, such as:
 - Therapists may feel incompetent in supervision when showing their recorded sessions;
 - o Therapists may feel that the access to supervision is difficult, due to the small size of the EFT community and/or financial costs or time required for accessing supervision.
- Challenges in relation to Self-study and other learning methods: Most of the therapists experienced difficulties while learning EFT, due to this model being emotionally and academically challenging. A few of the therapists also found that their working settings were not suitable for a "pure" EFT practice, which can also lead to added pressure when being engaged in EFT research.

















Section 4 presents a set of recommendations and good practices for conducting effective inperson and online training in EFT and growing positive learning and practice communities in this modality. These recommendations are oriented toward helping trainers, training teams (of trainers-in-training and facilitators) or even communities interested in developing EFT training but who still lack some resources to do it in a fully autonomous way. Nevertheless, it is also meant to contribute to developing clearer guidelines for coherent training across multiple countries and communities, fostering interchangeable experiences and facilitating international accreditation.

4.1. Planning: Before the training

The decision process about the type of EFT training to develop and offer can be complex, and depends on several factors, including the goals and objectives of the training, the level of experience of the participants, the resources available, and the specific contents and skills to be trained. In Table 2, we present a synthetic overview of four types of training. This is not intended to be an exhaustive list of types of training, but rather to help EFT communities around the world to think about potential forms of activity that may be developed. A good starting point in deciding the type of training is to determine the goals and objectives a given community might have. Here, we distinguish 4 basic types of training: to give a brief introduction to EFT (a "Taster"); to give a comprehensive overview of EFT; to train specific skills or concepts; or to give foundational training. This last kind of training is more adequate for people who are already interested in becoming accredited EFT therapists, or at least considering that possibility; the other kinds are more adequate for disseminating EFT to other audiences.

Table 2. Goals, formats, audiences, and contents of EFT training: A basic overview					
Goals	Formats and length	Audience: Type and Level of experience	Contents		
To give a brief introduction to EFT ("Tasters")	Brief talks Lectures (short)	Low experience in EFT, including: -General public Relevant stakeholders for mental health policies, such as managers of mental organizations or politicians devoted to health or social welfare Students (Undergraduate or Graduate) Mental health professionals Psychotherapists from other orientations	Main features of EFT, such as sources, concepts, tasks, empirical support, etc.		
To give a comprehensive basic overview of EFT	Basic course on EFT	 Low experience in EFT, including: - Students (Undergraduate or Graduate) Mental health professionals Psychotherapists from other orientations 	An overview will likely include: Origins/Main influences of EFT; EFT theory of emotions (types, emotion schemes); Basic principles of intervention (Following/ Guiding); Main markers and main tasks.		

















To teach specific concepts/themes and/or train very specific skills (e.g., how to conduct chair work; EFT applied to Generalized Anxiety Disorder)	Workshops or Masterclasses	Usually, this is more recommended for audiences with some previous experience on EFT, but can be adapted to audiences with lower experience. So, this may include: Students (Undergraduate or Graduate) Mental health professionals Psychotherapists from other orientations Certified EFT therapists	Varied, but focused on specific topics
To give foundational training, corresponding toLevel 1 and Level 2 workshops or analog forms of training (University embedded classes)	Typically, several intensive full- day workshops But also University embedded classes (1 or 2 semesters per level)	Level 1: Mental health professionals, with low to moderate experience in EFT, including Graduate Students, Psychologists, or even Psychotherapists from other orientations Level 2: Completers of level 1	Level 1: • Emotion theory: eg emotion response types, emotional deepening • Basic Empathic processes • Key EFT Tasks: Focusing, SEU, Empty Chair, Two Chair Level 2: • Empathy & Relational processes • Case formulation • Vulnerability & Selfsoothing • Advanced two chair work: Self-interruption & Anxiety & depressive splits • Advanced Empty Chair work
To provide a comprehensive training in EFT	Self-contained training course; 3 - 4 years	Part- or full-time students with psychology degree but little or no psychotherapy training or experience	For more detail see section 4.1.1.

These different goals and formats of training require different resources and will also produce different types of results. Thus, "Tasters", for example, can be a good idea to create attention from a wider audience, while not requiring much more staff trained in EFT besides the trainer. At the same time, foundational training seems vital to start an internationally recognized EFT community, but that will entail a need of, at least, two members in the training staff (the trainer and at least one more facilitator for the small group skill practice exercises). At the same time, introducing courses on EFT in academic settings is highly recommended since it is important to warrant EFT presence in academic curricula to sustain its viability and to preserve its teachings.

4.1.1. Adjusting EFT training to overarching European standards regarding psychotherapy training

As the EmpoweringEFT@EU project takes place in a European context, we would like to acknowledge the recommendations of several overarching European organizations regulating



















the practice of psychotherapy. We will focus on two organizations: the European Federation of Psychologists' Associations (EFPA), and the European Association of Psychotherapy (EAP). Both organizations provide overarching requirements for training certified professionals for the practice of psychotherapy[1]. When these standards become adopted by national organizations (such as Psychologist's national organizations, Counselors organizations or Psychotherapists' organizations, when applicable) they can impact the development of the training curricula in EFT in the affiliated institutes and professional accreditation in specific regions.

The EFPA became a standard for the training of psychologists (especially after the Bologna Process), namely in the access to the post-qualification training in psychotherapy. Among other requirements for the training of psychologists (i.e. the minimum training requirements to be eligible for accessing the EuroPsy Certificate; Lunt, 2011), for those interested in accessing the EuroPsy Specialist Certificate in Psychotherapy, training must fulfill additional requirements, which have been adopted by many national/local organizations of psychologists (namely in Portugal and Spain, among other European countries). These requirements usually include (at least): 90 ECTS of further study in psychotherapy models, of which 400 hours should be devoted to theory; 150 hours of supervision (on average 50 per year); three years of postgraduate practice (post eligibility for the minimum training requirements to access the EuroPsy Certificate), of which 500 hours is supervised practice (see Annex 1 of EuroPsy Regulations; EFPA, 2023). Moreover, the EFPA Training Standards explicitly state that a Psychotherapy Trainer should be a recognized expert in their field at doctoral level or a specialist of comparable standing. Also, according to the EFPA, both Psychotherapy Trainers and Psychotherapy Supervisors in a given psychotherapeutic model (such as EFT) should be specialized psychologists with a minimum of 3 years of post-qualification professional experience in psychotherapy.

The EAP (European Association of Psychotherapy) is another organization for the development and regulation of psychotherapy standards in European countries and the European Union, which has training standards adopted by several countries regarding the practice of psychotherapy (for example in Belgium and Denmark, among other European countries), sometimes regulated as an independent profession. The EAP framework prescribes that the total duration of the education and training for a professional psychotherapist must not be less than 3200 hours (spread over five to seven years depending on whether the training is conducted solely through a university or through a combination of academic training and professional training carried out by a non-academic training institute; Ginger, 2009). If these longer training programs comply with the EAP standards, trainees may apply to a European Certificate for Psychotherapy.

According to both organizations, to achieve full accreditation or advanced specialization as a psychotherapist, the training of each professional must include a combination of: theoretical and practical knowledge, supervision and supervised practice, and personal training/development (e.g. personal training or learning therapy or other alternatives to foster

[2] <u>https://www.efpa.eu/efpa-statement-psychologists-practicing-psychotherapy https://www.europsyche.org/quality-standards/eap-standards/</u>

















therapists' growth/development and ensure that trainees are aware of and can appropriately manage their personal involvement in, and contribution to, the psychotherapy processes they are involved in). The length of training can vary if the goal of the training curricula in EFT is to provide a full accreditation - not only according to ISEFT standards - but especially if the national/regional organizations adopt the training standards recommended by these overarching organizations. For example, in the UK there are two sets of standards, one for counsellors and the other for psychotherapists, each with their own criteria and requirements. This can imply the development of training curricula that can widen the scope of training beyond in EFT, usually embedded in a longer person-centred/experiential therapy training, for example. In summary, EFT training may need to be adapted to each set of national/local professional and training standards.

4.2. Developing an EFT community

Another vital aspect before setting up a specific training might be to reflect on the specific goals a specific person - let's say, a pioneer - in a specific region interested in developing EFT training has in mind. If the goal is just to promote contact with EFT and there are no accredited trainers in that specific region, maybe this pioneer will be interested in developing a Taster with an EFT-renowned therapist. Accordingly, this pioneer may invite an international trainer to organize this event. Usually, this varies from 1-day to 2-day workshop, sometimes complemented with a general masterclass to a wider audience. This was the way by which EFT started its introduction in different countries - for example, in Portugal, where Leslie S. Greenberg and Robert Elliott were invited at different moments to give this kind of workshop and/or masterclasses.

If the pioneer is interested in developing an EFT community and establishing training programs that lead to accreditation, it can be beneficial to begin by identifying local leaders who are among the most proficient EFT professionals in the region. These leaders can serve as a vital link between international trainers and the local community. They would take on the responsibility of organizing what we refer to as "foundational training," including levels 1, 2, and 3. To sustain the community's development, it becomes crucial to support and facilitate the progress and accreditation of these local leaders. This approach fosters a self-sufficient and resourceful community, gradually reducing its reliance on external support. Subsequently, these local leaders can decide to offer other forms of training, such as taster sessions or masterclasses, before assuming full responsibility for organizing their unique model of foundational training.

Another important path to increase the visibility and popularity of EFT is to sustain its development inside the academic world, via scientific research or via the introduction of EFT courses. Introducing EFT courses at varying levels of university programs, from undergraduate to graduate levels, and integrating it with knowledge about other forms of therapy and also to psychotherapy research helps to pave the way for future well-trained EFT therapists. Thus, proposing comprehensive courses on EFT at the Master's level would be a good starting point - and its depth will vary from program to program. For example, at Comillas University, students may apply to a Master's EFT program that offers a comprehensive psychotherapy















training course spanning 12 months. Participants engage in supervised practice with clients, acquiring hands-on experience integral to their development. The curriculum delves into a spectrum of crucial content, including empathic attunement, therapeutic skills aimed at cultivating and mending therapeutic alliances, case formulation in EFT and Emotion-Focused Therapy tasks. At Ph.D. level, if possible, the training can be very similar to the foundational training. For example, at the University of Maia, Portugal, currently, the students enrolled in the PhD in Clinical Psychology, who have a previous Master's degree in Psychology and are entitled to professional practice, have 3 mandatory courses related to EFT, with a total workload of 132 hours of classes, in small groups. This gives them extensive contact with the EFT model in terms of theory, research, and practice. On the other hand, in Scotland, where Masters-level training in Person-Centred counselling is well established, it makes more sense to deliver foundational EFT training at the post-master's level, as continuing professional education. However, counsellors tend to be less academically prepared and with less interest in research and psychology more broadly.

Academic settings often do create optimal conditions for improving EFT skills by offering opportunities to conduct intensive psychotherapy research. These general skills support the development of varied EFT clinical skills, which will depend on the specific research study under development. One excellent form of research training with clinical relevance, including for training of conceptual and perceptual skills, is derived from the rigorous application of observational measures. EFT research makes use of different sorts of observational measures, such as the Experiencing Scale (Klein, Mathieu-Coughlan, & Kiesler, 1986) or the CAMS (Pascual-Leone & Greenberg, 2005) to assess emotional processing; the CEAS-III to assess emotional arousal (Warwar & Greenberg, 1999; the ECCS to assess types of emotions (Herrmann, Greenberg, & Auszra, 2007); the CEPS - R to assess emotional productivity (Auszra, Greenberg & Herrmann, 2010); O-MAR for assessing emotional regulation (Watson & Prosser, 2006); the MEE to assess empathy (Watson, 1999), and the PCEPS-EFT-9 to assess treatment integrity in EFT (Elliott, Westwell & Monteiro, 2022). For example, if someone is using a scale such as PCEPS or PCEPS-EFT-9 for assessing the integrity of an EFT session (adherence and proficiency in EFT), this will imply previous in-depth study and training in the application of the scale in order to become a reliable coder, and application of the scale in an intensive way. Thus, beyond fostering knowledge acquisition, it also develops very specific perceptual EFT skills.

Thus, if someone is willing to increment EFT in a specific region through training activities, it will be a good starting point to reflect on the following issues:

4.2.1. Create a vision

What do you want? Ask yourself: What are my long-term aspirations for building an EFT community in my region? Dream big, as EFT aligns with neo-humanistic values, fostering a strong and supportive community, building a stronger and safer community that puts well-being and taking care of each other in the foreground. Why not?















4.2.2. Assess your resources

Identify the resources at your disposal, both EFT-related (e.g., trained therapists, supervisors, trainers) and non-EFT related (e.g., project funding, facilities, professional networks). A clear understanding of your available resources is crucial for planning.

4.2.3. Identify the needs in your environment

Consider why developing an EFT training community is essential for your region. Determine the needs and desires of the people and professionals around you that make EFT relevant to them. Why would developing an EFT training community be important for them?

4.2.4. Create a plan

Once you have a clear vision about what you want, and an understanding about the local motivations and resources, you can start defining your first steps. This might involve forming a team to design a training program tailored to your specific audience, incorporating both short-term and long-term goals.

4.2.5. Take Action

Now, it's time for action! Put your plan into motion and use the following sections as guidance to help you along the way.

4.3. Preparing and conducting the training

After deciding on the training to be implemented, there are some frequent steps to follow in order to prepare and deliver the training efficiently. The starting point should be a detailed training curriculum, including a schedule of topics and activities, and a list of required readings and other materials. This will entail developing a description of clear learning goals, and contents to be covered, and describing the different sorts of methods that will be used. The concrete learning goals that need to be developed will, of course, depend on the specific training at hand. These can be framed in a very generic way, but it will always be a good idea if the trainer is able to discriminate goals in the following domains:

- conceptual tools to be developed (e.g., in the end, the trainee will be able to understand...)
- clinical application of those conceptual tools (e.g., in the end, the trainee will be able to apply these new concepts to ...)
- goals related to specific skills to be developed (perceptual skills, relational skills intervention skills; formulation/conceptualization skills) (e.g., in the end, the trainee will be able to use the following skills...)















If the training is practice-oriented, most of the time it will probably make use of experiential exercises. If that is the case, it will be highly recommended to obtain a previous informed consent from the trainees as a prerequisite for registration in the training. In Portugal, a form was created that trainees fill out in order to register for level 1 or 2 training. Below you will find a refined version of that document:

Table 3. Agreement Statement Regarding the Emotional Aspects of Training and Privacy
I,, hereby acknowledge and fully understand the nature of the [name of the event], scheduled [dates] organized by the [institute].
I recognize that this training involves experiential learning activities, which involve experiential exercises. These are characterized mainly by "real play" exercises, in which I and my fellow trainees will be invited to play the role of client or therapist, and where the client is supposed to share real personal experiences, most of them involving emotionally difficult content. Thus, I am aware that I will be sharing, exploring, and processing personal emotional experiences. These activities are an integral part of the EFT training's pedagogical approach, aimed at enhancing therapeutic skills and fostering a profound understanding of Emotion-Focused Therapy principles. The overall purpose is to give the trainees a good emotional experience of how to work with emotions to change emotions.
I further acknowledge that as I engage in those experiential exercises, it is possible that I may encounter a range of emotional reactions. These may include, but are not limited to, feelings of vulnerability, or discomfort, with varying degrees of intensity. Even if the instructions are to work with manageable personal experiences, I understand that these reactions are a natural part of the learning process, and they will be handled with the utmost care and respect for my well-being. Even if infrequent or exceptional, if needed, the staff responsible for the training (the trainer and/or facilitators) will provide further assistance, and guide the trainees to appropriate, proper and more extensive care.
I am fully aware that all experiential work conducted during this training will be done under conditions of strict confidentiality and with unwavering adherence to professional ethical standards. The privacy and personal boundaries of all participants, including fellow trainees, will be always respected. I understand that I am obligated to treat the personal experiences shared by my fellow trainees that will share with me their personal experiences with the same respect, empathy, and confidentiality as if they were clients in a therapeutic setting.
By signing this agreement, I affirm my commitment to actively participate in the training, including the exploration of personal content, and I am prepared to engage in these emotional aspects of the learning experience with an open mind and a dedication to professional growth, all while respecting the privacy and boundaries of my fellow trainees.
[Trainee's Signature]
[Date]

How many trainees can a training event accept? This will depend on the goal of the training event. For training meant for wider audiences, mainly devoted to presenting EFT theory and practice, and to illustrating these with videos, there is no clear limit. Hundreds of people can attend this type of event. Of course, the wider the audience, the lower the possibility of interaction with the attendees, making these events more unidirectional. However, if an event

















is more practice-oriented, then a more reduced number of trainees is advised. The specific number will vary, but usually the limit is around 30 participants, and that will also depend on the number of (co-)facilitators helping the trainer in the experiential exercises.

In fact, the use of experiential exercises also demands previous consideration of the ratio of training staff (trainee+facilitators) to trainees. Usually, the trainer can be helped in supervising these groups by facilitators who are in their process of training to become trainers (trainers-intraining) or supervisors themselves. Together, they will constitute the training staff that will be vital for managing the experiential exercises. There is no strict rule regarding the ratio between the training staff and the number of trainees. In Portugal, a developing EFT community, we started using the ratio of 1 training staff member per 2 groups, and more recently, with more trained staff, 1 training staff member per 1 group. This ratio enables a careful consideration of what each group needs and for attending to group dynamics more adequately in skill practice groups.

Another issue that needs previous preparation is the decision about the venue in which to run the training. Ideally, the venue needs one room that comfortably accommodates all the participants in the training. This room must be equipped with proper audio and video devices, enabling appropriate lecturing, discussions and video projections. Moreover, if experiential exercises take place, there will be a need for sufficient available breakout rooms, allowing experiential exercises with the necessary conditions, and creating a feeling of privacy and safety in each group (e.g., having tissues available; screens to enclose the environment and provide more privacy to groups).

The specific didactics of the training will vary a lot. As previously highlighted, training may have very different goals, audiences, and formats. Nevertheless, there is a very frequent sequence in training EFT:

- 1. Lecturing: introducing and detailing a specific topic in a gradually increasing complexity (which also will depend on the previous training in the audience);
- 2. Modeling based on videos: when introducing intervention skills or tasks, to model them by showing and explaining sequences of videotaped sessions;
- 3. Experiential practice (real play), whenever possible or appropriate, followed by appropriate and safe discussion in both skill practice groups and the larger training group.

Nowadays, most level 1 and level 2 courses are based on this kind of sequential structure. However, we would like to highlight that in varying forms of training some other didactic blocks can be used. Specifically, it is also possible to use other exercises in order to apply the concepts and skills in a more elaborated way, making the trainees more active in their learning process. Thus, we will include a fourth section about "other practical exercises" that can be used in varied ways.

Returning to the above mentioned three first elements of a training, the most typical sequence is the progression from the lecturing, to video illustration and discussion, and finally to the experiential exercises and processing the exercises. For example, if the trainer is introducing a specific task (e.g., empty-chair work), then it is usually assumed that the training will start with a lecture detailing the task (its conceptual and research origins, the markers, the different steps of the task and its different resolution variants); then it will proceed with a video, demonstrating the task; and finally, participants will be invited to find specific markers of the marker (unfini-















-shed business, in this case) and to engage in "real play" exercises of this task, performing one the following roles: client, facilitator/therapist, or coadjuvant observer.

4.3.1. Creating an excellent EFT lecture

We may ask then, what are the essential features of an excellent EFT lecture? The global features of delivering an efficient EFT lecture will not be different from developing an efficient lecture on any other topic. Without the intention of being exhaustive, here are some helpful points to remember when preparing a lecture:

- Clarity of communication: A good lecture should be clear, concise, and easy to understand. The language needs to be adequate for the audience, and any EFT jargon of specialized vocabulary or concept needs to be clarified.
- Organization: A good lecture must be structured in a logical manner, adjusted to the specific time constraints. It may be helpful to think about developing a clear introduction, body, and conclusion. The lecturer should also use signposts to help the audience follow the lecture. For example, a lecturer might say, "Now let's move on to the next point", or "As I mentioned earlier". These signposts help the audience keep track of the lecture and understand how the different parts of the lecture relate to each other. These may also include visual aids such as diagrams, or slides that show the structure of the lecture or highlight key points. Overall, a more organized and cohesive lecture makes it easier for the audience to follow along and understand the content.
- Engagement: A good lecture should engage the audience. The attention of the audience can be captured in varied ways. For example, by creating some narrative plot in the lecture, or by using humor, storytelling, visual aids, and interactive elements. Clinical personal anecdotes can be used for illustrating the contents.
- Relevance: A good lecture should be relevant to the audience, which means that it needs
 to be connected to their interests, needs, or goals. The lecturer should also demonstrate
 the relevance of the topic to real-world situations or current events. In the case of EFT
 training this implies making a bridge to practical examples of clinical practice.
- Depth of knowledge: A good lecture should transmit a deep understanding of the topic and be based on credible research or reputable sources.
- Clarity and relevance of visual elements: If visuals are used, they should be clear, and relevant. Do not use graphics, photos, or drawings that distract from the contents of the lecture.
- Time management: Keep good pacing, and manage the time efficiently a good lecture should be delivered within the allotted time, in the right rhythm. In case time becomes an issue (e.g. because of the involvement and questions from the audience), an experienced trainer knows what information to skip or cover faster, so that the essential structure and contents are delivered and learning goals are met (distinguishing essential from accessory is an important aspect).
- Openness and approachability: The lecturer should be accessible and open to interacting with the audience, promoting discussion when appropriate, and being attentive to the audience's needs.















The specific topics of the lectures will vary. A comprehensive training program would include most of the contents in table 4 (see also the Supplemental material in the end of this document, with an illustration of a training curricula for foundational training in EFT).

Table 4. EFT contents to address in a comprehensive training program

The historical becoming of Emotion-Focused Therapy

- Theory of functioning in Emotion-Focused Therapy
- The global framework: Dialectical constructivism
- Emotion theory
- Emotion schemes
- Emotion, narratives and self-functioning
- Emotion and needs
- Emotional dysfunction

Theory of functioning in Emotion-Focused Therapy

- Theory of functioning in Emotion-Focused Therapy
- The global framework: Dialectical constructivism
- **Emotion theory**
- Emotion schemes
- Emotion, narratives and self-functioning
- Emotion and needs
- Emotional dysfunction

Basic principles of emotional change in EFT

- · Following and guiding
- Following: Relationship principles
- Guiding: Task-oriented work
- Intervention: Markers and tasks in EFT
- Global presentation of the markers of difficulties and the respective therapeutic tasks: Concept of therapeutic task in EFT; Elements of a therapeutic task; tasks based on empathy and therapeutic relationship, experiencing, reprocessing, and enactment.
- Phases of treatment
- Empathy and Therapeutic
- Responsiveness in EFT
- · Modalities of Empathic Response: Empathic understanding, empathic exploration, and guiding
- The task of empathic exploration for the exploration of relevant situations in therapy.

Tasks focused on empathy, experiencing, and reprocessing

- · Unclear Feeling marker
- Creating a Space for Attentional Focus Difficulties markers
- Systematic Evocative Unfolding for the Problematic Reactions marker

Tasks focused on enactment and chair work



















- Empty-chair dialog for the unfinished business with significant others
- Two-chair dialogue for negative treatment of the self
- Two-chair enactment for self-interruptive splits
- Chair work forself-soothing

Adaptations of EFT to work with specific populations in terms of depression, anxiety, stress and trauma, personality disorders

- EFT for depression
- EFT for Generalized Anxiety Difficulties
- EFT for Social Anxiety Difficulties
- EFT for Complex Interpersonal Trauma
- EFT for Eating Disorders

Clinical case formulation in EFT

- Models of clinical formulation in EFT
- Application of clinical formulation in EFT

Research on EFT

- The timeline of EFT research development
- EFT and task analysis
- EFT outcome studies

4.3.2. Modelling based on EFT videos

EFT is a model that puts a central emphasis on the procedural elements of the therapy. The therapist needs not only to master the model cognitively, but needs also to master the specific procedures, maneuvers, and modes of engagement with the client. In other words, the "how" is at least as important as the "what" to do, and the "what" is potentially not effective if not delivered appropriately. This is one of the reasons why watching videos occupies such a central place in EFT training and supervision: appropriate learning of concepts comes only from seeing exactly what empathically exploration of the client's issues looks like and how the therapist guides the client into and through specific tasks.

Thus, the video illustrations occupy a central role by creating good models of how to perform different types of skills and techniques. Using videos requires attention to specific issues, and the trainer should prepare their use in advance. Regarding these EFT demonstrational videos, we recommend trainers to make use, whenever possible, of the following tips:

- Select relevant videos: It goes without saying that optimally, the video should be an illustration of the previous contents and, therefore, relevant for that specific moment of training. For example, if the topic is about empty-chair work, the video should illustrate this task.
- Select high quality videos: Select specific high-quality videos and excerpts that are relevant to the content. The APA series are great examples, providing excellent illustrations of highly skillful EFT therapy sessions.















- Cultural sensitivity: Beyond the APA videos, examples may be locally available. This is extremely important and there is a need to develop more and more videos in different languages and cultures to share appropriate and culture-sensitive examples.
- Provide context: Before showing the video, provide context for the audience about the client's presenting issue and the therapeutic goals and techniques being used.
- Give a rationale for presenting this video: Specify the goals you have when showing this video.
- Select specific passages: In lots of situations, it will be enough to show only small parts of the video, previously selected. Thus, select in advance those pieces and show only the relevant parts (you can create video bookmarks for PowerPoint presentations).
- The 3 minute rule: Do not show the video for more than 3 minutes without some explanation or discussion of that period. Ideally, the video can be stopped and commented on every 90 seconds (roughly). These commentaries and discussions tend to help people stay focused and, at the same time, to better articulate the video with the key elements of the theory.
- Connect what you see with the learning goals: Ideally, the discussion should pinpoint the connection between what trainees are watching in the video and the relevant explanations of those events. For example, if showing the beginning of a task, it will be good to pinpoint the therapeutic maneuvers, such as the confirmation of the marker, preparation of the task, or even offering micro clinical formulations of the client's process. The explanations or commentaries should be associated with the relevant content to be illustrated, and use the video to better discriminate specific aspects of the practice.
- Ethics: Before using any videos of sessions, make sure you have obtained appropriate consent from the clients who appear in the videos shown to EFT trainees.

4.3.3. Experiential practice (real-play)

Experiential exercises play a crucial role in practice-oriented EFT training. In this type of training, after lecturing about a specific task or technique, and watching one or more videos about it, usually trainees will be invited to apply that task to personal experiences shared by other trainees who volunteer to work on them.

In these "real play" scenarios, trainees are divided into small groups, typically consisting of 3 to 4 people per group. One member assumes the role of the "therapist," another the role of the "client," and additional group members act as "observers" and "helpers." These exercises are supervised on-site by an experienced facilitator or trainer.

These exercises provide trainees with opportunities to practice EFT techniques, develop therapeutic skills, and gain a deeper understanding of the therapeutic process, not only from the therapist side, but especially from the client side. In fact, there is frequently a tension between these two purposes: on the one hand, the goal is to give the trainee the opportunity to practice as a therapist with a real client; on the other hand, it will be equally as important, or even more important to give the trainee in the client's role the opportunity to have a productive experience of working with a specific marker of an emotional processing difficulty. If the therapist-trainee is doing a good job in following and guiding the client-trainee, then these two purposes go hand by hand, and the role of the observers and of the more experien-















-ced facilitator in the group is just to watch attentively the process and to mentally bookmark specific moments for later discussion. However, there are often moments in which the client-trainee is stuck or being too difficult to approach; or moments in which the therapist-trainee is not able to deal adequately with the challenges of the situation. In those situations, the role of the facilitator is to carefully give some suggestions or even to substitute for the therapist-trainee and model the work of an EFT therapist. This process should be explained before the first exercise of this kind, to make it clearer to everybody what to expect and what may happen.

4.3.3.1. Preparing the experiential exercise:

Scenario Selection: The trainer or facilitator should help the client select specific personal emotional difficulties that align with the current objective. For example, the scenario may be to work with unfinished business, and thus it will be asked for the participants in the client role to share one specific issue of this kind. At the same time, a note of caution should be made: the trainees are asked to choose something relevant that they feel will be appropriate for a training context, and therefore not too disturbing. For example, traumatic events, in general, should be avoided.

Role Assignment: Trainers/Facilitators should encourage participants to select people for all roles in the group: therapist, client, observer/helper, keeping for themselves the role of facilitator and group supervisor. Rotating roles can provide a well-rounded learning experience, and therefore, if time allows, trainees can play the different roles within the same practice session.

Instructions: Trainees/Facilitators must clearly communicate the exercise's goals, roles, and expectations to all participants, to ensure that trainees understand their responsibilities and objectives for the exercise.

4.3.3.2. Conducting the Exercise:

Client Presentation: The client (played by a trainee) presents the emotional issue or concern, and the therapist then begins the "session", usually using empathic reflection and exploration. Therapeutic Interaction: The therapist (also a trainee) conducts the practice session using EFT principles and techniques. This may involve empathic exploration, identifying emotions, and facilitating emotional processing. When focused on a particular task, it will ideally follow the steps of that task.

Observer/Helper Roles: Observers (other trainees) take notes on the therapeutic process. They should focus on identifying key moments, emotional shifts, and any deviations from EFT principles. Helpers may assist the therapist if they become stuck (some trainers also use the role of a so-called surrogate therapist who is prepared to take the role of the therapist in case the designated therapist asks for help), ask for guidance, or have questions. Sometimes, a trainee may occupy both roles at the same time.

In-Person Supervision: An experienced facilitator or trainer may be present to supervise the small groups in real time. They can offer guidance, feedback, and support as needed. If necessary, they will kindly ask the therapist to step back, and they will then assume the role of therapist and show/model the work of an EFT therapist. The more central goal is to warrant that the person in the client role has a good experience with this exercise.















4.3.3.3. Debrief and Reflection:

Individual Reflection: At the end of the exercise, trainees should engage in individual reflection. They can consider their experiences, challenges faced, and lessons learned during the session.

Role Rotation: Trainees should have the opportunity to rotate through different roles in subsequent exercises. A skills practice session can have multiple rounds, allowing this sort of rotation. This allows trainees to experience both the therapist and client perspectives and learn from observation and active participation. Moreover, trainer and facilitators may also rotate, in order to let the trainees experience or observe different personal styles of supervision and/or intervention.

Group Feedback: After each practice session, the trainer should lead a discussion between all the groups. Trainees can share their observations, insights, and questions, while the facilitator/trainer can provide constructive feedback and clarify EFT principles. This discussion is an essential part of the learning process and allows trainees to consolidate their learning, while creating a sense of belonging and mutual learning.

Experiential exercises in EFT training provide a dynamic and effective way for trainees to develop their therapeutic skills. Since it is based on ways of being with the client and in specific procedures, it is not only focused on what to do, but how to do it. Thus, it is an opportunity for trainees to gain valuable practical experience, to learn from feedback, and to build confidence in applying EFT techniques or tasks to real situations. Moreover, these exercises may be introduced in a sequence of progressive complexity: as training progresses, exercises can become more complex, incorporating more challenging situations, creating opportunities for trainees to gradually build their competence in handling different and varied cases.

4.4. Other types of skills practice exercises

4.4.1. Practical exercises on conceptual and perceptual skills

During training, it is also a good idea to create some practical exercises around conceptual and perceptual skills. This is a very important part of any learning process, since it allows learners to apply the skills, in which they are being trained, to practical situations, in order to test their development and to obtain feedback about their learning process. At the same time, it makes the training more dynamic and interactive, making the learning contents come more alive.

This may take many forms, ranging from creating traditional guizzes about the contents of learning to the discussion and elaboration of full clinical formulations of real cases. Below, we give some potential examples of this format of practical exercises.

• Watching and discussing videos illustrating different types of emotions. It is possible to illustrate these with short clips from videos of the different types of emotion response types, especially for audiences that are not acquainted with EFT. One example would be, for example, to use some video clips from the film "Good Will Hunting" (Van Sant, et al., 1997), which is freely available on the internet. This suggestion of using video clips from movies may be especially suited for introductory EFT classes at the university (e.g. Master















- level), given that this type of material may be quite engaging for younger trainees (see also Garcia, 2017, for a more detailed use of this in terms of case formulation in EFT).
- Asking for examples of emotion schemes from different clients seen by the trainees.
- Asking for personal or client examples of different kinds of markers.
- Regarding perceptual skills, practical exercises of looking for specific markers or techniques (e.g., distinguishing different formats of empathic responses) while watching video recorded sessions.
- Elaboration of clinical formulations of cases, based on videos or real cases seen by the trainees.
- Application of specific observational scales to different emotional and interpersonal processes. Usually, these are not easy to use in the typical level 1 and 2, since they are mainly research oriented and need specific training. Nevertheless, in university-based settings, for example, in which clinical training goes side by side with research, it can be very useful to use these measures as ways of teaching conceptual and perceptual skills to trainees. The EFT research community has been quite prolific in the development of these types of scales, providing a rich set of different measures. Below we detail some of these available measures:
 - Affective Meaning States: Classification of Affective-Meaning States (CAMS; Pascual-Leone & Greenberg, 2005).
 - Affect Regulation: Observer-rated Measure of Affect Regulation (O-MAR; Watson & Prosser, 2006).
 - Emotional Arousal: Client Expressed Emotional Arousal Scale III–Revised (CEAS-III-R; Warwar & Greenberg, 1999).
 - Emotional Productivity: Client Emotional Productivity Scale-Revised (CEPS-R; Auszra, Greenberg, & Herrmann, 2010).
 - Empathy: Measure of Expressed Empathy (MEE; Watson, 1999).
 - Experiencing Scale (Klein, Mathieu-Coughlan, & Kiesler, 1986).
 - Treatment integrity: Person-Centred and Experiential Psychotherapy Scale: Emotion-Focused Therapy Version (PCEPS-EFT-9; Elliott, Westwell & Monteiro, 2022).
 - Types of Emotion: Emotion Category Coding System (ECCS; Herrmann, Greenberg, & Auszra, 2007).

EFT research makes use of different sorts of observational measures, such as the ECCS to assess types of emotions (Herrmann, Greenberg, & Auszra, 2007); the CEPS-R to assess emotional productivity (Auszra, Greenberg & Herrmann, 2010); O-MAR for assessing emotional regulation (Watson & Prosser, 2006); the MEE to assess empathy (Watson, 1999), and the PCEPS-EFT-9 to assess treatment integrity (Elliott, Westwell & Monteiro, 2022).

4.4.2. Deliberate practice

A new form of training that has recently emerged in EFT training is deliberate practice. This format of training is aimed at supplementing the usual training with more systematic exercises; thus, it does not substitute for other more traditional forms of EFT training. Deliberate practice may be particularly useful during the initial phases of training, as a common difficulty reported















by EFT trainees (in common with trainees in other models of therapy) is that the knowledge they have about EFT does not translate immediately into adequate EFT performance. Thus, they frequently become stuck, frozen, and lack confidence (see Goldman, Vaz, & Rousmaniere, 2021, for vivid self-reports about this type of experience).

This gap between knowledge (declarative knowledge) and performance (procedural knowledge) happens across all kinds of domains, ranging from arts, sports, medical procedures, and so on; actually, it happens in every domain that requires highly specialized performance. Deliberate practice has emerged from other fields as a potential response to this gap. Its origin was a seminal study by Ericson et al. (1993) with top musicians' performance and training. More recently, it has been introduced into psychotherapy training as a method for improving performance by means of a highly structured approach.

Generally, deliberate practice involves decomposing complex skills into different smaller components, and then systematically practicing them while obtaining feedback and repeating each one in order to achieve an automatized, but highly efficient, performance. Usually, the training distinguishes different levels of complexity and starts with ones that the trainee feels more comfortable with, before proceeding to more complex skills.

Recently, Goldman, Vaz, & Rosmaniere (2021) published a training manual for deliberate practice in EFT that can be used to train different skills. It is composed of 14 exercises, organized as beginner, intermediate and advanced skills.

- The first 4 exercises are devoted to "beginner skills", namely:
 - Therapist self-awareness;
 - Empathic understanding;
 - Empathic affirmation and validation;
 - Exploratory questions.
- Then, it proceeds to "intermediate skills", namely:
 - Providing treatment rationale for emotion-focused therapy;
 - Empathic explorations;
 - Empathic evocations;
 - Empathic conjectures.
- The next 4 exercises are devoted to the following "advanced skills":
 - Staying in contact in the face of intense affect;
 - Self-disclosure;
 - Marker recognition and chair work task setup;
 - Addressing ruptures and facilitating repair.
- After this, there are two final exercises, which are more comprehensive and aim to integrate all the above skills into more elaborated clinical scenarios.
 - Annotated Emotion-Focused Therapy Practice Session Transcript;
 - Mock Emotion-Focused Therapy Sessions.

These exercises are then structured as a potential course of 15 weeks of training and practice in EFT. Nevertheless, each exercise can be used on its own, so that it may be adequate to be used in other formats of training as well (such as in deliberate practice groups, as an adjunct type of skills training that can complement ongoing supervision or turned into a peerintervision groups, useful for deepening learning and engagement with EFT between level 1















and 2 trainings).

4.5. Online Trainings

The covid pandemic brought a dramatic innovation to the traditional formats of training, transforming the process of delivery EFT training from in-person to online training (and online training has remained in the current post-pandemic era). If the training is conducted online, it should attend to the following aspects (most of them previously included in the informed consent form delivered to the trainees and signed by them at the moment of registration):

- Use of an appropriate videoconferencing system, opting for software packages which are GDPR- and/or HIPPA-compliant (depending on the countries involved);
- Adaptation of informed consent for experiential exercises to account for potential violations of privacy as a result of hacking or piracy;
- Requiring participants to warrant in advance that they are alone and with adequate conditions of privacy when performing experiential exercises. The trainer needs to regularly remind trainees of this as a mandatory condition;
- Requiring trainees to have their camera on, especially during experiential exercises;
- Allowing recording of online training sessions, but only if this have been previously consented to by all the participants (training staff, staff, trainees). Note, however, that it is highly recommended not to record experiential exercises. Trainees should be aware that disrespect of these conditions will constitute violations of their obligations, and that can have legal consequences, including their removal from the training.

Moreover, the trainer should consider and anticipate the following issues, to create the best experience for the trainees:

- Engagement Strategies: Online training can be very demanding, so it will be good to use engaging teaching methods. Planning interactive activities ahead tends to make it easier, such as interactive polls, quizzes, discussions or even some funny events or videos; activities such as these will make it easier to maintain trainees' attention and participation.
- Lighting: Ensure adequate lighting so that the trainer face is well-lit and visible to participants. Natural light is often the best option, but the trainer can also use soft, diffused artificial lighting if needed. Avoid shades, and counter light effects.
- Webcam Quality: Invest in a good-quality webcam for better video clarity. An HD webcam can significantly enhance the overall video experience for participants.
- Eye contact: When using videoconference, the video camera should be placed at eye level, so that people remotely have the feeling that the other person is looking at them. Encourage trainees to speak to the camera and to do the same with their equipment. If experiential exercises will be used, it will be a good practice to share these tips about eye contact, video, audio, along with the necessary conditions of privacy that need to be put in place (being alone, using a earphone)
- Sound: The trainer can use an optimal choice, such as professional microphones, but most of the time good quality earphones with mic will be enough. It is useful to test out your equipment beforehand. For trainees, simple earphones without Bluetooth connection are

















- advisable, especially when doing experiential exercises; this will avoid unnecessary echoes, communicate to the other a higher sense of privacy, and it is safer not to use Bluetooth (as the signal can be easily detected by other equipment).
- Avoid noisy objects or movements: Almost undetectable sounds for the person if captured by a microphone - can become really problematic and distracting. Hearings, necklaces, scratching the clothes, wind, all these are examples of sounds that need to be avoided by the trainer. (Note that current versions of Zoom and Discord use sophisticated sound suppression technologies.)
- Clothes: Avoid colors, patterns or shapes that create strange visual effects.
- Background: Prefer neutral backgrounds (a light blue wall would be an optimal choice), and avoid distracting objects (books, notebooks, open closets, etc.).
- Adequate internet connection: Use a reliable internet connection and test it in advance.
- Create more frequent pauses and moments of discussion. It is harder for trainees to maintain their focus when online.
- Use smaller teaching blocks. For example, a full day of training tends to be very exhausting and, therefore, it will be preferable to divide it into 2 half-days, for example.
- Screen sharing: Familiarize yourself with the screen sharing options of your video conferencing platform (e.g., provisions for sharing your computer's sound). This is crucial for sharing presentations, videos, or other training materials effectively.
- Breakout rooms: Practice using breakout rooms for small group discussions and experiential exercises.
- Technical support: Have a plan in place for technical support in case participants encounter issues with their internet connection, microphones, or cameras during the training session.
- Bandwidth considerations: Trainees should be encouraged to close unnecessary applications and devices that may consume bandwidth during the training session to ensure a stable connection.
- Accessibility: Ensure that your training materials, including presentations and handouts, are
 accessible to all participants, including those with disabilities. Use accessible formats and
 consider providing transcripts for any videos or audio content.
- Time Zone considerations: If participants are from different time zones, be mindful of scheduling sessions at times that are reasonably convenient for everyone. Alternatively, consider recording sessions for those who cannot attend live.
- Supportive atmosphere: Create a safe and supportive online learning environment where participants feel comfortable sharing their thoughts, experiences, and questions.
- Internet backup: Ideally, the trainer should have a backup internet connection or hotspot available in case your primary connection fails.
- Test runs: Conduct test runs of the entire online training setup, including the video conferencing software, microphones, and camera, to manage any technical issues before the actual training.

Besides all these aspects regarding online training, if experiential exercises based on "real play" experiences are to be used, then all kinds of issues raised by online therapy sessions need to be considered. Some are the same as the ones previously mentioned, like lighting, placing the camera at eye level, and so on; but there will be some others. For example, if the















training includes chair work, it will be a good practice beforehand to advise trainees to prepare their setting with two chairs that can be seen by the "therapist" and "observers/helpers". However, if there are physical constraints, some adaptations can be made, such as just using body movement in one chair (e.g., moving from one side to the other of the couch or chair). Since it is beyond the scope of this guideline document to give extensive advice on how to adapt EFT sessions to online formats, we will refer to the following valuable sources:

- For general training on teletherapy, there is an APA online training course ("Telepsychology Best Practices 101") by Marlene M. Maheu: https://www.apa.org/careerdevelopment/telepsychology.
- For specific adaptations in EFT, see the following publications: Foroughe and Thambipillai (2022), a chapter titled Adapting Emotion Focused Therapies for Online Delivery; and Pugh, Bell, and Dixon (2021), a paper titled Delivering tele-chairwork: A qualitative survey of expert therapists.

4.6. After the training ("Where from here?")

After completing a specific EFT training, what can be done? Usually, this is a less developed concern, and sometimes it is not properly planned. Sometimes, after an excellent 4-day program on EFT, full of intensive experiences and learning, trainees are left with this feeling of "and now what?". Key moments in the process of training are the gaps between level 1 and 2; and between level 2 and level 3/supervision. By the end of each of these levels, the trainee is usually wondering about the next steps. Generally, the guidelines created by the isEFT about the successive steps to become an isEFT accredited therapist, supervisor, and trainer are an excellent resource, but then there are local specifications that will depend on the training institute, region, or country.

Usually, the trainer reserves some moments in the end to discuss this with the trainees, but the potential trajectory of the trainee from then on will also depend on several factors. It is practice to plan those future steps. For this reason, we provide here some suggestions that might help trainers and institutes to make those plans.

4.6.1. Information about further training

It is always good practice to make information available for the attendees about potential ways of obtaining further training. Thus, at the end of any kind of training event, information about further training should be distributed. This will be helpful for sustaining efforts to build an EFT community, but it will also be important for the trainees to feel that they have new opportunities for further development. For example, people who have attended a "taster" may be interested in having further basic training. Thus, ideally, tasters on EFT or introductory masterclasses should be complemented with information on how to obtain foundational training (level 1, level 2, level 3).

The isEFT website provides information about training across the globe, while the local institute will usually have updated information about further training that they offer.

It can also be useful to provide information about Universities in which EFT plays a central role.















For example, the University of Maia in Portugal has a Ph.D. Program based on the scientist-practitioner model in which EFT is part of the clinical training and supervision. In Spain, the University of Comillas has a full Master's Program devoted to EFT. Other Universities, such Trinity College Dublin or the University of Strathclyde, also offer excellent opportunities for further training and research on EFT.

4.6.2. Assess trainee skills and offer a proper training path

While not usually done, it would be excellent if the local institute was able to offer specific advice on the best opportunities to sustain EFT skill development, based on an accurate assessment of the trainees' current competencies. This could be done by asking the trainee to run a self-assessment in different EFT skills (e.g., self-assessing the level of competency in the skills outlined in the Appendix A - Therapist Competencies for Emotion-Focused Therapy practice - Elliott et al., 2021; or on the 12 skills outlined by Goldman, Vaz, and Rosminiere, 2021). For example, this could be provided by assessing trainee skills based on a videotaped session assessed using the PCEPS-EFT-9 (Elliott, Westwell & Monteiro, 2022).

After outlining the different aspects that need further training and refinement, a personalized plan could be established for developing those skills for each trainee. This might include: repeating previous training modules (e.g., repeating level 1), deliberate practice courses, peer supervision, supervision of specific skills, and so on. We will address several of these possibilities next.

4.7. Supervision

The local institute ideally should provide continuing supervision to EFT trainees, since supervision will be crucial to help trainees integrate EFT training into their clinical practice. Regular supervision sessions with experienced EFT supervisors can provide a safe space for discussing cases, receiving feedback, encouraging progressive involvement with EFT and deepening their understanding of EFT principles. This can be done immediately after level 1, if the trainee feels confident enough to start using EFT, but it will be a key component after level 2. We refer readers to the Good Practice Guide for EFT Supervision (IO5 - Jodar-Anchía, et al., 202) for helping local institutes in the structuring of supervision cycles in EFT (see also IO2 - Emotion Focused Therapy Supervisor Competency Framework - Elliott et al., 2022a, as well as other intellectual outputs available at the EmpoweringEFT@EU website).

4.7.1. Peer Supervision Groups

The local institute can encourage trainees to participate in peer supervision groups where they can discuss cases, exchange ideas, and provide support to one another. Peer supervision can complement formal supervision and foster a sense of community among trainees. Moreover, these groups can also entertain other activities such as reading clubs (to present and discuss specific reading materials), video clubs (to watch and discuss specific videos), and even deliberate practice clubs (See also Section 2.5. Informal Network Meetings).















4.8. Training Workshops/Masterclasses

Besides foundational training, it is always possible to organize EFT workshops and seminars that delve into more specialized areas of EFT, such as working with trauma, specific disorders, or specific populations. These workshops, often referred to as Masterclasses, can help trainees expand their expertise and address the unique challenges they may encounter.

4.9. Continuing Professional Education

The local institute can promote ongoing learning by providing access to resources, articles, books, and webinars related to EFT and related therapeutic approaches. This will also encourage trainees to stay up-to-date with the latest developments in the field.

4.10. Research and Publication

Encouraging trainees to engage in research related to EFT and contribute to the growing body of evidence supporting the effectiveness of the approach is also an excellent way for developing trainees' skills. This is easier in academic settings, but research on routine practice is also needed, and local institutes can help make bridges with research centers across the globe.

4.11. Peer Networking

The local institutes play a core role in disseminating information about EFT events and other learning opportunities, such as conferences, that will help the trainees connect with other EFT practitioners, researchers, and experts. Building a professional network can lead to collaboration and opportunities for growth.

4.12. Advanced Certification

Trainees should have opportunities to pursue advanced EFT certification, such as becoming a Certified EFT Therapist or Supervisor. This requires local institutes to put in the necessary efforts with local and national authorities to recognize EFT and EFT training. At the same time, it is important thattrainings are recognized by the ISEFT. These certifications demonstrate a commitment to excellence and can enhance the professional credibility of trainings.

4.13. Supervision of Supervision (EFT Meta-supervision)

The supervision that EFT local supervisors develop can and should be supervised by more experienced EFT supervisors. Thus, those who aspire to become EFT supervisors themselves, can have specialized training in supervision techniques. This can help develop a new generation of skilled EFT supervisors.







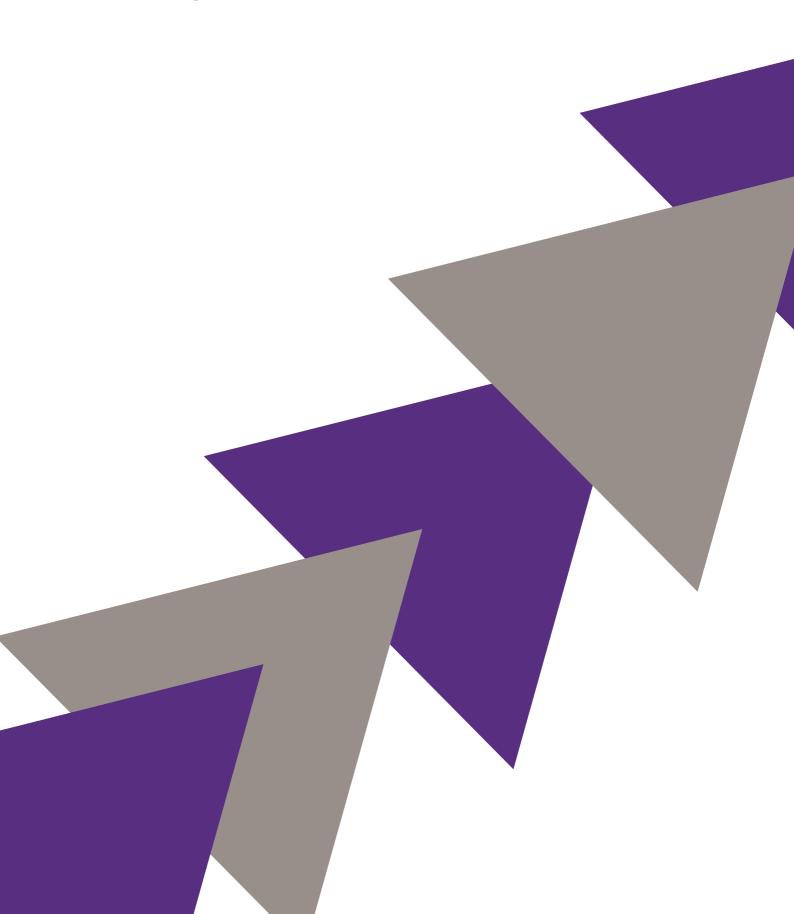








5. Training EFT trainers: Insights from a pilot workshop



The last section (section 5) of this guide reflects upon a pilot workshop to train EFT trainers and facilitators and the "training secrets" emerging from that experience. This pilot workshop took place at Trinity College Dublin in 2022 and was organized by two experienced EFT trainers, Robert Elliott and Ladislav Timulak, who developed an event for training trainers (or future trainers) from Portugal and Spain (see the Framework of Competencies for Emotion-Focused Therapy Training - IO1; Elliott et al., 2022b). During this three-day training, some specific hints and tips about EFT training were shared and developed by these experienced trainers in collaboration with the participants. These were referred to as "EFT Training Secrets", meaning important considerations for EFT training that Elliott and Timulak wished they had known when they started running EFT training. Now it is time to share them with everybody!

5.1. Training EFT Secrets

Training secret #1: Never be an organizer and a trainer at the same time.

The role of organizing an EFT training event makes it much more difficult to maintain the necessary focus that a trainer needs. So, avoid this double role.

Training secret #2: Never forget to fulfill a promise that you made as a trainer.

It is important tokeep the promises you made to participants. Trainees will be disappointed if you frustrate expectations that you created.

Training secret #3: Shadowers (i.e. trainers in training) can provide the trainer a useful "reflective space."

For in-person training, inviting supervisors/trainers-in-training to tag along and to observe the trainer can provide a valuable opportunity for the trainer to reflect aloud on what they have observed about the training processes while moving from room to room (e.g. during skill practice supervision). Unfortunately, this is much more difficult during online training).

Training secret #4: Each trainer must develop their version of the standard EFT slides in order to be effective.

It is important that you own the material and can say it in your own words. It is not enough for you to simply mouth the words; you have to make it personal.

Training secret #5: Especially if you as a trainer are from outside the local professional/EFT community, try to learn beforehand about your audience's interests and sensitivities, and adapt the training accordingly.

See if your local hosts can tell you if there are things that you should not do, learn it before the training. For example, if the audience is tired of watching the same video, don't play it! You can

















also use the initial introduction process to gauge the backgrounds and interests of the participants.

Training secret #6: If it is complex and important, repeat it by being redundant and presenting it in several modalities and multiple times.

Training secret #7: EFT level 1 needs to leave trainees with a first hand experience of the transformative power of emotional work.

Training secret #8: Facilitate experiential learning on the first day of EFT training.

In other words, don't just lecture participants about EFT theory; provide them with lived experience of key EFT concepts, like emotion schemes or emotion response types.

Training secret #9: Reviewing EFT theory and tasks on the morning of day 4 of EFT Level 1 is a very good idea, according to trainees.

Training secret #10: Strong therapist empathy is the secret ingredient in EFT, and it is the place to go when your chair-tasks are failing.

EFT empathy training is often overlooked and has multiple functions.

Training secret #11: EFT chair work drives participants' interest in empathy training.

Trainees generally think they know all about empathy and don't need to learn anything else about it... until they try to do chair work and discover it doesn't work without a high degree of empathy.

Training secret #12: Always have a co-trainer or facilitator when you are doing a live demonstration.

Live demonstrations are tricky to do in EFT training, so having someone else there to help manage the group process can be very useful.

Training secret #13: Watch out for withdrawal difficulties in skill practice groups (e.g., they finish early without fully engaging in the skill practice).

In this situation you can reopen the work just to check on how far it got and often work a little bit further with it, thereby modelling for the group how to make better use of their time.

Training secret #14: During skill practice, let the group know when you are leaving to let them deal with the process on their own.

Otherwise, they may feel abandoned.

















Training secret #15: When assigning participants to skill practice groups, let them know that you reserve for yourself the option to change/reshuffle groups.

This can be a useful strategy for dealing with situations in which there are problems in one or more groups. In these situations, it's better to be discreet, and limit yourself to saying that you've decided that it would be a good opportunity for participants to get experience working with different people.

Training secret #16: Try to engage all participants (not just client and therapist) in skill practice in various ways, especially if the skill practice groups are large.

For example, you can designate a surrogate therapist, or promote observers to "hold the theory".

Training secret #17: During the processing phase of skill practice, recommend that observers focus on therapist behaviour, rather than client process.

This will help keep the processing from opening up the therapy again when the client needs closure.

Training secret #18: Where possible, show EFT videos involving a mix of different gender, age, and ethnic groups.

This will help participants better identify with clients and therapists in the recordings.

Training secret #19: Develop your "ethical proof" as an EFT trainer bydeveloping a library of clips of your own practice.

This can feel like a hassle or be intimidating, but it will go a long way toward establishing your credibility with participants.

Training secret #20 (for trainers and trainees): A new training or trying a new thing with your client is never perfect and sometimes falls far short of how we hoped they would go.

This is to be expected: EFT training/therapy is inherently challenging, but as long as you don't give up, and keep trying, you are undefeated! Besides, if you have been over-ambitious, you can always scale your offer down to the appropriate ZPD (zone of proximal development) of your clients/trainees.



















This section aims to illustrate an example of training curricula on EFT and how this type of training can be developed. Based on the Portuguese experience, supervised by Robert Elliott, we will now present an extended version of the training developed by SPTFE (Sociedade Portuguesa de Terapia Focada nas Emoções, the Portuguese EFT institute) in 2022-2023, as an illustration of training curricula on EFT (we will henceforth refer to it as the "Portuguese experience"). We provide this as an illustration of a successful experience; however, we assume that other training curricula may be used and more suitable to other audiences/contexts of training, as local adaptations may be needed and fruitful.

The training in Portugal is based on the following structure:

- Level 1, composed by 4 full days of training
- Level 2, divided in 3 modules
- Level 2A: 3 full days, centred on Advanced Empathy Skills Training
- Level 2B and 2C: centred on more advanced EFT topics and skills (6 full days; if online, each full day will need 2 half days of training.

In this Portuguese experience, the training staff has been the following:

- Robert Elliott: global supervision of the training; and trainer of Level 1, and Modules B and C of Level 2
- Carla Cunha: trainer (under supervision of Robert Elliott) of Module A of Level 2; and facilitator
- João Salgado, Eunice Silva, Susana Almeida, Marina Monteiro, and Carla Branco as facilitators for skills practice.

The number of participants was limited to 30 trainees.

The ratio of skill practice groups per facilitator was usually 1:1, meaning that most of the time there was one facilitator supervising the skill practice of each group. Moreover, this allowed shadowing experiences: whenever possible, and in rotation, the training staff was able to shadow Robert Elliott while he was supervising a group of skill practice.

Next, we present the contents and global structure of each training day.

















Emotion-Focused Therapy (EFT), Level 1 (4 full days) SPTFE, July 2022. Portugal

Trainer: Robert Elliott Format: in person Language: English

Focus on emotion

Day 1

EFT Emotion Theory; EFT Adaptations of Focusing

I. What is Emotion-Focused Therapy?

- A. Integration of person-centered & gestalt therapies
- B. What Should We Call It?
- C. How Did We Get Here? An EFT Timeline
- D. Distinguishing characteristics of EFT
- E. EFT Therapy Principles:
 - 1. Relationship Principles
 - 2. Task Principles

II. Emotion Theory (Theory, part 1)

- A. What is Emotion?
- B. Emotion: Fundamentally Adaptive Because...
 - 1. Emotions Shape Our Perceptions of Our Situation
 - 2. Emotions Link Brain & Culture
 - 3. Emotions Connect us to our Bodies
 - 4. Emotions Shape Action
- C. EFT's Four Dimensional Model of Emotion
- D. Key Emotions in EFC: Distressing & Pleasant
- E. Exercise: Stuck vs. Productive Emotions:

III. Emotion Schemes

- A. Provide implicit higher-order organization for experiencing
- B. Organization of emotion schemes:
- C. Emotion Scheme Elements:
- D. Exercise: Elaborating Emotion Schemes:
- E. Clinical implications:

IV. Emotion Regulation:

- A. Emotional Intensity Dimension: eg, Anger
- B. Necessary for Adaptive Functioning
- C. Principles for Facilitating Adaptive Emotion Regulation

















- D. An Emotion Regulation Task: Clearing a Space for Attentional Focus Difficulties
 - 1. General Issues
 - 2. Types of Markers
 - 3. Developing a Working Distance
 - 4. Task Resolution and Facilitation Model
 - 5. Exercise 4: Practice Moderating Emotions and Attending to Bodily Sensations
- E. Principles for Accessing Emotion: (follows Emotion Scheme model)

IV. Emotion Response Types

- A. Fourth dimension of emotion in EFT
- B. Four forms of emotion response:
 - 1. Primary Adaptive Emotion Responses:
 - 2. Maladaptive Emotion Responses:
 - 3. Secondary Reactive Emotion Responses:
 - 4. Instrumental Emotion Responses:
- C. Exercise: Emotion Response Types
- D. Emotion Transformation: The Emotional Deepening Model in EFT

V. EFT Homework Exercise: Classifying Emotion Responses

Day 2

Emotion Theory Summary, Systematic Evocative Unfolding, Empty Chair Work

I. Emotion Theory Summary:

A. Summary for EFT Emotion Theory (for clients):

- Why Emotions are Important:
- Main ways to get stuck in emotions
- B. Integrative Emotional Deepening Sequence in EFT (from Elliott & Greenberg, 2021)
- Pre-deepening work
- Main Sequence
- Post-Deepening work

II. Therapeutic Tasks and Task Analysis:

- A. Concept of therapeutic task:
 - 1. Marker (observable sign of experiential state of readiness to work on task)
 - 2. Therapeutic work that facilitates client movement
 - 3. Key change point: beginning of the shift toward resolution
 - 4. Client steps to resolution: Measured by 6-point Degree of resolution scale
- C. List of Current EFT Specific Task Markers (8/2018)

















III. Systematic Evocative Unfolding (SEU) for Problematic Reaction Points (PRPs)

- A. Overview:
- B. SEU uses Evocative Empathy
- C. Marker: Problematic Reaction Point: 3 elements
- D. Systematic Evocative Unfolding for Problematic Reactions
- E. Systematic Evocative Unfolding for Problematic Reactions: Client Performance Model (Rice, 1984, 1986; revised, Elliott 2004)
- F. Skill Practice:

IV. Empty Chair Work for Unresolved Relational Issues

- A. Empathic Attunement is critical for the various forms of Chair work
- B. Unfinished Business Marker
- C. Clinical Applications
- D. Change Processes in Empty Chair Work:
- E. Useful Alternatives
- F. Empty Chair work as pathway to emotional deepening:
- G. Levels of Resolution
- H. Empty Chair Work for Unfinished Business

Day 3

Experiential Response Modes, Dialectical Constructivism, Two Chair Work & the Evidence

I. Therapist EFT Response Modes (2016)

II. More Theory: Dialectical Constructivism

- A. Epistemology: theory of knowledge:
- B. The Self:
- C. Dialectically Constructive Process
- D. Dialectically Constructive Processes in EFT:

II. Two-Chair work for Conflict Splits:

- A. Conflict Split
- B. Treatment of Self: SASB Introject Model (L.S. Benjamin: Structural Analysis of Social Behavior)
- C. Task Resolution Scale for Conflict Splits (1/20)
- D. Skill Practice: Practice Starting and Ending Two Chair Work
- E. Model: Resolution of Self-Criticism (NTS = Negative Treatment of Self)
- F. Skill Practice: Practice Stage 3 Deepening in Two Chair Work:
- G. Practical Suggestions for Chair Work















- 1. Introducing Chair Work to Clients
- 2. Allow creativity, flexibility:
- 3. Alternative: Configuration Work:
- 4. Other Clinical Issues:
- H. Depressive Splits: Working with the Collapsed Experiencer within Stage 3 of Conflict Split Work

III. Skill Practice: Practice Working with Collapsed Experiencer: (up to 50 min; if time/energy)

IV. EFT Effective?: Summary of Meta-Analytic Evidence

- A. Converging Lines of Evidence
- B. 2013 Review Results: Summary of Overall Pre-post Change, Controlled and Comparative Effect Sizes for EFT Outcome Research: 1990 - 2008
- C. Table 2: 2019 Results: Summary of Overall Pre-post Change, Controlled and Comparative Effect Sizes for EFT Outcome Research: 2009 - 2018
- D. What about Specific Client Problems? 2013 Results for HEPs in general
- E. 2019: Effect Sizes for EFT by Selected Client Problems/Disorders
- F. 2019: Effect Sizes for EFT vs. Other HEPs by Selected Client Problems/Disorders
- G. Published Outcome research reviews:

Day 4

Task Review; Practice Issues; Client Populations; Where from Here?

I. Theory/Task Review

- A. Group Quiz
- B. Marker List
- C. To Sum up: Integrative Emotional Deepening Sequence in EFT
- D. Open Marker Work: Naturalistic; 2 rounds of 45-60 min

II. Compassionate Self-Soothing Chair Work

- A. Two Main Kinds: Closure/Coping vs Transformative Self-soothing chair work
- B. Self-Soothing as Closure work
- C. Anguish Marker
- D. Therapist Stance
- E. Forms of Compassionate Self-soothing
- F. Common Versions of Compassionate Self-Soothing Chair Work: Self-Other combinations (soothing agent/object; process suggestions):

III. Practical Aspects of EFT:

A. Therapy Parameters

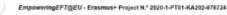
















- B. Use of Therapeutic Tasks
- C. General Organization of Sessions
- D. General organization of Therapy X tasks
- Based on treatment protocols for depression, anxiety, trauma (~ 20 sessions)
- 1. Phase I: Making contact and beginning to explore the presenting problem
- 2. Phase II: Initial work with presenting secondary processes
- 3. Phase III: Deepening: Working with primary maladaptive processes
- 4. Phase IV: Working with and repairing the sources key of problems

IV. EFT for Different Client Populations: A Brief Tour

- A. EFT Treatment Development Model
- B. Depression: Counselling for Depression (CfD)
- C. PTSD:
- D. Fragile Process ("Borderline Processes"):
- E. Anxiety
- F. Additional Client Populations with EFT Treatment Models
- Couples (Johnson/Greenberg/Goldman; Attachment injury task)
- Conflicted Families of troubled teenagers: Diamond: Attachment-based family therapy
- Emotion-Focused Family Therapy (EFFT): Dolhanty & LaFrance
- EFT Group Therapy (Thompson, Dolhanty; self-criticism)
- Eating difficulties (Wnuk, Dolhanty, Oldershaw; different formats)
- Generalised anxiety (Timulak, Watson/Greenberg)
- Aspergers/High functioning autism (A Robinson)
- G. Other Promising Client Populations for EFT treatment Development
- Transdiagnostic protocol: anxiety, depression (Timulak et al.)
- Coping with chronic medical conditions (eg, cancer, auto-immune conditions)
- Other anxiety difficulties (other phobias; obsessive-compulsive difficulties; panic difficulties)
- Psychosis
- Substance misuse

V. Assessment (in compliance with Portuguese regulations)

VI. Where from Here?

- A. Key books: (in recommended order)
 - 1. Elliott & Greenberg, 2021: Emotional-Focused Counselling in Action
 - 2. Elliott, Watson, Goldman & Greenberg, 2004: Learning Emotion-Focused Therapy
 - 3. Timulak, 2015. Transforming emotional pain in psychotherapy
 - 4. Goldman & Greenberg, 2014: Case Formulation in Emotion-Focused Therapy
- 5. Greenberg & Goldman, 2018: Clinical Handbook of Emotion-Focused Therapy
- B. EFT-C Books:
 - 1. Greenberg, L.S. & Johnson, S.M. (1988). Emotionally focused therapy for couples















2. Greenberg, L.S. & Goldman, R.N. (2008). Emotion-Focused couples therapy: The dynamics of emotion, love, and power

C. Websites:

- International Society for Emotion-Focused Therapy (ISEFT): www.iseft.org/
- Glasgow EFT Network Google group: http://groups.google.co.uk/group/EFT-training [email Robert for invitation]
- D. Courses/Network Meetings:
- E. EFT Qualification Criteria (Based on ISEFT Guidelines) (Aug 2017)
- F. EFT Supervision:
- G. Processing Exercise

















Emotion-Focused Therapy (EFT), Level 2A (3 full days) SPTFE, May 2023. Portugal

Trainer: Carla Cunha Format: in person Language: Portuguese

Empathy and relational work in emotion-focused therapy Advanced empathy skills and relational work in EFT

Day 1

I. Defining empathy

- A. What is empathy?
- B. Rogers on empathy
- C. Barret-Lennard (1981) on empathy
- D. Empathy and neuroscience
- E. Empathy and its role in the therapeutic relationship

II. The Therapeutic Relationship in EFT

- A. Empathy and the 6 principles of EFT treatment
- B. Modes of Experiential Engagement
- C. Empathy Exercise: Opening channels of Receptivity

III. Modes of Empathic Response

- 1. Empathic understanding
- 2. Empathic exploration
- 3. Process guiding responses

IV. Empathic Evocation

- A. Definition and Examples of Empathic Evocation
- B. Evocative Empathy Illustration (Video)
- C. Moment of practice: Evocative empathy exercise
- D. Therapist Empathy Self-Rating Form (General Practice Version; R. Elliott, 2016)

V. Synthesis and integration of the day

Day 2

I. Exploratory empathy

- A. Defining Exploratory Empathy
- B. Moment of practice: Exploratory Empathy Exercise



















II. Empathic exploration as a task

- A. The phases of the Empathic Exploration Task of problematic experiences
- B. Moment of practice: Empathic Exploration

III. Process-based empathy

- A. Defining Process-based Empathy
- B. Moment of practice: Process-based Empathy

IV. Empathy for implicit experience: Empathic Conjecture

- A. Defining empathic conjecture
- B. Empathic Conjecture Illustration (Video)

V. The Task of Empathic Affirmation

- A. What is Empathic Affirmation
- B. Moment-to-Moment Empathic Affirmation and Empathic Affirmation as a whole task
- C. The marker: Vulnerability
- D. The task of Empathic Affirmation
- E. Empathic Affirmation illustration (Video)
- F. Moment of practice: Empathic Affirmation

VI. Synthesis and integration of today's experiences

Day 3

I. Empathic refocusing

- A. Empathic refocusing and guidelines for practice
- B. Illustrations
- C. Moment of practice: Empathic Refocusing

II. Client Involvement and Therapeutic Presence

- A. Therapeutic presence: Characterization
- B. Group reflection exercise
- C. The different dimensions of Therapeutic Presence

III. Establishment of the therapeutic alliance and resolution of difficulties

- A. The Establishment of the Alliance as a therapeutic task
 - 1. The phases of Establishing the Alliance
 - 2. A first session in Emotion-Focused Therapy
 - 3. Illustration of a first session (video)

B. Relational Dialogue for Resolving Relational Difficulties

1. Difficulties and relational ruptures

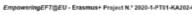


















- 2. Markers of therapeutic ruptures (3SRs)
- 3. Common relational difficulties in EFT and negative responses of the therapist
- 4. General principles for working with relational difficulties
- 5. Relational Dialogue for Alliance Difficulties
- 6. Exercise on relational difficulties
- 7. Demonstration of a Relational Dialogue for Alliance Difficulties
- 8. Moment of practice

IV. Assessment (in compliance with Portuguese regulations)

V. Final processing and relevant information about further training opportunities and community building

















Emotion-Focused Therapy (EFT), Level 2B (4 full days) SPTFE, July 2023. Portugal

Trainer: Robert Elliott Format: in person Language: English

Day 1

Introduction: Checking in

I. Collaborative Case Formulation in EFT: The Five Dimensional Model & Empathic Formulation Work

- A. EFT Case Formulation: General Principles
- B. Main EFT Case Formulation Models
 - 1.MENSIT/14-Step Goldman & Greenberg (2014)
 - 2. Five Dimensional Model (Elliott)
 - 3. CAMHS-based (Pascual-Leone; Timulak)
- C. The Goldman-Greenberg Case Formulation Model

II. The Five Dimensional Simplified EFT Client Case Formulation Model

- A. Main Therapeutic Focus: Why is my client here now?
 - 1. The client's key presenting problems:
 - 2. Interrupted life projects
- B. Key Task markers
- C. Key Problematic Emotions
- D. Client Emotional Processing Modes (=modes of engagement): Revised Client Emotional Processing Modes (2013)
 - 1. Dysregulated (over/under): flooded, numb/dissociated (=extremes)
 - 2. Restricted: externalized, somaticizing, abstract/purely conceptual, impulsive (=forms of self-interruption)
 - 3. Working: externally attending, body-focused, emotion-focused, active expression, reflexive/symbolizing (=resources)
 - 4. Change Process Modes
- E. Self-Self-Other Themes
- F. Exercise 1: Try EFT 5-Dimensional Framework
- G. Exercise 2: Case Formulation Skill Practice/Open Marker Work

III. Collaborative Case Formulation Work as an EFT Meta-Task

- A. EFT Therapist Competency Framework (Erasmus plus project: Cunha, Elliott et al., 2022)
- B. EFT meta-tasks
- C. General Suggestions for Empathic Case Formulation Responses
- D. Doing Case Formulation Responses after Tasks



















- E. Doing Big End-of-Session Empathic Formulations
- F. Encouraging Collaboration and Client Self-Formulation
- G. Encouraging Collaboration and Client Self-Formulation
- H. Video Examples of end-of-session case formulation work

IV. Exercise: Skill Practice: Chair work with Case Formulation

Day 2

I. EFT & Focusing: Focusing and Clearing a Space

- A. EFT & Focusing
- B. Focusing
- C. EFT Adaptations of Focusing
- D. Focusing Resources
- E. Clearing a Space for Attentional Focus Difficulties
 - 1. General Issues
 - 2. Marker Variations
 - 3. Main Therapeutic Work/Task
 - 4. Developing a Working Distance
 - 5. Later Steps
- F. Skill Practice
- G. Focusing for an Unclear Feeling:
 - 1. Main Marker and Alternative marker
 - 2. EFT-Style Focusing Questions
 - 3. Examples of EFT Focusing
- H. Task Resolution Stages
 - 1. Marker
 - 2. Attending
 - 3. Symbolising ("Finding a Handle")
 - 4. Feeling Shift
 - 5. Receiving
 - 6. Carrying forward
- I. Skill Practice

II. Re-processing Work in EFT: Narrative Re-telling & Systematic Evocative Unfolding

- A. The Point of This Session
- B. EFT Narrative/Re-Processing Markers & Tasks
 - 1. Narrative/Re-processing Work in EFT: General Approach
 - 2. Re-Processing Work Markers & Tracking Emotions
- C. Narrative Pressure Marker
- D. Problematic Reaction Point (PRP) Marker
- G. Key Change Processes in Re-Processing Tasks



















III. Narrative Re-Telling/ Memory Work

- A. Trauma Re-Telling: General Approach
- B. Useful Therapist Responses
- C. Revised Narrative Reprocessing Task Model (Breighner, 2006; Elliott, 2010)
 - 1. Introduction of Trauma Narrative
 - 2. Entry into Trauma Narrative
 - 3. In-depth Narration of Trauma Experience
 - 4. Exploration of Effects & Meanings of Trauma
 - 5. Assessment of General Core Values & Beliefs
 - 6. Understanding or Acceptance of Trauma
- D. Skill Practice on narrative retelling

IV. Systematic Evocative Unfolding: Task Resolution Process

- A. PRPs: Applications & Variations
- B. Task Resolution Process
- C. Stages of Model
 - 1. Problematic reaction
 - 2. Re-evoke experience
 - 3. Identify salience
 - 4. Meaning bridge
 - 5. Recognize and re-examine personal style
 - 6. Resolution
- D. Video illustrations
- E. Skill practice

Day 3

I. Advanced Two Chair Work in Emotion-Focused Therapy

- A. The Conflict Split Marker
 - 1. Classic Definition:
 - 2. Contemporary definition
- B. The Many Kinds of Conflict Split Marker: Main Forms of Negative Treatment of Self
 - 1. L.S. Benjamin's Structural Analysis of Social Behaviour (SASB) Introject Model
 - 2. The Many Kinds of Conflict Split Marker: Variant Markers
- C. How EFT Two Chair Work Works
- D. Conversational Practices Used in Two Chair Work
- E. EFT Task Resolution Model for Two Chair Work: Stages
 - 1. Pre-dialogue: marker identification
 - 2.Entry
 - 3. Deepening / Exploration
 - 4. New, emerging experience (=part resolution)
 - 5. Full resolution (...is task specific)



















- 6. Post-dialogue: reflection, meaning making, carrying-forward
- F. Video Examples
- G. Skill Practice: Practice Stage 3 Deepening in Two Chair Work:
- H. Two Chair Work for NTS: Client Task Resolution Scale
- I. Two Chair Work: Facilitating Therapist Responses
- J. Two Chair Work on Zoom
- K. Case Formulation & Two Chair Work
- L. Alternative Ways of Working with Conflict Splits
 - 1. Two Chair Work: Psychodrama/Gestalt Therapy tradition
 - 2. Configuration Work:

II. Depressive Splits

- A. Key Points in Working with Depressive Process in EFT
- B. Depressive Splits
- C. Working with the Collapsed Experiencer within Stage 3 of Conflict Split Work
- D. Skill Practice: Practice Working with Collapsed Experiencer

III. Two Chair Work for Self-interruption Splits

- A. Enactment Exercise: Action on the Self
- B. How to Do Enactments in EFT
- C. Micro-Markers for Enactments
- D. Self-Interruption Conflict Split Marker Forms
- E. Close Relation between Self-Interruption & Empty Chair Work
- F. Two Chair Enactment for Self-Interruption Splits: Task Resolution Model
- G. Video illustration
- H. Self-Interruption Skill Practice

IV. Wrapping up Day 3

Day 4

I. EFT Level 2B Review

- A. Five Dimension EFT Case Formulation model (15 min)
- B. The main tasks covered in this training (15 min)

II. Advanced Empty Chair Work

- A. Empty Chair Work Review
 - 1. Marker: Unresolved Relationship Issues ("Unfinished Business"; UFB)
 - 2. Clinical Applications:
 - 3. Unresolved Interpersonal Issues: Alternative Presentations
- B. Key Change Point and Resolution
- C. Empty Chair Work for Unfinished Business: Change Processes





















- 1. Early in therapy and when client won't talk to chairs
- 2. When client is already highly aroused
- 3. In general, when client is having trouble accessing their emotions
- 4. When self-interruption blocks emotion expression during stage 3 empty chair work
- 5. When the image of the Other doesn't soften after full expression of painful emotion
- 6. Mixed Two-Chair/Empty Chair work: When client is internally conflicted over how
- E. Empty Chair Work for Unresolved Relational Issues: Task Resolution Model (2/2020)
- F. Examples (videos)
- G. Skill Practice
- H. Empty Chair Work: Going Further: Much more up-to-date information available in Elliott & Greenberg (2021). Emotion-Focused Counselling in Action. Sage.

III. Empathic Affirmation & Compassionate Self-soothing Chair Work for Vulnerability/Anguish

- A. Working with Vulnerability: Empathic Affirmation
- B. Working with Vulnerability/Anguish: Compassionate Self-Soothing Chair Work
 - 1. Background
 - 2. Applications
- C. Two Main Kinds of Compassionate Self-Soothing Chair Work
 - 1. Transformative Self-soothing
 - 2. Closure/Coping Self-soothing (emotion regulation work: end of session when client is feeling raw & vulnerable)
- D. Anguish Marker
- E. Therapist stance
- F. Dimensions of Compassionate Self-Soothing
 - 1. Modes
 - 2. Objects of Soothing
 - 3. Sources/Resources for Soothing
 - 4. Self-Soothing Response Modes
- G. Four Common Versions of Self-Soothing
 - 1. Self to Inner Child:
 - 2. Self to Other Child (Universal or Known):
 - 3. Self to Close Friend (from Paolo Quattrini by way of Lucia Berdondini)
 - 4. Idealized parental figure to vulnerable self
- H. Compassionate Self-Soothing for Stuck/Dysregulated Anguish
- I. Revised Model for Compassionate Self-soothing (adapted from Goldman & Fox, 2010)
- J. Examples (videos)
- K. General suggestions for facilitating client self-soothing work
- L. Variation: Closure/Coping Self-Soothing Chair Work experience
- M. Skill Practice: Empty Chair + CSSCW
- N. Tips for Mini-Self-Soothing

IV. Assessment (in compliance with Portuguese regulations)



















V. Where from Here?

A. Key books:

- Elliott & Greenberg, 2021: Emotion-Focused Counselling in Action
- Elliott, Watson, Goldman & Greenberg, 2004: Learning Emotion-Focused Therapy (Kindle edition only)
- Timulak, 2015. Transforming emotional pain in psychotherapy
- Goldman & Greenberg, 2014: Case Formulation in EFT
- Greenberg & Goldman, 2018: Clinical Handbook of Emotion-Focused Therapy

B. Upcoming EFT Events

- Scottish EFT Institute Network Meetings on zoom
- EFT Training Opportunities
- Individual EFT Supervision

C. Workshop Processing: Focusing Exercise

- 1. How do I feel after these four days?
- 2. What have I learned? What will I take away to do differently?
- 3. What do I need to help me put this into practice?





















Emotion-Focused Therapy (EFT), Level 2C (4 half days) SPTFE, September 2023. Portugal

Trainer: Robert Elliott

Format: online Language: English

Day 1

I. Creation of Meaning: "Meaning Protest" and Cherished Beliefs

- A. Overview: General approach
- B. Key Change Processes:
- C. Marker:
- D. Facilitative Therapist Responses: Focused Empathic exploration:
- E. Task Resolution Model:
- F. Meaning Creation: Client Task Resolution Scale
- G. Tips for Skill Practice on Meaning Creation Work
- H. Notes on the Change Process:
- I. Meaning Protest vs Unfinished Business

Day 2

I. Motivational Interviewing (MI)

- 1. Applications
- 2. Motivational Interviewing (Miller & Rollnick, 2002)
- 3.MI: Person-Centred or Not?

II. EFT View: Habitual Self-Damaging (HSD) Splits

- 1. Habitual Self-Damaging Split marker:
- 2. Forms of HSD Split
- 3. Use standard Two chair conflict split work between:
- 4. Working with HSD Splits: MI Therapist Facilitating Responses
- 5. Facilitating Change Talk: EFT Response Modes
- 6. Working with Self-Damaging Splits: EFT Therapist Facilitating Responses

C. Skill Practice: EFT Unfolding/Chair work for Motivational Splits

- **D.** Discussion
- E. Evidence

Day 3

I. Anxiety Difficulties and the Humanistic-Experiential Psychotherapies (HEPs)





















- A. Why Study Anxiety?
- B. What is Anxiety?
- C. When Does (Social) Anxiety Become a Difficulty?
- D. What Kinds of Anxiety Difficulties are There?

II. EFT Theory of Anxiety Difficulties: Key Concepts

- A. Anxiety Splits: Conflict splits in which the person makes themselves anxious
 - 1. Multiple levels of Anxiety Conflict Splits
 - 2. Self-organizations:
 - 3. Results from Anxiety Split processes:
- B. Organized around Emotion schemes
- C. Developmental origins of social anxiety emotion schemes:
- D. EFT General Theory of Change Process with Anxiety Difficulties
- E. Different anxiety difficulties involve different emotion processes:

III. Working with Anxiety Splits in EFT

- A. Anxiety Split marker work
- B. Anxiety Split Marker
- C. Anxiety Split Task Process: Working with the Anxiety Split Triangle
- D. Anxiety Split Resolution Model (2016)
- E. Skill Practice

IV. Summary: EFT for Social Anxiety Model: See Appendix

V. Resources/Articles

Day 4

I. Micro-Markers in EFT

- A. Standard EFT Micro-Markers (See Elliott et al., 2004, chapter 4)
- B. Client Experiencing Scale (Klein et al., 1986)
- C. Client vocal quality (Rice): focused, externalizing, limited, emotional
- D. Disappointing Results of Empathic Reflection Meta-analysis

II. Conversational Analysis (CA)

- A. Key Interactional Concepts & EFT Equivalents
- B. CA Transcription Notation
- C. Successful Empathy Example
- D. Unsuccessful Empathy:
- E. Conversation Analysis (CA) and Empathic Reflections (ERs)

III. Getting Inside the Therapy Process: Interpersonal Process Recall

A. Introduction to IPR



















B. IPR Questions: Client C. IPR Questions: Therapist

D. Discussion

IV. Assessment (in compliance with Portuguese regulations)

IV. Discussion/Processing of This Training:

- 1. How do I feel after these four days?
- 2. What have I learned? What will I take away to do differently?
- 3. What do I need to help me put this into practice?

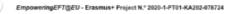
V. References

















7. Acknowledgments



This publication has been developed as part of the project Empowering Emotion-Focused Therapy Practice in Europe known as EmpoweringEFT@EU project (Erasmus+ Project reference: 2020-1-PT01-KA202-078724). We are grateful for the funding provided by the Erasmus+ KA2 - Cooperation for innovation that allowed for the establishment of a partnership between these institutions for strengthening knowledge and exchanging good practices in Emotion Focused Therapy under this action (KA202 - Strategic Partnerships for Vocational Training). We would like to also recognize the importance and the expertise gathered by those who collaborated with this project team, namely: the associated partners of the EmpoweringEFT@EU project, the founders and past/current members of the ISEFT board, and other worldwide experts in Emotion Focused Therapy (EFT), who provided valuable insights for this document (through participating in the EmpoweringEFT@EU interviews to EFT experts and/or provided feedback or valuable input in the several occasions they came across with this or other project outputs).





















Almeida, A. C. M. (2022, October). Listening to the experts II: Novos insights de peritos no treino de novos terapeutas na modalidade de Terapia Focada nas Emoções. [Listening to the experts II: New insights of experts in the training of new therapists in the modality of EFT]. Unpublished Master dissertation in Clinical and Health Psychology. Maia: Universidade da Maia.

Auszra, L., Greenberg, L.S., & Herrmann, I.R. (2010). Client Emotional Productivity Scale - Revised. Unpublished manuscript, York University, Toronto, Ontario, Canada.

Barbosa, M. A. A. (2023, October). Listening to the supervisees II: As perspetivas de terapeutas supervisionados numa viagem profunda pela terapia focada nas emoções. [Listening to the supervisees II: The perspectives of therapists under supervision in a deep journey through EFT]. Unpublished Master dissertation in Clinical and Health Psychology. Maia: Universidade da Maia.

EFPA – European Federation of Psychologists Associations (2023). EuroPsy – the European Certificate in Psychology. Belgium: EFPA. Retrieved from: https://www.europsyche.org/app/uploads/2021/04/Legal-Position-of-Psychotherapy-in-Europe-2021-Final.pdf

Elliott, R., Auszra, L., Herrmann, I., Cunha, C. & the EmpoweringEFT@EU team (2021). Therapist Competencies for Emotion-Focused Therapy practice. ISBN: 978-989-53655-8-6. Available at https://emotionfocusedtherapy.eu/wp-content/uploads/2023/12/FC-EFT-Competence-v1.03-1.pdf.

Elliott, R., Auszra, L., Herrmann, I., Cunha, C. & the EmpoweringEFT@EU team (2022a). Emotion Focused Therapy Supervisor Competency Framework. ISBN: 978-989-53655-6-2. Available at https://emotionfocusedtherapy.eu/wp-content/uploads/2023/12/FC-EFT-Competency-v1.04.pdf.

Elliott, R., Timulak, L., Jodar-Anchia, R., Salgado, J., Cunha, C., & the EmpoweringEFT@EU team (2022b). A Framework of Competencies for Emotion-Focused Therapy Training. ISBN: 978-989-53655-7-9. Available at https://emotionfocusedtherapy.eu/wp-content/uploads/2023/12/FC-EFT-IO1-v1.03.pdf.

Elliott, R., Watson, J. C., Goldman, R. N., & Greenberg, L. S. (2004). Learning emotion-focused therapy: The process-experiential approach to change. American Psychological Association.

Elliott, R., Westwell, G., & Monteiro, M. (2022). Person-centred and experiential psychotherapy scale: Emotion-Focused Therapy Version (PCEPS-EFT-9). Unpublished assessment instrument, available at:

https://www.dropbox.com/scl/fi/qos96l37l7pz9mk3ztz46/PCEPS-EFT-9-Observer-v1-

08.12.2022. docx? rlkey = godb113 sufxdplgyruz4nmwha&dl = 0

Ericsson, K. A., Krampe, R. T., & Tesch-Römer, C. (1993). The role of deliberate practice in the acquisition of expert performance. Psychological Review, 100(3), 363–406. https://doi.org/10.1037/0033-295X.100.3.363

Folkes-Skinner, J., Elliott, R., & Wheeler, S. (2010). 'A baptism of fire': A qualitative investigation of a trainee counsellor's experience at the start of training Counselling and Psychotherapy Research, 10(2), 83-92.



Foroughe, M., & Thambipillai, P. (2022). Adapting Emotion Focused Therapies for Online Delivery. In H. Weinberg, A. Rolnick, A. Leighton (Eds.), Advances in Online Therapy: Emergence of a New Paradigm. (pp. 217-229). Routledge.

García, C. C. (2017). Evaluación del modelo de formulación de caso de la terapia focalizada en la emoción. Doctoral thesis. Madrid: Universidad Pontificia Comillas. Retrieved from: https://repositorio.comillas.edu/xmlui/bitstream/handle/11531/22682/TD00288.pdf? sequence=1

Europe-2021-Final.pdf

Gus Van Sant, Danny Elfman, Artie Kane, Jeffrey Kimball & Steve Bartek, M. M. (1997) GOOD WILL HUNTING. USA: Miramax.

Goldman, R., Vaz, A., & Rousmaniere, T. (2021). Deliberate Practice in Emotion-Focused Therapy. American Psychological Association. https://doi.org/10.1037/0000227-000

Herrmann, I., Greenberg, L. S., & Auszra, L. (2007). Emotion category coding system. In I. Herrmann (Ed.), Emotion categories and patterns of change in experiential therapy for depression (pp. 203–231; Doctoral thesis). München: Ludwig-Maximilians Universität.

Jodar-Anchía, et al. (2023). Good practice guide for EFT supervision. Intellectual product 4 of the EmpoweringEFT@EU project. Available at: https://emotionfocusedtherapy.eu/wp-content/uploads/2023/12/IO5-English-1.pdf

Elliott, R., Auszra, L., Herrmann, I., Cunha, C. & the EmpoweringEFT@EU team (2022a). Emotion Focused Therapy Supervisor Competency Framework. ISBN: 978-989-53655-6-2. Available at: https://emotionfocusedtherapy.eu/wp-content/uploads/2023/12/IO2 German EFT-Supervisor-Competency-

Framework Laranja.pdf

Klein, M. H., Mathieu-Coughlan, P., & Kiesler, D. J. (1986). The experiencing scales. In L. S. Greenberg & W. M. Pinsof (Eds.), The psychotherapeutic process: A research handbook (pp. 21–71). The Guildford Press.

Lima, P. M. M. (2022, October). Supervision in emotion focused therapy: Insights from second-generation experts. Unpublished Master dissertation in Clinical and Health Psychology. Maia, Portugal: Universidade da Maia.

Lopes, P. M. M. (2021, October). Listening to the experts: A qualitative study with expert supervisors on their views upon clinical supervision in emotion focused therapy. Unpublished Master dissertation in Clinical and Health Psychology. Maia, Portugal: Universidade da Maia.

Lunt, I. (2011). EuroPsy: The development of standards for high-quality professional education in psychology. European Psychologist, 16, 104-110. http://dx.doi.org/10.1027/1016-9040/a000087

















Pascual-Leone, A., & Greenberg, L. (2005). Classification of affective-meaning states. In A. Pascual-Leone (Ed.), Emotional processing in the therapeutic hour: "Why the only way out is through" (pp. 289-367). Toronto: York University. Retrieved from Foroughe, M., & Thambipillai, P. (2022). Adapting Emotion Focused Therapies for Online Delivery. In H. Weinberg, A. Rolnick, A. Leighton (Eds.), Advances in Online Therapy: Emergence of a New Paradigm. (pp. 217-229). Routledge.

Pugh, M., Bell, T., & Dixon, A. (2021) Delivering tele-chairwork: A qualitative survey of Psychotherapy Research, 31 843-858. DOI: therapists. (7),10.1080/10503307.2020.1854486

Qiu, S., Hannigan, B., Keogh, D., & Timulak, L. (2020). Learning emotion-focused therapy: certified emotion-focused therapists' perspectives. Person-Centered & Experiential Psychotherapies, 19(4), 310-330.

Reisinho, I. C. (2022, October). Listening to the supervisees: A perspetiva de terapeutas supervisionados sobre o seu processo de supervisão. [Listening to the supervisees: The perspectives of therapists under supervision on their supervision process]. Unpublished Master dissertation in Clinical and Health Psychology. Maia, Portugal: Universidade da Maia.

Rodrigues, A. S., Lopes, P., Jodar-Anchia, R., & Cunha, C. (2023). "How was your path and experience in this clinical supervision process?" Exploring the perspective of supervisees undergoing supervision in emotion focused therapy. Paper presented at the 2023 ISEFT Conference (International Society for Emotion Focused Therapy), Porto, Portugal.

Watson, J. C. (1999). Measure of expressed empathy. Unpublished manuscript. Department of Adult Education, Community Development, and Counseling Psychology, OISE, University of Toronto; Toronto, Ontario, Canada.

Watson, J. C. e Prosser, M. (2006). Observer-rated Measure of Affect Regulation (O-MAR). Unpublished manuscript. Ontario Institute for Studies in Education of the University of Toronto, Toronto.

Warwar, S. H., & Greenberg, L. S. (1999). Client Emotional ArousalScale-III. Unpublished manuscript, York University, Toronto, Ontario, Canada.

















Emotion-Focused Therapy Training

Erasmus+ProjectN.º2020-1-PT01-KA202-078724

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