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An Investigation of Collaborative Case Formulation Work in Emotion Focused Therapy

by

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Abstract

Collaborative case formulation work is a central topic in Emotion Focused Therapy (EFT) and is supported by a theoretical framework; however, there is surprisingly little research on it. This study investigated what EFT collaborative case formulation work looks like, by studying client-therapist case formulation sequences in EFT. This study is presenting results on the defining characteristics of case formulation work, how many kinds of case formulation work there are and the therapist response modes that facilitate it. Using a collection of recordings selected from the APA video archive of EFT practice by four eminent EFT therapists, this study extracted all examples of case formulation work by client and therapist, through an open-ended, qualitative process-description method aimed at finding their defining characteristics and the variety of case formulation work. This was followed by coding the therapist response modes used in collaborative case formulation work. This study found five characteristics that define collaborative case formulation work for therapist and client. Two of these were "reflective: stepping back and reflecting on the client's process" and "connective: building a shared story that connects the client's presenting difficulties to their key emotions." This study also found 28 kinds of case formulation work; the most common kinds of formulation by action were translating formulations and storying formulations. The three most common therapist response modes used to facilitate the unfolding of collaborative case formulation work were: empathic formulation, empathic conjecture and empathic refocusing. Having a clear research-based definition for case formulation work makes it easier to teach therapists learning EFT. Identifying all the variety of formulations contributed to understanding the different roles they serve in the formulation process. Knowing the specific combination of empathic responses that eminent EFT clinicians are using in their formulations helps therapists know how to formulate collaboratively with clients.

Keywords: collaborative case formulation; EFT meta-tasks; typology; therapist response modes; empathic formulation

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Introduction

Case formulation work has recently gained a very central, important place in EFT. It is a useful tool that helps clients and therapists together conceptualise the client's process to support the therapeutic work and emotional transformation.

Case formulation work is a process in which therapists listen to clients' emotions present in their stories about their problems, as an indicator of what is painful, and work together on developing an understanding of what maintains these problems and how to address them. The founding clinicians of EFT (Elliott *et al.*, 2024) describe formulation work as an over-arching metatask that runs across therapy and integrates work from different sessions on different therapeutic tasks, pointing the way forward for client and therapist.

To explain the significance of my study, I start by framing case formulation in its context, offering a historical background, principles for developing case formulation in EFT, working definitions of case formulation in EFT, and ending with a dissertation overview.

Historical Context

Greenberg (2024) reflected on the phases leading up to the development of case formulation in EFT and identified *differential treatment* as a precursor. Due to pressures in the field by granting agencies and academics, and against their humanistic inclinations, EFT researchers began to develop different treatments for different disorders, such as EFT for depression (Greenberg & Watson, 2006), trauma (Paivio & Pascual Leone, 2010), generalised anxiety (Timulak & McElvaney, 2017; Watson & Greenberg, 2017) and social anxiety (Elliott & Shahar, 2017) to name just a few.

In their book dedicated to case formulation in EFT, Goldman and Greenberg (2015) explained the context outside of the EFT world at the time they started to develop this topic. They described an overall understanding among clinicians that there were overt difficulties in emotion, behaviour and cognitions (e.g. anxiety, depression, poor work performance,) and underlying

psychological mechanisms (e.g. core emotion schemes, core beliefs, attachment insecurity), which are explanations for the overt phenomena.

They describe how more behaviourally oriented approaches often prioritise working with observable difficulties in behaviour, emotion, and cognition, whereas modalities such as EFT tend to directly target underlying psychological mechanisms, aiming to facilitate enduring change at a foundational level rather than only at the symptomatic or overt level.

A further differentiation they made was that, in some psychodynamic approaches, underlying mechanisms are made up of conflicts, wishes or defence mechanisms, while in EFT, we talk about underlying emotion schemes. This, along with other concepts associated with case formulation, are defined in the next chapter.

The EFT Approach to Case Formulation

The EFT approach to case formulation is embedded within the humanistic tradition, specifically Person-centred and Gestalt therapy. Goldman and Greenberg (2022) reflect on how neither of these approaches originally developed a case formulation approach. Grounded in these humanistic roots, Greenberg and Goldman (2019) and others initially resisted the concept of case formulation, out of concern that it would create an unwanted interpersonal distance between client and therapist, running the risk of taking the therapist away from being fully emotionally present. However, Goldman (2017) recognised that the approach lacked an explicit organising framework to help therapists map out what to do next, moment by moment.

Greenberg (2024) reflects on how, through developing case formulation, EFT therapists were able to articulate what up to this point had been implicit in the therapeutic process: following the pain and working to a focus. Following the pain refers to identifying the client's core pain, which guides the therapeutic focus on these underlying emotions that are generating the presenting problems. This focus on core issues then became the basis for what is today referred to as a transdiagnostic approach (Timulak, 2015). This refers to the idea that EFT treatments are similar across various client populations. Thus, after the initial development of a differential treatment approach,

we have now seen a return to humanistic-experiential therapy roots, with slight variations for different diagnostic groups: treatment is guided by individualised case formulation for the person, more than by diagnosis.

Goldman and Greenberg (2015) took a qualitative-hermeneutic approach to formulation, which involves building up a shared understanding that emerges from the therapy process and changing it as new information from the client emerges. Case formulation in EFT follows the emotional flow of the therapeutic relationship and is based on developing and maintaining an "empathic healing therapeutic relationship characterized by the Person-centred relationship conditions of respect, acceptance, unconditional positive regard and empathy" (Watson, 2010, p. 90).

Principles for Developing Case Formulation in Emotion Focused Therapy

Elliott et al. (2024) specify a set of principles that derive from this kind of therapeutic relationship.

First, they refer to case formulation work as *collaborative and co-constructed* with the client. Advances in the theory have helped establish the usefulness of co-constructing a narrative that organizes the therapeutic process and provides a focus (Greenberg & Goldman, 2019).

Second, case formulation in EFT is *continuously evolving and held tentatively,* rather than developed at or prior to the beginning of therapy (Goldman, 2017).

Third, EFT has a *strong theoretical framework*, which is held lightly and follows the client in the moment by moment of the therapeutic work (Elliott et al., 2024).

The last principle refers to helping clients resolve *specific tasks to solve their emotional problems*, like intense problematic reactions or destructive self-criticism.

Working Definitions of Case Formulation in Emotion Focused Therapy

After presenting the historical background of case formulation and the principles that underpin it, I look next at the working definitions of case formulation.

Greenberg and Goldman (2015) define case formulation as "an explanation of how the client's problems have developed and what maintains, them, as well as what can be done in therapy

to address them" (p. 3). Further, Greenberg (2015) calls it "a working hypothesis about the client's core painful emotion: what this emotion is, what caused it and what thoughts and behaviours sustain it" (p. 119).

A recent development is the Therapist Competency Framework developed for EmpoweringEFT@EU Erasmus plus project (Elliott *et al.*, 2021) where collaborative case formulation work is looked at as a meta-task: an over-arching, baseline, multi-session, higher order task, done alongside / across / in parallel to other tasks. Here, case formulation is tentatively defined as:

Providing overall rationale for [the] emotion-focus of therapy; reformulating specific presenting problems in EFT terms; formulating core pain/underlying emotional determinants; identifying task markers for underlying emotion processing difficulties; providing a formulation-based rationale for tasks; bringing attention to and formulating micro-markers of emotional process; post-task meaning creation; end-of-session collaborative formulation work; end of therapy narrative reconstruction of emotional change (p. 17).

Another definition is found in Elliott's 5 item extension to the 10-item version of the Person-Centred and Experiential Psychotherapy Scale (PCEPS), where Elliott (2012) refers to case formulation as taking various forms:

Offering explicit empathic formulation responses that simply label aspects of self, emotion response types or markers; collaboratively constructing with the client more complex narratives that involve sequence processes; giving responses that imply case formulations by orienting to key client processes, such as markers, aspects of self, types of emotion response, emotion dysregulation (p. 6).

They further describe a skilful EFT case formulation as collaborative, exploratory, accurate, friendly and specific (PCEPS-EFT-T supplement, v1.0).

These definitions come out of a strong theoretical framework; however, they are not research based. Becoming aware of this gap in research, in an area that is so central in EFT, led to my interest

in this topic. I refer to this gap in more detail in the next chapter, after I review the existing case formulation models.

Dissertation Overview

This study is an investigation on case formulation work in EFT. After introducing the topic and setting case formulation in its context, next I move to the Literature Review chapter. This starts with defining key theoretical concepts associated with case formulation, before proceeding to review the existing case formulation models and to identify the research gap that guided me towards this topic. I end this chapter with identifying the research questions that emerged out of this gap.

In the Method chapter, I place my study in the context of the methodology that underpins it, and I explain in detail the method used, including the study sample, the process I followed in terms of ethics and the way I obtained the ethics approval for this study, I introduce the participants and give a detailed account of the pre-analysis and analysis process.

Next, I present the Results, in the order of the research questions and I extract examples from the data analysis for each category. In the Discussions chapter, I focus on reviewing these findings, analysing their meaning and importance and putting them in the context of the overall research. I end the Discussions chapter with the overall conclusions to my study.

Literature Review

A detailed approach to case formulation has emerged out of EFT theory and practice over the past three decades. Before reviewing the literature, I define key theoretical concepts present in it.

Theoretical Concepts Associated with Case Formulation in Emotion Focused Therapy Markers and Tasks

Elliott *et al.* (2004) refers to case formulation as a marker driven process, that involves awareness of the client's moment by moment experience and based on that, deciding how best to proceed.

Markers are in-session signs that our clients are ready to do a particular bit of work. Tasks refer to the kinds of therapy work that we do to address the presenting issues. For instance, if a client presents with bad, lingering feelings in relation to a developmentally significant other (=marker) the work we propose to do to address this issue is the empty chair task for unfinished business.

Emotion Schemes

Emotion schemes are our internal representations of our lived experience. They are based on inborn emotional responses coupled with experience. Together, these form complex internal representations which, with development, come to include thoughts and beliefs (Elliott & Greenberg, 2021). They provide clues as to how clients treat their emotional experience, as well as a guide to the most relevant tasks to work on (Watson, 2010).

Emotion schemes have component elements linked together in a network: perceptual-situational (what the emotion is about), bodily-expressive (how it is felt in the body), symbolic-conceptual (how the person visually or verbally represents the emotion scheme), motivational-behavioural (associated needs, wishes, intentions) and the feeling that organises the emotion scheme at the centre, for instance trauma related fear (Elliott *et al.*, 2004).

Types of Emotion

In EFT, therapists differentiate between four different types of emotion and case formulation requires this kind of differentiation (Goldman & Greenberg, 2015).

A *primary adaptive emotion* is an unlearned, direct response to a situation (Elliott and Greenberg, 2021). Part of case formulation involves recognising these emotions to help the client access them.

Maladaptive emotions are learnt, direct reactions to situations based on previous, often traumatic experiences (Elliott et al., 2004). It is important that these emotions are accessed and transformed; case formulation plays a role here to help clients symbolize them.

Secondary reactive emotions react to but hide primary adaptive emotions. The person reacts against their initial primary adaptive emotion, which is replaced with a secondary emotion (Elliott et al., 2004). Formulation involves recognising these kinds of secondary emotions so that they can be validated before helping the client arrive at the emotion underneath.

In *instrumental emotions*, the person reacts to the situation by enacting an emotion that is intended to influence or control others but is not what the person genuinely feels (Elliott *et al.*, 2004). Here, formulation involves helping clients become aware of their intent or aim.

Emotional deepening

In EFT formulation work, therapists "keep their finger on the client's experiential pulse at all times" (Greenberg, 2015, p. 120), as they are guided by the emotional pain. To help clients access this pain, therapists first acknowledge the emotion they present with on the surface and work through this deepening process, to get to other emotions underneath.

We use the term *global distress* to characterize the usual initial state clients present with in therapy. It is a mix of undifferentiated hopelessness/helplessness, anger, anxiety and upset (Pascual-Leone & Greenberg, 2007). To help clients acknowledge these secondary emotions, access the underlying maladaptive emotions, and transform them into primary adaptive emotions, EFT therapists engage clients in chair work tasks, which are a hallmark of this approach. Emotional deepening work mostly takes place during chair work.

Formulation Narrative

Another part of the formulation work is the process where the client and therapist both reflect on the client's experience in a story that makes meaningful sense (Goldman & Goldstein, 2022). Based on Angus and Greenberg's (2011) work on narrative and emotion in EFT, case formulation relies on two sources of information about the client: the stories they tell, and the emotions embedded in these. Goldman (2017) describes the process of carrying forward the formulation narrative that ties together triggering events, presenting problems, and the underlying core painful maladaptive emotions.

Throughout the case formulation process, therapist and client are continuously deconstructing the narrative, mining through and exploring the emotions in relation to it, proposing and engaging in tasks designed to shift emotional processing, and ultimately understand how changed emotion fits back into the changing narrative structure (p. 92).

Greenberg (2015) proposes that the meaning of an emotion is fully understood by a client when it is organised within a sequential narrative framework that identifies what is felt, about whom and in relation to what need or issue.

Types of Therapist Response

Case formulation is shaped by various types of empathically attuned responses. These are used to help clients emotionally explore the meaning of their stories and were first defined by Greenberg, Rice and Elliott (1993):

- Empathic Reflections: seek to demonstrate understanding of central client feelings or meanings.
- o *Exploratory Reflections*: "open edge" reflections intended to guide/stimulate client self-exploration through communicating partial or tentative understandings.
- Evocative reflections attempt to open up the client's meaning with vivid imagery and an expressive manner.

- Empathic Conjectures: empathic guesses at what the client may be currently feeling but has not yet said out loud.
- Structuring tasks: in which therapists suggest or set up an in-session experiment,
 often accompanied by an explanation of what it is and how it works.
- Process suggestions encourage clients to try specific things in the session, these
 include attention suggestions and action suggestions.
- Awareness homework: a form of process suggestion in which the therapist proposes
 carrying the therapeutic process beyond the confines of the session.
- Experiential Teaching: providing the client with general information about the treatment and the nature of the experiencing process (e.g., the importance of exploring feelings).
- Process Observation: help clients become aware of their emotional responses by drawing their attention to non-verbal signs of emotion.
- Process Disclosure involves therapist self-disclosure of immediate here-and-now reactions, intentions, or limitations.
- o Personal Disclosure: sharing relevant information about self, responsive to client.

A decade later, three further types of therapist response modes were specified (Elliott *et al.*, 2004):

- *Empathic affirmations* offer validation, support or sympathy when the client is in distress or pain.
- Experiential formulations (now known as empathic formulations) describe the client's difficulties in experiential terms such as emotional avoidance or action on the self.
- *Empathic refocusing* offers empathy with what the client is having difficulty facing to invite continued exploration.

Greenberg and Goldman (2015) iterate how these necessary skills are used to formulate the client's process, as well as to facilitate EFT tasks. To address this, Goldman *et al.* (2021) wrote a book on deliberate practice, a method of training designed to improve these skills. In their book, the authors refer to one aspect of formulation work – providing treatment rationale for EFT to clients – as skilfully done when it "reformulates the presenting problem in emotional terms" (p. 65). We can see the similarity between this definition and that of experiential formulation (describing the client's difficulties in experiential terms), both being aspects of formulation work.

Case Formulation Models

Next, I review the three main approaches to EFT case formulation and the variations or adaptations within these main models. I then reflect on what is missing from these models and require further research, before introducing my research questions.

Emotional Transformation Case Conceptualization Models

First, I review case conceptualisation models in EFT. Elliott (2019b) defines case conceptualisation as a specific model of the emotional transformation process, e.g. with a particular client or client population. They differentiate this from case formulation, which is a general structure/process for understanding clients/co-constructing narratives of how their process works. Therefore, I look at the emotional transformation case conceptualisation models as being pieces of this general structure, which is guided by the emotional pain.

Model of Productive Emotional Processing. Pascual-Leone and Greenberg (2007) developed a model of productive emotional processing of painful emotions, based on research on emotional transformation, by examining observable moment-by-moment steps in emotional processing, as they occurred within productive sessions of experiential therapy. The model is built on three phases: approaching emotions and exploring distress (Phase 1), working through primary maladaptive emotions (Phase 2) and facilitating emerging adaptive emotions (Phase 3). This sequential model of emotional processing is at the heart of formulation work in EFT and the integrated model I introduce last builds on this initial model.

Case Conceptualisation Framework. Based on this previous model, Timulak and Pascual Leone (2014) developed a conceptual framework for tentatively identifying core emotion schemes. They started from the assumption that the client's general distress is a response to current and past triggers, which represent situations in which the client's needs were not met, and the client was left with core painful emotions. Given that the client feels unable to meet the needs contained in them, they collapse into a hopelessness / helplessness and get stuck in avoidance strategies. The first step in therapy is to go beyond the global distress and avoidance, to ensure that core painful emotions are accessed. Second, these authors also show which emotions (compassion and protective self-assertive anger) can attend to the unmet needs and transform the experienced pain.

The authors present their case conceptualisation as complementing the traditional EFT case formulation approach (Goldman & Greenberg, 2015), arguing that its main strength is that it is based on an empirically derived model of emotional transformation in EFT (Pascual-Leone & Greenberg, 2007). This case conceptualisation model, along with later adaptations (Connolly-Zubot et al., 2020; O'Brien et al., 2019) contain many of the elements that this traditional EFT case formulation model is based on: secondary emotions, core painful emotions, unmet needs and emotional/behavioural avoidance, which is called *self-interruption* in the Greenberg and Goldman model (2015).

The Five-Dimensional Case Formulation Model (2013)

Next, I review the Five-Dimensional Case Formulation Model, developed by Elliott (2013) as a simplified version of the material on client process in chapter four of *Learning Emotion-Focused Therapy* (Elliott *et al.*, 2004). This simplified model focuses on the following aspects:

- I. The main therapeutic focus
- II. The key task markers
- III. The central problematic emotions
- IV. Modes of engagement
- V. Markers of Inter/intrapersonal Style: how clients treat themselves and others.

For the full model, see Appendix A. Elliott (2019b) reviews the simplified model as perhaps too static and not necessarily yielding a shared narrative of how the client's process works.

However, as an EFT trainer teaching this model, I found that laying out these important aspects of client process makes this framework easy to assimilate for students by providing building blocks towards learning case formulation. Listening to clients in session based on this framework also helps therapists link emotion theory to practice and is a steppingstone towards the development of a shared formulation of the clients' difficulties. What is missing from this model is that it doesn't build a cohesive story of the client's problems and what maintains them, however, it does give therapists the pieces to build the story.

A very recent adaptation of this model renamed it as the *Five-Aspect Client Process*Framework (Elliott et al., 2024). It retains the same dimensions, now called aspects of the client process, which are seen as indicators of key pieces of information for case formulation. It contains a full written description of the emotional processing modes for the first time, different from how they were first described in 2004. Under the fifth aspect, Elliott et al. have added relevant marginalised self-identities: gender, skin colour, disability etc., which is a major change to the initial model.

This adaptation also doesn't show how formulation is staged across therapy; however, Elliott's declared intention in creating this model was to offer a simplified model for didactic purposes, so its aim was to be used as a structure for written case formulation, rather than for the practice of case formulation across therapy. There is a co-ordination and alignment between this model and the integrated one, presented next. All five aspects of the client process are found in the integrated model, see Appendix D for the equivalents.

The 14 Step Case Formulation Model (2015)

This is the main, integrated case formulation model in EFT and shows how case formulation is staged across therapy. It is presented in a whole book, which tracks the development of case formulation work across the entire course of therapy. The first stage, *Unfolding the Narrative and*

Observing Emotional Processing Style, attends to the narrative about the clients' presenting problems as therapists begin to hear the core pain and observe emotional processing style.

The second stage, *Co-create a Focus and Identify Core Emotions*, is guided by what hurts the most in the client's life, as these core emotion schemes are the focus of therapy and what is in need of transformation. The acronym MENSIT (marker, emotion, need, secondary emotion, interruption, theme) describes steps five to ten in this stage. Goldman (2017) talks about the final step of this stage (step 11) where therapists help clients tie emotion schemes and narrative themes back to the presenting problems, as a way of providing further direction and goals for the ongoing therapeutic work. Goldman and Greenberg (2015) call this the formulation narrative that links the MENSIT or the core elements of the emotion scheme back to the presenting problems.

The third stage, *Attending to Process Markers and Emergent New Meaning* is referred to as process formulation. Formulation in this stage mainly happens through the ongoing process of therapy. The focus of stage three turns to the continuous observation and formulation of ongoing emotional states, markers and micro-markers. In the final step of this stage, emergent new meaning is tied back into existing narrative themes and connected to the relational and behavioural difficulties that originally brought people to therapy. For the full model, see Appendix C.

Initially, EFT students found this full model with all the micro-markers too overwhelming (Elliott, 2019b), which is why, for didactic purposes, the simplified five-dimensional model was developed.

A very recent adaptation to this model is *The Integrated Three-Phase Model*, (Elliott *et al.*, 2024), outlined in Appendix D. This adaptation fine tunes the definitions of the three phases.

The first phase is renamed *Building the Foundations of The Case Formulation: Attending to Key Elements of Client Process.* There are now five steps in stage one, and they correspond to the five aspects of the Client Process Framework. The second stage is renamed *Formulating Core Pain in its Context (Context + MENSIT)*. Stage two also has an extra step and has added context to MENSIT, which was missing in the original model. The authors emphasise the most important

aspect of the case formulation process: the formulation narrative, which emerges out of phase one and phase two and ties together triggering events, presenting problems and the core primary maladaptive emotions. The third phase is renamed *Following the Pain as the Case Formulation Evolves and New Meaning Emerges*. This has an extra step as well. All the added steps articulate the formulation process more clearly and make the coordination with the Client Process Framework more obvious.

This adaptation is addressing the complexity of the model that covers the whole of therapy. It is renamed as the Three-Phase Integrated Model rather than the initial 14 Steps Model, which makes it easier to retain as an overall structure. The three phases follow the process of developing a shared case formulation and show what formulation looks at different stages of therapy and how the formulation narrative is built.

The Research Gap

Elliott (2019b) noted that the formulation narrative step (step 2.8 in Appendix D), which is missing from the five-dimensional model, was important, but that it needed further explicating. This is where my interest in this topic started, with this central step: how do clients and therapists co-construct the formulation narrative, moment by moment, in sessions. Written case formulations are useful, particularly if they are presented as dynamic and emerging from collaboration between client and therapist, which is how this integrated model works. However, in this study I set out to investigate what this dynamic, collaborative case formulation work between therapist and client looks like in sessions, as a separate piece of work from the written case formulation.

Pascual Leone and Kramer (2017) presented a rationale for basing case conceptualization on process research and refer to case formulation as being a bridge from research to practice. They also note how overlooked case formulation has been as a focus of research. One exception is the work of Eells and colleagues, who demonstrated that using a systematic method for case formulation is what most differentiates expert from novice psychotherapists (Eells *et al.*, 2005).

In the introduction, I reviewed working definitions of case formulation and found very little in terms of a research-based definition. I found the case formulation process to be based on a rich theoretical framework, and I reviewed the development of case formulation models in EFT and what they are each missing.

In reviewing the literature, I also found no research on the various kinds of case formulation work. An exception is Elliott *et al.* (2004) reference to bookmarking – "underscoring a particular experience or task as significant and worthy of future work" – as a type of experiential formulation (p. 88). We can see from the complexity of case formulation work, that there are different aspects to it, but I found no research on the range of formulations that exist and what they each do.

Further, the various therapist response modes described earlier are building blocks used to formulate the clients' process. However, I found no empirical research on how they come together to do that, and which specific therapist response modes are used in case formulation work. An exception is an unpublished post-session self-report measure of EFT therapist response modes (Elliott, 2006). This allows therapists to self-rate their use of *experiential formulation* responses in therapy sessions, as part of the Therapist Experiential Session Form (Elliott, 2019a).

To address this gap, Elliott (2019b) proposed that we should start by looking at actual client-therapist case formulation sequences in therapy. In addition, they argued we need to see collaborative case formulation work as a therapeutic meta-task worthy of systematic investigation, using the tools of our trade as EFT therapists and researchers. My interest in this topic came out of this gap in the literature. I identified three specific gaps:

- (1) no research-based definition for case formulation in EFT.
- (2) no description of different types of case formulation work.
- (3) no understanding of what specific therapist response modes come together to make up and support case formulation responses.

Research Questions

This study is a systematic investigation of client-therapist case formulation sequences in therapy. It seeks to answer the following main research question:

What does EFT collaborative case formulation look like in sessions?

This question was broken into three sub-questions:

- a) What are the *defining* characteristics of collaborative case formulation? (i.e., characteristics which, if they were absent, would mean that a response was not case formulation, e.g., reflective on client process)
- b) Broadly speaking, what different *types* of EFT collaborative case formulation work are there? (e.g., client self-formulation)
- c) What therapist *response modes* facilitate the unfolding of collaborative case formulation work as a process in sessions? (e.g., empathic conjecture)

Method

Methodology

This was a discovery-oriented study in which I sought to uncover the defining characteristics of collaborative case formulation work between therapist and client, as well as the range and varieties of case formulation. This investigation posed open ended questions, and a quantitative approach cannot capture well these phenomena through standard methods. Therefore, qualitative methods using in-depth data gathering procedures, offered a more useful approach for my study.

Elliott and Timulak (2021) are pioneers in introducing qualitative research to the psychotherapy field and they refer to their approach as "generic descriptive-interpretive qualitative research" (GDI-QR). All of the methods falling under this generic approach involve posing openended, exploratory research questions and collecting open-ended, non-numerical observations to answer these questions. A systematic analysis of these observations follows, which describes and presents their meaning, and based on similarities between them, organizes them into clusters or categories. These categories are then integrated into a coherent story (Elliott & Timulak, 2021). The authors advocated for this generic approach, as opposed to a more specific brand-named procedure, because it is adaptable to fit the researcher's analytic style, the topic of their investigation or the nature of the data collected.

Barker *et al.* (2015) reflected on the importance of a basic understanding of epistemology, as it helps elucidate fundamental procedures and different stances. They noted that such understanding involves multiple perspectives and therefore advocated for epistemological pluralism in qualitative research. Elliott and Timulak (2021) described their epistemological stance of GDI-QR as embracing *critical realism* and *dialectical constructivism*, which, they point out, also happens to be the philosophical basis of EFT. Critical realism assumes that an objective reality exists, but it can never be known perfectly, that all our understandings are tentative and limited by the perspective from which they are offered. Critical realism further asserts that concepts exist apart from the

methods we use to study them, but that all methods are imperfect, so we should use several to triangulate or converge on what we are trying to study, especially when trying to understand a complex topic (Elliott, 2020).

Critical realism integrates several truth criteria at its basis, to give it solidity: correspondence theory (a belief is true if it matches reality), consensus theory (truth by agreement among different researchers), pragmatic theory (something is true if it's useful, e.g., for guiding practice or illuminating our understanding) and coherence (a belief is true if it is internally consistent). Guided by an integration of these criteria, it was important for me, during my investigation, to seek different perspectives and observations from my supervisors through running integrity checks on the analysis (auditing), to ensure I arrived at a coherent, elegant definition of case formulation work, where the various aspects and components of my definition are internally consistent and create a good gestalt, and finally, that in formulating the method for my dissertation, I offered a detailed account of all the steps I followed, so that my study can be replicated using different methods (triangulation).

Dialectical constructivism is "a philosophical position that sees knowers (e.g. qualitative researchers) not as detached observers but as actively interacting with what they are trying to know." (Elliott & Timulak, 2021, p. 13). The collection, analysis, and interpretation of the qualitative data in my study, for instance, involved processes of interactive construction and that will come across as I am describing the method. Dialectical constructivism also asserts that the act of knowing changes both the knower and the known and that the known is both real and constructed. The implication for my study is that knowing the data changed me as a qualitative researcher, and I also changed the data. From this point of view, it was imperative to read the existing literature when formulating the topic of my study, but also to be aware of my assumptions and expectations as much as possible, so that I could differentiate between what I was aware of at the start and what I became aware of. I refer to this in more detail in the Discussion chapter. In addition to these aspects, Barker *et al.* (2015) also argued for the importance of using description

(concrete, specific observations of data rather than generic, abstract concepts) and of discovering meaning, rather than inventing it, to reduce presuppositions.

Study Sample

The data for the current study was drawn from video recordings from the American Psychological Association (APA) video archive of EFT practice, represented by four eminent EFT therapists. This study is a secondary analysis from the selected recordings listed in Table 1.

Table 1
Study Sample

No.	Video Recording Title	Series	Year	Guest Therapist
1.	Resolving Problematic Reactions in Emotion Focused Therapy	Psychotherapy Video Series	2017	Robert Elliott, PhD
2.	Case Formulation in Emotion Focused Therapy: Addressing	Psychotherapy Video Series	2014	Rhonda N. Goldman, PhD
3.	Unfinished Business Empty Chair Self Interruption (published on APA's video	N/A	2016	Sandra C. Paivio, PhD
4.	streaming service, PsycTherapy) Emotion Focused Therapy over Time (Sessions 2 and 6)	Series VIII, Therapy in Six Sessions	2006	Les Greenberg, PhD

The inclusion criteria were:

- 1. *Eminent practice*: choosing eminent EFT therapists who are the best, most representative and clearly recognizable examples of EFT practice and case formulation work.
- 2. *Diversity of sessions*: a mix of one-off demonstration therapy sessions and multiple sessions with the same client, following the unfolding of client and therapist case formulation work within and between sessions.

To choose the study sample out of the APA archive of EFT practice, I listened to all the recordings that fitted with the inclusion criteria and used the following further exclusion criteria:

1. *Diversity of work*: excluding multiple one-off demonstration sessions that belong to the same therapist, so that I have a variety of approaches to case formulation work.

2. Degree of case formulation work: excluding sessions that don't have a significant amount of case formulation work, so that I have enough data to work with within each session.

Ethics

Prior to using the videos, I checked the details of the consent obtained from the participants by APA as the producers. The APA Director for Video Media confirmed the following in an email correspondence (E. Meidenbauer, personal communication, March 30th, 2023):

The videos in the APA Psychotherapy Video Series feature people who volunteer to demonstrate psychotherapy for educational purposes. The consent waiver spells out that volunteers agree to publish this material for educational and research purposes in clinical, mental health and educational settings.

In addition, as a user who watched these videos, I agreed and abided by the following terms, outlined in the disclaimer at the opening of each individual video:

- 1. That I am an Authorized User, which means I am using these videos for legitimate educational purposes, whether as a mental health professional in training or as part of other relevant university-approved educational courses or assignments.
- 2. That it is unethical to disclose identifying information about any of the participants in the videos or to share access to the videos with unauthorized viewers.
- 3. That I will not make any copies or cause any copies to be made of the videos and that I understand it is illegal to copy or disseminate the video footage without prior written permission of the Publisher.
- 4. That I will respect the videos and their content by viewing the videos in a private environment, out of sight or hearing range of unauthorized viewers.

To obtain ethics approval for my study from the University, I shared the details of the consent APA obtained from the participants with the Convenor of the School Ethics Committee (SEC). I also obtained explicit consent from APA to use the selected videos for research purposes for my study, by filling in a Permission Request form and receiving a Permissions Licence. This

allowed me, as the principal investigator in this study, to analyse the selected materials for research purposes. I shared this Permissions Licence with the Convenor of the SEC as well and, based on all the information that I shared, I obtained the ethics approval. Due to the nature of my study, using secondary data, which was already in the public domain and managed by the publisher, I didn't have to go through the full SEC ethics application process.

Participants

I describe the participants in this study in the order in which I analysed the video recordings, following the natural progression of my study. The consent and confidentiality terms stated above are applicable to all participants in this secondary analysis from these videos. To abide by the confidentiality terms, I used the clients' initials, and I didn't share identifying details about the clients throughout my study. Although the videos are in the public domain, they are for limited access, and it was important for me to not disclose any identifying information about the clients. All the therapists in these recordings are eminent leading clinicians in EFT and their names appear in the title of each video recording. They have also given explicit consent to have these sessions recorded for educational and research purposes.

One of the therapists recruited in these demonstration sessions confirmed the terms of the APA process of therapist recruitment for these demonstration videos (R. Elliott, personal communication, January 19th, 2024). They told me that eminent therapists were approached and asked to provide details about their experience, any major publications, their theoretical approach, highlighting interventions they used in their approach and any suggested reading. This description, alongside any publications in the suggested reading, was made available on the Web site containing Additional Information about each video/DVD.

Therapists were also asked to provide, if possible, some details about client characteristics that would work well with their approach and if there were any presenting issues that the APA coordinator should look for in potential clients. This thorough process ensured each therapist was

matched with clients that presented with the kind of issues they were looking for in their demonstration video.

Each therapist worked with three clients and the sessions lasted 45 minutes each, with 15 minutes in between to meet the next client and prepare for the next recording. A brief marketing statement of a few minutes started off each session, where the therapist introduced themselves, their approach and objective. At the end of all three video recordings, a discussion followed about which session of the three best represented the approach. The following day, there was a follow up roundtable recording with counselling students, reviewing short clips from the selected recording. *Client and Therapist Dyads*

Client and Therapist Dyad 1. The first client is from the demonstration video *Resolving*Problematic Reactions in Emotion Focused Therapy. Client G reported as her main problem,

chronic and habitual issues with emotional detachment every time she goes through something

serious or traumatizing in her life. More specifically, her mother recently died, and she was puzzled

by her failure to grieve or allow emotional sadness to be expressed. She further reported she did not

find her (non) reaction to be normal and was therefore puzzled by it.

The therapist who saw client G for a demonstration session is a Professor Emeritus with extensive experience in Person-Cantered-Experiential psychotherapy and counselling in general and specifically in EFT, as one of the originators, and is a leading expert in psychotherapy research, experienced in a wide variety of research methods and co-authored major texts and numerous articles and book chapters.

Client and Therapist Dyad 2. The second client is from the demonstration video recording Case Formulation in Emotion Focused Therapy: Addressing Unfinished Business. Client C brought issues with how she was treated by her mother since childhood, carried into adult life, especially now as a mother herself. She also brought self-criticism, which she is aware affects what her daughters see in her. She stated her goal was to find a different way to relate to herself, but that the

difficulty was the things her mother said really stuck inside, really hurt and she didn't know how she could shift that.

The therapist working with client C is an associate professor in Psychology, an eminent EFT practitioner who published many articles and book chapters in EFT, exploring various topics, including case formulation. The therapist helped the client work on unfinished business with the client's mother, in the empty chair dialogue.

Client and Therapist Dyad 3. The third client is from a demonstration video recording Empty Chair and Self Interruption for trauma. Client J wanted to bring mostly emotional abuse that she had experienced from her mother, and how it left her with unresolved feelings, impacting her self-esteem and sense of self-worth.

The therapist working with client J is a Professor of Psychology, an eminent EFT practitioner with over twenty years of clinical experience. She is one of the developers of EFT, particularly applied to complex trauma (EFTT). She is the author of numerous publications on trauma and psychotherapy.

Client and Therapist Dyad 4. The fourth client is from *Emotion-Focused Therapy Over*Time: Therapy in Six Sessions. Two sessions were analysed out of the six sessions recorded: session 2 and session 6. In this series of sessions, client M faces multiple problems, including depression, anxiety, and marital distress.

The therapist working with client M is a Professor of Psychology, one of the world's leading authorities on working with emotions in psychotherapy and among the primary developers of EFT, having published numerous books and co-authored some of the fields' major texts, including on case formulation.

Researchers

Principal Investigator. I am a BACP accredited counsellor, trained in Person-centred Therapy (PCT) and EFT as a therapist, supervisor, and trainer, with over fourteen years of post-qualifying experience as a clinician and over twelve years of experience working with the EFT

model. As an EFT supervisor, I work closely with supervisees on how they conceptualize client work in EFT terms. While watching recordings of their actual client work in sessions, and because of my own reflections in my supervision work, I became particularly interested in case formulation as a collaborative process between the therapist and the client in sessions. I approached this study with a lot of interest and curiosity, as well as an open mind as to where it would take me, which I feel is needed in descriptive-interpretative qualitative research.

My expectations were that, immersing in this process of deep observation would first of all verify, with data, characteristics of CFW already referred to by the leading EFT clinicians: reflecting on the client process, collaborative, sequential. I also hoped to be surprised by new characteristics that are not found in the existing working definitions. With regards to a typology for CFW, I started from the expectation that the variety of CFW would be found by studying both therapist and client responses. I expected to find variety within the *content* of what is being formulated, such as the aspects of formulation found in the Client Process Framework (CPF, see Appendix B): formulating emotion scheme elements, emotion response types or the intensity of the emotion, as well as self-other thematic formulations. In terms of therapist response modes found within CFW, I expected to find empathic formulation as a common denominator in all the formulation responses and to discover if any other therapist response modes, like empathic conjectures, are also a significant part of CFW. I expected to find differences in the way eminent therapists engaged in CFW, including the combination of therapist response modes used.

Research Supervisors. My first supervisor was a Lecturer in Counselling and Director of the Strathclyde Counselling & Psychotherapy Research Clinic, with significant research contributions, a COSCA accredited counsellor/psychotherapist, with extensive experience in Person-Centred Therapy (PCT), as well as a co-editor of the international peer-reviewed journal, Person-Centred & Experiential Psychotherapies (PCEP). She has an appreciation of EFT as she took part in EFT Level 1 and 2 training in 2006-2007. As my first supervisor, she offered extensive feedback and regular support in conducting my investigation and writing my dissertation.

My second research supervisor was a Teaching Fellow in Psychology, a Chartered Psychologist with the British Psychological Society (BPS), registered member of COSCA and BACP, also trained in EFT Level 1 and 2 in 2022. Due to his expertise in teaching research design, research methods and data analyses, he was able to offer feedback and support in these areas during our supervision meetings.

My third research supervisor was a Professor Emeritus with extensive experience in EFT, as one of the originators, and a leading expert in psychotherapy research, experienced in a wide variety of research methods, including the method used in my study and co-authored major texts and numerous articles and book chapters. Given their expertise in the method and subject area, they provided extensive support and guidance during our supervision meetings. They were also the therapist in Dyad one. I was aware of their dual role as therapist in one of the sessions analysed and research supervisor, and I brought up the implications of this dual role with all my supervisors. We discussed their potential investment and influence on the analysis and tried to mitigate that. They deliberately took a step back and let the other supervisors be more involved in giving me feedback on the analysis of the session where they were therapist. However, this was only one out of five sessions analysed, therefore the implications of this dual role were limited.

Pre-Analysis

Research framework

The first step was to create a pre-analysis table that is structured by a conceptual framework, based on the research questions. The rationale for this table was to organize the analysis and to make explicit what I set out to study. This conceptual framework contains different kinds of data, and I explained the nature of these categories in the data analysis. Starting with the research questions and following the logical structure of case formulation work between therapist and client, namely who is involved, I organised the data based on the research framework presented in Table 2.

Table 2

Research Framework

No.	Research Framework
1	Client Formulations of their own Process
2	Therapist Formulations of Client
3	Accompanying Therapist Response Modes
4	Degree of Relevance of Case Formulation Work (CFW)

Data Preparation

For the pilot study, I analysed the APA Video *Resolving Problematic Reactions in Emotion Focused Therapy*. To prepare the data for my pilot study, I first did a transcription of the full session and delineated it into therapist and client speaking turns as the meaning units. Barker *et al.* (2015) refer to qualitative methods as being human encounters in which the investigator is the measuring instrument. As the researcher observing the transcribed material and looking to retain only what was relevant for my study, I had to establish a degree of relevance of the data: which meaning units were case formulation work and which ones were not. I analysed the therapist and client speaking turns from the point of view of the level of granularity needed to differentiate CFW from responses that were not within the same speaking turn. I used a grading scale to assist me in this process of judgement of relevance with regards to the corpus of my study and establishing the degree of CFW in each speaking turn (see Table 3A).

Table 3AGrading Scale for Degree of Case Formulation Work

Degree of Case	Grading Scale
Formulation Work	
Level 3	Responses that are definitely CFW for Therapist and Client.
Level 2	Responses that are most likely CFW for Therapist and Client.
Level 1	Responses that are maybe CFW but probably not, for Therapist and
	Client.
Level 0	Responses that are definitely not CFW for Therapist and Client.

Data Analysis

Analysis Mode

I proceeded to record the characteristics of the responses that I assessed at various levels of CFW, through an open-ended qualitative process description. This process helped me begin to articulate the defining characteristics of therapist and client responses that were rated at various levels of CFW on the graded scale. After engaging with the categories of CFW on this graded scale through this rating and process description analysis mode, I renamed them to reflect a more accurate description, and I added a colour coding to further assist in delineating more clearly the different categories of CFW (see Table 3B).

 Table 3B

 Colour Coding for Grading Scale of Degree of Case Formulation Work

Degree of Case	Grading Scale	Colour Coding
Formulation Work		
Level 3	Clear CFW for Therapist and Client	Dark Green
Level 2	Likely CFW for Therapist and Client.	Light Green
Level 1	Unlikely CFW for Therapist and Client	Yellow
Level 0	No CFW for Therapist and Client.	White

Category Construction

Through working with the data under these degrees of certainty on the grading scale, I started to use similarities to cluster meaning units into themes and attempted to accurately describe the data under these themes. For instance, starting from my observations of all therapist responses that had the following characteristics: collaborative, tentative, friendly, checking for fit with client, I clustered the meaning units that had in common these process descriptions into the following theme or category: "The work is done collaboratively with the client: it builds on client and therapist formulations, it is tentative, responsive to feedback for fit and making sense to the client, it adapts to the client's experience."

Apart from attempting to accurately describe the data, I also named the categories. For instance, responses that were clustered under the theme "not bringing anything previously unspoken in session" were named "Recycled Formulations".

I continued to create categories and arrange them into a hierarchical structure, with sub-categories. For instance, under the category "Client responses that are not delivered in a reflective manner" I added two different sub-categories: "Client adds example that illustrates formulation" and "Client narrative detail drawing on schematic memory that implies an unstated formulation". A full illustration of my definitional structure, with all the categories and subcategories will be presented in the Results chapter.

I then moved on to analyse the data to answer the next two research questions on identifying the different types of EFT collaborative CFW that emerged, and what therapist response modes facilitated the unfolding of in-session collaborative CFW. The corpus for these two research questions contained the speaking turns that I assessed as CFW for therapist and client, when working on the first research question. In the Results chapter, when I present all the categories of definition, I specify which categories are CFW and which ones are not. Table 4 is an example of the format I used to integrate all the observations from the data analysis and to assist me in answering the research questions.

Table 4

Template for Data Analysis with Example

No	Speaking Turn	Therapist Response Mode	Degree (0-3) and Characteristics of Case Formulation Work	What Kind of Case Formulation Work
T1a	Therapist: OK G, thank you for coming in, I'm glad to see you and meet you,	process disclosure	0	
T1b	I think you brought something in for us to work on today, what would that be?	Exploratory Question	1	Gathering data for formulation. Pre-formulation Formulation relevant but not in itself formulation;
C1	<u>Client:</u> I seem to have an emotional detachment any time I go through serious or	client self- formulation	3. self-reflective	Client self-formulation. Troubles telling Formulating the emotion, (level of emotion)

	traumatising issues or events in my life			
T2	Therapist: So, something serious or <i>painful</i> or traumatic happens then what, somehow what, you detach?	Empathic / Exploratory Reflection	2. Tentative, collaborative reflective on client process	Repeated F, reflecting back Client Self Formulation without bringing something new. Consolidates client formulation and invites continued exploration

Each heading in Table 4 was designed to assist in answering one of the three research questions. The heading "Degree and Characteristics of CFW" helped answer the first definitional question, using the grading scale and open-ended, qualitative process description. Elliott and Timulak (2021, p. 53) define process description as "a mode of understanding and translating a participant's communications (spoken and written) by characterizing the nature of their observable speech acts or their manner or style." They further specify that process description is found frequently in studies that use therapy sessions as their data, like this study. The heading "What Kind of CFW" assisted in answering the second research question, using process description again. And finally, the "Therapist Response Mode" heading was added to assist in answering the third research question, through a process of coding into the various therapist experiential response modes, based on the EFT Therapist Session Form (Elliott, 2019a).

In Table 4, I extracted an example of each category from the beginning of the session, which shows how I started to analyse the data by writing my observations under each heading. The first therapist speaking turn is an example of further delineating the therapist speaking turn to distinguish between different categories of CFW. Through working with the data emerging under these categories, I continued to create sub-categories and then checking the categories for fit with the data and a coherent structure, to arrive at the results.

After concluding the data analysis for the pilot study and after careful consideration of all the implications, I decided to continue the analysis with the single session recordings rather than adding more complexity at this stage with the EFT over Time series, which I analysed last.

I continued to analyse the data in the remaining four video recordings, following the analysis table (see Table 4) I had developed at the pilot stage. If my approach for the pilot stage was

more inductive, creating categories of definition by drawing general principles from my observations of the transcribed data, from this point I proceeded with an abductive approach. Tavory and Timmermans (2019) described this approach, which originates from Charlies S. Pierce, the founder of American pragmatism, as a proposition that is guessed at, presumed after the fact to explain observations we cannot easily account for, and added that it was the only form of inference that has innovative potential. For my study, this meant continuing to develop the definitional framework I had built at the pilot stage and adjusting it, trying to disprove it when encountering new data that couldn't be explained based on the existing categories.

In this process of continuously disproving the existing categories, new categories continued to emerge, until they gradually started to stabilize and the meaning units to fit within the existing categories and subcategories. This stage was what grounded theory calls "saturation" (Glaser & Strauss, 1967) and it refers to the point where all relevant conceptual categories had been identified, explored, and exhausted. This told us that we were nearing the end of our study (Elliott & Timulak, 2021).

Both myself as the principal investigator and my research supervisors ran integrity checks at various stages of the analysis, to ensure consistency in the process of coding. First, during my research supervision meetings, I brought any examples of case formulation work I wasn't sure about in terms of the coding and checked with my supervisors to make sure it made sense. My first supervisor audited the full analysis of the pilot study to check for consistency in terms of coding. I also did repeat internal audits by checking the full session analysis after each session and at the end of the study, refining the categories and checking for cohesion. One example of refining was changing the name of Level 3 formulations from 'clear formulations' to 'complete formulations', which made more sense in light of Level 2 formulations being called 'partial formulations'.

To recap all the research activities that I used to develop this method, I created the flowchart below:

Figure 1Research Activities used to Develop the Method



Results

After I described the method in detail, so that it could be replicated by other researchers, next I present the results that emerged from the data analysis. I did this in order of the research questions, which followed the natural progression of this study. The results for each research question are presented in a framework that captured the complexity of the findings, followed by examples to help ground the findings in data.

Defining Characteristics of Case Formulation Work

Categories of Definition of Case Formulation

3.1.5. PRIMARY: The formulation is the main

point of the therapist response, as opposed to

(MANNER)

The first research question is: What are the defining characteristics of CFW (i.e., characteristics which, if they were absent, would mean that a response was not case formulation)? Table 5 presents an overview of the results for this question and Table 6 presents the frequency by dyad of each category of definition of CFW found.

Categories of Definition of Case Formulation

3.2.5. PRIMARY: The formulation is the main

point of the client response, as opposed to

 Table 5

 Categories of Definition of Case Formulation Work for Therapist and Client

Categories of Definition of Case Formulation	Categories of Definition of Case Formulation		
Work for Therapist	Work for Client		
Level 3: Complete Case Formulation Work			
3.1. Therapist Complete Case Formulation Work	3.2. Client Complete Case Formulation Work		
(all 5 aspects must be present):	(all 5 aspects must be present):		
3.1.1. REFLECTIVE: Stepping back and	3.2.1. REFLECTIVE: Stepping back and		
reflecting on the client's process. (ACTION)	reflecting on the client's process. (ACTION)		
3.1.2. CONNECTIVE: Building a shared story	3.2.2. CONNECTIVE: Building a shared story		
that connects the client's presenting difficulties	that connects two or more elements having to		
to their key emotions. (CONTENT)	do with the client's presenting difficulties,		
	progress or emotions. (CONTENT)		
3.1.3. UNSPOKEN: Bringing something	3.2.3. UNSPOKEN: Bringing something		
previously unspoken by the client and making it	previously unspoken by the client and making		
explicit. (CONTENT)	it explicit. (CONTENT)		
3.1.4. COLLABORATIVE: The work is done	3.2.4. COLLABORATIVE: The work is done		
collaboratively with the client: it builds on client	collaboratively with the therapist: it builds on		
and therapist formulations, it is tentative,	client and therapist formulations, it is tentative,		
responsive to feedback for fit and making sense	responsive to feedback for fit and making sense		
to the client, adapts to client's experience.	to the client. (MANNER)		

being a secondary or subsidiary element. (ACTION)

being secondary to task implementation. (ACTION)

Level 2: Partial CFW: a therapist or client response that is missing one or more aspects (from 3.1 or 3.2) that would otherwise make it Complete Case Formulation Work.

- 2.1. Therapist Partial Case Formulation Work (any of the following):
- 2.1.1. Recycled formulations: reflecting client formulation or a previous therapist formulation without bringing something previously unspoken by the client, therefore missing aspect 3.1.3 above.
- 2.1.2. Therapist responses that are not delivered in a reflective manner (missing aspect 3.1.1):
- 2.1.2.1. Adding narrative detail that clearly illustrates the formulation.
- 2.1.2.2. Empathic conjecture about narrative detail formulation.
- 2.1.3 Simple, single element formulation: one experience or one feeling (missing aspect 3.1.2).
- 2.1.4. Secondary task formulation, where formulation is not the main point of the therapist response, it is subsidiary to task work [opening, maintaining, closing], missing aspect 3.1.5
 2.1.5 Formulation that steps back and reflects on the client's process by building a shared story but without connecting to key emotions (e.g. interpersonal formulation), missing aspect 3.1.2.

- 2.2. Client Partial Case Formulation Work (any of the following):
- 2.2.1. Recycled formulations: repeating previous formulation without bringing something previously unspoken in session, therefore missing aspect 3.2.3 above.
- 2.2.2. Client responses that are not delivered in a reflective manner (missing aspect 3.1.1):
- 2.2.2.1. Adding example that illustrates formulation.
- 2.2.2.2. Client narrative detail drawing on schematic memory that implies an unstated formulation (as opposed to episodic memory). 2.2.3. Evaluation of an aspect of formulation, therefore missing aspect 3.2.3 by evaluating a previous formulation rather than bringing something new.
- 2.2.4. Secondary self-formulation, part of task implementation, missing aspect 3.2.5.
- 2.2.5. Simple, single element formulation: one experience or one feeling (missing aspect 3.2.2).

Level 1: Formulation-Relevant Work: not in itself formulation but preparation work, approaching, building towards it (Pre-Formulation) and follow up, testing out, carrying formulation responses forward (post-formulation)

- 1.1. Therapist Formulation-Relevant Work (any of the following):
- 1.1.1. Therapist responses that gather data towards formulation (e.g. exploratory questions, creating context, process suggestion, offering encouragement for task;) (Pre-Formulation)
- 1.1.2. Therapist checking client agreement with formulation. (Post-Formulation)
- 1.1.3. Therapist acknowledges CFW (e.g. empathic repetitions or empathic following). (Post-Formulation)

- 1.2. Client Formulation-Relevant Work (any of the following):
- 1.2.1. Minimal response in relation to or confirming formulation. (Post-Formulation)
- 1.2.2. Formulation relevant narrative detail. (Pre-Formulation)
- 1.2.3. Client expressing emerging emotion that is being formulated as part of task implementation. (Pre-Formulation)

Level 0: No Case Formulation Work

- 0.1. Therapist Level 0:
- a) Opening statement/welcome
- b) Empathic following and Empathic Repetition of client narrative not related to formulation.
- c) Empathic Reflection of narrative detail not related to formulation
- d) Scene building/clarification questions.
- e) Interrupted sentences.

Therapist and Client

- f) Structuring Task responses e.g. Process Suggestions or confirming Action Suggestions.
- g) Personal Disclosure not related to formulation.

- 0.2. Client Level 0:
- a) Greeting/opening
- b) Narrative detail not related to formulation.
- c) Answering therapist questions, not related to formulation.
- d) Clarification questions
- e) Interrupted sentences.
- f) Client disagrees with therapist reflection, not related to formulation.
- g) Response in relation to the task, not in relationship to the formulation.

 Table 6

 Frequency of Occurrence by Dyad for each Category of Definition of Case Formulation Work for

Levels of Definition of Case Formulation Work		Frequency in Dyad 1	Frequency in Dyad 2	Frequency in Dyad 3	Frequency in Dyad 4 s2	Frequency in Dyad 4 s6	Frequency Across all Sessions
Level 3	3.1	14	6	7	5	10	42
	3.2	13	13	20	13	16	75
Level 2	2.1.1	14	16	27	11	9	77
	2.1.2.1	7	1	0	0	0	8
	2.1.2.2	7	9	8	9	7	40
	2.1.3	13	13	13	6	4	49
	2.1.4	18	31	25	20	18	161
	2.1.5	8	6	0	4	4	22
	2.2.1	11	9	6	5	10	41
	2.2.2.1	20	25	4	3	7	59
	2.2.2.2	7	2	0	4	8	21
	2.2.3	9	9	14	12	7	51
	2.2.4	10	21	24	31	38	124
	2.2.5	10	4	8	3	3	28
Level 1	1.1.1	49	36	53	70	52	260
	1.1.2	9	0	1	0	0	10

Levels of Definition of Case Formulation Work		Frequency in Dyad 1	Frequency in Dyad 2	Frequency in Dyad 3	Frequency in Dyad 4 s2	Frequency in Dyad 4 s6	Frequency Across all Sessions
	1.1.3	12	7	24	15	20	78
	1.2.1	35	13	23	18	12	101
	1.2.2	41	28	18	47	18	152
	1.2.3	2	4	11	10	16	43
Level 0	0.1	59	15	17	31	26	148
	0.2	56	14	29	34	26	159

Complete Formulation for Therapist and Client

Next, I show examples of each category of definition, starting with the complete formulation category. Below is an example of client complete self-formulation (category 3.2, Table 5), found in Dyad 4, session 6:

C41: And most people think I'm like a really, really happy person (T: yes) Because I can...[pause] function well and I'm very joyful, I mean, I joke around, I engage in conversation with people. But I'm really like the saddest person in the room (T: yes, yes, yes). And most people don't know that, you know, they don't understand that. They would be really shocked.

In C41, the client is stepping back and reflecting on her process [Aspect 3.2.1, Table 6], how she is in general, by using words like "I can... [pause] function well" which suggest she is not talking about a specific example but making general comments about the way she is functioning. She is pausing after the word "can", showing a reflective mode. She is building a story that connects six different elements [Aspect 3.2.2]: people know her as a happy person; that is because she puts on a façade and can function well; however, underneath that, she is really the saddest person; and then, connecting back to the interpersonal element, that people don't know this about her; they don't understand this about her; and finally, that they would be shocked to know this about her. In this sequence, she is connecting the difficulties she is presenting (I hide how I really feel) with what it's costing her in terms of her emotions (leaves her feeling like the saddest person) and back to the relational difficulty about what is maintaining this (people would be shocked). She

is bringing something previously unspoken and making it explicit: the fact that she can function well but underneath she feels sad [Aspect 3.2.3]. The manner in which she is doing this self-formulation is collaborative with the therapist by building on pervious formulations, both by the therapist and by herself, and by leaving room and being receptive for the therapist to empathically follow her story ("yes, yes, yes") and confirming that he understood her in the following speaking turn [Aspect 3.2.4]. And finally, the self-formulation here is the main point of the client response, it is not secondary to task implementation [Aspect 3.2.5].

This self-formulation is followed by a Therapist Complete Formulation (Category 3.1). T42: I'm like the saddest person [C: right] because somehow, I'm never going to get the love that I really, I just want to be understood and held and [C: exactly] kind of responded to.

And it feels like everything is such a struggle [C: it is] and I never get this kind of soothing, comforting at home. I did get it from my father [C: right] but I never... [C: pause] got it again. This is such a painful place.

In T42, the therapist is taking a step back and reflecting on the client's process [Aspect 3.1.1], again speaking generically using words like: "it feels like", "everything", "I never get this" "I'm like..." "I just want...". He has a reflective tone by slowing down the pace and pausing after certain words, also using the 1st person as he is reflecting on the client process, to allow the client to also reflect inwards. He is building on the client self-formulation [Aspect 3.1.4] by acknowledging it at first through an empathic repetition and then adding something previously unspoken by the client [Aspect 3.1.3], through an empathic guess at the client's core pain and unmet needs. The therapist is connecting the client's presenting problems to her key emotions [Aspect 3.1.2] and is doing that tentatively, paying attention to the client agreeing with this formulation and that it fits with her experience ("right", "exactly", "it is") [Aspect 3.1.4]. This is also the main point of the therapist response, as opposed to being secondary to task work [Aspect 3.1.5].

Another example of client (Category 3.2) complete formulation is from Dyad 2:

C2: Mhmm...Well..., I realised... as I got older..., that mhmm... I have a lot of issues with... the way my mom treated me when I was younger, (T: mhmm) and it's carried over a lot into my adult life. And now that I'm a mom..., well, I mean, I've been a mom, but my three oldest girls, especially, they're in that critical stage where self-image and stuff, and so I try to be opposite of what my mom is, but it's hard because I know it's more of like Dowhat-I-say-and-not-what-I-do (T: Right) kind of thing, so I say, 'Don't worry, you're beautiful how you are', and then, when it's time for me and my husband to go out or something, I'm like, "Oh, I'm ugly, I'm too fat," and then they see that and I just wish I could get rid of that.

In C2, the client is stepping back and reflecting on her difficulties in relation to her mum, slowing down and pausing after certain words, as she searches inside, using reflective language: "I realised", "I have a lot of issues with", "It's hard because", "I'm like..." [Aspect 3.2.1]. She is building a shared story that the therapist is picking up in T3 and building on it, and she connects various elements: that she has issues with the way mum treated her when she was younger; this impacted on how she sees herself; now that she is a mum, she worries that these issues spill out into her relationship with her daughters; she tells them one thing and shows them another; she formulates her goal, that she wishes she could feel different [Aspect 3.2.2]. This is right at the start of the session so everything the client is bringing at this point is previously unspoken [Aspect 3.2.3]. She is doing this collaboratively, leaving room for the therapist to acknowledge her self-formulation ("right", "mhmm") and build on this in the next speaking turn [Aspect 3.2.4]. She is not working on any task at this point, so her formulation of her issues is the main point of the client response [Aspect 3.2.5]. This is followed by a therapist complete formulation (category 3.1).

T3: Right, find a different way to feel.... (C: Yeah, to feel) - about yourself. - And you're saying like, I resolved inside myself not to... do this... the way she did it because it really hurt..., it was very painful... (C: Right, yes, yes, yes) for you growing up, it sounds like. But then, you found it hard to somehow let go of all that stuff..., it's still there.

The therapist is reflecting on the client process: "you want to find a different way to feel... about yourself"; "this was very painful... for you growing up, it sounds like"; "you found it hard to somehow let go" and also showing the reflective manner by slowing down and pausing after certain words, to allow the client to go inside and check against her experience [Aspect 3.1.1]. She is acknowledging the client self-formulation at first [Aspect 3.1.4] and then bringing something previously unspoken [Aspect 3.1.2] by connecting her presenting problems to key emotions ("because it really hurt, it was very painful"), and does this collaboratively, watching out for client agreement, showing that it fits her experience ("right, yes, yes, yes") [Aspect 3.1.4]. The therapist is implicitly reflecting towards the task they will do later ("you found it hard to somehow let go of all that stuff, it's still there."), however, the formulation is the main point of this therapist speaking turn, as opposed to task work, which starts quite a bit later [Aspect 3.1.5].

Partial Formulation for Therapist and Client

As presented in Table 5, I also found Partial Formulations (Level 2) for therapist and client. They have some of the definitional characteristics but are only partial formulations because they are missing one or more aspects that would otherwise make them complete formulations, as described above in Level 3 definitions.

Partial Formulation for Therapist. Below I am presenting examples for all the categories of partial formulation for therapist from Table 5.

Recycled Formulations. The first kind of partial therapist formulation is category 2.1.1, where the therapist is reflecting a previous formulation without bringing anything previously unspoken, therefore missing aspect 3.1.3 of the complete definition. An example from Dyad 1 is found in T2:

C1: "I seem to have an emotional detachment any time I go through serios or traumatising issues or events in my life." T2: "So something serious or painful or traumatic happens then what, somehow what, you... detach?"

Responses not Delivered in a Reflective Manner. Another kind of partial formulation for therapist are responses that are not delivered in a reflective manner (category 2.1.2), therefore missing aspect 3.1.1 from the complete definition. I will give examples for the two subcategories I found here. The first subcategory is the therapist adding narrative detail that clearly illustrates the formulation (category 2.1.2.1). Below is an example from Dyad 1, where the therapist is doing a narrative task with the client, and we can find a few of this kind of formulations. As we can see in Table 6, this category is only represented by a few examples found in Dyad 1 and an example in Dyad 2, which makes it a variant category, not widely represented. The therapist in Dyad 1 does a narrative task, which requires helping the client accessing the episodic memory and explains the use of this category of formulation, which is a feature of a narrative task.

T163c: "And he's saying, see that poem, right, you know, she wouldn't want you to do that, right?" This follows the therapist doing a formulation on how the client interrupts her emotions, in the same way her brother is interrupting her emotions too, to give an example that illustrates the formulation.

The second kind of therapist response not delivered in a reflective manner is an "empathic conjecture about narrative detail formulation" (category 2.1.2.2). Below is an example from Dyad 4, session 6:

T37: Yes. But in the centre of that hurt, I wonder what, if you could put words into that place, you know when you're feeling just terribly alone, terribly abandoned, terribly un-responded to, if you would say what you felt, what would you say? What's it like for you? I feel...

Another example of empathic conjecture about narrative detail is from Dyad 3, highlighted in bold below:

T68: Okay. So, be a phoney, why? Tell her why. What's scary about -- because it sounds like that's part of what it is. It's scary to go there and if you go there, bad things are going to happen. Can you tell her what those bad things are?

During a self-interruption enactment, the therapist is working with the client on the way she stops her emotions and explores her fear of her emotions by empathically guessing the client's experience. This kind of formulation is missing the reflective element, it is done in the moment, by inviting the client to go inside and speak from her fear. Prior to this formulation, the client is reflecting on how she is physically hurting in the context of relational difficulties, and then the therapist responds in a way that is not reflecting on the client's process overall but working in the moment, empathically guessing the client's internal experience through an empathic conjecture.

Simple, Single Element Formulation. Another kind of therapist partial formulation (Category 2.1.3) only reflects one experience or one feeling, therefore missing the connective aspect from the complete definition.

An example is from Dyad 3: T107: "So you kind of numbed out. Zoned out." The therapist is not building a shared story with the client here, just focusing on this one action on the self, a piece that will later build the bigger story. Another example from Dyad 1 is T99 "Pull it together, you said to yourself". In this example, the therapist is again only reflecting on one experience, in this case an action on the self.

Secondary Task Formulations. For category 2.1.4. I picked an example from Dyad 1 below:

T100: So, I'm just going to, I said to you that we might try something with the chairs, right, so I'm going to try this, okay [moves chair] so like there's G and there's just a few tears, right, and then you start telling her, what do you tell her, you start telling her don't do anymore of that? You don't wanna get a headache or a stuffy nose, what do you actually?

Here the formulation, which I have highlighted in bold, is clearly secondary to the task implementation (therefore missing the primary aspect of the complete definition), it serves the purpose to formulate and differentiate the two parts of the interruptive split.

Formulation that Doesn't Connect to Key Emotions. For category 2.1.5. Formulation that steps back and reflects on the client's process by building a shared story without connecting to key emotions, I chose an example from Dyad 2, T114: "Wow, it's almost as it you can do what she hasn't been able to do for you, right?" This formulation is interpersonal, reflecting towards the client's relationship with her mother as part of the empty chair task and is a partial formulation by missing the connection to key emotions.

Partial Formulation for Client. Below I am presenting examples for all the categories of partial formulation for client.

Recycled Formulations. For category 2.2.1. client repeating previous formulation without bringing something previously unspoken (missing the unspoken element), I will give an example from Dyad 1, C20: "They're, that's normal but I don't feel like maybe I was reacting normal or something, I don't know." (reiteration of C2: "I don't have a reaction that would be considered as like most normal people would do, maybe a breakdown or something like that.").

Formulations not Delivered in a Reflective Manner. For client responses that are not delivered in a reflective manner (category 2.2.2., missing the reflective element of the complete formulation) I found two subcategories. The first subcategory is of client adding example that illustrates the formulation (category 2.2.2.1). I will give an example from Dyad 2:

C4: Well, like she would always say, I mean, since I can remember, she'd always be like, "Oh, you're so big, you're so fat, you're so slow, you're so clumsy, oh, your hair doesn't look right, or if I wear makeup, when I was becoming a preteen or something, all my friends were wearing makeup so, when I would try, "Oh, my gosh, you look like a street walker." And I mean, so really, maybe sometimes I did; I don't know, but I don't think so because I didn't really wear much. [Right.] - But just things that I would never imagine saying that to my daughter. I would be like, "Well, maybe you can tone it down a little bit," or "That colour looks nice on you," something like that.

In the previous speaking turn (T4), the therapist is formulating how the things her mother said were very hurtful and damaging and left wounds and here the client is giving examples of the hurtful things her mother said and did, illustrating the previous formulation.

Another kind of partial formulation for client that isn't done in a reflective manner is 2.2.2.2: Client narrative detail drawing on schematic memory that implies an unstated formulation (as opposed to episodic memory) and I will give an example from Dyad 1:

C164: "Probably if I see him [her brother] react a certain way and I say, you tell me to hold it together and you need to hold it together."

This is an example where we can tell the client is drawing on schematic memory, as opposed to episodic memory, by the fact she is not sure of the details, she starts the sentence with "probably" and the fact she is speaking generically: "if I see him react a certain way" instead of referring to a specific example, drawn from episodic memory. She talks about the way things are between them in general, it's an old familiar way of relating to emotions between them.

Evaluating an Aspect of Formulation. For category 2.2.3. I give an example from Dyad1, C107: "It's just, I don't know, cause she's not here anymore." Here, the client is evaluating a rationale for the sadness she is feeling, sadness which is being formulated earlier. This partial formulation is missing the element of bringing something new, previously unspoken in session by being an evaluation of a previous formulation.

Secondary Task Formulation. Clients can also self-formulate as part of task work (category 2.2.4, missing the primary aspect of the complete formulation). This is exemplified in C154 from Dyad 1, where the client is speaking from the interrupter chair, during chair work: "Yeah, pretty much, I can't, yeah, I can't afford to be weak if they're weak at the time."

Simple, Single Element Formulation. And finally, for category 2.2.5. Simple, single element formulation for client: one experience or one feeling (missing the connective element), I will give an example from Dyad 3, C108: "I don't know if it's a coping mechanism!" is an example of the client reflecting on just one experience. This partial formulation is also an example of an

evaluation of an aspect of formulation (category 2.2.3), where the client is evaluating the self-interruptive action, the therapist is naming in the previous speaking turn (T108) about zoning out.

Formulation-Relevant Work for Therapist and Client

Moving down the category structure in Table 5, I found Level 1 Formulation-Relevant Work to be not in itself formulation, but preparation work, approaching, building towards it (preformulation) and following up, testing out, carrying formulation responses forward (postformulation).

Formulation-Relevant Work for Therapist. Below I present examples for all the categories of formulation-relevant work for therapist.

Gathering Data Towards Formulation. The first kind of formulation relevant work for the therapist is category 1.1.1 gathering data towards formulation, which is preparation work or preformulation. The example below is from Dyad 1, T1b: "I think you brought something in for us to work on today, what would that be?" where the therapist is inviting the client to bring her own formulation of her problems, which she is doing in C1. Another example is from Dyad 3, T112: "So can we do that, if you go back over to this chair, can you think of a specific incident that happened in the past that was particularly troubling for you?" This invites the client in C112 to add narrative to exemplify her formulation of mum's abuse that angered her, so it was a way for the therapist to gather data towards the formulation which came next.

Therapist Checking Client Agreement with Formulation. For the next formulation relevant category, therapist checking client agreement with formulation (category 1.1.2), I found an example in Dyad 1. In C84, the client doesn't sound sure of the therapist previous formulation ("I guess so"), which the therapist checks with the client by asking in T85: "You guess?" The therapist invitation to check encourages the client to bring an example that confirms the formulation (in C85) and ensures the work is done collaboratively. All therapists check client agreement with formulation, however most of the times this is part of a formulation response, while category 1.1.2 refers to

speaking turns that follow a previous formulation, where the therapist is checking client agreement with the previous formulation, and this makes it a post-formulation response.

Therapist Acknowledges Client Self-formulation. The last kind of formulation relevant work for therapist is category 1.1.3. Therapist acknowledges the client self-formulation, which also makes it a post-formulation response. After the client is bringing a formulation of mum's abuse which really angered the client, the therapist is acknowledging the client's formulation by responding: T113: "So insulting!" Another way to acknowledge the formulation is through an empathic repetition of a relevant aspect of the client self-formulation, like in T23 from Dyad 1:

C22: "It's not as much as that, what worries me is that that's just one incident, which is something great. but I've had other incidents in my life to where the reaction is probably been nonchalant."

T23: "Nonchalant"

Formulation-Relevant Work for Client. Below I am presenting examples for all the categories of formulation-relevant work for client.

Minimal Response in Relation to/Confirming Therapist Formulation. The first kind of formulation relevant work, category 1.2.1, is a post-formulation response. The example below is from Dyad 4 (session 2): T26: "But somehow, it's this thing about you and your kids. It's as though we're not, he's not together with me..." C26: "Right." This is relevant because it is part of the collaborative aspect of CFW in EFT.

Formulation-Relevant Narrative Detail. For category 1.2.2. I found an example in C79 from Dyad 4, session 2/6. The therapist is asking the client what she is angry with her husband about, as part of the empty chair task and the client replies in C79: "His attitude". This is a formulation relevant detail which gets picked up by the therapist in T80 which is a secondary task formulation: "Tell him what you resent. These are built up things, right?". This makes C79 a preformulation response and again, part of that collaboration between the therapist and client, working together towards a formulation.

Client Expressing Emerging Emotion that is Being Formulated as Part of Task

implementation. The last formulation-relevant category is 1.2.3 and I found the example below in Dyad 2. In C116 the client is expressing a strong protest to her mother's abusive treatment of her, which the therapist reflects empathically and then in C117 the client is expressing strong emotion: "Yeah, oh [strong emotional reaction]. This is then being explicitly formulated by the therapist in T118 as part of task implementation: "what's happening, you're so furious". Here, the therapist is formulating the client's protective anger in relation to her mum, which she expressed strongly in C117, therefore that expression, which is a pre-formulation response, is a relevant piece to the formulation work. Another couple of examples from Dyad 1 are: C112: "Pull it together, you know (gets tearful) "C148 client tearful: "it's just memories that's all."

Level Zero Formulation for Therapist and Client

Lastly, I found various kinds of therapist and client responses that are not CFW at all and rated these as Level Zero Formulations.

Level Zero Formulation for Therapist. An example of no CFW for therapist is from Dyad 2: T1: "OK, hello C" (category 0.1). Here we have an opening statement/welcome from the therapist, and we can find this at the start of all the sessions. Another form of no CFW for therapist is an empathic following of the client narrative not related to formulation, as for example T10 from Dyad 1: "Okay, I see, okay." One more example from Dyad 1, which is not formulation work, is T51: "So that's the background to the story" where the therapist is structuring the task.

Level Zero Formulation for Client. Level Zero CFW for client (category 0.2) can also look like a greeting/opening statement, as found in Dyad 2, for instance: C1: "Hello!" Another kind of no CFW for client can be answering the therapist question, not related to formulation: T42: "So you came, went back to Chicago then?" (category 0.1) C42: Yeah, and came back to work, I had to go back to work. (category 0.2).

Types of Collaborative Case Formulation Work

The second research question is: *Broadly speaking, what different types of EFT collaborative CFW are there?* Table 7 presents the results for this question and Table 8 presents the frequency of each kind of formulation by dyad and across all sessions.

In answering the first research question, I focused on presenting the defining characteristics of CFW. In answering the second research question, my focus was to capture the varieties of EFT collaborative CFW within this definitional structure. The corpus for the second research question is all the speaking turns for therapist and client that were assessed as Complete CFW (Level 3 formulations) and Partial CFW (Level 2 formulations).

Table 7

Types of EFT Collaborative Case Formulation Work

	Types of EFT Collaborative Case Formulation Work					
A. By Person	A1. Therapist Formulation of Client					
Formulating	A2. Client Self-Formulation					
B. By Content	B1. Reflection on Important Events in Client's Life (what is problematic /					
	progress in their life)					
	B2. Formulating the Emotion:					
	B2.1 Intensity Level of Emotion (e.g. overwhelming)					
	B2.2 Emotion Scheme Element (e.g. what it's about)					
	B2.3 Emotion Response Type (e.g. secondary reactive emotion)					
	B3. Self-Other Thematic Formulations:					
	B3.1 Formulations about Self-Self Relationship					
	B3.2 Formulations about Self-to-Other Relationship					
	B3.3 Formulations about Others-to-Self Relationship					
	B4. Complexity of the Content:					
	B4.1 Simple, Single Element Formulation.					
	B4.2 Formulating Two or More Elements.					
	B5. Unspoken-ness of the Content:					
	B5.1. Bringing Content Previously Unspoken by Client					
	B5.2. Recycled (previously spoken) Formulations					
C. By Action	C1. Storying (creating a narrative) Formulations					
	C2 Translating Formulations					
	C3. Formulation Density:					
	C3.1. Consolidating Formulations					
	C3.2. Elaborating Formulations					
	C4. Agreement Structure of the Formulation:					

C4.1. Confirming Formulations (e.g. adding example to confirm formulation)

C4.2. Correcting Formulations (e.g. client correcting therapist formulation and adding corrected self-formulation)

C5. Evaluating formulations

C6. Empathically conjecturing the client experience (e.g. empathic conjecture about narrative detail)

D. By Stage in

D1. Task Opening Formulation

Task Work

D2. Task Maintenance

D3. Task Closure Formulation

E. By Style

E1. Explicitness of the Formulation:

E1.1 Implicit Formulations

E1.2 Explicit Formulations

E2. Completeness of the Formulation:

E2.1 Complete Formulations

E2.2 Partial Formulations

Table 8Frequency by Dyad of Each Type of Case Formulation Work

Types of Case Formulation Work		Frequency in Dyad 1	Frequency in Dyad 2	Frequency in Dyad 3	Frequency in Dyad 4 s2	Frequency in Dyad 4 s6	Frequency Across all Sessions
A. By person	A1	71	57	54	49	43	274
formulating	A2	65	54	60	61	79	319
B. By	B1	28	23	50	83	84	268
Content	B2.1	65	13	17	33	14	142
	B2.2	65	26	44	46	57	238
	B2.3	6	11	18	10	13	58
	B3.1	71	43	52	60	69	295
	B3.2	31	51	47	38	60	227
	B3.3	23	90	38	31	48	230
	B4.1	30	20	32	32	27	141
	B4.2	99	98	83	78	94	452
	B5.1	74	70	65	67	85	361
	B5.2	58	54	50	43	36	241
	C1	109	63	73	71	97	413

	Types of Case Formulation Work		Frequency in Dyad 2	Frequency in Dyad 3	Frequency in Dyad 4 s2	Frequency in Dyad 4 s6	Frequency Across all Sessions
C. By Action	C2	84	58	91	93	88	414
Action	C3.1	63	43	22	25	25	178
	C3.2	5	32	43	34	21	135
	C4.1	28	20	3	3	13	67
	C4.2	1	1	1	0	1	4
	C5	15	5	22	10	6	58
	C6	7	9	8	8	12	44
D. By	D1	11	7	9	23	36	86
Stage in Task	D2	94	86	61	55	51	347
Work	D3	10	8	19	12	15	64
E. By	E1.1	58	71	57	58	68	312
Style	E1.2	76	40	57	52	47	272
	E2.1	27	19	27	18	26	117
	E2.2	109	92	88	92	95	476

I will now show examples of each kind of formulation. The corpus for this research question is all the Complete Formulations (Level 3) and Partial Formulations (Level 2), as all the kinds of formulations can be found within these categories of definition.

Types of Formulation by Person Formulating

Category A1: Therapist Formulation of Client. An example of A1 (Table 7) can be found in Dyad 3:

T17: So, you are stronger for that [C: yes] however, you paid a big price, it sounds like, as well, in terms of your self-esteem and [C: yes, absolutely, self-esteem] feeling unloved, unappreciated, uncared for by the one person you needed from the most. That's real tough, really tough.

Here, the therapist is formulating the client's image of herself in the context of mum's abuse and the cost on her life. Every therapist speaking turn that is a Complete or a Partial Formulation falls under category A1.

Category A2: Client Self Formulation. An example of A2 is found in Dyad 2:

C3b: "It's like, that's the heaviest. Like everything else is nice, but it goes away. - [T: Right.] It doesn't stick with me. Her words stick with me. - The things she said."

Here, the client is self-formulating and reflecting on the way she is affected by her mum's criticism. Every client speaking turn that is a Complete or a Partial Formulation falls under category A2.

Types of Formulation by Content

Category B1: Self-Reflection on Important Events in Their Life. For category B1, I extracted C23, Dyad 1 as an example of client self-reflection on what is *problematic* in her life:

C23: And my fear with it is that I know when I was younger, I've been through things where I did that, I detached emotionally and what happens is as time goes, portions of my life in that period I don't remember."

Another example under this category, this time of the client self-formulating *progress* in her life, is C20, Dyad 3:

C20: Good, because I feel like I finally have the freedom to actually better myself, like this has been one of the most beneficial years for me, because I no longer feel like I have to please her, like I feel like I can finally take the steps that I need to take in order to focus on myself instead of focusing on the demands of her, focusing on the household, everything that needed to be done with like my siblings. I feel like I can finally just focus on me.

Category B2: Formulating the emotion. For category B2, I found three sub-categories.

Sub-category B2.1: Intensity Level of Emotion. I will give an example from Dyad 1:

C184: "I don't know, the fear is that one day it all comes rushing in and then you explode."

Here, the client is reflecting on her fear of the level of emotion being too overwhelming.

Sub-category B.2.2. Emotion Scheme Element. I found an example in Dyad 1 where the client is formulating the emotion element of the emotion scheme, by naming the emotion she interrupted, her sadness:

C21: "I think I'm reacting, I'm not like, I don't know [T: okay, okay] I just didn't like, I wasn't sad, I wasn't like... "

I also found T81 in the same session, where the therapist is formulating the perceptual and action tendency elements of the emotion scheme:

T81: "Not the people who carry on and make a scene, you're not gonna talk to them, right!".

Here we can see the perceptual/situational element where the fear of sadness comes up, in being around others who show distress, and the action tendency is to avoid ('you're *not* gonna talk to them").

Sub-category B.2.3. Emotion Response Type. I found the following example showing the therapist from Dyad 1 referring to the client's fear of sadness, which is a secondary reactive type of emotion, an emotion about another emotion underneath:

C77 (for context) ... I don't wanna talk to certain people because I don't want them certain people that I think are goanna react and start crying, I don't wanna talk to those people.

T78: Because you'd get upset. (B2.3.)

Category B3: Self-Other Thematic Formulations Category. I found 3 sub-categories here. The first sub-category is B3.1, formulating the self-self relationship. The second sub-category is B3.2, formulating self to others relationship. The third sub-category is B3.3, formulating others-to-self relationship. I found an example from Dyad 2 where the client is formulating her relationship to herself (B3.1. Self-Self), the way she relates to her mother (B3.2 Self-Others) and the way she sees her mother relating to her (B3.3. Others-Self), so we find all three sub-categories in this one example:

C110: Ah, you've given me strength. You've given me strength and I don't think I realised it until right now [B3.3]. I always thought I was a wimp, but when I think about sitting there,

and I think about all the things that I can do, and I have done [B3.1], I know that I got them from you [B3.2 implied gratefulness in relation to mum]. And I know I got that sense of power, per se, that if there's a problem, - "I can do it." - I can fix it if you just give me a minute or two, I can fix it [B3.1]. (T: Wow, yeah, that's really) - And I get that from you, definitely, I get that from you [B3.3. and implied B3.2].

In this example the client is formulating her relationship to herself (used to criticise herself, call herself a wimp but now because of the work she has done in session she has a positive view of herself as someone with a sense of power who can take care of her problems). She is also reflecting on the way she now relates to her mother (feels grateful to her mother for giving her strength) and reflecting on the way she sees her mum relating to her (giving her strength, a sense of power).

Another example of B.3.1 (Self-Self) is from Dyad 1, this time a therapist formulation of the client's relationship to herself:

T125: So, it's quite hard work. You work hard to keep...maybe come over here, let's work with that a bit. [client moves chair] So there she is, there's the sadness there. It's not that she doesn't feel it, this part of you feels like I've got to keep a lid on it, what's that about?

In this example we can see the client relating to herself by keeping a lid on her sadness.

For B3.2. (Self to Others) I found T105, Dyad 2 where the therapist is reflecting on the client's relationship to her mother (admire her; also needed things from her that she missed; still feels she gave her some other things):

That's really important, what you just said. It sounds important to me, anyway, like this thing of, almost like, "I admire you "for your strength and I've been strong for it. "I needed some things from you, "and I really need it." I mean, it sounds like you really missed those things, and you really needed them, right? And that doesn't sort of end that all, right? - [C: Right]. - But that doesn't mean that you don't feel that she gave you some stuff, some other things, some strengths? - [C: Right]. - So, tell her. So, you're saying, like, "I admired you for

how strong you were." I mean, what she had to, from your description, she had to go through a lot.

For B3.3. (Others to Self), the therapist in Dyad 1 is reflecting in T187: "Yeah, yeah, yeah, you might get some flak from people [if you show emotion]" The therapist formulates how others relate to her by interrupting her emotions.

Category B4: Complexity of the Content. I found 2 sub-categories here. The first one is B4.1: Simple, Single Element Category of Formulation. An example of this category is T99, Dyad 1: "Pull it together, you said to yourself "where the therapist is formulating just one element, one action on the self. The second one is Category B4.2: Formulations that Have Two or More Elements. An example can be found in C102, Dyad 3:

C102: I should be angry, [T102b: I should be angry, so I have a right to be angry]. But I feel like I've gotten to a little point where I'm so emotionally numb to it, that every time I feel it doesn't faze me, so it never gets brought up. like a few minutes ago I was crying, but now, I'm not crying, it's like I pushed it away.

Here, the client is formulating several elements: her right to be angry, as well as the fact she numbs her anger. She formulates how she numbs: every time she feels it, she tells herself that it doesn't faze her anymore and when she cries, she pushes it away.

Category B5: Unspoken-ness of the Content. I found two sub-categories here. The first one is B5.1: Formulations that Bring Something Previously Unspoken by the Client. This is found in dyad 1, C107: "It's just, I don't know, cause she's not here anymore." Here, the client is formulating for the first time what her sadness is about: because her mother is not here anymore. The second sub-category is B5.2: Recycled Formulations. An example is found in the therapist speaking turn following C107, where the therapist is reflecting back the client self-formulation: T108: "You can feel her absence, the presence of her absence."

Types of Formulation by Action. I found various types of formulation under this category, exemplified below.

Category C1: Storying Formulations. In category C1, the action is one of the client and therapist building a formulation story, step by step, of the client's key issues and what is maintaining them. The example I found is a therapist formulation that builds a story of the client's difficulty, found in Dyad 4, session 6:

T28/29: Like I feel we're not together and so we're not connected, and l just feel so alone [C: we're like roommates] But really, I want you to understand and respond to that in me, so then I feel more connected. I really want to be connected [C: yeah, I do] but I constantly try, and l constantly get rebuffed, l guess, or not understood.

Category C2: Translating Formulations. In category C2, the action is taking a step back from the client's narrative and reflecting it back, e.g., by translating the action on the self or others. The example below is from Dyad 3:

T104: Blocked out. Okay. So that's again, so this is a part that you can you do this to yourself right [C: yeah] This process goes on. So come over here again. And it's like so how you block yourself out, you get close to that anger, but you...

Here, the therapist is reflecting on the client's action on the self in the context of two chair enactment of her self-interruption, the therapist action is one of translating what the client is doing to herself.

Category C3: Formulation Density. I found two sub-categories here. The first one is C3.1: Consolidating Formulations. In this kind of formulation, the action of consolidation is demonstrated in T150 and T152, Dyad 1, which consolidate T148:

T148: You took care of the tough ones. There's the tough ones and then there's the ones that take care of the tough ones [C: right] yeah, yeah, that's your role, that's your job.

T150 They're the tough ones, but if the tough ones were having trouble, you were the super tough one that takes care of the tough ones when they have trouble [C: right] that's your job in the family.

T152: So, when the tough have trouble, you are the super tough one that takes care of the tough ones? [C: yeah] yeah, so you've got to be even tougher than they.

The next sub-category is C3.2: Elaborating Formulations. This is exemplified in T30, Dyad 4, session 2/6, where the formulation is in the middle of the session, so the work of further elaborating is ongoing:

T30: Right, so one thing and it just expands. Yeah. So, what does it bring up or what's the most painful thing or the most troubling thing that it brings up? You know, in the past, like he's... What did it actually bring up today, do you know? Because somehow you spiral off, right?

Another example of this kind of elaborating formulation is from Dyad 1, T21: "You could end up feeling like there's something not quite right about how I'm not reacting to this, about my reaction, my non reaction feels a bit..."

Category C4: Agreement Structure of the Formulation. I found two sub-categories here. The first one is C4.1: Confirming Formulations. This action is shown in C25, Dyad 1, where the client is adding an example to illustrate the therapist formulation, thus confirming that it fits with her experience:

T25 (for context): I'm missing out on something, [C: I'm missing] I'm missing because I don't, I haven't had this experience of really letting myself fully feel some of these painful events in my life [C: Right] right. And so, from I guess, quite a bit of your life when something happened you just sort of said, ok, nonchalantly and went on and didn't really react and now you find yourself not being able to remember stuff.

C25: If I look back into certain periods, I try to remember the people I've probably met, I'm going to tell them I don't remember you.

Here, the client is confirming the not being able to remember stuff because of going over painful events without letting herself really experience them.

The second sub-category is C4.2: Correcting Formulation. The opposite action is when the client corrects the therapist formulation and adds their corrected formulation. This is exemplified in C115, Dyad 1:

T115: She's saying to you it's weak to be sad, and even now maybe she's telling you it's weak. And yet somehow the more she tells you, the more the sadness comes because it's there.

C115: The more she says pull it together the more you feel like you got to be strong [T: okay, okay, yeah]

Category C5: Evaluating Formulations. An example of this action is C126, Dyad 3, where the client is evaluating an aspect of the previous formulation, the image of mum saying she loves her which doesn't fit with mum's actions:

C126: It's almost like you are saying, I love you, right, because you know that I don't think you love me and this is your way of trying to make amends because you don't know how to be an adult about the situation and address what you've done in the past, you don't.

Category C6: Empathically Conjecturing the Client Experience Formulations. Lastly, I found category C8 of formulation and I will show an example from Dyad 4, session 6, highlighted in bold:

T33: But it sounds like learning how to deal with this hurt is what's so important. I mean, I understand it is very hurtful [right] but each of our hurt is so unique and kind of personal, right? (C: yes) So I'm getting this image of you really sort of really yearning or needing the understanding and soothing from him (C: yes) And I just don't get it and when you feel hurt, what goes through you? What's it like for you?

Here, the therapist's action highlighted in bold (among other actions too which are not our focus for this category) is to empathically guess the client experience by putting himself in her shoes and making explicit what is implicit in the client experience.

Types of Formulation by Stage in Task Work

Category D1: Task Opening Formulations. An example is T29, Dyad 3, where the therapist is proposing an empty chair task to the client:

T29: So not to do it and it's not for practice for real life, it's for you to come to terms with things and to get clear about where you stand, for you to get strong and then after that, you make a decision about how you are able to handle or how you want to handle things with your mother. Because my guess is, you've never really had a chance to say uninhibitedly how you feel, what you want, how angry you are, how sad you are, all those things. And so, this kind of therapy is an opportunity for you to do exactly that to express the way, the ideas the way to healing is through expression of all the feelings that you have and make sense of them for yourself. And then you are going to be a stronger person for having done that, does that make sense?

Task Maintenance Formulations. This category of formulations is found at the task implementation stage, e.g., T73, Dyad 4, session 6, where the therapist is formulating as part of maintaining chair work with the client: "But you know, it's how he erodes your self-confidence that's important. So, when you're demeaned right [C: yeah] you said at some point it starts to make you feel like you're crazy [C: yes] Right?"

Task Closure Formulations. This category of formulations is found at the end of a task, where the therapist's main point is closing the task, often by describing what might come next in the work, as found in Dyad 1:

T196: Yeah, yeah. You understand why you didn't react. You understand what it means in your life. [C: yeah], and you don't know what to do with it yet, but that's like another, this is a process, step by step by step, right. So, but you do have a sense of maybe what a next step might be, you know, if you were to take this further. [C: yeah], does that make sense?

Types of Formulation by Style

Category E1: Explicitness of the Formulation. I found two sub-categories here. The first one is E1.1: implicit formulations. A kind of implicit formulation is where task work is the main focus of the therapist /client and the formulation is implicit, as exemplified below (Dyad 2):

T107: And all that you taught me." - And tell her a little bit about this thing, I just think this is really important, as well, this thing of your strength, right? That you feel you kind of got from her. Like this thing of fixing the sink. (C: laughter) That's a good image of a strong woman.

Another kind of implicit formulation is found, for example in Dyad 1, where the client is adding narrative detail drawing on schematic memory that implies an unstated formulation (about her non reaction to finding out her mother died): C70: "And then I was **just talking like normal conversation to my brother** [T: yeah, yeah, yeah] about him being okay or... and about when you find out the arrangements make sure you let me know if they don't call and tell me."

The second sub-category is E1.2: explicit formulations. This is then made explicit by the therapist in the following speaking turn: T71 "So here's this, is like G switching into let me worry about my... I'm paying attention to my brother asking him about how he's doing, talking about arrangements."

Category E2: Completeness of Formulations. I found two sub-categories here. The first one is E2.1: complete formulations. All the Level 3 formulations for client and therapist in the definitional structure fall under this category. An example is from Dyad 4, session 2:

C63: Yeah. I wanna give up. And when I wanna give up, I don't wanna give up, I wanna give up on life. I'm tired. It's like I can't see anything worthwhile anymore. Not even for my kids. But sometimes that's what keeps me holding on when I really dig deep inside. My kids are what keeps me here because they, I don't have my father, and so I know what that would do to them if I wasn't here.

The second sub-category is E2.2: partial formulations. All the Level 2 formulations for client and therapist in the definitional structure fall under this category. An example below is from Dyad 4, session 2 and this is a partial formulation by missing one of the definitional aspects, namely that it is secondary to task implementation: C91: "I'm protecting you from any more hurt, anymore, anybody, anybody doing anything to you. That's why I'm here and I'm not leaving. I don't wanna leave. Because without me, you would fall apart."

Therapist Response Modes used in Collaborative Case Formulation Work

The third research question is: What therapist response modes facilitate the unfolding of collaborative case formulation work as a process in sessions? Tables 10 and 11 show an overview of the results. The corpus for this research question is all the Complete and Partial CFW across all the sessions analysed. I start by presenting the results for therapist response modes used in complete formulations first. For context, Table 9 presents the percentage of complete and partial formulations in each session. Table 10 presents the therapist response modes used in complete formulations and Table 11 presents the therapist response modes used in partial formulations.

 Table 9

 Percentage of Complete and Partial Therapist Case Formulation Work in Each Session

Dyad	Dyad 1	Dyad 2	Dyad 3	Dyad 4 s2	Dyad 4 s6	Mean % Across all Sessions
Percentage of Complete Formulation Work	14/199 Speaking Turns (7%)	6 /108 Speaking Turns (5%)	7 /140 Speaking Turns (5%)	5 /169 Speaking Turns (3%)	10 /147 Speaking Turns (7%)	5%
Percentage of Partial Formulation Work	57 /199 Speaking Turns (29%)	53 /108 Speaking Turns (49%)	48 /140 Speaking Turns (44%)	41 /169 Speaking Turns (24%)	35 / 147 Speaking Turns (24%)	34%

Table 10

Therapist Response Modes used in Complete Case Formulation Work

Therapist Response Mode	Dyad 1	Dyad 2	Dyad 3	Dyad 4 s2	Dyad 4 s6	Mean % Across all Sessions
Empathic Formulation	14 (100%)	6 (100%)	7 (100%)	5 (100%)	10 (100%)	100%

Empathic Conjecture	2 (12.5%)	2 (40%)	3 (43%)	1 (20%)	8 (80%)	39%
(of which with Fit Question)	6 (37%)	-	-	2 (40%)	1 (10%)	29%
Empathic Refocusing	8 (50%)	2 (40%)	1 (14%)	2 (40%)	-	29%
Experiential Teaching	2 (12.5%)	2 (40%)	4 (57%)	-	-	22%
Exploratory Reflection	-	-	-	2 (40%)	3 (30%)	14%
Process disclosure	1 (6%)	3 (60%)	-	-	-	13%
Evocative reflection	-	-	1 (14%)	1 (20%)	2 (20%)	11%
Empathic Reflection	-	1 (20%)	-	1 (20%)	1 (10%)	10%

Table 11Therapist Response Modes Used in Partial Case Formulation Work in Each Session

Therapist Response Mode	Dyad 1	Dyad 2	Dyad 3	Dyad 4 s2/6	Dyad 4 s6/6	Mean % Across all Sessions
Empathic Formulation	35 (61%)	15 (28%)	21 (44%)	21 (51%)	23 (66%)	50%
Empathic Conjecture	13 (23%)	20 (38%)	17 (35%)	20 (49%)	12 (34%)	36%
(with Fit Question)	7 (12%)	-	-	5 (12%)	5 (14%)	8%
Process Suggestion	18 (32%)	21 (40%)	20 (42%)	10 (24%)	10 (28%)	33%
Empathic Reflection	8 (14%)	6 (11%)	11 (23%)	9 (22%)	5 (14%)	20%
Empathic Repetition	16 (28%)	3 (6%)	14 (29%)	6 (15%)	4 (12%)	18%
Structuring Task	8 (14%)	8 (15%)	8 (17%)	2 (5%)	4 (12%)	13%
Process Reflection	9 (16%)	14 (26%)	8 (17%)	1 (2%)	1 (3%)	13%
Exploratory Reflection	4 (7%)	1 (2%)	-	2 (5%)	5 (14%)	6%
Evocative reflection	7 (12%)	-	-	3 (7%)	3 (9%)	5.6%
Empathic Refocusing	6 (11%)	1 (2%)	-	5 (12%)	-	5%
Experiential Teaching	1 (2%)	1 (2%)	4 (8%)	2 (5%)	2 (6%)	4.6%
Process disclosure	-	1 (2%)	1 (2%)	1 (2%)	1 (3%)	2%

Empathic - 1 (2%) - 1 (3%) 2%
Affirmation

Examples of Therapist Response Modes used in Complete Case Formulation Work

Empathic Formulation. As shown in Table 10, all Complete CFW for therapist across all the sessions analysed have empathic formulation as part of the speaking turn. These results were expected, we cannot have a complete CFW without having an empathic formulation as part of that speaking turn. An example is T22 from Dyad 4, session 6: "So while you're there, you're sort of kicking yourself in a way or feeling like I'm an idiot to be here, why am I still here." Here, the therapist is describing the client's difficulties in EFT terms, e.g. action on the self: while already being overwhelmed (which the client formulated in C21), she is kicking herself for being stupid.

Empathic Conjecture. The next most prevalent therapist response mode that facilitates the unfolding of CFW I found was empathic conjecture (39%), which is a tentative guess at the immediate, implicit client experience, usually accompanied by a fit question. Using an empathic conjecture is one way in which the therapist can "bring something previously unspoken in session and making it explicit", which is one of the definitional characteristics of Complete CFW. I found examples of empathic conjectures used as part of Complete CFW in all the sessions. Two therapists (across three sessions) used a fit question with 29% of their empathic conjectures. A fit question encourages the client to check representation of experience with actual experience and this collaborative aspect is one of the five definitional characteristics of CFW. One of the therapists in particular used empathic conjectures in 80% of all his Complete CFW responses and I have extracted an example from one of his sessions from Dyad 4, session 2/6:

C52: The love or the attention or you know, because he does give it to me sometimes (T: yes, yes) You know, it's just painful the stuff that comes behind it, that takes away from what he does give.

T53: Yes, yes. But I don't know if it's like I stay for the crumbs I get (C: yes) or whether, I mean, that's the confusion thing (C: right) or it's like I really feel connected (C: right)

somehow this time in the middle of the night, when you want to call your mother, it seems really important to try to get there **because**, **that's the most painful place**.

We can see the therapist using empathic formulation with empathic conjecture (highlighted in bold), playing the important role of deepening the client's experience and connecting to her core pain ("that's the most painful place"). The fit question here is implied, in the tentativeness of the formulation ("but I don't know if it's like...") which the client confirms ("right").

Empathic Refocusing. The next most prevalent therapist response mode that facilitates the unfolding of CFW I found was empathic refocusing (29%), responses that offer empathy to what the client is having difficult facing to invite continued exploration. In particular, the therapist in Dyad 1 used it in 50% of all their Complete CFW and I extracted an example from that session: T125c "So there she is, there's the sadness there. It's not that she doesn't feel it, this part of you feels like I've got to keep a lid on it."

Here, the therapist is leaving an open edge on what the client is having difficulties facing, her sadness and what she is doing to her sadness, keeping a lid on it. This therapist response mode is helpful in motivational dialogue around change, in this case a different way of engaging her emotions for a client who interrupts them.

Experiential Teaching. This is the next most prevalent therapist response mode used as part of Clear CFW (22%), and it refers to providing general information about the nature of experiencing or treatment process or tasks. One therapist used it in 57% of her Complete CFW and it has relevance given that this session is with a client presenting with trauma, where explaining or providing information about what she is experiencing is really important. Below are a couple of examples from Dyad 3. The first one is T109: "Well, that's a way of escaping from difficult feelings [C: Yeah] (...) so you zone out and how do you -- in a sense of how you do that, you just sort of go blank". The experiential teaching is in bold, followed by the empathic formulation part of the CFW. The second example is T136: "Wouldn't want you to go into a situation where you end up being hurt and dumped on again (C: exactly) Important thing is to feel strong in yourself."

Here, the experiential teaching part is at the end, highlighted in bold and it validates and strengthens the need for personal boundaries (primary adaptive anger).

Exploratory Reflections. These are simultaneously communicating empathy and stimulating client self-exploration of experience, through open edge or growth-oriented responses, are only used in Complete CFW by one of the 4 therapists and are a hallmark of his manner of building a shared story of the client's process and linking to their core emotions. T44 in Dyad 4, session 2/6 is an example of this kind of formulation:

T44: I give to others what I would really like to get, but I don't get it [C: right] right. And then somehow, I just feel more and more disappointed and get to feel desperate, like life will never yield to me the things that I would like. Then I get sort of, I don't know if you get panicky or?

The therapist is starting with an empathic formulation and then continues to formulate through this exploratory reflection (in bold) that uses deliberately tentative language ('somehow', 'like', 'sort of', 'I don't know?' 'Or...?') and incorporates an empathic conjecture at the end of this formulation response.

Process Disclosures. These are therapist responses that share our own 'here and now' reactions, intentions or limitations to clients and are used as part of Complete CFW only by two of the four therapists, and more significantly by one therapist who uses process disclosures in 60% of her Complete CFW, namely at the end of the session, in a way that adds a personal note of the therapist disclosure on how they feel about the work done.

T115 (in Dyad 2): Right, right, right. So, it's like really finding a new sense of appreciation for what she did give to you [C: Right, right] and wanting to tell her and sort of understanding why maybe she wasn't able to give you all of the things that, right? So, some of the stories about her life sort of [C: right] give us an idea of her, well, how she had to be tough and... [C: Right] so, it was hard for her. It doesn't mean she didn't feel them, but she couldn't always express them, right? [C: Right] but I mean, you did need those things, right,

and I guess, maybe it would be helpful sometime, also, to kind of give yourself a little bit of appreciation, [C: laughter] right? [C: Right]. [empathic formulation] Like, that would be another piece to work on. If we were gonna continue, that's the kind of stuff you might work on, [experiential teaching] but I really appreciate you doing this work and coming here and being so open about all of the issues and the feelings of your mind [process disclosure].

The process disclosure is not a formulation response in itself, but in this complex speaking turn, the therapist is using various response modes that offer this complete formulation at the end of the session: empathic formulation, experiential teaching regarding future work and process disclosure.

Evocative Reflection. This type of therapist response communicates empathy while helping the client heighten or access experience through vivid imagery, powerful language or dramatic manner, is used by two of the four therapists to unfold Complete CFW, as exemplified in T42 in Dyad 4, session 2/6:

T42: I'm like the saddest person (C: right) because somehow, I'm never going to get the love that I really, I just want to be understood and held and (C: exactly) kind of responded to.

And it feels like everything is such a struggle (C: it is) And I never get this kind of soothing, comforting at home. I did get it from my father (C: right) But I never got it again. This is such a painful place.

The therapist is putting himself in the client's experience by using the 1st person, which is more evocative and is using powerful language in this formulation done in an evocative manner: "I'm like the saddest person", "I'm never going to get the love that I really...", "I never get this kind of soothing, comforting at home", "everything is such a struggle", "this is such a painful place".

Empathic Reflections. This type of therapist response accurately represents the most central poignant or strongly felt aspect of client's message. These are not very prevalent in clear

formulation responses (10%) and are only used by two of the four therapists across three sessions, in a few of their Complete CFW responses, as exemplified in Dyad 2:

C3b: It's like, that's the heaviest. Like everything else is nice, but it goes away (T: Right). It doesn't stick with me. Her words stick with me. - The things she said.

T4: So, she said things to you that were really hurtful and damaging [empathic reflection] sounds like they've kind of gone inside and sort of wounded you [empathic formulation describing the client difficulties in EFT terms e.g. the action on the self of mum's words] (C: yeah, right, yes) and they remained there, almost like wounds [empathic conjecture].

Here, the therapist is reflecting the client self-formulation in C3 through an empathic reflection with an empathic formulation and ending with an empathic conjecture.

Examples of Therapist Response Modes used in Partial Case Formulation Work

Empathic Formulation. The most prevalent therapist response mode found in partial formulations is empathic formulation (50%) One example is found in T4 in Dyad 4, session 6/6, where the therapist is describing the client's difficulties in EFT terms, e.g. action on the self: "And so, I mean, you're still hanging in there, right? [yeah], but one of your things was how do you protect yourself to make sure you don't really get sick or sort of get too depleted."

Empathic Conjecture. The next most prevalent therapist response mode found in partial formulations is empathic conjecture, used in 36% of all therapist partial formulations. An example is T26 in Dyad 4 session 2: "But somehow, it's this thing about you and your kids. It's as though we're not, he's not together with me..." Here the therapist is using an exploratory reflection with an empathic conjecture, highlighted in bold.

Process Suggestion. The next most prevalent therapist response mode found in partial formulations is process suggestion, used in 35% of all therapist partial formulations. Process suggestions are a form of process guiding especially used in chair work and all the sessions analysed have chair work as part of them, some of them extensively. An example is T106 in Dyad

3, where the therapist is feeding lines to the client during the two-chair for self-interruption task. The first sentence in T106 is a process suggestion and an empathic repetition of C105, followed by the suggestion to do that to herself, as part of this two-chair enactment and finishing with an exploratory/focusing question. There is an implied formulation of the action on the self in this process suggestion, however no explicit empathic formulation as a therapist response mode (which is what makes this a secondary formulation, by missing the primary aspect from the complete definition).

T106: Pretend like it didn't happen, okay. Can you do that to yourself over there, just push over there, go to the side, don't -- just pretend, lie (C: lie) be phoney. Pretend like it didn't happen. What's happening?

Empathic reflections. The next most prevalent therapist response mode found in partial formulations are empathic reflections, used in 20% of all therapist partial formulations. An example is found in Dyad 4, session 2/6:

C27: Yeah. It really bothers me when he says your kids (T: Yes. Yes). Because I get the feeling that he doesn't like them. So, then that creates a problem for me because I'm like well why am I with somebody who doesn't like my kids? It throws a lot of confusion into me and so I start thinking out my whole life again (T: Oh, wow. Yeah. Yeah) You know like why am I here, (T: why am I here) what's going on, what's goanna happen? You know?

T28/29: So, the whole thing, like the negative comments from him (C: Yeah, it just consumes me) about your kids, it just flips you into reviewing your whole life and then why am I here, I don't want to be, this isn't working or what am I getting?

Here, the therapist is focusing on the essence of what the client is saying in C27 and reflecting that back empathically. The second half of this speaking turn also doubles up as an empathic formulation, by focusing also on a general shared understanding of the person and how her process works.

Empathic Repetitions. The next most prevalent therapist response mode present in partial formulations are empathic repetitions, where the therapist repeats a word or phrase verbatim, with the purpose to emphasise key, important words. I found empathic repetitions in 18% of all the therapist partial formulations. An example is T128 in Dyad 3:

C127: I do not trust your motives at all. I feel like you are manipulative, and you only have your own best interest at heart, you will do whatever it takes, just make sure that you are happy, you do not care about anyone else's happiness, you will use people to your own benefit, it's all about you, *it's your big show*. **T128: It's your big show**. So, I don't believe your concerns (C: exactly) are genuinely about me, okay.

In C127 the client is doing a secondary self-formulation and in T128 the therapist starts by repeating her words verbatim, "it's your big show" and continues with formulating the client's relationship with her abusive mother as part of the empty chair task, in this secondary and recycled therapist formulation.

Process Reflections. Next, I found process reflections to be present in 13% of all partial formulations. An example is from Dyad 2:

T67: Yeah, I just need to hear, "I know it's hard for you, but I just need to hear you're proud of me," right? - Right. Yeah, because this is what brings the tears. This is what brings the pain, is when you say, "I just need to hear it once." - Right. - Tell her about.

Here, the therapist is feeding lines during the empty chair task and then describes what the client is doing right now in the session, through a process reflection, focusing on the client's immediate experience.

Structuring the Task. An equally prevalent therapist response mode in partial formulations is structuring the task and we have an example below in Dyad 1, T17, where the therapist is doing a secondary task formulation: "So you're left right now, even now as I mean you've just been that was 2 weeks ago and you've been to the funeral, you're left right now just not knowing why it is that you don't that you didn't react, (C: didn't) didn't get upset or cry or.."

Exploratory Reflections. The next most prevalent therapist response mode in partial formulations are exploratory reflections, found in 6% of all therapist partial formulations. An example is found in T21 in Dyad 4, session 6/6: "Yes. And it's reassurance, that I'm not crazy? Is it because he's getting into you or it's just like I feel so..." Here the therapist starts with an empathic conjecture with implied fit question ("and it's reassurance, that I'm not crazy?) followed by an exploratory reflection, which tentatively leaves an open edge to model self-exploration and focus on what is important and emerging in the client experience. This encourages the client to bring a clear self-formulation next, in C21.

Evocative Reflections. The next most prevalent therapist response mode in partial formulations are evocative reflections, found in 5.6% of all therapist partial formulations. An example is found in Dyad 1, T18: "So people actually saying, they're kind of calling you and saying are you okay, (C: Uhmhmm) you know, and you go like what are you talking about!" Here, the therapist is using a very expressive, exaggerated, vivid tone of voice as part of a narrative task, where getting the client to open up the experience and get in touch with the emerging emotion is paramount to arrive at what is puzzling in her reaction, which is her presenting problem in this session. Another example is from Dyad 4, session 2/6, T37: "Yeah, yeah, yeah, but still this hurt, right, seems to be like this big pool of past hurt with him right now". Here, the therapist is using vivid images to help the client touch on what is poignant in her emerging emotion, pointing towards a marker for an empty chair for unfinished business task.

Empathic Refocusing. The next most prevalent therapist response mode in partial formulations is empathic refocusing, found in 5% of all partial formulations. A sequence example is found in Dyad 4, session 6/6, where the therapist is focusing on a minimised, sidetracked experience and offers the client an opportunity to return to this uncomfortable experience she avoided twice:

C152: That's important. But do I really wanna be alone? I'd say I do, but I don't know...

T153: But I mean, you also say that you don't wanna be alone, right?

C153: I don't think I would, on a long term.

T154: But what you're saying is that if she shuts you down, closes you off, you will be alone.

Experiential Teaching. The next most prevalent therapist response mode in partial formulations is experiential teaching, found in 4.6% of all partial formulations. An example is found in: Dyad 2:

T57: (...) But I mean, it's like I get this real picture of how she was and how she is, right?

(C: Yes) Do it some more. Do what she does because this is how we're gonna get some of these feelings.

The therapist is ending this partial formulation response with experiential teaching as a rationale for enacting the negative imagine of her mother in the empty chair task in order to get a real picture of what it is that her mother is doing that is hurting her "because this is how we're goanna get some of these feelings".

Empathic Affirmation. The least prevalent therapist response modes found in partial formulations are empathic affirmation and process disclosure, 2% each. I will give an example of empathic affirmation first, found in Dyad 2, T44: "Uh huh, yes, yes. And that's painful, right, to... I needed to feel that you saw me. Tell her about the pain, tell her about the tears. It's very painful." The therapist leans towards the vulnerable emotion here and offers empathy and support, delivered with a gentle, compassionate voice. Since this partial formulation is done as part of chair work, we also have process suggestion/feeding lines ("tell her about...") but done in this evocative manner leaning towards what is painful.

Process Disclosure. I found an example of Process disclosure in Dyad 4, session 2/6:
T33: So, it's sort of like, I mean I was really struck with yesterday how you said you're locked inside and thrown the key away or lost the key. But in a way if you get on, you somehow come out a little bit, but then as soon as you get a kind of a negative or hurtful comment...

The process disclosure is followed by an empathic / evocative reflection, using vivid images and then ending with an empathic formulation done in an exploratory manner.

Chapter Summary

In this chapter I focused on presenting the results for each research question and showing examples of each category of definition, type of formulation and therapist response mode used to facilitate the unfolding of CFW. The next chapter focuses on reviewing these findings, analysing their meaning and importance and putting them in the context of the overall research.

Discussion

This study set out to investigate what CFW looks like in sessions. To answer this main research question, my aim was to first arrive at a research-based definition for CFW; second, to differentiate types of collaborative CFW into a typology; and third, to identify what therapist response modes facilitate the unfolding of collaborative CFW as a process in sessions.

Contributions to Knowledge

Defining Characteristics of Complete Formulations

With regards to the first research question, I reflect on what I have learnt through this study. I started from a theoretical framework and working definitions for case formulation, presented in the literature review and through open-ended, qualitative process description, I found the defining characteristics of complete formulations, characteristics which, if they were absent, a response would not be a complete formulation. I found examples of complete formulations in all the dyads, which further supports the findings. The proportion of these complete therapist formulations within each session is five percent on average (see Table 9). This was expected, given that complete formulations are culminations of all the formulation work that happens in sessions and that builds towards these peaks.

If we compare the defining characteristics of complete formulations from my study with the existing literature, we find a reference to the connective aspect (3.1.2) present in Greenberg and Goldman's (2015) working definition: "an explanation of how the client's problems have developed and what maintains, them, as well as what can be done in therapy to address them" (p. 3). The reflective aspect (3.1.1.) is also implied: the authors refer to formulation as "an explanation" which implies a stepping back and reflecting on the client's process. My definition makes this process explicit.

Furthermore, the tentativeness of the collaborative aspect of complete formulations (3.1.4) is referred to in Greenberg's definition (2015): "a working hypothesis about the client's core painful emotion: what this emotion is, what caused it and what thoughts and behaviours sustain it" (p. 119).

His definition refers to this tentativeness by calling it "a working hypothesis", also implying that the work is done collaboratively with the client. Aspect 3.1.4 of this study's definition makes it explicit: "The work is done collaboratively with the client: it builds on client and therapist formulations, it is tentative, responsive to feedback for fit and making sense to the client, adapts to client's experience." Greenberg's definition (2015, see above) also refers to the content of the formulation (client's core painful emotion, what caused it and what maintains it). This aspect is found in this study's complete definition: "Building a shared story that connects the client's presenting difficulties to their key emotions" (aspect 3.1.2).

The collaborative and connective aspects of the complete definition are also found in Elliott's (2012) definition. Elliott refers to "collaboratively constructing with the client more complex narratives that involve sequence processes" (p. 6). While Elliott's definition makes it explicit that the process is collaborative, this study's definition explains and details this collaborative process. Furthermore, Elliott implies the connective aspect by mentioning that it involves sequence processes; my definition explicates the elements that are being connected.

We can see that these working definitions are only referring to three of the elements of the complete definition that came out of this study. Often these references are implied, and this study makes them explicit and detailed. It also finds two further aspects: previously unspoken (3.1.3) and primary (3.1.5) which I haven't found a reference to in the literature.

Partial Formulations. Besides complete formulations, which have all the defining characteristics, this study also found partial formulations, which are missing one or more of the defining characteristics. They are part of the body of collaborative formulation work and are found on average in 34% of all therapist responses (see table 11). I found evidence of all these partial formulations across all of the study sample, which further strengthens the results.

One of the aspects of partial formulations, secondary task formulation, where formulation is not the main point of the therapist response, but is subsidiary to task work [opening, maintaining, closing] is also referenced by Elliott *et al.* (2021). They talk about "identifying task markers for

underlying emotion processing difficulties; providing a formulation-based rationale for tasks (...) post-task meaning creation; end-of-session collaborative formulation work" (p. 17). Elliott (2012) talks specifically about these kinds of implied formulations: "giving responses that imply case formulations by orienting to key client processes, such as markers, aspects of self, types of emotion response, emotion dysregulation" (p. 6). However, these are not differentiated as 'partial formulations' and I haven't found this tiered categorization of formulations anywhere in the literature. I also haven't found reference to other kinds of partial formulations that came out of this study, for instance formulations not delivered in a reflective manner, recycled formulations, simple, single element formulations or formulations that don't connect to key emotions (e.g. interpersonal).

Client Self-Formulations. Another contribution of this study was making it explicit that it is not only therapists who formulate the client's process, but that clients also self-formulate. As a result of this study, I identified the defining characteristics of CFW for clients too. Prior to this study, I haven't found evidence in the literature explicitly referring to client self-formulations, but only through the collaborativeness of the formulation process.

Differences between Therapist and Client Formulations. I learnt that client selfformulations mirror therapist formulations of clients (see Table 5). I comment on the very few differences between the two definitions below.

With regards to the connective aspect of complete CFW, a therapist complete formulation builds a shared story that connects the client's presenting difficulties to their key emotions, while a client complete self-formulation builds a shared story that connects two or more elements having to do with the client's presenting difficulties, progress or emotions. EFT therapists are guided by the emotional deepening that is at the heart of the case formulation process, while clients self-formulate when they connect at least two elements to do with their difficulties, progress or emotions. Without a connection of various elements, we don't have a narrative of the client's difficulties and what is maintaining them, just a piece of this shared narrative (see partial formulations).

In terms of therapist partial formulations, I found 'empathic conjecture about narrative detail formulation' (category 2.1.2.2), to not be mirrored in 'Client narrative detail drawing on schematic memory that implies an unstated formulation' (category 2.2.2.2). Empathic conjectures are therapist responses that empathically guess at what the client may be feeling but has not yet said out loud, so they make the implicit explicit. Category 2.2.2.2. also refers to the implicit in the client narrative so although they are not mirrored, they are connected through the style of communicating: implicit versus explicit.

Another two categories that are not mirroring each other in terms of partial formulations for therapist and client are: "Therapist formulation that steps back and reflects on the client's process by building a shared story but without connecting to key emotions" (category 2.1.5) and "Client evaluation of an aspect of formulation, missing aspect 3.2.3 by evaluating a previous formulation rather than bringing something unspoken" (category 2.2.3). As mentioned before, connecting the client's presenting problems to key emotions is an emotion deepening process characteristic to EFT therapists following the EFT emotion theory underpinning case formulation. However, clients can also reflect on their emotions and the sources of their distress. The client self-evaluative partial formulation can only be done by the client, since it involves checking inside to see if the previous formulation fits with their experience. Nonetheless, both categories, for client and therapist, involve a stepping back to check in and reflect.

'Formulation Relevant' Category. Another contribution of this study was finding the category of 'Formulation Relevant' work: not in itself formulation but preparation work, approaching, building towards it (pre-formulation) and follow up, testing out, carrying formulation responses forward (post-formulation). This looks different for therapist and client (see table 5). I called these 'the legs' of formulation work, as they approach it and carry it forward. I have found no reference in the literature to pre and post formulation responses and the role they play in the formulation work. However, one of these kinds of formulation relevant work, "Client expressing emerging emotion that is being formulated as part of task implementation" (category 1.2.3) is found

in Elliott et al (2021), except as a therapist response rather than the client expression: "therapist bringing attention to and formulating micro-markers of emotional process" (p. 17). Both therapist-led interventions and client-led emotional expressions are integral to formulation-relevant work.

Types of Collaborative Case Formulation Work

Building on the findings from the first research question, this study further elaborated all the types of EFT collaborative CFW found within the definitional structure (see Table 7). These findings could be seen to overlap with the findings to the first research question, by the fact that the results to the first research question have categories of definition in it. However, the approach here was to find the variety of formulations, not the defining characteristics.

Through this study, I learnt that the different kinds of formulations serve different roles in the formulation process. For instance, a simple, single element type of formulation (B4.1) helps the client acknowledge one aspect, e.g. one action on the self that they are doing and assimilate that information, in the moment, while a type of formulation that connects two or more elements (B4.2) helps the client build a shared story of their problems and what maintains them. Simple formulations are essential for clients to gradually assimilate more complex formulations, building understanding step by step.

In terms of formulations by content, I found these largely followed the elements of the Five Aspect Client Process Framework (CPF, see Appendix B). "Reflection on important events in client's life: what is problematic / progress in their life" (category B1) is found in Aspect I of the CPF ("presenting problems"). "Formulating the emotion" (category B2) with its subcategories (level of emotion, elements of the emotion and type of emotions) are found in aspect III of the CPF ("central problematic emotions: kind of emotion, what the emotion is about, type of emotion response") as well as aspect IV-A ("dysregulation, over/under"). "Self-Other Thematic Formulations" (category B3 with its subcategories) are found in aspect V of the CPF ("Self-Self-Other themes: treatment of self and perceived treatment by/of others"). "Task opening formulations", which pick up the marker and offer it to the client (category D1) are found in aspect

II of the CPF (key task markers). It makes sense that we find these elements from the CPF present in session as it is out of the work done collaboratively with clients that the written structure emerged: the CPF was developed to help therapists reflect on the work they have done with the client, in sessions.

I found examples of each type of formulation in all the sessions, which further consolidates the results. One exception is C4.2: correcting formulations, e.g. client correcting therapist formulation of client and adding corrected self-formulation, which was used in four out of five sessions, once in each session. This type of formulation is part of the collaborative process between therapist and client, where the client is encouraged to check if a formulation fits with their experience and add their corrected self-formulation. The fact that I found very few examples reflects on how closely the eminent therapists in the study sample stayed to their client experience: their formulations of the client fitted most of the time.

Therapist Response Modes

As a result of this study, we now also know which specific therapist *response modes* facilitate the unfolding of collaborative case formulation work as a process in sessions.

Comparison Between Therapists' Complete Formulation Responses. All four therapists used empathic formulation in all their complete formulations. As mentioned in the Results chapter, this makes sense, since we cannot have a complete formulation response without empathic formulation as part of it. Beyond this therapist response mode, the way formulation work is built in each dyad is different and uses a combination of various therapist response modes. Each therapist has their signature 'ingredients' that they use, and I reflect on this next.

The therapist in dyad one uses a combination of empathic formulations and empathic refocusing in 50% of all their complete formulations. Empathic refocusing is a therapist response mode useful in working with ambivalence and the client in dyad one is presenting with ambivalence regarding her emotions, since her difficulty is emotion interruption. Therefore, an extensive use of

these two response modes, to formulate the client's difficulty and what maintains it, is required and effective in this case.

This therapist is only using empathic conjecture in 12.5% of all their complete formulations. This low number of empathic conjectures raises the question of how else they brought something previously unspoken by the client and made it explicit (aspect 3.1.3). In analysing their complete formulation responses, what emerged is that this therapist is mainly doing that through: *empathic formulations*, which translate what the client does in EFT terms (e.g. action on the self), therefore making that action explicit; and also through *empathic refocusing*, which leaves an open edge on what is problematic/difficult for the client, naming explicitly the dilemma or choice the client is left with (e.g. what it's costing them to continue to block their emotions). Given the extensive use of these two therapist response modes, we can see this therapist has a different way to bring something previously unspoken and making it explicit, other than through empathic conjectures. These observations on the therapist's style are only based on one session. The same therapist might work differently with a client presenting with different issues, that require a different approach.

The therapist in dyad two mostly uses a combination of empathic formulation (100%), process disclosure (60%), empathic conjecture, empathic refocusing and experiential teaching (40% each) in her six complete formulations. Process disclosure in itself wouldn't be a formulation response; however framing end-of-session formulations in this way, by adding a warm, personal note on how she feels about the work done and coupled with empathic formulation, conjecture, refocusing and/or experiential teaching, makes up these complex, complete formulation responses that are a signature for this therapist.

The therapist in dyad three mostly uses a combination of empathic formulation (100%), experiential teaching (57%) and empathic conjecture (43%) in her seven complete formulations. This therapist is a specialist in working with trauma, where explaining or providing information about what the client is experiencing is paramount in creating safety and trust. Accompanied by

empathic formulations and conjectures, these experiential teaching responses, which are usually about emotions, validate these emotions for clients who are disempowered by trauma.

The therapist in dyad four uses a combination of empathic formulation, empathic conjecture, exploratory reflections and evocative reflections as his 'signature ingredients' that make up his case formulation responses across the two sessions analysed. In session six, he uses empathic conjecture in 80% of his complete formulations, a much higher percentage than in all the other sessions analysed. He is also the only therapist using exploratory reflections in complete formulations. These are found in middle-of-the-session formulations, where the work is ongoing, and these exploratory reflections are just the right ingredient to encourage client collaboration and elaboration of their own self formulation.

Partial Formulations. One finding I would like to discuss is that I only found *empathic* formulation to be used in 50% of all partial formulations for therapist. This can be explained through the fact that partial formulations can *miss the reflective element* (category 2.1.1) and be delivered in a narrative manner instead, which means there won't be any empathic formulation responses (which involve a *reflection* on the client process) as part of this kind of partial formulations.

Next, I comment on the therapist response modes only found in partial, but not in complete formulations. The first of these is *process suggestion*, a form of process guiding used in chair work. As explained in the Results chapter, the main element for the therapist during chair work is task implementation, the formulation is implied. I also only found *empathic repetitions* in partial formulations, since they repeat a previous formulation, rather than bringing something previously unspoken. In *process reflections*, the therapist is reflecting on the client's immediate experience, rather than building a story that connects it to any other elements, therefore not a response that I found in complete formulations.

Structuring the task appears in secondary task formulations, where the therapist's main focus is task work (e.g. opening, closing), I didn't find this therapist response mode in complete

formulations, which need the formulation (of the client) to be the primary element. I also only found *empathic affirmations* in few partial formulations but not in complete formulations. They are responses that offer support and empathy in the moment, to a vulnerability present in the client, which in the data I studied, are usually found in secondary formulations, accompanying process suggestions/feeding lines.

Implications for Practice

Definitional Findings

Interacting with the data and learning about case formulation through my study changed me as a therapist, supervisor and trainer. I am much more deliberate in delivering complete formulations when these have been built towards, bit by bit. What I learnt as a therapist, through this study, was to listen out for client self-formulations too. I do this from the beginning of sessions, when clients formulate their presenting problems; also later in sessions, when they formulate problematic emotions and how they relate to their emotions or what hurts the most; and lastly, at the end of sessions, when they reflect on their progress, to help them assimilate what changed and what they are doing differently.

The current EFT case formulation models don't fully tell us how to actually carry out formulations in sessions, with clients, which is what this study is bringing. Starting sessions by paying attention to client self-formulations and building my own therapist formulations in collaboration with the client contributes to a more refined collaborative formulation in EFT.

This differentiates EFT practice from other approaches, like CBT, where case formulation is seen as the initial step and main tool by which a therapist manages the entire psychotherapeutic process (Ruggiero *et al.*, 2021). In this compilation of approaches to case formulation in CBT, we find the concept of 'shared case formulation' (p. 28). However, what is understood by 'shared' in CBT approaches is that the therapist shares their understanding of how the client's mental states are determined by their thoughts, their beliefs about themselves, life, the world, others, and the future and that these beliefs are ways of consciously formulating how the mind works. What my study

understands by sharing is collaborating, and through that creating a shared story, built on connecting the client's presenting problems to their key emotions (see aspect 3.1.2 and 3.1.4 of my complete definition).

In talking about the collaborativeness of the formulation meta-task, I reflect on how this relates to the person-centred roots of EFT. Rogers (1978) moved the power away from the expertise of the therapist towards the wisdom of the client, from an 'expert' to a 'servant', who gives up all control over decision making to the client. What emerges from this study's definition is that everything the therapist does is in the service of the client: reflecting on the client process, connecting the clients' presenting difficulties with their key emotions, making explicit what was previously unspoken, so that the client can hear it and confirm or correct it, building on the client's previous formulations and checking if it fits their experience, making the client the primary focus, not the task, when delivering complete formulations. However, in this process, the therapist brings themselves in too, so formulation is co-created in this dialogue: client and therapist take turns speaking and building on each other's formulation; the formulations are tentative both for client and therapist, as they involve listening to the other, taking in what the other has to say, being responsive to the other. In the end, the formulation belongs to the client. However, that doesn't mean EFT therapists withhold valuable information from clients, like for instance about the nature of therapy or the role of feeling our emotions and we see some very well-placed experiential teaching therapist responses as part of some complete formulations.

As a supervisor and trainer, the implication for having a clear research-based definition for case formulation work is that it makes it easier to teach. Breaking down the definition of complete formulations into five aspects (reflective, connective, unspoken, collaborative and primary) could help trainees remember the elements more easily. I have already been experimenting with ways to integrate some of these research findings into the input on in-session case formulation, when teaching EFT. My supervisees and students are giving me feedback that, as a result, they find it easier to understand how to use case formulation in sessions.

Types of Case Formulation Work

As a result of this study, students and supervisees learning and practicing EFT could also grasp the different functions that various kinds of formulation play in CFW and when to use each kind. For instance, this study found eight kinds of actions present in the various kinds of formulations and they each play a different function: a storying formulation aims to build a shared narrative of the client's difficulties and what maintains them; a translating kind of formulation takes a step back from the narrative and reflects it back in terms of what the client is doing to themselves, making that explicit; a consolidating formulation follows up on previous formulations and strengthens them; an elaborating formulation plays the role of leaving an open edge and encouraging the client to stay with and continue to explore inside. There is a need for the entire variety of formulations to complete the formulation work within sessions and to help clients find a way forward with their emotional problems.

Therapist Response Modes

In terms of practice and of teaching case formulation to student learning EFT, this study also offers a clear list of what therapist response modes facilitate the unfolding of case formulation work, both in complete and in partial formulations.

Complete CFW responses are complex, and they contain a lot more than just empathic formulations. What emerged from this study is that using empathic conjectures is one way in which therapists can bring something previously unspoken in session and make it explicit. Using these two therapist responses together helps deepen the client experience and connect to the core pain. This study also found that adding empathic refocusing to these formulation responses helps clients stay with what they are having difficulty facing and leads the way forward.

Less frequent therapist response modes used in complete formulations are experiential teaching, exploratory reflection, process disclosure, evocative reflection and process reflection.

Together, they make up these culminations of complete formulation work. Knowing the exact 'ingredients' that these eminent, founding EFT clinicians are using helps therapists to know how to

formulate collaboratively with clients and what therapist response modes to combine. It also helps trainers and supervisors teach this to students learning EFT.

Limitations

One of the limitations of this research is the relatively small study sample: five sessions by four eminent therapists. A question to reflect on is how the results could have been different if the study sample was larger: would more categories continue to emerge? Another related question is how the results might have been different if I had included non-eminent practices in the study sample.

A further potential issue with the study sample is the fact that most sessions are single therapy demonstration sessions; only two sessions are part of a series of sessions. How would the findings have been different, i.e. more complex, if I had analysed more later-in-the-work and ending sessions, which could have showed more diversity around ending kinds of formulation?

With regards to the analysis, several parts of it, such as the process description, the category construction and running integrity checks, were time consuming, however necessary. On the other hand, this kind of study is prone to the risk of over analysis of the categories, so finding the right balance is one of the challenges of using this method.

A further potential limitation of this study is that it seeks to study what case formulation work looks like in sessions from the perspective of an observer; however, case formulation work is a meta-task that guides the therapist's strategy and may be visible at various points in the sessions, or it may not, at times, be observable at all. Therefore, it can be difficult for an external observer (e.g. researcher) to notice what strategy the therapist was using or what was their intention regarding case formulation work. Future studies might involve the therapist perspective on case formulation, as well as the client's.

Implications for Research

In terms of the method, the flexibility of GDI-QR allowed me to develop a unique method that fitted this topic, and the nature of the data collected. A promising prospect that emerged out of developing this method, was the possibility of applying it to other similar studies. Once I finished

the pilot study, a parallel study on empathic conjecture in EFT with couples used the method I had developed to study a different therapist response mode.

This study provides a resource for future studies on therapist response modes, having transcribed five sessions of eminent EFT practice and coded all the therapist response modes in these sessions. Trainers teach therapist response modes to students learning EFT, so the skilfulness of CFW becomes a key issue. Therefore, a follow-up question to this study is on the characteristics of *skilful* EFT collaborative case formulations work.

Another follow up to this study's findings of the category of formulation-relevant work should be further research on pre-formulation and post-formulation work. Future research could also focus on how collaborative case formulation unfolds within and between sessions. Can we model the sequence of client and therapist CFW to capture its unfolding nature? A task analytic study would help answer these questions and carry forward the findings from this study.

Conclusions

This study looked at client-therapist case formulation sequences in EFT to offer a comprehensive, complete definition of CFW as a (1) reflective, (2) connective, (3) previously unspoken, (4) collaborative and (5) the primary point of the therapist response process. I found that clients and therapists can work together over multiple responses to build toward these complete formulations. These multiple responses, also part of the body of formulation work, that are missing one or more aspects of the complete formulations, are called partial formulations. This study also found formulation-relevant work, which builds towards (pre-formulation) and follows up (post-formulation) on CFW.

Within this multi-tiered formulation structure, I found a wide range of formulation work, and this is the first study to offer a typology of CFW, having identified 28 different kinds of formulations.

Further, this study found that formulations are a lot more complex than just containing empathic formulations. All complete formulations contain multiple therapist response modes and

the most frequent are empathic formulations (100%), empathic conjectures (39%) and empathic refocusing (29%). A smaller proportion of other therapist response modes are also part of these complex responses, and each of the four therapists in the study sample has their 'signature' therapist response modes, which they combine to build these complete formulations.

This study made explicit how to actually carry out formulations in sessions, therefore contributing to an improvement in EFT practice and, consequently, improved outcomes for clients. Articulating the defining characteristics of CFW and highlighting the specific therapist response modes present in them contributes to a more refined collaborative formulation work in EFT.

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Appendix A: The Five-Dimensional Case Formulation Model (2013 version)

I. Main Therapeutic Focus

Key Presenting problems

Interrupted life projects.

II. Key task markers

III. Key Emotion Schemes (emotion response type, emotion scheme)

Kind of emotion (e.g., fear/anxiety, shame, anger, depression, hopelessness, emotional pain)

Type of emotion response (instrumental, global distress secondary, symptomatic secondary, maladaptive, or core pain)

Elaborating the Elements of the Emotion Scheme: experienced emotion: perceptual, bodily, symbolic, action tendency

IV. Modes of Engagement

Non-experiential: externalized, somaticizing, abstract/purely conceptual, impulsive

(=forms of self-interruption); flooded; distanced

Experiential: externally attending, body-focused, emotion-focused, active expression, reflexive/symbolizing (=resources)

Processing: Receiving emotional transformation, body shift/relief, reperceiving/altered perception, new meaning perspective, action-planning (= inprocess outcome)

V. Markers of Characteristic Inter/Intrapersonal Style (treatment of self and of others)

Self => Self (introject): treatment of self

Self => Others: how client sees self as treating others

Appendix B: The Five Aspect Client Process Framework (Elliott et al., 2024)

- I. Main Therapeutic Focus (presenting problems and compromised life projects)
 - I-A. Key Presenting Problems
 - I-B. Compromised Life Projects.
- II. Key Task Markers
- III. Central Problematic Emotions (emotion response type, emotion scheme)
 - III-A. Kind of Emotion (=emotion category, e.g., fear/anxiety, shame, anger, depression, hopelessness, emotional pain)
 - III-B. What the Emotion is About (situational-perceptual emotion scheme element; trigger/releasing function)
 - III-C. Type of Emotion Response (instrumental, global distress secondary, symptomatic secondary, maladaptive, or core pain)
 - III-D. *How the Core Pain is Experienced*: Pick the core pain or most important primary maladaptive emotion and elaborate how it is expressed or represented in the body, conceptually, and in need or action
- IV. Emotion Processing Modes (previously known as modes of engagement)
 - IV-A. Dysregulated (over/under): flooded, numb/dissociated (=extremes)
 - IV-B. Restricted: externalized, somaticizing, abstract/purely conceptual, impulsive (=forms of self-interruption)
 - IV-C. Working: externally attending, body-focused, emotion-focused, active expression, reflexive/symbolizing (=resources)
 - IV-D. Emotion Change Process: Receiving emotional transformation, body shift/relief, re-perceiving/altered perception, new meaning perspective, action-planning (= in-process outcome)
- V. Self-Self-Other Themes (treatment of self and perceived treatment by/of others, including marginalizing identities, e.g., sexual minority status)

- V-A. Self => Self (introject): treatment of self
- V-B. Others => Self: how client sees others as treating them
- V-C. Self => Others: how client sees self as treating others
- V-D. Relevant marginalized self-identities (e.g., gender, phenotype, immigrant, disability, neurodiversity, social class)

Appendix C: The Goldman-Greenberg 14 Step Model

Stage 1. Unfold the Narrative and Observe the Client's Emotional Processing Style

The therapist listens to the client to deconstruct the client's presenting problems and accompanying narrative and to observe the client's emotional processing style

- Step 1. Listen to the presenting problems (relational and behavioural difficulties)
- Step 2. Listen for and identify poignancy and painful emotional experience
- Step 3. Attend to and observe the client's emotional processing style
- Step 4. Unfold the emotion-based narrative/life story (related to attachment and identity)

Stage 2. Co-create a Focus and Identify the Core Emotion

The therapist guides the client by listening for markers, unpacking the different elements of core emotion schemes, identifying themes, and a coherent formulation narrative emerges. Work on MENSIT

- Step 5. Identify markers (M) for task work
- Step 6. Identify underlying core emotion (E) schemes, either adaptive or maladaptive
- Step 7. Identify needs (N)
- Step 8. Identify secondary emotions (S)
- Step 9. Identify interruptions (I) or blocks to accessing core emotion schemes
- Step 10. Identify themes (T)
- (a) Self–self-relations
- (b) Self-other relations
- (c) Existential issues
- Step 11. Co-construct the formulation narrative linking presenting relational and behavioural difficulties to triggering events and core emotion schemes.

Stage 3. Attend to Process Markers and Emergent New Meaning

The therapist listens for emerging task markers and embedded micro-markers and facilitates the construction of new meaning.

- Step 12. Identify emerging task markers
- Step 13. Identify micro-markers
- Step 14. Assess how new meaning influences the reconstruction of new narratives and connects back to presenting problems.

Appendix D: The Integrated EFT Case Formulation Model

The Integrated Three-Stage EFT Case Formulation Model (Adapted from the 14 Step Model)

Stage	Description
Stage 1	Building the Foundations of The Case Formulation: Attending to Key
	Elements of Client Process
	1.1. Listen to the presenting problems: relational and behavioural difficulties.
	[see Client Processing Framework (CPF) aspect I]
	1.2. Listen for and identify poignancy and painful emotional experience. [CPF aspect III]
	1.3. Listen for possible task markers (implicit in presenting problems and observed in session <i>[CPF aspect II]</i>
	1.4. Attend to and observe emotional processing styles. [CPF aspect IV]
	1.5. Unfold the emotion-based narrative/life story (including compromised life
	projects, potentially related to attachment and identity). [CPF aspect I-B & V]
Stage 2	Formulating Core Pain in its Context (Context + MENSIT):
	2.1. Context for core pain: Deeper level of presenting problems: existential
	concerns, marginalization experiences [CPF aspect I]
	2.2. Identify recurrent markers (M) for task work. [CPF aspect II]
	2.3 Identify underlying core emotion (E) schemes, adaptive and maladaptive.
	[CPF aspect III -D]
	2.4. Identifying needs (N) [CPF aspect III-D]
	2.5. Identifying Secondary Emotions (S) [CPF aspect III-C]
	2.6. Identify interruptions (I) or blocks to accessing core emotion schemes. [CPF aspect IV-B]
	2.7. Identify themes (T) self-self relations, self-other relations, existential
	issues/interrupted life projects. [CPF aspect V]
	2.8. Throughout stage 2, co-construct the formulation narrative linking
	presenting relational and behavioural difficulties to triggering events and core
	emotion schemes.
Stage 3	Following the Pain as the Case Formulation Evolves and New Meaning
J	Emerges.
	3.1. <i>Carry forward</i> the evolving case formulation narrative as therapy
	progresses:
	3.2. Identify emerging task markers. [CPF aspect II]
	3.3. Fine tune the work using <i>micro-markers</i> to heighten responsiveness.
	3.4. Assess how new meaning influences the reconstruction of new narratives
	and connect back to presenting problems, so that the case formulation process
	now encompasses client change.

Note. Table presented in Elliott *et al.*, 2024 and adapted from R.N. Goldman & L.S. Greenberg (2015). *Case Formulation in Emotion-Focused Therapy*. APA. Client Process Framework (CPF) equivalents are given in italics within square brackets.

Appendix E: Transcript and Analysis of Session 1 (Pilot Study)

	Speaking Turn	Therapist Response Mode+client agreement with formulation	Degree of Formulation (0-3) + Characteristics	What Kind of Formulation
T1a	Therapist: OK Gina, thank you for coming in, I'm glad to see you and meet you,	process disclosure	0.1	
T1b	I think you brought something in for us to work on today, what would that be?	Exploratory Question	1.1.1.	gathering data for formulation
C1	Client: I seem to have an emotional detachment any time I go through serious or traumatising issues or events in my life	client self-formulation	3.2. self-reflective	Troubles telling client formulating their trouble with emotion processing A2 B1 B2.1 B2.2 B3.1 C1 C2 E1.2 B4.2 B5.1 E2.1
Т2	Therapist: So, something serious or painful or traumatic happens then what, somehow what, you detach?	Empathic Reflection	2.1.1. Tentative, exploratory, collaborative client reflective	Reflecting back Client formulation (recycled F) on client processing of their emotion A1 B1 B2.1 B2.2 B3.1 C1 C2 C3.1 E1.2 B4.2 B5.2 E2.2
C2	Client: Yeah, I believe so. I don't have a reaction that would be considered as like most normal people would do, maybe a breakdown or something like that.	Agrees with therapist reflecting back and elaborates self- formulation	3.2. self-reflective	elaborating C1 by formulating image of self: reaction as not normal A2 B1 B2.1 C1 C3.2 E1.2 B4.2 B5.1 E2.1
Т3	Therapist: If something bad happens you see people around you and they might get upset or cry or something like that [right] or get scared [exactly] get really sad or something like that, experience some emotional pain? And you don't find yourself doing that.	Empathic/Evocative Reflection	2.1.2.1 adding narrative/evocative detail that illustrates F	reflects back client SF (recycled) situational and emotion element of emotion scheme Narrative detail F A1 B1 B2.1 B2.2 C1 C3.1 C4.1 E1.2 B4.2 B5.2 E2.2
C3.	Client: I find myself being numb to it [therapist: being numb] and blank feeling [therapist: feeling blank] going on with whatever is next, I may make a comment and then move on.	Client adds more detail to self-formulation; therapist emphasises through Empathic Repetition;	3.2. client self-reflective	SF on emotion processing (detachment) languaging formulation (numb, blank) A2 B1 B2.1 B3.1 C1 C2 C3.2 E1.2 B4.2 B5.1 E2.1
T4	Therapist: You make a comment like what might you say?	Exploratory Question	1.1.1	gathering data for formulation
C4	Client: It depends on what it is.		0.2	
Т5	Therapist: Okay, okay, If you give me an example of one?	Tell me question	0.1	
C5	Client: Okay, I can give you an example. My mom passed two weeks ago.	formulation relevant narative detail	1.2.2	
Т6	Therapist: Okay so your mother died 2 week ago?	Empathic repetition	0.1	
C6	Client: Uh-huh, her funeral was just Saturday, so	narrative detail not related to formulation	0.2	

Т7	Therapist: You've just been to the funeral this weekend?	Empathic Repetition	0.1	
C7	Client: Yeah, and so I got the phone call, and it was like okay, mum just died, [okay] Me and my husband was there, and I told him. And it's like okay, I'm going to lay back down and go to sleep [Therapist: I see, okay, okay] because I'm tired.	self-formulation adds examples that illustrates formulation	2.2.2.1	implicit formulation of self- interruption (saying it's ok, going back to sleep) narrative formulation A2 B2.1 B2.2 C1 C3.1 C4.1 E1.1 B4.2 B5.1 E2.2
Т8	Therapist: Because I'm tired, right, right	Empathic Repetition	1.1.3	
C8	Client: And it's like that. And then I think once I woke up or something [mhmm] I'd call and tell my daughters or whatever. I think I talked to my brother [okay] right afterwards. No, my brother actually is	Client narrative detail drawing on schematic memory that implies an unstated formulation (as opposed to episodic memory)	2.2.2.2. client implicit formulation	implicit formulation of self- interruption (made explicit by therapist in the next speaking turn) narrative/story F A2 B2.1 C1 C3.2 E1.1 B4.2 B5.1 E2.2
Т9	Therapist: So, it's like I'm not gonna do anything right now, I'm just gonna go back to sleep, I'll deal with it in the morning.	Empathic / Evocative Reflection	2.1.2.1. narrative detail client reflective, making CF explicit, collaborative	Languaging Formulation of detachment/problematic (in)action A1 b2.1 B2.2 C1 C2 E1.2 B4.2 B5.1 (newness is making the F explicit) E2.2
С9	Client: No, it was morning, [it was morning] they woke me up. [client laughing]	minimal response to therapist F, correcting a narrative detail	1.2.1	
T10	Therapist: Okay, I see, okay.	Empathic following	0.1	
C10	Client: like 8 o'clock in the morning		0.2	
T11	Therapist: I see, okay;	Empathic following	0.1	
C11	Client: I just wanted to lay back down and just	formulation relevant narrative detail	1.2.2	
T12	Therapist: Oh, I see, okay. So normally you might have gotten up then?	empathic following with Clarification Question	1.1.1.	
C12	Client: I don't, know, it's the first-time mom passed		0.2	
T13	Therapist: Yeah, its not every day that happens, right, yah, yeah, yeah;	Empathic reflection	0.1.	
T14	Therapist: So would you, so this is an example of a time, a particularly striking sort of time when something happened that you'd expect yourself to be more upset or something, more expressive and you didn't, and you're puzzled by why [client nodes in approval]	Structuring Task with Empathic Conjecture at the end (you're puzzled)	2.1.4. Tentative Collaborative Client reflective Specific	Task Formulation: structuring task A1 B1 B2.1 C1 C3.1 C4.1 D1 E1.1 B4.2 B5.2 E2.2
C14	Client: Yeah, this is the most recent,	Confirming puzzlement	1.2.1.	
T15	Therapist: this is the most recent yeah	Empathic Repetition	0.1	
C15	Client: which is something pretty big.		0.2	
T16	Therapist: yeah,	Empathic Following	0.1.	

C16	<u>Client</u> : My mother, biological mother, raised, its just me and my brother and it's like, okay	narrative detail	0.2	
T17	Therapist: So you're left right now, even now as I mean you've just been that was 2 weeks ago and you've been to the funeral, you're left right now just not knowing why it is that you don't that you didn't react, [didn't] didn't get upset or cry or	Structuring Task /exploratory reflection at the end	2.1.4. Tentative Exploratory Friendly language	Task Formulation: structuring task Recycled (repeat of T14) A1 B1 B2.1 C1 C3.1 C4.1 D1 E1.1 B4.2 B5.2 E2.2
C17	Client: I guess, I don't know. I didn't, like everybody's calling, oh how are you? Oh, I'm okay.	Agreeing and adding example	2.2.2.1 self-reflective,	SF of emotion processing on non-reaction narrative/story detail/example F A2 B2.1 B2.2 C1 C3.1 C4.1 E1.1 B4.2 E2.2
T18	Therapist: so, people actually saying, they're kind of calling you and saying are you okay, (uhmhmm) you know, and you go like what are you talking about!	Evocative Reflection	2.1.2.1 narrative detail 2.2.1	recycled (reflect back C17) story formulation A1 B2.1 B2.2 C1 C3.1 C4.1 D1 E1.2 B4.2 B5.2 E2.2
C18	Client: I'm sorry, I'm like, its okay [it's okay] yeah	Agreeing	1.2.1.	
T19	Therapist: so people are treating you like you're expected to be or you ought to be grieving or in distress or something and you're just not	Repetition+ Evocative Reflection	2.1.2.1 Evocative quality	F of situational and emotion element of emotion scheme narrative formulation A1 B1 B2.3 B2.1 C1 C3.1 C4.1 D1 E1.2 B4.2 B5.2 E2.2
C19	Client: I guess they're doing the normal thing when you give condolences to people, you know	Conceptualising therapist formulation	1.2.1.	
T20	Therapist; yeah, yeah	Empathic Following	0.1.	
C20	Client: They're, that's normal but I don't feel like maybe I was reacting normal or something, I don't know	Self-Formulation (reiteration, not adding anything new)	2.2.1.	process formulation on self- image (non-reaction as not normal) recycled A1 B1 B2.3 B2.1 C1 C3.1 C4.1 D1 E1.2 B4.2 B5.2 E2.2
T21	Therapist: You could end up feeling like there's something not quite right about how I'm not reacting to this, about my reaction, my non reaction feels a bit	Exploratory Reflection	2.1.1. Tentative, Exploratory client reflective	Picks up self-formulation, exploratory process F on emotional non reaction A1 B1 B2.1 C1 C2 C3.2 D1 E1.2 B4.2 B5.2 E2.2
C21	Client: I think I'm reacting, I'm not like, I don't know [Therapist: okay, okay] I just didn't like, I wasn't sad, I wasn't like	Making explicit previous unspoken schematic content	3.2.	client naming the emotion she interrupts A2 B1 B2.2 B3.1 C1 C2 C3.2 E1.2 B4.2 B5.1 E2.1
T22	Therapist: I mean, I guess i'm just curious about, I mean, would you like to have been more able to express sadness when your mum when you got the news about your mum passing?	Motivational Question, to elicit change talk	1.1.1. exploratory	Clarifying goals, gathering information

C22	Client: It's not as much as that, what worries me is that that's just one incident, which is something great. but I've had other incidents in my life to where the reaction is probably been nonchalant	doesn't fit; client clarifies self-formulation of troubles telling	3.2.	SF on emotion self- interruption as a pattern. labelling/languaging formulation (nonchalant) also storying F A2 B1 B2.1 C1 C2 C3.2 E1.2 B4.2 B5.1 E2.1
T23	[Therapist: nonchalant]	Empathic Repetition	1.1.3. experiential specificity	Reflects back (piece of) formulation on emotion detachment
C23	Client: And my fear with it is that I know when I was younger, I've been through things where I did that, I detached emotionally and what happens is as time goes, portions of my life in that period I don't remember.	adds detail to the formulation	3.2.	Troubles telling on emotional detachment leading to memory loss. A2 B1 B2.1 B3.1 C1 C2 C3.2 E1.2 B4.2 B5.1 E2.1
T24	Therapist: You don't remember them?	empathic repetition	1.1.3.	
C24	Client: So, I'm afraid that the emotional detachment may be linked to [not remembering] memory, remembering because I didn't grow through the experience if I don't feel the emotion then I maybe went over it or, I don't know, I just didn't grow through it	Adding more detail to self-formulation	3.2.	Troubles telling on impact of emotional detachment action on the self (went over it); self-reflective A2 B1 B2.1 B3.1 C1 C2 C3.2 E1.2 B4.2 B5.1 E2.1
T25	Therapist: I'm missing out on something, [I'm missing] I'm missing because I don't, I haven't had this experience of really letting myself fully feel some of these painful events in my life [Client: Right] Right. And so, from I guess, quite a bit of your life when something happened you just sort of said, ok, nonchalantly and went on and didn't really react and now you find yourself not being able to remember stuff	Evocative/Empathic Formulation Client agrees with therapist formulation	3.1 Evocative collaborative client reflective/conceptual	Languaging Formulation on interruption of painful emotion; also storying formulation A1 B1 B2.1 B3.1 C1 C2 C3.1 D2 E1.2 B4.2 B5.1 E2.1
C25	Client: If I look back into certain periods, I try to remember the people I've probably met, I'm going to tell them I don't remember you	confirming the not remembering with examples	2.2.2.1.	SF on impact of self- interruption narrative/storying F A2 B3.2 C1 C3.1 C4.1 E1.1 B4.2 B5.2 E2.2
T26	Therapist: Yeah, I see, so certain people, right, yeah, yeah.	Acknowledges receipt of information on client SF	1.1.3.	
C26	Client: I remember the incidents and everything but maybe like other things that may have happened throughout my life and just period, I can't		1.2.2	impact of self-interruption
T27	Therapist: So, I guess it's a real sense of maybe I'm missing out and I don't even know if I'm missing out, but I might be missing out on some things in life because I don't react emotionally as much as other people do, is that - that's the worry? (reiteration of T25)	Empathic refocusing+structuring task	2.1.4. repeated Evocative, tentative, exploratory client reflective	Secondary Task formulation (formulation is secondary to task work, e.g. offering marker A1 B1 B2.1 C1 C2 C3.1 C4.1 D1 E1.1 B4.2 B5.2 E2.2

C27	Client: right, it's like [Therapist: okay] I don't know if the non-reaction is linked to just acting as if it didn't happen. I know it did and I acknowledge it did and I will say it and I can remember that incident but, say instances like it was a lot of family at recess and I had lot of conversations with everybody and I could remember the funeral, and everything else, I mean I remember some things, somebody said remember I told you this, oh I don't remember saying that	Client agrees and adds more detail Therapist: Empathic Following of client self- formulation	3.2.(for client self- formulation) self-reflective collaborative exploratory	making explicit previous unspoken schematic content (acting as if it didn't happen) process/languaging F on self-interruption (acting as if it didn't happen) and cost of it (not remembering) A2 B1 B2.1 B2.2 B3.1 B3.2 C1 C2 C3.2 C4.1 D1 E1.2 B4.2 B5.1 E2.1
T28	Therapist: Yeah, yeah, so like I'm not, you might end up feeling like you're not fully present to some important things in your life	Empathic Reflection	2.1.5. reflective but not linking to key emotions and not a story sequence 2.1.3	Languaging Formulation on emotion interruption (not fully present) A1 B1 B2.1 B3.1 C1 C2 C3.1 D1 E1.2 B4.1 B5.2 E2.2
C28	Client: Yeah, maybe that's it	Tentative agreement, not sure	1.2.1.	
T29	a. Therapist: Let's see if that fits, like I'm missing - like I'm not fully present then I can't remember, and other people remember things that I was present to that I don't remember and b. so if I'm kind of checked out and emotionally kind of tuned out, [Client: exactly] what am I losing? What's it costing me, that's the concern, [exactly] that's the worry?	Empathic Formulation, client in agreement, followed by exploratory Question with refocusing (around marker);	2.1.2.1 adding narrative detail to illustrate F 2.1.4 secondary task formulation	Languaging Formulation on emotion over-regulation (checked out, emotionally tuned out) and impact A1 B1 B2.1 B3.1 C1 C2 C3.1 C4.1 D1 E1.1 B4.2 B5.2 E2.2
T30	Therapist: So you would actually kind of like to look at why is it that I don't react in a situation	structuring task, (proposing task)	1.1.1 Collaborative, tentative, exploratory,	Task implementation (as opposed to formulation); gathering data
C3.10	Client: exactly	agreement on task	0.2	
T31	Therapist: So basically what I want to propose to you is that we take some time taking one example of a time when something big happened and you talked about your mother's passing and if you can we can go back through it like a movie playing and actually see if we can find the moment when you didn't react, when you might have, to actually find that moment, does that make sense?	Structuring task, (proposing, creating context), empathic formulation (in bold)	2.1.4. Engaged, clear, collaborative, exploratory	Task Formulation, formulating the rationale for the task; formulation comes secondary to the task A1 B2.1 B2.2 B3.2 C1 C2 D1 E1.1 B4.2 B5.2 E2.2
C3.11	Client: okay	says okay but sounds confused	1.2.1	
T32	Therapist: Not quite, okay, but will help you with it, so it's like playing it like a movie in your - in our heads together and I'll try and be in it with you like, so actually go back and tell me about hearing about your mother having passed, this is two weeks ago	Structuring task, offering encouragement for task engagement and creating context	1.1.1. Collaborative, clear, perceptive of client's process (confusion) friendly	Task structuring as opposed to formulation of emerging marker; also, micro marker of emotional experiencing (noticing client confusion)

C3.12	Client: Ok, should I go back before that when I was when I flew out to take care of her three weeks prior and then [ok], she	asks for clarification on task	0.2
Т33	Therapist: Whatever you need to, what it needs, this story needs, so you've flown, you live some place, you live	Structuring task, creating context	0.1
C3.13	Client: I live here, I live in Illinois, she lives in Georgia [Therapist: Georgia, ok] so I got a call, she's been through different surgeries and different things. she's fairly, not old but even at her age, a young version of her age, the way she lived, and how lively she was [Therapist: ok, ok] so when she's had surgeries and everything it didn't properly heal right	back-channel receipt of information	0.2
T34	Therapist: So, it's a whole series of medical complications	Empathic Reflection	0.1
C3.14	Client: Right! So, I get a call maybe say 2 months ago [Therapist: Ok] said ok, I'm going, mamma is going to hospice, she's been placed on hospice [Therapist: okay, okay] and you need to get down here and, actually my mum herself called	Claims of understanding	0.2
T35	Therapist: she called and said	Empathic Repetition/following	0.1
C3.15	Client: You need to see me		0.2
T36	Therapist: I'm going into hospice	Empathic repetition	0.1
C3.16	<u>Client</u> : I'm going into hospice care, right.		0.2
Т37	Therapist: I don't know how long I have; I have left		0.1
C3.17	Client: Right, so you all need to come on down and see me or whatever. [Therapist: Sure] and so I said ok I'll be down and take care of you. First, I have a weekend trip planned so I pray that you hold on until the weekend and then I'll be there the next day. [Therapist: okay] went on my weekend trip then	Empathic Following Claims of understanding	0.2
T38	Therapist: Then you went down to Georgia	Empathic Repetition	0.1
C3.18	Client: Then i went down and I stayed for about three weeks with her		0.2
T39	Therapist: You stayed for three weeks	Empathic Repetition	0.1
C3.19	Client: Taking care of everything		0.2
T40	Therapist: So you're caring for her, okay	Empathic Repetition	0.1
C3.20	<u>Client</u> : Um-hmmm, my brother came, the day before I left to come home.		0.2

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T41	Therapist: Got it, so you were there for 3 weeks she was still hanging on [uhhuh] and you were caring for her, you had some time with her and then your brother basically came to kind of replace you in the care	Empathic Reflection	0.1	
C3.21	Client: right, well, to see her too because he hadn't - he had to get down there too, so he came		0.2	
T42	Therapist: So, you came, went back to Chicago then?	Clarification Question	0.1	
C3.22	Client: Yeah, and came back to work, i had to go back to work.		0.2	
T43	Therapist: And go back to work, okay	Empathic Repetition	0.1	
C3.23	Client: And he came a stayed a week and after a week he left. And she said okay she's going into a hospice hospital because she was at home		0.2	
T44	Therapist: She was at home hospice, now she's going [right] into the ward	Repetition/ receipt of information	0.1	
C3.24	Client: And she didn't, and she only had 5 days to be there she didn't wanna come back home. [okay] so		0.2	
T45	Therapist: I can't be home anymore, I got to	Evocative Reflection/repetition	0.1	
C3.25	Client: right, so when they were going to send her back home because she only had 5 days to be in hospice		0.2	
T46	Therapist: right, they would only allow her to be there for 5 days	Empathic Repetition	0.1	
C3.26	Client: Right, she told my aunt was there with her and she told her I'm not going home. and then she died		0.2	
T47	Therapist: and she died while she was in the hospital during the 5 days?	Clarification question	0.1	
C3.27	Client: No, on the 5th day, the day due to come home.		0.2	
T48	Therapist: Oh, I see, okay	Claims of understanding	0.1	
C3.28	Client: Like I'm not going back there, and she died.		0.2	
T49	Therapist: And she died, right. so rather than going back home, she died.	Empathic repetition/reflection	0.1	
C3.29	Client: Right cause she didn't wanna go back home		0.2	
T50	Therapist: She didn't wanna go back home, she couldn't go back home anymore.	Empathic repetition/reflection	0.1	
T51	Therapist: So that's the background to the story	Structuring task/creating context	0.1	
C4.11	Client: Right, and then I get the call	Agreeing with therapist	0.2	

T52	Therapist: So then you get the call, so	Empathic	0.1	
	you said it was in the morning, like 8 o'clock in the morning [Client: yeah] you said you were sleeping,	Repetition/Reflection		
C4.12	Client: yeah, I was sleeping		0.2	
T53	Therapist: So you got the call, the phone rings, [Client: it's my brother] It's your brother	Empathic repetition	0.1	
C4.13	<u>Client</u> : Saying okay, mum passed this morning		0.2	
T54	Therapist: Okay, okayand do you remember just when you heard that news or maybe even when you heard the phone ringing, what your experience was?	Empathic following Exploratory question	1.1.1	gathering data for formulation
C4.14	Client: I was asleep	client doesn't understand the question	0.2	
T55	Therapist: You were asleep, you come out of the sleep, the phone is ringing	Empathic repetition	0.1	
C4.15	Client: Saw it was my brother, answered it, I already kinda knew	formulation relevant narative detail	1.2.2	implicit element
T56	Therapist: You kinda knew, as soon as you heard his voice on the phone	Empathic Repetition + Conjecture	1.1.1 pre formulation narrative detail Tentative, collaborative	Makes implicit Situational element of emotion scheme explicit through conjecture
C4.16	Client: He said mum passed this morning	adding more detail	0.2	
T57	Therapist: mum passed	Empathic Repetition	0.1	
C4.17	Client: and I was like okay so how are you doing	client narrative detail drawing on schematic memory that implies unstated formulation	2.2.2.2.	implicit formulation of self- interruption (saying 'okay' to mums passing and focusing on brother, asking him how he is doing) A2 B2.1 C1 D2 E1.1 B4.2 B5.1 E2.2
T58	Therapist: you asked him?	Clarification Question	1.1.1.	gathering data for formulation
C4.18	Client: I think so	uncertainty suggests schematic as opposed to episodic memory (in C4.17, then continued in C4.21)	1.2.2.	
T59	Therapist: Actually, just try to replay it	Process suggestion (proposing mental action)	0.1	
C4.19	Client: I'm just trying to remember		0.2	
T60	Therapist: That's fine	offering encouragement for task	0.1	
C4.20	Client: I know he called because we talked for a good while, maybe for about 40 minutes how mum passed this morning, I said okay	formulation relevant narrative detail	1.2.2	self-interruption (saying okay instead of reacting)

T61	Therapist: Ok, so you're talking	Empathic Following	0.1	
C4.21	Client: And I probably said how are you doing, I asked him about how is he doing, he said I'm, you know, I'm doing okay, I don't know what his reaction was, I could tell he had cried a little bit or something	client narrative detail drawing on schematic memory that implies unstated formulation	2.2.2.2.	Client SF on other's reaction A2 B3.2 C1 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T62	Therapist: He'd cried, you could hear in his voice, a bit irregular or something	Empathic repetition, then Conjecture	1.1.1. tentative exploratory, Searching for saliency and specificity;	gathering data towards formulation in the conjecture
C4.22	Client: yeah, yeah, not, he wasn't doing it on the phone [Therapist: yeah, yeah] talking to me and then we talked about her friends, I said Well, no, because the funeral hadn't been planned yet	client disagrees with conjecture	1.2.2.	
Т63	Therapist: Okay, just try to remember about the arrangements and everything, first you check with him to see how he's doing, then you start asking	Proposing mental action	0.1	
C4.23	<u>Client</u> : Oh yes, so I asked him so do you know anything about a funeral? Or were you sharing something about a funeral?		0.2	
T64	Therapist: yeah, okay so you're talking	Empathic following	0.1	
C4.24	<u>Client</u> interrupts: I think somewhere in the conversation we were talking about okay, so what are you gonna do about the arrangements, who called you and told you, it was	interrupted sentence	0.2	
T65	Therapist: So let me just see if I can find the moment, if we can find the moment when you didn't react, when you would have expected yourself to react. So, what, where are your puzzles there? Does that make sense?	Structuring task Exploratory Question Fit Q	1.1.1. Collaborative ("we") exploratory friendly	Part of Task structuring/implementation
C4.25	Client: I don't know okay so when he called, I'm trying to remember	Client not sure it makes sense but cooperating on task	1.2.2.	
T66	Therapist: You're trying to remember	Repetition/Process Reflection	0.1	
C4.26	Client: When he called and said mum passed and I saidI don't know if I said		0.2	
Т67	Therapist: Okay so what was that, what happened as soon as you heard that, mum passed	Exploratory question	1.1.1.	
C4.27	Client: I said okay or I don't know, he (my husband) reacted because he heard me [Therapist: okay, okay] whatever my response was to my brother, my husband reacted [Therapist: he's there next to you] oh my God, yeah because he was woke and he woke up too	narrative detail drawing on schematic memory that implies an unstated formulation (I said okay to mums passing)	2.2.2.2.	self-formulation on non-reaction (I said okay) A2 B2.1 B3.2 C1 C3.2 D2 E1.1 B4.2 B5.1 E2.2

T68	Therapist: Woke up too, okay, yeah	Empathic repetition	1.1.3.	
C4.28	<u>Client</u> : I think he said oh my God or something like that		0.2	
T69	Therapist: You heard him react	Process Reflection	1.1.1.	Data for formulation of situational aspect
C4.29	Client: like he had, he reacted	confirming therapist formulation	1.2.1.	
T70	Therapist: You could hear his sadness	Empathic Conjecture	1.1.1. Tentative, bringing focus on saliency	
C70	Client: And then I was just talking like normal conversation to my brother [yeah, yeah, yeah] about him being okay or and about when you find out the arrangements make sure you let me know if they don't call and tell me	narrative detail drawing on schematic memory that implies an unstated formulation	2.2.2.2.	implicit self-formulation on non-reaction (normal conversation with my brother) A2 B2.1 B3.2 C1 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T71	Therapist: So, here's this, is like Gina switching into let me worry about my I'm paying attention to my brother asking him about how he's doing, talking about arrangements	Empathic Formulation	2.1.5. reflective but not linking to key emotions	abstracting, action tendency element of emotion scheme A1 B3.2 C1 C2 D2 E1.2 B4.2 B5.1 E2.2
C71	Client: and then going into okay, now I'm gonna have to come up with how to get down there, back down there because I just came	formulation relevant narrative detail	1.2.2	(focus on practical things)
T72	Therapist: yeah, so you basically	Empathic Following	0.1	
C72	Client: the other stuff is what I'm thinking about [yeah, yeah, yeah] and I'm hoping that		0.2	
T73	Therapist: okay so let's slow it down, let's slow it back down to where's the first place where you wish or sort of wondered if you would have wanted to have expressed some sadness or let yourself feel something? I mean where in that would you	Process Suggestion/Structuring Task+ Exploratory Question	1.1.1.	
C73	Client: Probably at least after I got off the phone	formulation relevant narrative detail	1.2.2	
T74	Therapist: After you got off the phone, so maybe you could have held it together for the phone call, for how long did it last, did you say it lasted?	empathic repetition, then conjecture with clarification Q	2.1.2.2. Tentative specific client reflective 2.1.3	Formulation on action on the self A1 B3.1 B2.2 C1 C2 D2 E1.2 B4.1 B5.1 E2.2
C74	Client: about 40 minutes	formulation relevant narrative detail	1.2.2.	
T75	Therapist: 40 minutes, it was a long phone call in fact, lots of details, lots of checking in with your brother, maybe he needed some support from you or something [Client: right] and then you get off the phone and then what happened?	Empathic Reflection, Conjecture [client agrees] Exploratory Question	1.1.1.	formulation relevant discussion about action tendency (distraction by checking in with brother)
C75	Client, Because I was more concerned for him	Client agrees with conjecture and adds SF	2.2.5 self- reflective/conceptual	SF on self-distraction A2 B3.2 C2 C3.2 D2 E1.2 B4.1 B5.1 E2.2

Т76	Therapist: Yeah, you were basically putting all your attention into him [right] like sort of turning your attention, I guess as one does, right, to	Empathic Formulation, exploratory reflection	2.1.1. Tentative reflecting on client process	Formulation on action tendency A1 B3.2 C1 C2 C3.1 D2 E1.2 B4.2 B5.2 E2.2
C76	Client: And then I was thinking about other people I need to call or talk to	F relevant detail	1.2.2.	
T77	Therapist: You kinda go into coping mode is what I call it	Empathic Formulation	2.1.3. reflective but not a story sequence;	Languaging Formulation that labels aspects of self-A1 B3.1 C2 C3.1 D2 E1.2 B4.1 B5.1 E2.2
C77	Client: and who do I wanna talk to and who I don't, because I don't wanna talk to certain people because I don't want them certain people that I think are gonna react and start crying, I don't wanna talk to those people	self-formulation adds examples that illustrates formulation	2.2.2.1	SF on avoidance A2 B3.2 B2.2 C1 D2 E1.1 (implied F in the narrative, therapist makes it explicit next) B4.2 B5.1 E2.2
T78	Therapist: because you'd get upset	empathic conjecture,	2.1.2.2 2.1.3	Formulating fear of sadness as reason for self-interruption A1 B2.1 B2.3 C3.2 D2 E1.2 B4.1 B5.1 E2.2
C78	Client: but I wanna talk to people who oh I didn't think about that, I wanna talk to people who kinda have a level head or something	evaluating T78 and adding more narrative detail to illustrate F	2.2.2.1 2.1.3	Client SF on avoidance A2 B2.2 B3.2 C1 C3.1 C4.1 C7 D2 E1.1 B4.2 B5.1 E2.2
T79	Therapist: I wanna talk to levelheaded people, right	Empathic repetition	1.1.3	
C79	Client: I don't wanna talk to people who are directly connected to my mum like her husband, my aunt which is her sister, my brother, her best friend	client adds examples that confirm the F	2.2.2.1	SF on avoidance A2 B2.2 B3.2 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.1 E2.2
T80	Therapist: Who might need some support? (reiteration of T75)	Empathic conjecture (about others)	1.1.1. tentative, collaborative	formulating perceptual element
C80	Client: And I said that's all the people and my husband, those are the only people I really want to	F relevant detail	1.2.2.	piece of SF on avoidance
T81	Therapist: Not the people who carry on and make a scene, you're not gonna talk to them, right (reflection back of C77)	Evocative Reflection	2.1.1. evocative client reflective	Formulating perceptual element+action tendency A1 B2.2 B3.2 C1 C3.1 D2 E1.2 B4.2 B5.2 E2.2
C81	Client: And certain - and then I actually picked out, I have 6 children, so I picked out the ones that I think would hold it together if I told them more than the others	agrees and adds more examples	2.2.2.1 self-reflective collaborative	Client SF on emotional avoidance/interruption A2 B2.2 B3.2 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.1 E2.2
T82	Therapist: yeah, yeah yeah	Claims of understanding	1.1.3.	
C82	Client: So, I think I told my oldest daughter	formulation relevant narrative detail	1.2.2.	
T83	Therapist: Your oldest daughter, she's more contained	Empathic Repetition +conjecture	2.1.2.2. and 2.1.3	situational element of emotion scheme

				A1 B2.2 C3.2 D2 E1.2 B4.1 B5.1 E2.2
C83	Client: and I asked her to tell the others whereas she seems she's more like me	evaluates previous F	2.2.3 self-reflective evaluative	client self-formulation A2 B2.2 C1 C2 C3.1 C7 D2 E1.2 B4.2 B5.2 E2.2
T84	Therapist: So, you're actually in a way kind of engineering this so you don't touch pain because you're talking to the people who are going to be calm, you can be calm with and you're not talking to the ones that are going to get upset and get into some vulnerable, painful state, is that right	Empathic Conjecture (about not touching pain) and Empathic Formulation with Fit Question	3.1. client reflective/conceptual Tentative Collaborative	Formulation on emotion interruption/conceptual+action tendency elements A1 B2.1 B3.1 B3.2 C1 C2 C3.1 E1.2 B4.2 B5.1 E2.1
C84	Client: I guess so	Client not sure it fits yet	1.2.1.	
T85	Therapist: you guess	Empathic Repetition/Process Reflection	1.1.2. checks client agreement with formulation	
C85	Client: Maybe that could be it because it's one person in particular that I didn't speak to through the whole ordeal even up to now because she was like oh that's like my sister's cousin and I'm really hurt and I can't come to the funeral because I don't wanna break down and see her like that and I'm like ok I don't want to talk to you at all	client begins to explore and find evidence that it fits, then adds more detail	2.2.2.1 self-reflective collaborative	client SF on self-interruption + situational element of emotion scheme A2 B2.1 B2.2 B3.1 C1 C3.1 C4.1 D2 E1.2 B4.2 B5.2 E2.2
T86	Therapist: Yeah, yeah, so what's that about, when you talked to her?	Exploratory Question	1.1.1. exploratory	gathering data for formulation
C86	Client: I don't know, i thought it was just overly dramatic [overly dramatic] that doesn't sound right because she probably she grew up with her and they were real close I guess, I don't know.	F relevant narrative detail	1.2.2.	SF on others reaction
Т87	Therapist: I see, okay, I don't wanna talk to any drama queens, [exactly] people that are gone a make a big scene/ [uh-huh] because it feels like it's too much somehow	Evocative Reflection Conjecture	2.1.2.2.	emotion element of emotion scheme: dysregulation A2 B2.1 B2.2 B3.1 C1 C3.1 C7 D2 E1.2 B4.2 B5.1 E2.2
C87	Client: yeah,	client agrees	1.2.1.	
T88	Therapist: Okay, okay. so, you get off the phone and there's your husband. and your husband, what's he saying to you?	Question about specificity of situation	0.1	
C88	Client: He was supposed to be, we were discussing what he was going to fix. and he was supposed to just take some ribs out and cooking in the oven. But after the when I got off the phone, I laid back no I got up [Therapist: that's right] I went to see where he went because he was supposed to make coffee or whatever and we were discussing what he was gonna fix so he said I'm gonna take out ribs and were gonna cook because this is a Sunday	Empathic Following	0.2	
T89	Therapist: Sunday, it's Sunday	Empathic Repetition	0.1	

C89	a. Client: and I say I'm gonna go back and lay down for a while because I'm tired. And I got back to bed b. and what woke me up was him barbecuing he literally took like every meat we had out of the deep freezer and had it on the grill. I'm like who is all this food for? Because it's like just me, him and my daughter, my youngest daughter lived there.	implicit self formulation	0.2	formulation on self interruption (go back to sleep after hearing the news) A2 B2.1 B3.1 C1 D2 E1.1 B4.2 B5.1 E2.2
Т90	Therapist: So, his response to hearing that your mum has died is to go into complete cooking frenzy	Empathic Reflection	0.1	
C90	Client; I guess		0.2	
Т91	Therapist: Okay, and you've gone back to sleep?	Informational Question, relevant to this task	0.1	reflects client formulation on self-interruption
C91	Client: right, but when I got up cause I heard music and in the, in the yard through my bedroom window and barbecue, i smell barbecue, like I said he pulled the grill out and I said when I go downstairs I go, Oh God he even pulled out every meat we had and I said okay, maybe this is his reaction because he doesn't know what to do with himself, I don't know		0.2	
Т92	Therapist: Okay, okay, okay, and what was it like for you to see your husband grieving in that particular way?	Claims of understanding + Exploratory Question	1.1.1.	formulation relevant information gathering
C92	Client: I didn't know, I don't know what that is. I thought it was like insane, like this is a bit much, this is a lot, but I left him alone because we always talk about when someone passes that everybody grieves differently [right, right] and allow people to grieve to grieve the way that they		0.2	
Т93	Therapist: so you understood that this was his way of grieving and you let him do it?	Exploratory Question	0.1	
C93	Client: yeah, I think so		0.2	
Т94	Therapist: yeah, okay, okay	Therapist: yeah, okay, okay	0.1	
T95	Therapist: So, what do your puzzles are in this situation here with your mother's death when you find out that your mother passed, what are you puzzled there? I mean what would you have wanted or expected yourself to do or say	Structuring Task with process suggestion	1.1.1. exploratory collaborative inviting specificity	gathering data
C95	Client: I don't know, I don't know, I mean at least I did shed a few tears, but it wasn't cry. I didn't cry [Therapist: okay] I didn't cry like, oh, most people.	client starts to explore, therapist back-channel receipt of info;	3.2. self-reflective collaborative	SF on non-reaction as not normal A2 B2.1 B3.1 C1 C3.2 E1.2 B4.2 B5.1 E2.1
Т96	Therapist: you weren't hugely demonstrative	Empathic Reflection	2.1.1. 2.1.3 client reflective	formulation on emotion self- interruption

				A1 B2.1 C2 C3.1 E1.2 B4.1 B5.2 E2.2
C96	Client: like tears may have fell and well, you could actually dab them. And I remember saying to myself you don't want a stuffy nose, and you don't wanna headache.	Making explicit previous unspoken schematic content	3.2.	SF on action on the self (interruption) and what I tell myself (conceptual) A2 B2.1 B2.2 B3.1 C1 C2 C3.2 E1.2 B4.2 B5.1 E2.1
Т97	Therapist: okay, okay, so you're actually stopping yourself from crying anymore	empathic formulation	2.1.3. client reflective/conceptual process but not a sequence	Languaging formulation that labels action on the self A1 B3.1 C2 C3.1 D2 E1.2 B4.1 B5.1 E2.2
C97	Client: yeah	agreement	1.2.1.	
T98	Therapist: you let it		0.1	
C98	Client: pull it together	F relevant narrative detail	1.2.2.	SF on self-interruption
T99	Therapist: pull it together, you said to yourself	Empathic formulation / process reflection	2.1.3. Collaborative client reflective/ not a story sequence	formulation that labels action on the self-conceptual element A1 B3.1 C2 C3.1 D2 E1.2 B4.1 B5.1 E2.2
C99	Client: yeah, cause you're gonna have a headache and then your nose is going to be all stuffy [okay, okay] and you know,	F relevant detail, repeated	1.2.2.	
T100	Therapist: so I'm just going to, I said to you that we might try something with the chairs, right, so I'm going to try this, okay [moves chair] so like there's Gina and there's just a few tears, right, and then you start telling her, what do you tell her, you start telling her don't do anymore of that? You don't wanna get a headache or a stuffy nose, what do you actually?	Process Suggestion Structuring Task and Formulation	2.1.4. subsidiary to the enactment Tentative manner collaborative invites specificity client reflective/conceptual process	languaging formulation on aspects of self: experiencer and interrupter A1 B2.1 B3.1 B2.2 C1 C2 C3.1 D2 E1.1 B4.2 B5.2 E2.2
C100	Client: Do I say what I felt my mum would say because that's basically	client doesn't fully understand	1.2.1.	
T101	Therapist: That's what your mum would say, it's more like what you did say to yourself on Sunday when the tears started coming.	Process Suggestion	1.1.1 Specific, clarifying client reflective	Piece of formulation on action on self and self-other thematic F
C101	Client: pull it together [pull it together] she's happy [she's happy] she was ready, I mean this is what she wanted	formulation relevant narrative detail	1.2.2.	
T102	Therapist: She was ready to go, okay, so don't cry	Empathic Repetition/feeding lines	1.1.1.	
C102	Client: yeah, what do you, what are you, you know	agreeing	1.2.1.	
T103	Therapist: Why are you doing this, why are you, yeah, why are you getting upset here [Client: right] yeah, just	Empathic Repetition/feeding lines	1.1.1.	
C103	Client: I mean you have no regrets; you have nothing left to say or do, you know. So why cry?	client adds more detail	1.2.2.	
T104	Therapist: Yeah, why cry. Change. come over here and be	Feeding lines, then Process suggestion	0.1	

C104	Client: Do you want me to go over there?		0.2	
T105	Therapist: Yeah, actually yeah.	confirms action suggestion	0.1	
T106	Therapist: So, this is emotional Gina, right, who has, feels a few tears come because there is some sadness there, isn't there?	Empathic Formulation and conjecture with fit question	3.1. Exploratory; Tentative. Collaborative client reflective	Languaging Formulation on experiential aspect of split The formulation is done as part of working on the task, but it isn't subsidiary to the task. A1 B2.1 B2.3 C1 C2 C3.1 D2 E1.2 B4.2 B5.1 E2.1
C106	Client: I mean yeah	agrees	1.2.1.	
T107	Therapist: Yeah, yeah. So some sadness and tears come. Maybe right now sitting in there maybe you could fell some [yeah] of that sadness there	Process Reflection	1.1.1.	gathers data for F, this in itself is not a F as it's a process reflection rather than an abstraction
C107	Client: It's just, I don't know, cause she's not here anymore	Agreeing and adding example (for T106)	2.2.2.1	aspect of sadness, what it's about A2 B2.2 C1 C3.1 C4.1 D2 E1.1 B4.1 B5.1 E2.2
T108	Therapist: You can feel her absence, the presence of her absence	Empathic/ process Reflection	1.1.1	experiential aspect
C108	Client: Yeah		0.2	
T109	Therapist: You can feel a little bit of sadness there	Process Reflection	1.1.1.	gathering data for formulation
C109	Client: uh-huh		0.2	
T110	Therapist: yeah, yeah. Change.	Process Suggestion	0.1	
T111	Therapist: So just then when you could feel the sadness begin to come what were you starting to say to yourself over here?	Process suggestion	1.1.1. client reflective, Exploratory, Collaborative	Formulation about action on the self
C111	Client: That person was sad because	doesn't understand therapist question	0.2	
T112	Therapist: Yeah, but what does this part of you say to her when you feel the sadness coming	Process suggestion	1.1.1., client reflective, collaborative, exploratory	formulation on action on the self
C112	Client: Pull it together, you know (gets tearful)	expressing emotion being formulated as part of task implementation	1.2.3	
T113	a) Therapist: Pull it together, okay okay/ b) change. Do you want a tissue?	a) Empathic Repetition/following b) Process Suggestion (empathic affirmation/attending to sadness)	la (part of formulation which becomes explicit and conceptual, in T114	(notices sadness and invites client to speak from experiencer chair)
T114	Therapist: There is some sadness there, isn't there; yeah, yeah, and the pull it together doesn't make the sadness go away it just kinda covers it or something	process reflection /formulation, followed by empathic formulation with refocusing	3.1 Collaborative; Tentative client reflective	story construction Formulation (not subsidiary to task implementation) building the story of emotion, 3 steps: 1. the emotion of sadness, the occasion for it; 2. covering of

				the sadness (action); 3. intention of pull it together + effect of it A1 B1 B2.2 B3.1 C1 C2 C3.2 D2 E1.2 B4.2 B5.1 E2.1
C114	Client: Yeah, it's like a sign of weakness	client responds from collapsed exp.	2.2.5	SF on aspect of self/image of self; simple F A2 B1 B2.2 C2 C3.2 D2 E1.2 B4.1 B5.1 E2.2
T115	Therapist: okay thats what she's saying, she's saying to you it's weak to be sad, and even now maybe she's telling you it's weak. And yet somehow the more she tells you the more the sadness comes because it's there.	Structuring task Empathic Formulation/process reflection a. Refocusing	2.1.4. Specific, Tentative, Exploratory client reflective	Languaging Formulation that labels aspects of self A1 B3.1 B1 B2.2 C1 C2 D2 E1.1 B4.2 B5.1 E2.1
C115	Client: The more she says pull it together the more you feel like you got to be strong [okay, okay, yeah]	client disagrees with the refocusing, responds from collapsed exp.	3.2.	SF on aspect of self (collapsed experiencer) A2 B1 B3.1 C1 C2 C4.2 D2 E1.2 B4.2 B5.1 E2.1
T116	a) Therapist: So, she's telling you be strong, pull it together, yeah, but there is a part of Gina that's really quite sad about this in fact, yeah? / b) You're just letting yourself feel some of that now. This is an appropriate place to do that. / c) And i hope it - I don't know how it feels to you, but I hope it feels safe enough to let a little bit of the sadness come here in this moment. And we'll - in a while we'll help you put it back away/ d) But maybe just to acknowledge there is some real sadness about your mum's passing and that there's a part of you that spends a lot of time trying to push that away and close it down, you know. / e) But what does this part here need that's so sad? what does it need, this part of Gina that's - what do you need right now?	Empathic Refocusing Process Reflection Experiential Teaching Self-disclosure Process suggestion Information about the structural organisation of session Empathic Formulation Exploratory/focusing Question/	3 (for a, d) Tentative (maybe) Collaborative Exploratory client reflective/conceptual process friendly	Formulation on aspects of self A1 B2.1 B2.2 B2.3 B3.1 B3.2 C1 C2 C3.1 D2 E1.2 B4.2 B5.1 E2.1 sequence/story formulation on emotion regulation and orienting to the pain +need
C116	Client: I feel like I need to be strong so I can think [therapist pointing towards the other chair as Gina is speaking from the interrupter]	self formulates from interrupter part (collapsed experiencer)	a. 2.2.4	SF on self-interruption A2 B2.2 B3.1 C1 C2 D2 E1.1 B4.2 B5.1 E2.2
T117/118	Therapist: you're saying to be strong, and this feels weak, right [pointing to the experiencer chair she is sitting in] okay, okay so its like you hear this voice saying be strong [again pointing to the other chair] and it's like even your mother's voice, isn't it, also. Be strong, don't be weak. Crying is weak. Showing feelings is weak and that's what happens. Yet somehow there is pain. and so, the pain needs something. The pain needs something.	Empathic Formulation/Refocusing	3.1 Clarifying/clear, specific; exploratory at the end; collaborative client reflective	Story Formulation sequence on action on the self, other(mum)-self theme, also formulating the pain+need A1 B1 B2.2 B2.3 B3.1 B3.2 B3.3 C1 C2 C3.1 C3.2 D2 E1.2 B4.2 B5.1 E2.1

T117/T118	Therapist (cont.): I understand there's a big part of you that needs it to shut down [uh-huh] and needs to feel strong and not to feel weak, right. That's her, that's this part of you that's so strong. And so, when it's there for everybody in your life, there you are supporting your brother, your family, your kids and your husband, letting him barbecue all the meat in the house. So, you're supporting everybody else but you're being - you have to be - she has to be strong, you don't get to be weak. Gina doesn't get to be weak, right? But there is a part of you that does hurt, that is sad. What can we do for her cause she's part of you too, what can we do for that Gina?	Empathic Formulation, then refocusing, client agrees exploratory Q	3.1 (cont.) Clarifying/clear, specific; exploratory at the end; collaborative client reflective	Story formulation sequence, reflecting on parts of self, self-others theme, the pain and need.
C118	Client: I don't know	can't yet clearly hear experiencer needs	0.2	
T119	Therapist: what would help her be less sad? You shake your head	Exploratory Question, Process Reflection	1.1.1. collaborative	gathering data for formulation of need
C119	Client: I don't know		0.2	
T120/T121	Therapist: Yeah, just to be told that it's okay to be sad or? [Client120: Maybe] that this is the moment for it?	Empathic Conjecture,	2.1.2.2. Tentative, Exploratory 1.2.1 for C120	Formulating the need A1 B2.2 B3.1 C1 C3.2 D2 E1.2 B4.1 B5.1 E2.2
C121	Client: Maybe because even during the funeral when I got sad, I guess, shed a few tears, my brother was next to me saying what are you crying for	client adds example, begins to fit	2.2.2.1 self-reflective collaborative	SF about parts of self and self- others theme A2 B2.1 B2.2 B3.3 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.2 E2.2
T122	Therapist: Oh, you don't get to be, you don't get to cry in your family, right.	Evocative reflection / Formulation	2.1.3. (no story sequence) client reflective/conceptual friendly also 2.1.5	Languaging Formulating self- others theme A1 B2.2 C2 D2 E1.2 B4.1 B5.1 E2.2
C122	Client: No, my grandma was sitting there, she didn't shed a tear, she just stared straight on.	Client confirming therapist formulation and adding example	2.2.2.1 collaborative	Client SF regarding situational aspect/self-others theme A2 B2.2 C1 C3.1 C4.1 D2 B4.2 E2.2
T123	Therapist: So, at the funeral you start to shed some tears, and your family is saying	exploratory Reflection	1.1.1 Collaborative Exploratory	Formulation about situational aspect
C123	Client: My aunt didn't shed a tear; she was sitting there.	formulation relevant narrative detail	1.2.2.	SF regarding situational aspect/self-others theme
T124	Therapist: we're strong, we don't let - we got to keep those emotions in check, yeah?	Empathic formulation	2.1.5.	Languaging Formulation on interruption and self/other theme A1 B2.2 C1 C2 C3.1 D2 E1.2 B4.2 B5.2 E2.2
C124	Client: Yeah	confirming formulation	1.2.1.	
T125	a) Therapist: So, it's actually quite hard work. you work really hard to keep. b) Maybe come over here, let's work with that a bit. [client moves chair] c) So, there she is, there's the sadness there. It's not that she doesn't feel it,	Empathic Formulation. Process Suggestion/Structuring Task/	3.1 Exploratory Collaborative	Languaging Formulation on action on the self/parts of self formulation is subsidiary to task implementation A1 B2.1 B2.2 B3.1 C1 C2 C3.2 D2 E1.2 B4.2 B5.1 E2.1

	this part of you feels like I've got to keep a lid on it. d) what's that about?	Empathic refocusing Exploratory Q		
C125	Client: I don't know.		1.2.1.	
T126	Therapist: so strong, yeah.		0.1	
C126	Client: I don't know. I know, I remember it now, telling at the funeral what I did, because I had to excuse myself and go to the bathroom when I first got here because they handed me an obituary and then I felt tears about to come so I went to the bathroom [Therapist: Aha] and it was like pull yourself together.	Client confirms therapist formulation and remembers moment of self-interruption, adds example	2.2.2.1	SF on action on the self A2 B2.2 B2.1 B3.1 C1 D2 E1.2 B4.2 B5.1 E2.2
T127	Therapist: You're saying to yourself, this is the part that is saying pull yourself together, tell her, pull yourself together.	Empathic formulation Process suggestion	2.1.4. 2.1.1 also 2.1.3 Collaborative Clear client reflective	Reflects back client formulation on action on the self, as part of task implementation A1 B3.1 C2 C3.1 D2 E1.1 B4.1 B5.2 E2.2
C127	<u>Client</u> : Pull yourself together! What are you crying for?		1.2.2	implementation/demonstration of self-interruption
T128	Therapist: What are you crying for	Empathic Repetition/feeding lines	1.1.1.	
C128	Client: yeah, you know mum wasn't like that, she was [she wouldn't like you to] happy [be crying] right and that's what I was saying, I was like okay, okay. Then I pulled it together and went back out. Saw my brother and he was like and then he was talking to me the whole while. It's the family, we all sat down, if there's any tears, oh, what are you crying for? He hands me the obituary [aha] with a poem saying don't shed tears for me or whatever and I	Client adds more detail to her SF	2.2.4. 2.2.2.1	SF on self-interruption and situational element/self-others theme A2 B2.2 B3.1 B3.2 C1 C2 C3.1 D2 E1.1 B4.2 E2.2
T129	Therapist: in her obituary there's a poem that said [right] that has don't shed tears for me	Empathic repetition	1.1.3.	
C129	Client: Right, it's a poem and it has that in there [aha] and he handed it to me and told me to read it. And I said, well, I'm the one who approved it. He said, well, if you read it then what are you crying for? And I was like, okay. You know, and then I stopped.	client adds example to illustrate F	2.2.2.1 self-reflective collaborative	SF on self-interruption and situational element/self-others theme A2 B2.2 B3.1 B3.2 C1 C2 C3.1 D2 E1.1 B4.2 E2.2
T130	Therapist: Then you stopped. That shut you down, right. So, be your brother telling Gina, what did he say? Actually, do it again, like be your brother and	Empathic repetition/formulation Process suggestion	2.1.4. Collaborative. client reflective	Languaging Formulation on interruption and self-other theme (others shut me down) A1 B3.1 C2 C1 C3.2 E1.1 B4.2 E2.2
C130	Client: he was like what are you crying for? You know mom wanted this.	collaborating on task	1.2.2.	SF on self-other theme
T131	Therapist: she wanted to die; she was ready	feeding lines	1.1.1.	

C131	Client: you know, this is what she wanted. She was ready, she was happy [yeah] Look at her, it's like she's		1.2.2.	
	smiling. And then I said, I know, I know you're right.			
T132	Therapist: Yeah, that's what you said to her (pointing to the other chair) okay, I know you're right.	structuring task	1.1.1.	
C132	Client: I know you're right and then	collaborating on task	1.2.2.	
T133	Therapist: Get it together	feeding lines	1.1.1.	formulation on action on the self
C133/134	Client: yeah, so then I said, so I was trying to wipe the tears. And then he hands me the obituary, and some more tears came [some more came] and I said, I already read it. He pointed to that point for me to read. I said I read it. I approved it. And he said, well, what are you crying for if you read the poem Why are you crying? [yeah, yeah yeah] and I was like yeah, okay, you're right [T134 Therapist: Change, pointing to the other chair] and then i stopped and that was it.	client adds example to illustrate F	2.2.2.1 and 2.2.4 for C133/134 0.1 for T134	SF on self-interruption + self-other theme during task implementation A2 B2.1 B2.2 B3.3 C1 C3.1 C4.1 D2 E1.1 B4.2 E2.2
T135	Therapist: that was it, sorry. So, then you, what's what that's what shut you down, you stopped at that point?	empathic repetition, Empathic Formulation with implicit fit Q	2.1.4. client reflective/conceptual	process formulation on self - interruption as part of task implementation A1 B3.1 C2 C1 C3.2 E1.1 B4.2 E2.2
C135	Client: yeah	Agreeing with therapist	1.2.1.	
T136	a) Therapist: yeah, what are you crying for? Get yourself together, pull yourself together/ b) Change. Then what did you feel over here, when your brother and you got together (as client changes chair) Basically there's your brother, there's the strong part of Gina. When they got together to shut this down, what did this part of you feel then?	Feeding lines Process suggestion(change)then Empathic Formulation with Exploratory Question	2.1.4. exploratory/evocative client reflective/conceptual process collaborative	Languaging formulation on self-interruption +self-others theme A1 B2.1 B2.2 B3.1 B3.3 C1 C2 C3.2 E1.1 B4.2 B5.1 E2.2
C136	Client (from other chair): That I got to stop crying, that I can't cry anymore	client doesn't understand and responds from interrupter chair	1.2.2.	SF about self-interruption
T137	Therapist: Yeah. And what did — what did you feel in your body? [client shakes head] Do you remember?	Exploratory Question (to engage the experiencer)	1.1.1.	gathering data for body focused element of emotion
C137	Client: I think I looked at my grandma. Oh, what I did was I focused — I found something to focus on and stare at it for the rest of the funeral so that I can —	continues narrative detail drawing on schematic memory that implies an unstated F (made explicit by therapist next)	2.2.2.2. collaborative	SF on self-interruption/action tendency A2 B2.2 B3.1 B3.2 C1 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T138	Therapist: You distracted yourself, uhhuh. You looked at people and you're worried about people and took care of — I mean, you kind of	Empathic Formulation	2.1.4. client reflective/conceptual tentative	Languaging formulation on action tendency and conceptual aspect of emotion A1 B2.2 B3.1 B3.2 C1 C2 C3.1 D2 E1.2 B4.2 B5.1 E2.2
C138	Client: well, we were on the front row, so I just focused on an object or something.	F relevant narrative detail	1.2.2. Collaborative, clarifying, self-reflective	SF on self-interruption/distraction

T139	Therapist: Oh, an object, okay, okay.	Receipt of information re clarification	1.1.3.	reflecting back client SF
C139	Client: [inaudible] or looked, yeah [okay] and I did kind of like glance over to my grandma, who was just sitting there staring and	F relevant detail	1.2.2.	
T140	Therapist: they were staring so you look at them, they're staring, yeah.	Empathic repetition/following	1.1.1	situational element
C140	Client: she got up and she read the poem [aha] and I just I had to just focus on one spot and - [focus on a spot] and if I felt like any tears were coming just focus on something [one spot yeah] and stay there.	Client adding more detail to SF therapist empathic repetition	2.2.4 self-reflective collaborative specific	SF on emotion self- interruption and situational element A2 B2.1 B3.1 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T141	Therapist: so, she's saying (pointing to the other chair) don't let the tears come and then if this when this part of you starts to sadness, because this sadness probably comes in waves doesn't it [aha] you get a wave of sadness, and then every, she's watching you.	Feeding lines, Empathic Formulation with conjecture+Fit Q	2.1.4. client reflective/conceptual tentative exploratory collaborative	Languaging Formulation on parts of self (interrupter and experiencer) +Self-Others T A1 B2.1 B3.1 C1 C2 C3.1 D2 E1.1 B4.2 B5.1 E2.2
C141	Client: it's like something will trigger it. Like when I first viewed the body. I had to stand outside first and try to pull it together.	implicit self-formulation to task implementation	2.2.4 self-reflective collaborative	SF on emotion self- interruption and situational element A2 B2.2 B2.1 B3.1 C1 C2 C3.1 C4.1 D2 E1.1 B4.2 B5.1 E2.2
T142	Therapist (leaning towards the other chair) She saying pull it together.	feeding lines	1.1.1. client reflective/conceptual	
C142	Client: before you go see her	formulation relevant narative detail	1.2.2.	situational element
T143	Therapist: Oh, okay, before you go see her	Claims of understanding	0.1	
C143	Client: before you step in the room [aha, aha] and look at her like that.	formulation relevant narative detail	1.2.2.	
T144	Therapist (pointing towards the other chair) she's coaching you beforehand? Pull it together, don't react [yeah], keep a lid on it and then when the tears come	process reflection / Empathic formulation with exploratory reflection at the end	2.1.4. client reflective/conceptual collaborative exploratory	Languaging formulation on aspects of self (interrupter and experiencer) A1 B3.1 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C144	Client: and then when I walked in, and I saw her then the tears came. And it's like, you know, pull it together [pull it together], hey look at her. So then i look at her and I was like, okay, she looks fine, she looks pretty, you know.	implicit self-formulation to task implementation	2.2.4 self-reflective collaborative	SF on parts of self (presence of emotion and then self-interruption) A2 B2.1 B2.2 B3.1 C1 C2 C3.1 D2 E1.1 B4.2 B5.2 E2.2
T145	Therapist; yea, you're kind of telling her: she looks nice, she looks pretty, don't, you know, don't be sad, right, yeah.	Empathic Formulation with empathic repetition	2.1.1.	Reflects back client formulation on self- interruption A1 B2.2 B3.1 C1 C2 C3.1 D2 E1.1 B4.2 B5.2 E2.2
C145	Client: and then my brother was there at the end.	formulation relevant narrative detail	1.2.2.	situational element

T146	Therapist: it's a family culture of not being sad and you don't	Empathic formulation	2.1.3. and 2.1.5 single element F	Languaging formulation on self-interruption+ self-other thematic F A1 C2 D2 E1.2 B4.1 B5.1 E2.2
C146	Client: It was it was tough. I felt like my mum and my brother were the tough ones.	evaluating an aspect of formulation (it was tough)	2.2.3. specific, evaluative, reflective	SF on others reaction A2 B1 C2 C3.2 C7 D2 E1.2 B4.2 B5.1 E2.2
T147	Therapist: they were the tough ones, yeah. / b. And you got to be tough, too.	Empathic repetition conjecture	a. 2.1.1. b. 2.1.2.2	Languaging formulation on self-others theme+self- interruption A1 B3.1 B3.3 C1 C2 C3.1 C3.2 D2 B4.1 B4.2 B5.1 B5.2 E2.2
C147	Client: I was the one that took care of them.	evaluating an aspect of formulation (her role)	2.2.3 self-reflective evaluative	SF on self-other theme A2 B3.2 C2 C7 D2 E1.2 B4.1 B5.2 E2.2
T148	Therapist: you took care of the tough ones. There're the tough ones and then there's the ones that take care of the tough ones [right] yeah, Yeah, that's your role, that's your job. / b. That touches something too. What's that touch on you?	Emp. repetition Empathic Formulation Process reflection Exploratory Q	a. 2.1.4. AND 2.1.5 b. 1.1.1.	reflects back client SF languaging formulation on self-others thematic formulation A1 B3.2 C1 C2 C3.2 D2 E1.1 B4.2 B5.2 E2.2
C148	Client (tearful): it's just memories that's all	minimal response to therapist F	1.2.3	
T149	Therapist: memories so memories come back to you right then. What was the memory?	Process Reflection then Exploratory Q	1.1.1.	gathering data towards formulation
C149	Client: of growing up taking care of mom and my brother [aha] if they went through something I had to be strong to take care of them.	client adds example to illustrate F	2.2.2.1	SF on emotion self- interruption and sel-others theme A2 B3.2 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.2 E2.2
T150	Therapist: they're the tough ones, but if the tough ones were having trouble, you were the super tough one that takes care of the tough ones when they have trouble [right] that's your job in the family. (T148)	Empathic Formulation	2.1.5 (interpersonal, not linking to key emotions); also 2.1.1. repeat of T148	languaging formulation on self-others theme A1 B3.2 C1 C2 C3.1 D2 E1.2 B4.2 B5.2 E2.2
C150	Client: it was	correcting this was the case in the past	1.2.2.	
T151	Therapist: it was, yeah.	Empathic repetition/claims of understanding	1.1.3. (Acknowledges client corrected detail about T150	feeds back client clarification of SF
C151	Client: when i was we all live in three different states [okay, okay] as we got older, you know.		1.2.2	
T152	Therapist: so, when the tough have trouble, you are the super tough one that takes care of the tough ones? [yeah] yeah, so you've got to be even tougher than they to - repetition of T150	Empathic Formulation	2.1.1. client reflective tentative collaborative exploratory	Formulation on self-others theme A1 B3.2 C1 C2 C3.1 D2 E1.2 B4.2 B5.2 E2.2
C152	Client: I guess	client not sure if it fits	1.2.1	
T153	Therapist: Does that, doesn't it put, is that too much? Is that overstating things, is that	Exploratory Q	1.1.2. collaborative exploratory	related to previous formulation but not in itself formulation

C153	Client: I never looked at it like that.	aliant raflacts ar	1.2.1.	
C153	Client: I never looked at it like that.	client reflects on new element not aware of before	reflective	
T154	Therapist: okay, does that fit?	Fit Q	1.1.2. exploratory	related to previous formulation but not in itself formulation
C154	Client: Yeah, pretty much, I can't, yeah, I can't afford to be weak if they're weak at the time.	confirms formulation and elaborates	2.2.4. self-reflective AND 2.2.5	SF about self-interruption and self-others theme A2 B1 B2.2 B3.1 C3.2 D2 E1.1 B4.1 B5.1 E2.2
T155	Therapist: yeah, that's what's she says over there, I can't afford to be weak if they're weak. So, Gina, you're watching your brother too, right? You're watching, is he going to, you know, like so you're kind of watching, keeping an eye on	task structuring with Empathic Formulation	2.1.4. exploratory client reflective/conceptual tentative	a. languaging formulation on self-interruption b. self-others theme A1 B3.1 B3.2 B3.3 B2.2 C1 C2 C3.2 D2 E1.1 B4.2 B5.2 B5.1 E2.2
C155	Client: i used to take care of him, yeah.	F relevant detail, correcting this was the case in the past	1.2.2.	self-others theme
T156	Therapist: to take care of him, so he's watching you, too, to make you know, if you cry then he's going to get you to be tough, too. So, you're kind of watching each other. Everyone's got to be tough. Don't let the emotions. and yet somehow there are these emotions, yeah. / So where does that leave you?	Emp. repetition Empathic Formulation Empathic Refocusing Exploratory Q	2.1.4. collaborative client reflective exploratory 1.1.1.	feeds back client SF Self-others theme and aspects of self (interrupter and experiencer) A1 B3.1 B3.2 B3.3 B2.2 C1 C2 C3.2 D2 E1.1 B4.2 B5.2 B5.1 E2.2
C156	Client: I don't know [hmmm]		0	
T157	Therapist (maintaining eye contact with client): What do you feel right now, what do you experience right now?	Exploratory Q	1.1.1.	reflects towards experiencer
C157	Client: I'm thinking back to when mamma was sick and she was rushed to the hospital and she told me, you're panicking. You need to calm down.	client adding memories around emotion interruption	2.2.2. exploratory self- reflective/conceptual	self-others theme A2 B3.3 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.2 E2.2
T158	Therapist: Okay, all right. She saw you begin to	Claims of understanding, starts empathic formulation but interrupted by client needing water	0.1	
C158	Client: Yeah / some water.		0.2	
T159	Therapist: Be strong Sorry yeah, go ahead (leans over to get client a glass of water) Yeah, yeah. It's hard to talk about it, yeah (while client drinking water).	Feeding lines Empathic affirmation	0.1	
C159	Client (shaking head, while still drinking water): not really	doesn't recognise/confirm vulnerability	0.2	

T160/161	Therapist: yeah, and at the funeral,	Empathic Formulation	3.1.	formulation on the action
	when emotions started to come and this part of you would find a point to look at, you would find a point to look at, you would distract yourself. You would basically tune in tune out the pain. In a way, almost dissociate yourself from it. Yeah? [C160: yeah, I think so] that's what happens, right. So, this part of you is left feeling a bit numb, I guess.	with conjecture and fit Q Fit Q	client reflective/conceptual tentative collaborative	tendency (dissociation) and situational element (funeral), alongside but not subsidiary to task work part of self: numbed experiencer A1 B2.1 B2.2 B3.1 C1 C2 C3.2 D2 E1.2 B4.2 B5.1 E2.1
C161	Client: a blank	simple self F, correcting therapist F	2.2.5 SIMPLE F	SF about part of self
T162	Therapist: Blank, blank, it feels blank. I could see you are left with a blank. / So when she (pointing towards the other chair) cuts off the emotion you're left with a blankness. And then it's like maybe I can't remember it as much. yeah, yeah. / Why don't you come over here (pointing to the other chair and therapist moves on the chair in front of her, to signal the end of chair work) and we'll maybe just - We'll have to stop pretty soon [okay] lets just see where we are now at this point. So is that what happens actually? / And it happens when you start to feel emotion, you have this So it's not like emotion isn't there. It's like the emotion starts to come and this part of you watches so carefully for the emotion, watches so carefully to see if it's going to come and kind of guards against it because emotions are dangerous, and emotions are, we don't do emotions in our family.	Empathic repetition, Empathic Formulation Process suggestion, Structuring task; Exploratory Q d. more empathic formulation	3.1 c. 1.1.1.	storying formulation on self-interruption+ aspects of self A1 B2.1 B2.2 B3.1 C1 C2 C3.2 D2 E1.2 B4.2 B5.1 E2.1 end of session meaning perspective formulation on self-interruption+ self-others theme Formulation is alongside task implementation but not secondary to it, there is a stepping back and building a story with the client.
C162	Client: right, It's sort of like a weakness because you're vulnerable at the time.	makes explicit previously unspoken schematic content	3.2. reflective/conceptual collaborative	SF on self-interruption A2 B2.1 B3.1 B2.2 C1 C2 C3.2 D2 E1.2 B4.2 B5.1 E2.1
T163	Therapist: It's a weakness, yeah. Because you're vulnerable at that time. Yeah, you're vulnerable, right. So, it's like don't - so this part of you says don't be weak. Emotions are vulnerable. So, you - so actually the thing you're puzzled by, which is why don't I react to situations, you know, like painful situations with emotion, is that actually you do react but stop it, right? You work really hard to stop it. You interrupt it. You kind of - you - and it's like this part of you is watching for the emotions, in the same way that your brother was watching you for a tear, right? And he's saying, see that poem, right, you know, she wouldn't want you to do that, right?	Empathic repetition Empathic Formulation	a. 2.1.1 recycled b. 3.1 collaborative tentative client reflective/conceptual process.	a. formulation on parts of self b. end of session meaning perspective (task) formulation on meaning bridge being the self-interruption; self-others theme; situational element Formulation is alongside task closure but not secondary to it, there is a stepping back and building a story with the client. A1 B2.1 B2.2 B3.1 B3.3 C1 C2 C3.2 D2 E1.2 B4.2 B5.1 E2.1

C163	Client: well, he was telling me, too,	adding example to	2.2.2.1	SF on self-others theme
	even before that evening, don't you break down. Don't you get there.	confirm formulation	reflective collaborative	A2 B3.3 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.2 E2.2
T164	Therapist: Don't you break down. It's like you <i>rehearse each other</i> . You know, you, he rehearses you to be strong. Do you rehearse him?	empathic repetition, Empathic formulation exploratory Q	2.1.4. client reflective	Languaging formulation on self-interruption and self- others theme, secondary to task work A1 B3.2 B3.3 C1 C2 D2 E1.1 B4.2 B5.1 E2.2
C164	Client: probably if I see him react a certain way and I say, you tell me to hold it together and you need to hold it together.	Client narrative detail drawing on schematic memory that implies an unstated formulation	2.2.2.2	self-interruption and self- others theme A2 B3.2 C1 D2 E1.1 B4.2 B5.2 E2.2
T165	Therapist: that's right. If I if you -	empathic following	0.1	
C165	Client: but he's already just		0.2	
T166	Therapist: Yeah, so he's really tough, right, okay.	Process Reflection	1.1.1.	
C166	But he's not because I know him.	F relevant detail	1.2.2.	
T167	Therapist: You really know what's inside, right [yeah] Yeah, yeah. So, what do you make of all that? What's that?	Process /empathic reflection; Exploratory Q	1.1.1	therapist checking client evaluation of F
C167	Client: I don't know [friendly, warm laughter from therapist]		0.2	
T168	Therapist: So, are you still puzzled by why you don't react emotionally?	Exploratory Q	1.1.1. exploratory	Part of Task closure
C168	Client: I guess it's just a <i>fear</i> of being weak. I don't know	client self-formulation	2.2.1. recycled	SF on parts of self A2 B2.1 B3.1 B2.2 C2 C3.1 D2 E1.2 B4.1 B5.2 E2.2
T169	Therapist: Does that fit?	Fit Q	1.1.2.	related to client formulation
C169	Client: I guess	client not sure if it fits	1.2.1.	
T170	Therapist: I guess. Just sit with it a little bit, yeah. It's like this part of you is so scared of being weak, so careful to not be weak [client nodding in approval]. And it's not just you, its like the people around you that expect you to be strong, super strong.	Empathic repetition Process suggestion Empathic Formulation client agrees	2.1.2.1. adding narrative detail that clearly illustrates F, to help client check for fit	meaning perspective formulation about Self-Self, Self-Other themes A1 B2.1 b2.2 B3.1 B3.3 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.2 E2.2
C170	Client: Right, the people that's watching.	confirming formulation	1.2.1. Collaborative	self-others theme
T171	Therapist: they're watching you and you're <i>aware</i> of them watching you.	Empathic repetition and conjecture	2.1.1 recycled	Languaging formulation on self-others theme A1 B3.3 C1 C2 C3.1 D2 E1.2 B4.2 B5.2 E2.2
C171	Client: It's like my children [children] just people that maybe watch me	confirms F and adds example to confirm	2.2.2.1 Tentative, self-reflective, collaborative	SF on self-others theme A2 B3.3 C1 C3.1 C4.1 D2 E1.1 B4.1 B5.2 E2.2

T172	Therapist: yeah, yeah yeah. There's	a. Claims of	2.1.5	a. story formulation on self-
11/2	mum, mum is always strong, she doesn't she's the one that always holds it together, if you're upset, she's gonna hold it together. That's her job, yeah [client nods] /	understanding Empathic Formulation	collaborative conceptual exploratory	others theme. b.1.1.1 A1 B3.3 B3.1 C1 C2 D2 E1.2 B4.2 B5.1 E2.2
	what's that like for you [client shrugging shoulders] to be [mumbling] kinda shrugging your shoulders	b. Exploratory Q Process Reflection	b. 1.1.1.	
C172	Client: I don't know, I've been doing this for so long	reflects on how ingrained/long standing it is	2.2.3 collaborative self-reflective evaluative also 2.2.5	evaluating longevity of this pattern A2 B3.1 C7 D2 E1.1 B4.1 B5.2 E2.2
T173	Therapist: for so long, it's like me, it's like Gina, that's what Gina is, does, yeah?	Empathic Formulation/conjecture with fit Q	2.1.2.2 Tentative Friendly Client reflective collaborative	Self-self theme A1 B3.1 C1 C3.2 D2 E1.2 B4.2 B5.1 E2.2
C173	Client: yeah	fits her experience	1.2.1.	
T174	Therapist: yeah, yeah, yeah. So at least it makes sense about why I don't react emotionally, because I work really hard to stop it when it comes, in lots of different ways, I distract myself, I go back to sleep, I pay attention to other people's needs, I worry about concrete details, practical matters, so there's lots and lots of things to keep the emotion down [yeah] yeah, yeah, because getting upset is weak. Does that make sense?	Empathic Formulation fit Q	3.1 collaborative tentative client reflective 'Bouquet reflection'	End of session meaning perspective formulation on different ways of self-interruption A1 B2.1 B2.2 B3.1 B3.2 C1 C2 D2 E1.2 B4.2 B5.1 E2.1
C174	Client: yeah	it fits	12.1.	
T175	Therapist: but what do you do with that knowledge?	Exploratory Q	1.1.1.	gathering data for formulation
C175	Client: I don't know [shaking head] [therapist laughs softly, making client smile] I don't know, because if something happens and you react you can't be in the right frame of mind to handle the situation.	evaluating aspect of F (can't be in the right frame of mind to handle the situation)	2.2.3. Tentative self-reflective collaborative evaluative	conceptualising the self-interruption A2 B2.1 B3.1 C1 C2 C7 D2 E1.2 B4.2 B5.2 E2.2
T176	Therapist: a. Right, right. Who's going to handle the practical details if I'm upset, or if everybody is upset? Who's going to do what needs to be done? Who's going to cope? [yeah] b. so then it becomes your job to cope. You're the master coper.	Claims of understanding/ Evocative reflection then Empathic Formulation	2.1.2.1 adding narrative/evocative detail that illustrates F b. 2.2.1	F on self-self self-other themes A1 B2.1 B2.2 B3.1 C1 C2 D2 E1.2 B4.2 B5.2 E2.2
C176	Client: [while laughing] I guess [well] master coper, yeah, I guess (client blows her nose) Yeah. We have to be able to perform under pressure I guess [aha]	evaluating aspect of F (have to be able to perform under pressure)	2.2.1 then 2.2.3 self- reflective/conceptual collaborative tentative	conceptualising the self- interruption A2 B2.1 B3.1 C1 C2 C7 D2 E1.2 B4.2 B5.2 E2.2

T177	Therapist: You have to be able to	Empathic repetition	2.2.4, also 2.2.1 collaborative	end of session formulation on action on the self and on self-
	perform under pressure. That's part of what, I guess, what this part of you can say to you, got to perform under pressure. If there's pressure, got to perform. Right. Don't let those emotions in, right? Because they get in the way. If you get emotional you can't cope, you're too busy being emotional [yeah] so you better really and that's actually part of the family.	(2.1.1) Empathic Formulation	collaborative tentative client reflective/conceptual	action on the self and on self- other theme, part of task implementation and closure A1 B2.2 B3.1 B3.3 C1 C2 D2 E1.1 B4.2 B5.2 E2.2
C177	Client: You can't make a sound decision if you	simple F, making explicit previously unspoken content	2.2.5 simple F Tentative, self- reflective, collaborative	conceptualising self- interruption A2 B2.1 B2.2 C2 D2 E1.2 B4.1 B5.1 E2.2
T178	Therapist: Aha, you can't make a sound decision if you're too upset, if you're overwhelmed with the emotion [yeah] Yeah, yeah, yeah. / So, we'll have to end in a few minutes, but [okay] so you can't make a sound decision. So, you're the master coper, so more than anybody else in the family I guess it might - I guess it feels like it falls to you to be the person who has to be the one who's rational and calm in order to make the sound decisions that need to be made	Empathic repetition/Empathic Formulation with conjecture Structuring task around ending, meaning perspective formulation	2.1.1 and 2.2.4 client reflective tentative collaborative exploratory	consolidating, recycled formulation on self-self and self-others theme A1 B2.2 B2.1 C1 C2 C3.1 D2 E1.1 B4.2 B5.2 E2.2
C178	Client: Yeah	confirms formulation	1.2.1.	
T179	Therapist. Yeah, yeah, yeah. And how is that for you? How is that?	exploratory/fit Q	1.1.2.	
C179	Client: It's a normal day for me because [it's a normal day] because I 'been doing it for so long.	evaluating an aspect of formulation	2.2.3. Collaborative self-reflective	repeats SF on longevity of this pattern A2 Bb.1 C7 D2 E1.1 B4.2 B5.2 E2.2
T180	Therapist: Yeah, you've been doing it. And are you ok with that?	Empathic repetition, exploratory Q	1.1.2. client reflective/conceptual exploratory	
C180	Client: I guess I am		1.2.1.	
T181	Therapist: You guess you are? Okay, yeah	empathic repetition/empathic following	1.1.2.	checking for fit in relation to F
C181	Client: I don't know		0.2	
T182	Therapist: It feels really important to you to be able to do that, to perform that function.	Empathic reflection	2.1.3. client reflective/conceptual	formulating role of interrupter A1 B2.2 B3.1 C7 D2 E1.1 B4.1 B5.2 E2.2
C182	Client: somebody has to	repeated	2.2.1 and 2.2.5	Self-self theme A2 B2.2 C7 D2 E1.1 B4.1 B5.2 E2.2
T183	Therapist: Someone's got to do it, right, yeah, yeah, yeah. And yet somehow you can be left with a sense of am I missing something? Am I missing memories? Am I missing pieces of my - pieces of memory or pieces of my life or something? Am I is there cost for me doing that?	Empathic repetition+ refocusing	2.2.1 exploratory tentative collaborative client focused/conceptual	recycled formulation on personal cost of self- interruption A1 B2.1 B3.1 C1 C7 C3.1 D3 E1.2 B4.2 B5.2 E2.2
C183	Client: Exactly	confirming it fits	1.2.1.	

T184	Therapist: That's what you're left with, yeah. So that's the kind of dilemma that it leaves you with [yeah] is if I'm going to be the master coper and work so hard to contain and suppress the emotions that are there, just like your emotional equipment is there, intact, but you are very, very skilled in containing and blocking them, and that leaves you blank. [yeah], And sometimes you are missing memories and things, [nods] because the emotions are connected to -I mean, emotions are partly how we connect to memories. [yeah] Yeah, so is that you know, I guess that's a choice we all make. You know, how much do I block out the emotion so I can be in coping mode? And how much do I let it be there so I can capture some more richness in my life? Yeah, that's a dilemma I think that I know that I face in my life, too. I'm an emotion focused therapist, right. This is the, I know, I do emotions programming for a living, but I know sometimes you just have to cope, right? And you kind of got to park the emotions. [yeah] / Yeah, but then I guess what do you do with that, right, if you kind of missed out on some important things, some important experiences?	Empathic formulation, refocusing experiential teaching personal disclosure, process disclosure exploratory Q	3.1 collaborative tentative client reflective/conceptual process friendly language	End of session meaning perspective formulation sequence about self-interruption work done in session A1 B2.1 B2.2 B3.1 C1 C2 C3.1 C7 D3 E1.2 B4.2 B5.1 E2.1
C184/185	Client: I don't know, the fear is that one day it all comes rushing in and then you explode. [T185well, yeah, that's a, that's a] or you breakdown and can't recover from it	Self-Formulation	3.2. T185 1.1.2	SF about fear of interrupter part A2 B2.1 B2.2 B3.1 C1 C2 C3.2 C7 D3 E1.2 B4.2 B5.1 E2.1
T186	a) Therapist: yeah, yeah, yeah, that's the fear, right, yeah, yeah. / b) I mean, that's what I always tell my clients, is that, you know, like if you know, if you park your emotions then they fall you know, fall and hit you in the head at some point, right. / c) But you're so good at it that you actually are able to, I guess, most of the time bring it off, right? So, you're, so that's it really is a choice for you I think. [yeah] Yeah, Do I want to continue to contain them so that I can be the master coper and fulfil that role in my family? Or do I want to let a little bit of them out and deal with the fact that people around me might be uncomfortable with me letting a few tears shed? Right, yeah? That's a kind of choice, isn't it?	Receipt of information+formulation Self-disclosure +experiential teaching empathic refocusing with self-disclosure (I think) with fit Q at the end	3.1 collaborative, tentative client reflective/conceptual process	End of session meaning perspective formulation (about self-interruption and self-other thematic formulation) A1 B2.1 B3.1 C1 C2 C3.1 D3 E1.2 B4.2 B5.1 E2.1
C186	Client: Yeah [yeah], But the problem with that is, if I allow, if I let it out people are so used to me not reacting and like, oh you're such a drama queen, what is going on [yeah, yeah, yeah], so I don't just get it from my brother.	evaluating an aspect of formulation	2.2.3.	evaluating what happens if she is letting emotion out A2 B1 B3.3 B3.1 B2.1 C1 D2 E1.1 B4.2 B5.2 E2.2
T187	Therapist: Yeah, yeah, yeah, you might get some flak from people	Empathic reflection	2.2.1.	reflects back SF A1 B3.3 C2 D2 E1.2 B4.1 B5.2 E2.2

C187	Client: I get it from my children, I get it from whoever.	adds more detail to SF	2.2.2.1	self-others thematic formulation A2 B3.3 C3.1 C4.1 D2 E1.1 B4.1 B5.2 E2.2
T188	Therapist: Yeah, yeah, people will	Receipt of information	1.1.3.	
C188	Client: If they see me like that, it's like [so you're so] what is wrong with you?	adds example to further illustrate SF	2.2.2.1	SF about attributed own reaction (expression of feeling) as not normal A2 B3.3 C3.1 C4.1 D2 E1.1 B4.1 B5.2 E2.2
T189	Therapist: you're so deeply enrolled in being the master coper that people in your family would have a hard time dealing with it. [mhmm] That's part of it too, it kind of keeps you	Empathic formulation	2.2.1. and 2.2.5	self-interruption and self- others thematic formulation A2 B3.1 B3.3 C3.1 C2 D2 E1.1 B4.2 B5.2 E2.2
C189	Client: it would scare them	evaluating an aspect of formulation	2.2.3.	SF on others reaction A2 B3.3 C7 D2 E1.2 B4.1 B5.2 E2.2
T190	Therapist: it would scare them, so I don't want to scare them so yeah, yeah. So, it feels like a choice. It feels like an important choice to make for the sake of my family and the people around me, people I love, to be able to keep it in a box, to contain that and have that and like with the blankness. Is that right?	empathic repetition Empathic Refocusing/Formulation with fit Q	2.2.1.	self-interruption and self- others thematic formulation A1 B3.3 B3.1 C1 C2 C3.1 D3 E1.2 B4.2 B5.2 E2.2
C190	Client: yeah	confirms formulation	1.2.1.	
T191	Therapist: yeah, how does that sit with you as we just come to the end here?	Fit/focus Q with structuring task (around end of session)	1.1.1 (connected to previous formulation)	data for formulation on impact of self-interruption
C191	Client: It doesn't feel whole	simple SF	2.2.5. self-reflective	SF on part of self A2 B2.2 C3.2 D3 E1.2 B4.1 B5.1 E2.2
T192	Therapist: It doesn't feel whole?	empathic repetition	1.1.2.	reflects back SF
C192	Client: Right.	confirms formulation	1.2.1.	
T193	Therapist: Yeah, yeah. Something is missing. And you're maybe just beginning to think about	Empathic following, Empathic reflection, Process reflection	2.1.1.	self-interruption A1 B2.2 C2 C3.2 D3 E1.2 B4.2 B5.2 E2.2
C193	Client: it's like a blockage or something	adds detail to SF	2.2.5	simple SF of action on the self A2 B2.2 C3.2 D3 E1.2 B4.1 B5.1 E2.2

T194	a) Therapist: a blockage, it feels like a	Empathic repetition	a. 2.1.1.	End of session meaning
	blockage, yeah. / b) Feels like something is blocked in me and something in me would actually like to let more of the feelings out even though my family wouldn't like it and even though I might like it. It feels something is missing, something is blocked. That's what you're basically [right] and in the session today we're kind of leaving you with a sense of this blockage and this sense of conflict. [right] and if you, if you and I were continuing that's what we would work on next, is how to help you find a balance between I mean, coping and being there and supporting the people you love, and giving yourself a little bit of breathing room and space for some of the painful emotions so you can have more sense of vividness and life in your life. [yeah], that's what you would be working on. d) Does that make sense?	Empathic Refocusing/Formulation, client agrees Task structuring around ending Experiential Teaching/Formulation, client agrees Fit Q	b. 3.1.	perspective formulation about self-interruption, cost of it A1 B2.1 B2.2 B3.1 C1 C2 C3.1 D3 E1.2 B4.2 B5.1 E2.1
C194	Client: Yeah.	it fits	12.1	
T195	Therapist: So, I think you've done a really great piece of work here to get, because you probably didn't even imagine you'd get this far with it.	Personal disclosure with conjecture	1.1.3	reflection on the formulation work done
C195	Client: yeah	it fits		
T196	Therapist: Yeah, yeah. You understand why you didn't react. You understand what it means in your life. [yeah], and you don't know what to do with it yet, but that's like another, this is a process, step by step by step, right. So, but you do have a sense of maybe what a next step might be, you know, if you were to take this further. [yeah], does that make sense?	Receipt of information. Process reflection Experiential teaching/formulation, client agrees Fit Q	2.2.4. collaborative clear client reflective tentative/not imposed/checks for fit	Formulation secondary to task closure A1 B1 C1 C2 C3.1 D3 E1.2 B4.2 B5.2 E2.2
C196	Client: yeah.	client agrees	1.2.1	
T197	Therapist: Is it okay for us to stop here?		0.1	
C197	Yes, it is.		0.2	
T198	Therapist: Okay. Thank you so much, Gina, for bringing this. [okay, smiling] That's been really powerful actually.	Personal disclosure	0.1	
C198	Client: Thank you		0.2	
T199	Therapist: Yeah, thank you, okay. So, I'll stop here, good.	Structuring Task/ending	0.1	
C199	Client: okay		0.2	

Appendix F: Full Transcript and Analysis of Session 2

No	Speaking Turn	Therapist Response Mode	Degree of CFW	Characteristics of CFW+ What is Being Formulated
T1	[Dr. Goldman] Okay, hello, Candy!		0.1	
C1	[Candy] Hello!		0.2	
T2	[Dr. Goldman] Thank you for coming in, today [Thank you] - And I'm just wondering what you'd like to focus on for this session we have together?	Personal disclosure [of personal reaction: thank you for coming in] followed by Exploratory Q	1.1.1.	Gathering data towards formulation, i.e. inviting client to share their presenting problems
C2	[Candy] Well, I realised as I got older, that I have a lot of issues with the way my mom treated me when I was younger, [mhmm] and it's carried over a lot into my adult life. And now that I'm a mom, well, I mean, I've been a mom, but my three oldest girls, especially, they're in that critical stage where self-image and stuff, and so I try to be opposite of what my mom is, but it's hard because I know it's more of like Dowhat-I-say-and-not-what-I-do [Right] kind of thing, so I say, 'Don't worry, you're beautiful how you are', and then, when it's time for me and my husband to go out or something, I'm like, "Oh, I'm ugly, I'm too fat," and then they see that and I just wish I could get rid of that.		3.2.	Troubles telling on how criticism from mum led to self-criticism, impact on own daughters. A2 B1, B3.1 B3.2 B3.3 C1, C3.2, E1.2, B4.2, B5.1, E2.1
Т3	[Dr. Goldman] Right, find a different way to feel [Yeah, to feel] - about yourself And you're saying like, I resolved inside myself not to do this the way she did it because it really hurt, it was very painful [Right, yes, yes, yes] for you growing up, it sounds like. But then, you found it hard to somehow let go of all that stuff, it's still there.	Empathic reflection, with formulation, Empathic Conjecture	3.1.	Collaborative, building on client SF, bringing something new (it really hurt, it was very painful, found it hard to let go); reflecting on the clients difficulties linking them to key emotions reflecting towards task at the end but F is not secondary to that, PM emotion A1, B2.3 B3.1 B3.3 C1, D1, E1.2, B4.2, B5.1, E2.1
C3.1a	[Candy]a) Right, even though I had like my husband and friends, and I have a great support system of them telling me that, "You're wrong. You're crazy. "Don't think like that." All through my adult life, but still, it's there.	a) adding example that illustrates formulation [that it's hard to let go]	2.2.2.1	narrative; consolidating A2, B3.1 B3.3 B2.3 (it's still there) C1, C3.1, C4.1, E1.2, B4.2, E2.2
C3.1b	b) It's like, that's the heaviest. Like everything else is nice, but it goes away [Right.] It doesn't stick with me. Her words stick with me The things she said.	b) client elaborates on previous SF	3.2.	troubles telling on how mum's criticism sticks and feels heaviest (pointing to the pain) A2, B1, B2.2, B2.3 B3.3 C1, C3.2, E1.2, B4.2, B5.1, E2.1
T4	[Dr. Goldman] The things she said? - [Right.]-So she said things to you that were really hurtful and damaging, sounds like they've kind of gone inside and sort of wounded you [yeah, right, yes] And they remained there, almost like wounds [Yes.] - So, even if other people say, "Oh, no, that's not true." [Right] you're still left with this voice that says like what, what kind of stuff would she say?	Empathic Repetition, followed by empathic reflection and formulation with conjecture exploratory Q	3.1	Collaborative, building on client SF, tentative, bringing something new (damaging, wounded you) linking client's difficulties to key emotions. A1, B2.2 B2.3 B3.3 C1, C2, C3.1, E1.2, B4.2, B5.1, E2.1

C4	[Candy]Well, like she would always say, I mean, since I can remember, she'd always be like, "Oh, you're so big, you're so fat, you're so slow, you're so clumsy, oh, your hair doesn't look right, or if I wear makeup, when I was becoming a preteen or something, all my friends were wearing makeup so, when I would try, "Oh, my gosh, you look like a street walker." (laughter) And I mean, so really, maybe sometimes I did; I don't know, but I don't think so because I didn't really wear much. [Right.] - But just things that I would never imagine saying that to my daughter. I would be like, "Well, maybe you can tone it down a little bit," or "That colour looks nice on you," something like that.	Client adds examples/narrative that illustrates formulation	2.2.2.1	client implicit formulation of [secondary reactive] blame of mum (I would never imagine saying that to my daughter) narrative manner consolidating by exemplifying specificity A2, B3.3 C1, C3.1, C4.1, E1.1, B4.2, B5.1, E2.2
T5	[Dr. Goldman] So, you're very aware of this, it sounds like [Yeah] And it's like, "I really don't want to repeat this pattern." [Right] Right? So, you don't [Exactly.] do that with your daughters	Empathic reflection, Emp. repetition	2.1.1. 2.1.5	recycled F, reflecting back client SF; not linking to key emotions A1, B3.2 B3.3 C1, C3.1, E1.2, B4.2, B5.2, E2.2
C5	[Candy] I don't; no, I don't. And I do have two daughters that are overweight, right now, for their age. One's 17 and one's 15, and I've never told them that. Like, even though it may be true, like my 17-year-old isn't very physical, she isn't very athletic. [Right] but yet, I would never tell her that. [Right], she's played softball, she's tried for tennis, and for various sports, bowling. I don't ever say, I'll just say, "Do your best." [Right] "Do your best," and "It's all about having fun," and "You can meet new people," and things like that. She wanted to go out for soccer one time and I'm like, "Oh," in my head I'm like, "Ooh," but I was all for it. I'm like, "Go, try out. Do it. "It's a new experience. That's what high school's about."	Client adds examples/narrative that illustrates formulation	2.2.2.1	narrative manner consolidating by exemplifying specificity A2, B3.2 C1, C3.1, C4.1, E1.2, B4.2, B5.1, E2.2
Т6	[Dr. Goldman] You're very encouraging, very supportive.	Empathic reflection	2.1.1. 2.1.3	reflecting back client SF by abstracting A1, B3.2 C2, C3.1, E1.2, E1.1, B5.2, E2.2
C6	[Candy]a) Yes, whereas, if that had been me, my mother would be like, "Are you kidding? "How are you gonna run up and down the fields? "You can't even go up the stairs." b) And in retrospect, when I think back, it wasn't even true, the things that she said. I know they weren't true. [Right] Because she really didn't know that much about me, c) but yet they still stick with me, which is	a. adding example that illustrates F b) elaborates SF (contesting mum's evaluation and how well she knew her) c) recycled (they still stick with me;	2.2.2.1 2.2.3. 2.2.1.	consolidating by exemplifying specificity evaluating an aspect of F repeated A2, B1 (still they stick) B3.1 B3.3 C2, C3.1, C4.1, C7, E1.2, B4.2, B5.2, E2.2
Т7	[Dr. Goldman] Yeah, so it's like you can refute them in your head, right? Yeah And say, "That isn't even true," and "What was she even talking about?"	Process reflection	2.1.1.	reflecting back client SF by abstracting A1, B3.1 C2, C3.1, E1.2 B4.2, B5.2, E2.2
C7	[Candy] Right, because I was like, "She doesn't even know what I would do." She was never, she wasn't involved, I guess you would say, as far as school sports.		2.2.1 2.2.2.1	recycled, then adding example (she wasn't there), consolidating A2, B1, B3.3 C1, C3.1, C4.1, E1.2, B4.2, B5.2, E2.2

Т8	[Dr. Goldman] Oh, I see, she was more at a distance. [Right] just making comments. [Right] but very negative comments. [Right] and very hurtful comments [yes] that you're saying are still there. [Right.] You almost like, even hear these things. [Right.] Like when you talk about it you can can almost hear your mother's voice when you're saying these things, like she's	Empathic reflection then process reflection	2.1.4.	task F, first reflecting back client F then reflecting towards marker A1, B3.3 C1, C3.1, D1, E1.1, B4.2, B5.2, E2.2
C8	[Candy] Oh, yeah, I can see her.	confirming therapist F	1.2.1	
Т9	[Dr. Goldman] You can see her?	empathic repetition	0.1	
C9	[Candy] Yeah, I'm seeing her, and it kills me because I have five sisters and they've all dealt with the same thing, the whole put-down on the self-image. And then, when I look back at my high school pictures and stuff, I'm like, "Oh, my gosh, I was not! "I was not overweight. I was not fat." - [Really?] - I wasn't, you know, - Wow a stick, but I wasn't overweight.	evaluation of an aspect of formulation (disputing mum's view of her)	2.2.3.	A2, B1, B3.1 B3.2 C1, C3.2, C7, E1.2, B4.2, B5.1, E2.2
T10	[Dr. Goldman] Yeah, so almost like appreciating yourself, in retrospect.	Process reflection	2.1.1. 2.1.3	reflecting back client SF by abstracting A1, B3.1 C2, C3.1, E1.2, B4.1, B5.2, E2.2
C10	[Candy] but I'm like, "But now I am." (laughter) And I can't help, we all think, my sisters, we're all like, did she do, is it because we just felt so little self-worth that we just let ourselves go that way because we're like, "Well, we're that anyway."	elaborating SF of Primary maladaptive low self-worth and implicit blame (sec reactive) of mum	3.2.	A2, B1, B2.3, B3.1 C1, C3.2, C7, E1.2, B4.2, B5.1, E2.1
T11	[Dr. Goldman] Yeah, right, like, "Did this really do some kind of damage that we can't [Yeah] that's very hard to get over at this point, right?	Empathic reflection	2.1.1	recycled F, reflecting back client SF. A1, B1, B3.3 C2, C3.1, C7, E1.2, B4.2, B5.2, E2.2
C11	[Candy]Yeah. Because I can remember thinking, "Well, I'm that anyway," so, even when I wasn't, and my husband would always tell me, "No you're not. You're crazy. "You're perfect. You're beautiful." This, that, and the other, but I'm like, "Oh, you're nuts, I'm so fat. "You have such a fat wife." And I go back to the pictures and I'm like, "Oh, my God, I was cute!" I'm like, "I was cute. You were lucky to have me." [Yeah] Now, I'm like, "Uh So you're maybe now it's true." (laughter)	adding examples to consolidate previous formulation evaluating an aspect of formulation, repeat of C9	2.2.2.1 2.2.3and 2.2.1	narrative; consolidating A2, B3.1 B3.3 C1, C3.1, C4.1, C7, E1.2, B4.2, B5.2, E2.2 recycled evaluative
T12	[Dr. Goldman] All right, so you struggle with it Yeah Because you kind of recognise that, looking back, that that was not even, she was just always finding mean things and [Yes] And picking up on them - I mean - and it's specifically around the weight that you're saying.	Empathic formulation (reflecting on internal struggle) empathic reflection	2.1.4.	reflecting towards internal struggle marker, then UFB marker A1, B1, B3.1 B3.3 C1, C2, C3.2 D1 E1.1 B4.2 B5.2 E2.2
C12	[Candy] Oh yes. Even when I was pregnant, it was never like, "Oh, you, it's just simple things that- [Like you're so beautiful]- mothers and daughters interact like, you're carrying the baby so good. And, oh, your skins really cleared up. I mean, just simple things like that. With my mom, it was, "Oh, my gosh, "your butt's getting so wide," or "Oh, your nose is swollen up," and "You don't really look good pregnant," and just comments like that, never anything good.	adding examples to confirm therapist formulation [on mum's negative comments about weight]	2.2.2.1	narrative; consolidating by exemplifying previous therapist formulation A2 B1 B3.3 C1 C4.1 E1.2 B4.2 B5.1 E2.2

T13	[Dr. Goldman] Nothing positive coming [Never] And you're saying it's really taken its toll, like it's really there [Oh yeah] and this hurts now [oh yeah] and it's painful, still, it's almost like it's a voice in you now.	empathic formulation followed by process reflections	2.1.4.	reflecting towards UFB marker, formulation is implicit; also recycled. A1, B1, B2.1 B2.3 B3.1 B3.3 C1, D1 E1.1 B4.2 B5.2 E2.2
C13	[Candy] Right. Because, I mean, a hundred people could tell me like I look, I have a cute outfit on, or my hair looks good, and I'm like, "Mm-hmm. Thanks." - [But it doesn't stick] - And I'll go in the bathroom and I'm like, "Oh, my gosh, you're so ugly." - [Wow.] - I mean, yeah, to this day.	adding example to confirm therapist formulation [that it's a voice inside her now]	2.2.2.1	narrative; consolidating. A2, B1, B3.1 B3.3 C1, C3.1, C4.1, E1.2, B4.2, B5.2, E2.2
T14	[Dr. Goldman] It's hard, right	empathic affirmation of vulnerability	1.1.3	
C14	[Candy] And it makes me angry because I want to just wash that away and be smarter than that, but	making explicit previously unspoken schematic content	3.2.	SF of secondary reactive anger A2, B1, B2.3 B3.1 C2 (want to wash that away) E1.2, B4.2, B5.1, E2.1
T15	[Dr. Goldman] It makes you angry, like, at your mother, or	exploratory reflection	1.1.1.	Gathering data towards formulation, i.e. inviting specificity about anger
C15	[Candy] At my mother and at myself.	F relevant detail	1.2.2.	
T16	[Dr. Goldman] Just angry that you are still with it?	exploratory Q	1.1.1	Gathering data towards formulation, i.e. inviting more specificity about anger
C16	[Candy] Yeah, yeah. [I see.] - And that I can't let it go.	F relevant detail	1.2.2.	anger at self
T17	[Dr. Goldman] Right, why can't I just push that nice out?	empathic reflection	1.1.1	gathering data towards F
C17	[Candy] Right. Why can't I listen to everybody else instead of that one voice that.	F relevant detail	1.2.2.	
T18	[Dr. Goldman] So, it's sort of like a voice that comes from your mother and it's also, it sounds like, in you, too, correct? - [Yeah] - I mean, does that kind of fit? - Yeah Like you struggle with, it's almost like, she kind of left this mark- [Yeah, she told me it, right]. and you internalise-[Right] And you brought it inside.	empathic formulation	2.1. 4.	Task F: formulating the marker is the main element, implicit, secondary F; collaborative, checking for fit, tentative (kind of, sort of, correct?); also recycled A1, B1, B2.2 B3.1 B3.3 C1, C3.1 D1 E1.1 B4.2 B5.2 E2.2
C18	[Candy] Exactly. Like, she told me that and I took it as truth and no matter what, that's truth, so	recycled self- formulation, confirming therapist F T18	2.2.1	A2, B3.1 B3.3 C1 C3.1 C4.1 E1.2 B4.2 B5.2 E2.2
T19	[Dr. Goldman] Okay, so, I mean, I don't know if you know, or have heard this, but I sometimes work with these kinds of issues in chairs, and we have a dialogue between different parts. It sounds like there really are these different parts in you, and there's this part that kind of, is very hard on yourself, and says these mean things and then, you when you look in the mirror, you're so ugly and you're saying it really is echoed in the voice of your mother. So, I'm wondering how you would feel about maybe having a dialogue, with your mother, in imagination, bring her here, so you could tell her some of these things and what you feel about these things. And I could help you, I mean, if you're willing to try it. I could help you.	Process disclosure with structuring task Experiential formulation Structuring Task: proposing task	2.1.4.	Task F, proposing the task, reflective/abstracting, formulating action on the self and self-other theme A1 B3.1 B3.3 C1, C2, D1 E1.1 B4.2 B5.2 E2.2
C20	[Candy] Um, yeah, I, ooh, I would never really say it to her, but (laughter) -	response in relation to therapist task F/proposing task	1.2.1	SF of self-interruption

T21	[Dr. Goldman] You wouldn't want to really say those things to her.	experiential teaching	1.1.1.	
C21	[Candy] I mean, because, yeah, but I wonder what it'd feel like to do it.		0.2	
T22	[Dr. Goldman] You're curious?	Exploratory Q	1.1.1.	
C22	[Candy] Yeah, because I just don't talk to my mom about things like that.		1.2.2.	
T23	[Dr. Goldman] You don't?	empathic repetition/question	0.1	
C23	[Candy]No		0.2	
Т24	[Dr. Goldman] Right. And you wouldn't have to say these things to her in real life [All right.] - Because it's sort of like we were talking before, it's like now, it's almost like this is the mother in your head, right? - [Right.] It's not really that even, you're saying, I don't know, in real life you might say these things, you might not; and you can decide, if you want to. But really, it's about, between you and you [Right, right.] - In a sense, so, it's like you wouldn't have to say these things to her in real life, but maybe you could say something here to try to get at some of those criticisms because it sounds like she was very hard on you and very critical, and that you want to fight back. And this could maybe help you to fight back, inside of you.	Experiential Teaching experiential formulation	2.1.4.	Task F, rationale for task A1 B3.1 B3.3 C1, C2, D1 E1.1 B4.2 B5.2 E2.2 abstracting/reflecting on self-self/self-other relationship with mum
C24	[Candy] Right, right.	confirming therapist F	1.2.1	
T25	[Dr. Goldman] You want to try it?		0.1	
C25	[Candy] Okay		0.2	
T26	[Dr. Goldman] Okay, and I'll facilitate you.		0.1	
C26	[Candy] You'd really have to		0.2	
T27	[Dr. Goldman] What?		0.1	
C27	[Candy] I said, you really have to facilitate because I'm an amateur.		0.2	
T28	[Dr. Goldman] Okay, don't worry, I'm gonna sit here [Okay.] - And what we're gonna do is, we're gonna put your mother here. [Okay] Okay, and imagine, she's not here, but just try to get a picture of her and what, first of all, what happens when you try to get a picture of her?	Structuring task, set up and offering encouragement for task engagement exploratory Q	0.1.	structuring the task is not part of F gathering data towards F, leaning towards the hurt/key emotions/evocative
C28	[Candy] she's glaring at me.		1.2.2	
T29	[Dr. Goldman] She's glaring at you? (laughter)	empathic repetition	1.1.1.	
C29	[Candy] Yeah, like with her eyebrow cocked, like, "What?" - Like, "What, now?"		1.2.2.	
T30	[Dr. Goldman] Like what now! [Yeah, yes] Okay. And what happens inside of you when you get that cocked eyebrow?	empathic repetition followed by exploratory Q	1.1.1.	gathering data towards F, leaning towards the hurt/key emotions
C3.10	[Candy] Ah, like nervous. Like, "Why can't you just be nice?"	secondary SF implicit to task implementation,	2.2.4	SF of anxiety (nervous) A2, B2.1 B3.3 C1 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T31	[Dr. Goldman] That's you saying that to her Yeah, to her Tell her. Why can't you just be nice?	Structuring task, creating context and feeding lines	1.1.3.	gathering data towards F

C3.11	[Candy] Why can't you just be nice? And I know you care, but you have such a hard time showing that you care.	Client narrative detail drawing on schematic memory that implies an unstated formulation	2.2.2.2 and 2.2.4	SF of image of mum, implicit F A2, B3.3 C1 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T32	[Dr. Goldman] a) So, it's like, "I need to know you care." - [Right] - Can you say that to her? b) What would happen if you tried to say that to her?	Conjecture in context of structuring task/feeding lines; exploratory Q	a) 2.1.4 b) 1.1.1.	a) conjecture about need A2, B2.2 B3.2 C2 C3.1 D2 E1.1 B4.1 B5.2 E2.2 b) gathering data towards F
C3.12	[Candy] (loud sigh) - I don't know.	expressing emotion being formulated	1.2.3	non-verbal cue (sigh)
T33	[Dr. Goldman] It's hard to say that to her.	empathic affirmation/conjecture	1.1.1.	
C3.13	[Candy] It is. kind of like, internally, roll my eyes, like, this is, you know, I don't know		1.2.2	consolidating;
T34	[Dr Goldman] Like I wouldn't say this to her.	process reflection/with conjecture	1.1.1.	conjectured narrative detail/reflecting towards self- interruption
C3.14	[Candy] No, I can't even imagine what her		1.2.2.	
T35	[Dr. Goldman] I don't want to be so vulnerable [Right] To her. [Yeah, yeah.] - Right?	empathic conjecture	2.1.2.2. also 2.1.3	conjectured narrative detail leaning towards the pain A2 B1 B2.1 B3.2 C2 C3.2 D2 E1.2 B4.1 B5.1 E2.2
C3.15	[Candy] Because we joke around with it, like our sisters and stuff, we'll go like, "Mom, you know, "this is why I do this, because you did this to me," and things like that, and she gets mad and angry, and I guess I kind of start feeling sorry for her a little bit. Because she feels like we're attacking her. I don't think it's like we mean to attack her, but we try to take it out in humor because we meet once a month for dinner and eventually, somebody brings something up that has hurt them in the past, with her. And I do. I always end up realizing that, now, that I always end up feeling sorry for her. And I'm always the one that says, "Mom, you know, we're not trying to pick on you," or "Mom, we're not angry at you, "it's just what it was back then, and you know, "but you were pretty rotten to us." (laughter) [Right, right, it's like]- But then, I'll laugh, and then, it's kind of like saying	adding example to confirm therapist formulation [that instead of being vulnerable she ends up laughing it off]	2.2.2.1	client self formulates (adds example of) her interruption of emotion to mum, not showing vulnerability to mum by laughing it off and reassuring mum it's not there A2 B2.3 B3.1 B3.2 C1 C3.2 C4.1 D2 E1.1 B4.2 B5.1 E2.2
Т36	[Dr. Goldman] It's like, sort of diffuse it	process reflection	2.1.1. 2.1.3	recycled F, reflecting back client SF. also simple, single element F A1 B3.2 C2 C3.1 D2 E1.2 B4.1 B5.2 E2.2
C3.16	[Candy] I'm just joking but I'm serious		2.2.1.	recycled self F A2 B3.2 C2 C3.1 D2 E1.2 B4.2 B5.2 E2.2
T37	[Dr. Goldman] Yeah, because I guess when you say it to her you start to feel sorry for her, as you said.	empathic reflection	2.1.1.	recycled; collaborative, tentative (I guess; as you said); abstracting A1 B1 B3.2 C1 C3.1 D2 E1.2 B4.2 B5.2 E2.2
C3.17	[Candy] I do, I do	confirming previous F	1.2.1	
T38	[Dr. Goldman] a) But that doesn't mean you don't mean it, right? - [Right.] - I guess you do kind of have pretty strong feelings toward her [Yes.] - b) Well, maybe try this. If you could just say to her, "It's hard for me to tell you this, because I feel bad saying it, but some of the things you said to me, they really damaged me, they really hurt me." I don't know if that fits, but I	empathic conjecture/with fit Q empathic reflection process suggestion/feeling lines	2.1.2.2 2.1.4.	a. conjectured detail b. formulation is secondary to task implementation (chair work) A1 B1 B2.1 B3.2 B3.3 C1 C2 D2 E1.1 for b and E1.2 for a B4.2 B5.1 E2.2

C3.18	[Candy] Yes, yeah okay	confirming the fit	1.2.1.	
T39	[Dr. Goldman] It's hard to do	Process reflection	1.1.1.	
C3.19	[Candy] Yeah I don't want to hurt your feelings, [yes] but a lot of the things that you said to me when I was young, and a teenager, a young adult, even to this day, really hurts my feelings and it makes me feel bad about myself. [Yeah], and it makes me feel like asking you like, "Why can't you just show love, show positive, show support?"	reflects back the line therapist suggested	2.2.1. and 2.2.4	recycled; formulating hurt feelings in relation to mum and starts to (implicitly) reflect towards the need, but in a blaming way A2 B1 B2.1 B2.2 B3.3 C1 C3.1 D2 E1.1 B4.2 B5.2 E2.2
T40	[Dr. Goldman] So, tell her, "I need you to" This is what brings the tears, right? Mm-hmm. This feeling of like, "I needed love, I needed support."	process suggestions/feeling lines with process reflection and conjecture	2.1.2.2	conjecture about tears about unmet need A1 B1 B2.2 B3.2 B3.3 C1 C3.2 D2 E1.2 B4.2 B5.1 E2.2
C3.20	[Candy] Yeah, because the only time I ever heard you ever say anything positive about me was if I was coming in the house and you didn't hear me and you were talking to somebody else, or talking to them on the phone, so I'd overhear it. [Sure, sure] I distinctly remember one incident of telling her, telling you that, I had gotten voted to be head of the class for something in college, and I was so excited and so nervous about it, and when I told you, you were like, "Oh, how are you gonna do that? That's a lot of responsibility. You're not organised enough."	client agrees and gives examples	2.2.2.1	narrative, consolidating of mum not meeting her needs for support and love A2 B1 B3.3 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.2 E2.2
T41	[Dr. Goldman] So she put you down.	process reflection (re. mum)	2.1.3 also 2.1.5	abstract, simple F, single element A1 B1 B3.3 C2 C3.1 D2 E1.2 B4.1 B5.1 E2.2
C3.21	[Candy] Right. But then, later that afternoon and I had come back from somewhere and I was coming up the stairs and I heard you talking to my grandfather on the phone, and "Oh, Candy's doing great, and she's doing this, and she's getting As." But whenever I would show it to her, it was always like, "oh, well, it's good. I don't know how you're doing that. You're not studying, it doesn't seem like." [Right, so] - Things like that. So, it was never like, "Good, Candy, I'm so proud of you," and	Client adds more examples/narrative that illustrates formulation	2.2.2.1	narrative, consolidating of mum not meeting her needs for support and love A2 B1 B3.3 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.2 E2.2
T42	[Dr. Goldman] - So, it's like I I needed that, I needed that.	Process suggestion/feeding lines	1.1.1.	formulation relevant work, suggesting client expresses her need directly
C3.22	[Candy] "I needed that." - I did.		1.2.2	
T43	[Dr. Goldman] Tell her what you needed. I needed to feel you were proud of me	Process suggestion/feeding lines	1.1.1.	
C3.23	[Candy] that you saw me	elaborating the unmet need	2.2.4 2.2.5	formulating the need as part of task implementation A2 B2.2 B3.2 C3.2 D2 E1.1 B4.1 B5.1 E2.2
T44	[Dr. Goldman] Uh huh, yes, yes. And that's painful, right, to I needed to feel that you saw me. Tell her about the pain, tell her about the tears. It's very painful.	empathic repetition, process reflection with process suggestion/feeding lines done in evocative manner with empathic affirmation	2.1.1 2.1.4.	formulation is secondary to task implementation, full expression of emotion A1B1 B2.1 B3.2 B3.3 C1 C3.1 D2 E1.1 B4.2 B5.2 E2.2

C3.24	[Candy] Um, just um [There's Kleenex, here. (laughter)] - I just needed to not always be lumped together with everybody else, I don't, Tim, my brother, who's close to me in age, he's the closest sibling in age, he was opposite of me in schooling. He had learning disabilities, and just hard, bad grades, he got held back a year, which put him in my class, and yet, I was a straight-A student and never got in trouble, never ever, my whole school career, and yet, whenever it was talked about, how all these stupid kids and they're always messing up at school, and it was never, "Well, Candy's doing great. I'm so proud of you, Candy, for doing good." Or, it was just, it was all concentrated on the downside. And well, actually, Mom, you uplifted Tim because he was good in gym and you felt that I wasn't, even though you never saw me in gym, you just assumed that	client adds examples of what was painful	2.2.2.1	narrative, consolidating, reflecting towards the unmet need to be seen, acknowledged as her by mum A2 B1 B2.2 B3.3 C1 C3.1 C4.1 D2 E1.1 E1.2 (the bit in bold) B4.2 B5.1 (bit in bold) B5.2 E2.2
T45	[Dr. Goldman] Right So, "You never lifted me up," [Right] "You never supported me, and I needed you." [Yeah.] "I needed you to support me." Can you tell her? Tell her what you need.	Process suggestion/feeding lines	2.1.1. and 2.1.4	recycled, abstracting A1 B1 B2.2 B3.2 B3.3 C1 C2 D2 E1.1 E1.2 B4.2 B5.2 E2.2
C3.25	[Candy] loud sigh	client expresses emotion being formulated	1.2.3	response to therapist process suggestion is micro marker of emotional exp.
T46	[Dr. Goldman] What happens? You sigh, right? - [Yeah.] - It's hard to tell her what you need.	process reflection with conjecture	1.1.1	therapist notices the self-interruption in expressing her needs
C3.26	[Candy] Yeah, right.	confirming therapist F	1.2.1	
T47	[Dr. Goldman] Because it's somehow sad?	conjecture	2.1.2.2. 2.1.3	formulating sadness at loss (not having needs met) A1 B2.2 C3.2 D2 E1.2 B4.1 B5.1 E2.2
C3.27	[Candy] Um, it is sad, and I don't, like, there's this part of me that just says, "I'm angry. I don't need you." [Okay.] And um, or [That you are] When I think about it, I'll tell myself, I know who I am. But yeah	making explicit previously unspoken schematic content	3.2.	client SF of anger about the sadness A2 B2.3 B3.1 B3.2 C2 C3.2 D2 E1.2 B4.2 B5.1 E2.1
T48	[Dr. Goldman] It's hard to say to her	process reflection	1. 1.3	minimal response in relation to F
C3.28	[Candy] Right. (laughs) - Yeah, right		0.2	
T49	[Dr. Goldman] I guess, there's also, like you're saying, a lot of resentment that you never did see, right? - [Right. Right.] - So, what happens when you say to her, like, "I know, I know who I am." Could you say that to her? Like, I know who I am? - [Yeah.] Because you sound, like when you said that there was this conviction [Yeah].	Empathic reflection, followed by exploratory Q, process suggestion/feeding lines; process reflection	2.1.4.	formulation is implicit, secondary to task implementation here A1 B1 B2.2 B3.2 B3.1 (I know who I am) C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C3.29	[Candy] It's like it's (sniffing) - It's because I do. I don't know. I really can't understand it. Like as an adult, I know I'm a good mom. And I know I'm a good wife. And I know I'm a good teacher. But there's, and it angers me that I need her to tell me that I am, and um	evaluating an aspect of formulation	2.2.3.	evaluating/formulating own image of herself which is different from mum's and anger at part of self that needs to hear it from mum A2 B1 B3.1 B3.2 C1 C7 D2 E1.2 B4.2 B5.1 E2.2
T50	[Dr. Goldman] Tell her about the anger there. Tell her about, "I'm so angry with you, "that you never gave me what I really needed. "I've suffered with this now, for a long time," right? [Yeah], It's like, you fight to hold onto what you do know.	process suggestion/feeding lines process reflection	2.1.4.	formulation is secondary to task implementation, expression of emotion, directing anger at mum rather than self A1 B2.2 B3.1 B3.2 B3.3 C2 C3.1 D2 E1.1 B4.2 B5.1 E2.2

C4.10	[Candy] I'm angry at you because you never acknowledged my triumphs. [Yeah], you just picked apart what I might have failed, or I wouldn't even say, sometimes, I wouldn't have failed, I just wasn't what you thought I should've achieved. [Right] and so, because I didn't achieve your level, - [Right] It wasn't good.	SF is secondary to task implementation	2.2.4. and 2.2.1	formulating anger at mum for the specific need for acknowledgement not met A2 B2.2 B3.2 B3.3 C1 C3.1 D2 E1.1 B4.2 B5.2 E2.2
T51	[Dr. Goldman] Yeah, so, "I needed you "to acknowledge my triumphs," right? "And to acknowledge my successes." [Yeah] "And to see how hard "I worked, and to value me for me, as" [Right, right] Okay, so tell her what (loud sigh) It's hard to say these things, right, but it's like you really feel them.	Process suggestion/feeding lines process reflection/empathic refocusing	2.1.4.	formulating unmet needs A1 B2.1 B3.2 B3.3 C2 3 D2 E1.1 B4.2 B5.2 E2.2
C4.11	[Candy] Um, I need you to see me as an individual [Yes] And not, "Oh, you're just "like your sister, Connie, or Oh, you're just like your brother, oh, you're just like your dad. You always tell me that I'm like somebody else. And it's always in a down way, and So, I need to know that I want to see, I want you to tell me that (heavy sigh) that I'm me [Yeah]. That I make my own mistakes, and I make my own achievements [Yeah] And it's, I did it, not anyone else. [Right, right] I didn't burn dinner because I cooked like somebody, or I can't cook because I, when I first started out, I did frozen dinners. Who doesn't? You didn't teach me how to cook. (laughter) So, when I left home, that's all I knew how to do. Now, I make everything from scratch, but all you talk about it, that I used to cook frozen foods, and that was 20 years ago. (laughter) -	client adding examples of mum not seeing her as an individual, not meeting her needs for acknowledgement as her.	2.2.2.1	narrative, consolidating, A1 B3.3 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.1 E2.2
T52	[Dr. Goldman] Right, so, it's like, "I need you to recognise me, and I need you to see that good in me." Right? - [Right] Tell her this I need you to see the good in me.	Process suggestion/feeding lines	2.1.1. and 2.1.4	A1 B2.2 B3.2 C2 C3.1 D2 E1.1 B4.2 B5.2 E2.2
C4.12	[Candy] I need you to say the good in me [Yeah], "I need to hear it." - I need to hear the words, "You're doing a good job."	Secondary self- formulation, part of task implementation	2.2.4	elaborating unmet need for acknowledgement, how mum can show it A2 B2.2 B3.2 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T53	[Dr. Goldman] - Come over here, then, if you will. Move to this chair. All right? Okay, so, she's saying, you're your mother, right? [Okay], so now, Candy's saying, "I need you to see the good in me "and I need you to see what I've done. "I need you to focus on the positive. "I needed to hear; I need you to really see me for me." What, as your mother, how do you respond to what Candy's, can you give that to her?	task structuring/ then Process suggestion/feeding lines Exploratory Q	1.1.1	
C4.13	[Candy] - I don't know. Do I say what I want to say, or what I want to hear, - Say what you or do I say what I think my mother would say? (laughter)		1.2.1.	
T54	[Dr. Goldman] Well, of course, it's what you want to hear, but I guess, what do you imagine she would say? And it's not what she'd actually say, but what do you imagine she would say?	experiential teaching related to task structuring	1.1.1.	

C4.14	[Candy] What I imagine she would say. "Well, you are a good mother, Candy, of course you are." And, but then she'd back it up with something negative [Right] "But you shouldn't have "had five kids," and "it's too hard," and "Leslie's sick," and "What are you guys gonna do? "You are a good wife, but you should be "getting up and making him breakfast "before he goes to work, and you should be "making sure he has a lunch five days a week," and	adding examples of what mum would say	2.2.2.1	narrative manner consolidating by exemplifying A2, B3.3 C1, C3.1, C4.1, D2 E1.1, B4.2, B5.2, E2.2
T55	[Dr. Goldman] So, the message is, what? Like first she says, you know you are good- [Telling me what I want] - Right, but then she'll - [But then she'll tear it down.] - Right, so she tears you down.	process reflection (on Candy as mum, in empty chair)	2.1.1. 2.1.5 2.1.4	reflecting back client SF by abstracting A1, B3.3 C2, C3.1, D2 E1.1 B4.2, B5.1, E2.2
C4.15	[Candy] Telling me what she doesn't even know. (laughter) So, she doesn't know if I cook my husband dinner in the morning, [Right] She doesn't know if I pack him a lunch every day, [right] but she'll assume it.	evaluating an aspect of formulation (I give mum's opinion so much weight, but she doesn't even know what I do)	2.2.3	implicit (blame of mum), establishing herself as her own source of evaluation A2 B3.3 C1 C7 D2 E1.2 B4.2 B5.1 E2.2
T56	[Dr. Goldman] So, it's this thing about always finding the negative. [Right] and always seeing the negative of Candy. [Right] So, what I want you to do is be her, finding the negative, like what you just did, all right? Almost like the message is, you're not good enough, or you can't do anything right, it doesn't matter what you do, you're not. [Right] Like this thing of in high school, when she was like, "How you gonna do that?	process reflection (on mum) process suggestion/structuring task	2.1.4. and 2.1.2.1.	formulation is secondary to task implementation; therapist adding examples that illustrate F and encouraging client to find more specific examples; evocative A1 B3.3 C2 C4.1 C1 D2 E1.1 B4.2 B5.1 E2.2
C4.16	[Candy] Well, Candy, how could you, [How could you be on the team] Right. How could you play softball? That's one thing I always wanted to play. You couldn't even run. You're slow as molasses. You walk like you're walking through cement.	adding examples that illustrate F	2.2.2.1	A2 B3.3 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.2 E2.2
T57	[Dr. Goldman] Right, so what is it you're doing to her right now? It's like, you're putting her down. Your kind of deriding her, making her feel small [Right]. Is that? [Yes] Okay, so do that some more. Do what you do. And what she actually did. "You're too slow. You're slow as molasses." So, there's this, and you're sort of, you make this face, and your shoulder goes when you do that. (laughter) Right? I don't know if you're aware of it [No (laughs)] But I mean, it's like I get this real picture of how she was and how she is, right? - [Yes] Do it some more. Do what she does because this is how we're gonna get some of these feelings.	process reflection (on mum) process suggestions process reflection more process suggestions and experiential teaching	2.1.4.	reflecting back client SF by abstracting, part of task implementation evocative A1 B3.3 C2 C3.1 D2 E1.1 B4.2 B5.2 E2.2
C4.17	[Candy] Well, she'd always say, "Oh gosh, you have the Massey butt." - [The Massey butt?] - Yeah, it just like, family joke because my dad had a big bottom.	adding example to consolidate F	2.2.2.1	A2 B3.3 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.2 E2.2
T58	[Dr. Goldman] Okay But I mean, it Yeah, but still, it's about your body, right?	conjecture with fit Q	0.1	
C4.18	[Candy] It didn't matter if you had it or not, she just said that just to make you feel		1.2.2	
T59	[Dr Goldman] Oh, God, you have the Massey butt."	empathic repetition	0.1	

C4.19	[Candy] Right. "You didn't get that from my side		1.2.1	
	of the family." - And just			
Т60	[Dr Goldman] You didn't get that from me." - [Right] So, what's the message?		1.1.1	
C4.20	[Candy] Like you're just not, you're not good	simple single element F	2.2.5	SF of PM shame A2 B2.3 B3.1 C2 D3 E1.2 B4.1 B5.1 E2.2
T61	[Dr. Goldman] You're not good	empathic repetition	1.1.1.	
C4.21	[Candy] It's not good, no matter what you do. Yeah, okay, you get straight As, "but you're not the top 10, "you're not the top 10 students. "Why can't you do more, why can't you do better.	client adds example to illustrate F	2.2.2.1	A2 B3.3 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.2 E2.2
T62	[Dr. Goldman] So you're just not good enough as you are, you're never enough, you could always be better [right] Tell her	process suggestion/ feeding lines	211.1.	
C4.22	[Candy] You could always do better [yeah and there's like this] no matter how hard you try, it's just not enough		1.2.2	
T63	[Dr. Goldman] Yeah, you're just not enough. Yeah. Okay. Switch back. So now, what happens from inside of you when you get this, "You're just not enough. "You're just, no matter what you do, it's not enough." There's this real put-down, right? There's this real like negative, like, "You're just not enough." Candy, what do you feel inside when you get this?	process suggestion/feeding lines; structuring task exploratory Q empathic formulation exploratory Q	2.1.4. 2.1.1	formulation is secondary to task implementation, formulation of PM shame in connection to mum's criticism A1 B3.3 C2 D2 E1.1 B4.2 B5.2 E2.2
C4.23	[Candy] Asking why [Like why you always find the negative?] - Yes [And?] - And then, why is it the more I try to achieve, the more you put down, and why do I hear it from everybody else, what a good girl I am? And all my friends' moms and dads tell me how mannerable I am, and how they wish I was their daughter because a don't backtalk and I don't get in trouble in school and I have a job, and I'm respectful but when I come to you, I'm none of those, or I am those, but it doesn't matter.	evaluating an aspect of formulation (mum's negativity on her as opposed to everyone else seeing her qualities)	2.2.3	A2 B3.3 C1 C7 D2 E1.1 B4.2 B5.1 E2.2
T64	[Dr. Goldman] So, it's like, "I need you to, like you're telling her these things that other people say about you, and you've even heard her say about you when she doesn't think you're listening. [Right] but it's like you feel like, "Why can't you see this?" Right? So, it's like, "I need you to acknowledge	process suggestion/feeding lines	2.1.4.	formulation is secondary to task implementation, encourages direct expression of unmet need A1 B3.3 C1 C2 D2 E1.1 B4.2 B5.2 E2.2
C4.24	[Candy] "I need you to recognise "the good parts in me. ["What is good about me?"] I need you to recognise what is good about me	Secondary self- formulation, part of task implementation	2.2.4 2.2.3	client F of need A2 B3.2 C1 C3.1 D2 E1.1 B4.1 B5.1 E2.2
T65	[Dr Goldman] What happens when you-	exploratory Q	1.1.1	
C4.25	What do you see? Don't you see anything good in me? And if you do, why don't you ever say it? You know?		1.2.2	
T66	[Dr Goldman] Yeah, yeah. So, "I need you to recognise "and I need you to express the good things you see." (loud sigh) What's happening when you, if you try to say that to her?	feeding lines Exploratory Q	1.1.1	continued encouragement to express unmet need directly

C4.26	[Candy] What I really want to say, is, I know it may be uncomfortable for you, (laughter) again, there's like, I feel like a wimp, like you're mean, but I feel sorry for you. So, I know it'd be uncomfortable, but if you could just say, at least once, "Good job," or "I'm proud of you," or something.	Secondary self- formulation, part of task implementation	2.2.4	expression of need, formulating self- other relationships; can see how hard it is for mum to acknowledge her A2 B3.2 B3.3 C1 C3.1 D2 E1.1 B4.2 B5.2 E2.2
Т67	[Dr. Goldman] Yeah, "I just need to hear, "I know it's hard for you, but I just need to hear "you're proud of me," right? - Right. Yeah, because this is what brings the tears. This is what brings the pain, is when you say, "I just need to hear it once." - Right Tell her about	process suggestion/ feeding lines with process reflection	2.1.4.	formulating/linking to core pain A1 B1 B2.2 B3.2 B3.3 C1 C2 D2 E1.1 B4.2 B5.2 E2.2
C4.27	[candy] I might faint, but (laughter)	response in relation to the task, not in relationship to the formulation	0.2	
Т68	[Dr Goldman] Its almost like you don't believe that it could really happen [No, no] Come over here, for a second. And let's try something. So, it's like, you kind of like, well, first of all, as your mother, can you respond to this, like, "I need to hear, just once, what's good about me."	empathic reflection process suggestion, structuring task	1.1.1	
C4.28	[Candy] (sigh) - My mom would say, "Of course, you did good in school. "You always had good grades; you know that."	responding to therapist process suggestion	0.2	
Т69	[Dr Goldman] So, what is that? Because somehow, she gives that to you, and she says it, but it doesn't	exploratory Q and then exploratory reflection	1.1.1.	
C4.29	[Candy] Mean anything, because it's like, "You know that. Why should I say it?" So, she knows it, because you see the letters on the papers, you're doing the work-	F relevant detail	1.2.2	
T70	[Dr. Goldman] So, as your mother, you're saying that she would say, "Why should I have to say this to you because you know it." - Right. So, you should just, you should just know it? - Right.	empathic repetition/ feeding lines	1.1.1.	
C70	[Candy]Well, yeah, yeah. "I never said you were a bad mom." - [Right] "Of course, you're not a bad mom. I mean, you do things I wouldn't have done, but" -	F relevant detail	1.2.2.	
T71	[Dr Goldman] Right, but it's almost like, "I'm not going to give this to you. I mean, I'm not going to be able to tell you to your face, to express to you, what is good, even though, I feel these things, I can't tell you; I can't give this to you."	empathic formulation	2.1.4.	formulating client's image of mum, as part of task, (reflecting back client's implicit formulation, by abstracting) A1 B3.3 C2 C1 C3.1 D2 E1.1 B4.2 B5.2 E2.2
C71	[Candy] Yeah, I truly feel like she wouldn't be willing to offer that up.	client confirms F	1.2.1.	
T72	[Dr. Goldman] Yeah, tell her this, as your mother.	process suggestion/ feeding lines	0.1	
C72	[Candy] "I don't think I can. "That's just not who I am, for you."	F relevant detail	1.2.2	
T73	[Dr Goldman] For you, meaning? -	exploratory Q	1.1.1	

C73	[Candy] She's like that for my little sister, my younger sister, totally different relationship. Me and my other siblings, she's the same, but for my younger sister, she's just the mom that we all wanted, but never got.	elaborating ongoing collaborative F (of her image of mum, adding new detail, mum can be what I wanted from her for my little sister but not for me)	3.2.	A2 B3.3 B2.2 C1 C3.2 D2 E1.2 B4.2 B5.1 E2.1
T74	[Dr. Goldman] And this is painful to you	conjecture / empathic affirmation	1.1.1	gathering data towards F leaning towards the pain
C74	[Candy] Yeah, yeah. I mean, because you wonder, you can't help but wonder why. [yeah] Well, actually, and then we wonder, is it, was it my little sister that was the different one? Or is it just that my mom was different with her?	evaluating an aspect of formulation (what was different about my little sister or about mum that she got what we all wanted)	2.2.3	A2 B3.3 C1 C3.2 C7 D2 E1.2 B4.2 B5.1 E2.2
T75	[Dr. Goldman] Right, right [But, um]— - So, it's almost like you kind of end up questioning yourself, it's back to that, right?	Empathic formulation (reflecting on self- doubt)	2.1.3	simple single element F A1 B3.1 C2 D2 E1.2 B4.1 B5.1 E2.2
C75	[Candy] Right. I didn't show affection to my mom. (laughter)	narrative detail drawing on schematic memory implying an unstated formulation	2.2.2.2. 2.1.3	A2 B3.2 C1 D2 E1.1 B4.1 B5.1 E2.2
T76	[Dr. Goldman] Oh, I see, - That's how So it's, - "But maybe it's my deficit." Right? Like, I guess that's what I'm hearing as well.	Process disclosure with conjecture (maybe it's my deficit)	2.1.1 2.1.3	reflects back client SF A1 B3.1 C2 D2 E1.2 B4.1 B5.2 E2.2
C76	[Candy] Yeah, because in my memory, I cannot remember the last time I hugged or kissed my mom; never. I mean, I can remember all the way back to first grade, watching other moms saying goodbye to their kids and for school and everything, and but my mom, "All right, bye." And then we'd get out of the car and go. There was no hugging. There was no kissing. There was no playing around or anything like that	adding example that illustrates F	2.2.2.1	A2 B3.2 B3.3 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.2 E2.2
T77	[Dr. Goldman] a) Right. Right, so it's like, "I couldn't be there for you. I couldn't be affectionate to you." - [Right] Because? Try telling her this, like, "I b) I mean, how do you end up making sense of that, then, as a child? Like, she just doesn't As a child She doesn't love you.	empathic formulation, then process suggestion/ feeding lines exploratory Q with conjecture	2.1.1	recycled, consolidating part a) exploratory part b) A1 B3.2 B3.3 C1 C2 D3 E1.2 B5.1 B5.2 E2.2
C77	[Candy] I didn't understand. And when I watched my little sister, though, because there's seven years between us, so by the time she was like four, which I think is when the affection stops with my mom, because I can't imagine her not being affectionate before then, - [I see] But my sister was very affectionate. She would cry when my mom would leave. She would run out after her and beg for one more hug, one more kiss, all the way up to when she was like 10. And we'd go, "Oh, are you kidding? "You're hugging Mom?" - "[Don't do that]." (laughter) Yeah, we were, "You don't hug her. You don't kiss her." And of course, - [I see] my mom would do it back. And my sister always told my mom, "I love you; I love you; I love you." And so, sometimes I do, I wonder, if I wasn't a shy child, if I was more charismatic, like my sister [Maybe I would have got that back.] - Would my relationship be different?	adding examples that illustrates F client evaluating an aspect of F therapist: conjecture	2.2.2.1	A2 C1 C3.1 C4.1 E1.1 B3.2 C2 C7 D2 E1.2 B4.2 B5.2 E2.2

T78	[Dr. Goldman] Right So, what I'm also hearing here is, that it's almost like you tell yourself this thing of, like, don't be too vulnerable with her, because if you are then you're just not going to get any affection back? And so, then, you're saying, you look at your sister and she was always asking for—[Right] And then you end up saying, "Well, maybe it was me. Maybe I didn't do enough, I wasn't affectionate enough with her." Right? - [Right, yeah]- But I guess, like in a way, you sort of are telling yourself, "Don't." Because then, if you're vulnerable, tell her, "I need," then she's not going to be able to, she said, "I can't give that to you." Right? - [Right]. So, one of the ways that you've kind of dealt with this is by telling yourself, "Don't ask. "Don't ask for what you need; you won't get it. "She won't be able to give it." - [Yeah] - Does that fit? - [Yeah].	empathic formulation empathic conjecture more empathic formulation with Fit Q	3.1	task formulation, therapist is formulating emerging marker for self-interruption but as a complex formulation sequence, done in a reflective way, linking to key emotions, where the formulation is not secondary to the task A1 B2.2 B3.1 B3.2 B3.3 C1 C2 D2 E1.2 B4.2 B5.1 E2.1
T79	[Dr Goldman] So, can we work with this a little bit, then? Just this piece of it? (laughter) You willing to keep going? - Yeah Okay, so as you, so this is you, over here in the chair, you're in the part of Candy Okay So, you're in the part of yourself that tells her, "Don't," this is still Candy, here, but "Don't tell Mom how you really feel. "Don't act too vulnerable with her because "she won't be able to give you what you want, or	task structuring/ formulation, then Process suggestion/feeding lines	2.1.4.	formulation is implicit, secondary to task implementation here A1 B3.1 B3.2 B3.3 C2 D2 E1.1 B4.2 C3.2 B5.1 E2.2
C79	[Candy] " - Don't act vulnerable with her because she'll make you feel stupid.	SF is secondary to task implementation	2.2.4	SF of self-interruption A2 B3.1 B3.2 B3.3 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T80	[Dr Goldman] - She'll make you feel stupid.	empathic repetition	1.1.3	therapist acknowledges client SF
C80	[Candy] And she'll make you feel more like she doesn't love you.		2.2.4	A2 B2.1 B3.3 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T81	[Dr Goldman] So, you'll just be more hurt?	conjecture with implied fit Q	1.11	gathering data towards F
C81	[Candy] Right, right. You'll be more hurt. And you'll regret it.		2.2.4	A2 B2.1 B3.1 B3.3 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T82	[Dr Goldman] You'll regret it. So, because? She won't get what you-	empathic repetition with exploratory Q	1.1.3 1.1.1	
C82	[Candy] Because you won't get what you want, and you'll feel even worse.		2.2.4	A2 B2.2 B3.3 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T83	[Dr Goldman] Yeah, so you'll be more vulnerable Right And then, you still won't get what you need.	conjecture, feeding lines	2.2.4 2.1.1	SF is secondary to task implementation, active expression rather than reflective A1 B2.1 B2.2 B3.2 B3.3 C2 C3.1 D2 E1.1 B4.2 B5.2 E2.2
C83	[Candy] Right Right And eventually, you may reach your breaking point. You should just leave everything as it is. And that way you still have some kind of relationship with her		2.2.4.	implied F (of fear of loss) A2 B2.1 B2.2 B3.1 B3.2 C1 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T84	[Dr Goldman] And the breaking point would be what? where she— (heavy sigh) Just cuts off the	exploratory reflection with conjecture	2.1.2.2.	A1 B2.1 B3.3 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C84	[Candy] Where, you, Candy, cuts it off and just backs away from, not only her, her mother, but possibly her siblings because it would be too hurtful to be around all of them - [Seeing] With her.	client corrects F	3.2.	A2 B2.1 B2.2 B3.1 B3.2 C1 C2 C4.2 D2 E1.2 B4.2 B5.1 E2.1

T85	[Dr Goldman] And maybe your younger sister, seeing them maybe getting, or her, getting some of the stuff you're really wanting, - Right And being reminded.	empathic conjecture	2.1.2.2	A1 B2.2 B3.3 C1 C3.2 D2 E1.2 B4.2 B5.1 E2.2
C85	[Candy] Yeah, that happens all the time, anyways [Right] but we just turn it in, I turn it [as a joke] I turn it into a joke	implicit to task F	2.2.4	SF of how she covers up with a joke her pain of unmet needs A2 B3.2 C1 C3.1 C4.1 D2 E1.1 B4.2 B5.1 E2.2
Т86	[Dr Goldman] Yeah, right. Okay, so then, what should she do with her needs. What do you tell yourself then, or just like, "Don't. Just live with it."	receipt of information, then feeding lines/exploratory Q	1.1.1.	
C86	[Candy] heavy sigh Yeah. Hold it in and just take what you can get. And don't do it to your children.	implicit SF to task implementation,	2.2.4	SF about her self-interruption, active expression A2 B3.1 B3.2 C1 C2 D2 E1.1 B4.2 B5.1 E2.2
T87	[Dr Goldman] Just, "Be a good mother to your kids. "Don't repeat it, but just hold in those" - Right So, do you try to just, sort of, hold back those needs, or just I mean, if you were to try to represent that, how would you hold her back? Just push her back or?	Feeding lines/process suggestion with formulation	2.1.4.	formulation is implicit, secondary to task implementation here A1 B3.1 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C87	[Candy] How to hold Candy back? - Yeah Just keep telling yourself that that's just the way that mom is and-	secondary SF to task implementation,	2.2.4 2.2.5	SF about her self-interruption, active expression A2 B3.1 C2 C3.2 D2 E1.1 B4.1 B5.1 E2.2
T88	[Dr Goldman] This is what you do tell her, so tell her. that's just the way she is	Feeding lines/process suggestion with formulation	2.1.1 2.1.4 2.1.3	recycled and secondary to task implementation A1 B3.1 C2 C3.1 D2 E1.1 B4.1 B5.2 E2.2
C88	[Candy] - That's just the way she is and "[She's never going to change]" And she's not going to change; it's too late. She probably doesn't even know how; she probably doesn't even know half the things she did to hurt you [So just]- So just, let it go	Secondary self- formulation, part of task implementation	2.2.4	SF about her self-interruption, active expression A2 B3.1 B3.3 C1 C3.1 D2 E1.1 B4.2 B5.1 E2.2
T89	[Dr Goldman] Let it go. Okay. Change over here. Okay, so she's saying, "Just hold it all in. "She doesn't even know." And "She can't give it to you, so just move on."	Feeding lines/process suggestion/structuring task with formulation	2.1.4.	recycled and secondary to task implementation A1 B3.1 B3.3 C2 D2 E1.1 B4.2 B5.2 E2.2
C89	[Candy] (heavy sighs) - I'm trying.		1.2.3	
Т90	[Dr Goldman] You're trying. They're always there Yeah, so this is a wall, right?	repetition, then structuring task	1.1.1	
C90	[Candy] I would say I'm trying.		1.2.3	
T91	[Dr Goldman] What happens to those needs though? -		1.1.1	
C91	[Candy] They're always there and they just don't go away. Even if you don't try to think about it, there's always some comment that's said or, and you just immediately turn me off. Just puts up a wall.	making explicit previously unspoken schematic content	3.2.	A2 B2.3 B3.1 B3.3 C1 C2 C3.2 D2 E1.2 B4.2 B5.1 E2.1
T92	[Dr Goldman] Yeah You're saying there is a wall, here, and you put it up with yourself.	empathic formulation	2.1.4. 2.1.5	A1 B3.1 C2 D2 E1.1 B4.2 B5.2 E2.2
C92	[Candy] Right, yes, I do see myself. I don't have, I don't have a relationship with my mom, as an adult, that I feel like I should have regardless of how she treated me, because she is my mother and she deserves respect for what she struggled with, and to deal with me.	troubles telling about poor relationship with mum	3.2.	A2 B1 B3.2 B3.1 C1 D2 E1.2 B4.2 B5.1 E2.1

Т93	[Dr Goldman] What do you mean she struggled with you?	exploratory/clarification question	1.1.1	
C93	[Candy] Well, just I mean, there was a lot of kids in the family		1.2.2.	
T94	[Dr Goldman] You know I think this is actually her talking, can you move over here, cause like this is like your mother and this is what she says back to you {she says back to me] yeah like I had a lot of kids, I couldn't	structuring task with formulation	2.1.4.	formulation is secondary to task implementation, encourages direct expression of unmet need A1 B3.3 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C94	[Candy] "I was tired." - [was tired] "I was married first, I had three kids, and I was in an abusive relationship; he beat me. [Oh, okay] And when I left him, nobody would help me. My sisters wouldn't help me. My mom and dad told me that me and the kids couldn't come live with them. They gave me money to stay in a hotel for a few nights. And then, I met your father, who also had four children, his wife had just died, there's 18 years between us, so we got married. And so, all of a sudden, I was the mother of seven. [Wow] and I was young, and he was older.	client adding examples of what mum would say to illustrate F	2.2.2.1	A2 B3.3 C1 C3.2 C4.1 D2 E1.1 B4.2 E2.2
T95	[Dr Goldman] And how was that for you, being the mother of seven, and having all these kids? I mean it's like you're saying	exploratory Q	1.1.1	
C95	[Candy] It was hard. "A lot of resentment from his children, towards me. [Right] Because his kids were 9 through 17. They didn't want me to replace their mom. It was soon after she died, within a year and a half. [Oh, right] And so, his family didn't like me. They thought I was a Jezebel and too young for him and just totally inappropriate. [Right], I'm just assuming here, but I would think [Those things are all true, right?] They are all true.	client continues adding examples to illustrate F	2.2.2.1	A2 B3.3 C1 C3.2 C4.1 D2 E1.1 B4.2 E2.2
Т96	[Dr Goldman] So, in a way, this is her saying to you, "I couldn't be affectionate with you. "I couldn't be nurturing. "I couldn't see the good in you because," what? "Because I was too? I couldn't be that vulnerable, somehow?" Like, "It was too hard?"	formulation with conjecture	2.1.4.	translating F A1 B3.3 C2 D2 E1.1 B4.2 B5.1 E2.2
C96	[Candy] "I just don't think I had the energy." - ["I just didn't have the energy."] - "I just didn't have it in me. I was livin' a life that I never wanted to live. "I wanted more "and I didn't get it. "And maybe I was angry and"	implicit SF of image of mum to task implementation	2.2.4.	A2 B3.3 C1 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T97	[Dr Goldman] So I would turn on you?	empathic conjecture	2.1.2.2 2.1.3	A1 B3.3 C2 D2 E1.1 B4.1 B5.1 E2.2
C97	[Candy] I would turn, yeah	client confirms F	1.2.1.	
T98	[Dr Goldman] I mean, is that her anger, was sort of turned on you?	empathic conjecture	2.1.2.2	A1 B3.3 C2 D2 E1.1 B4.1 B5.1 E2.2
C98	[Candy] Yeah, like resentment, maybe? Yeah, this thing of, "Well, Candy, you can't do this." And I just	client confirms F and adds example	2.2.2.1 2.1.3	A2 B3.3 C2 C3.1 C4.1 D2 E1.2 B4.1 B5.2 E2.2
T99	[Dr Goldman] Right hear the resentment	claims of understanding	1.2.2	
C99	[Candy] "Don't dream too high." - [Don't dream too high] - And "If you expect failure, "you don't get disappointed."	client adds example to illustrate F	2.2.2.1	A2 B3.3 C3.1 C3.2 C4.1 D2 E1.1 B4.1 B5.2 E2.2

T100	[Dr Goldman] Oh, so it's like she was talking, almost like that was her experience? She didn't want you - [Yeah] To be disappointed because she was quite unhappy and disappointed; I see. So, don't dream too high, and then, so, it's almost like she was always sort of holding you back, or holding you down in some way or another. Right, like when you tried to be like, "I've got straight As, I'm excited, "I'm going to join the softball team, I'm going to do this," - Right it's like, and sort of seeing you come with all this excitement, and then she kind of dashes it off, right? - Right, right, yeah. Yeah, and so, it's like, don't dream too high because you're only going to be disappointed [Right] Right. So, tell her this, as her; tell Candy that. That's kind of what the message was, right?	empathic conjecture, then empathic formulation	2.1.4.	F is secondary to task implementation formulation of what it's like to be mum and what mum is doing in relation to Candy. A1 B3.3 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C100	[Candy] (deep breath) - Right, yes. "If you don't dream too big, "then you don't get your dreams crashed. "And I'm not going to celebrate anything "until you do it because otherwise, "maybe it's just words." - "I'm not going to celebrate anything, "any of your accomplishments." - Right.	client continues adding examples to illustrate F	2.2.2.1	A2 B3.3 C3.1 C3.2 C4.1 D2 E1.1 B4.1 B5.2 E2.2
T101	[Dr Goldman] "I'm not going to give you any hope "because you're just going to be disappointed." So, she was always there to dash? - Yeah And this is sort of how she did it Yeah Okay, come over here, if you will. So, we're going to have to start wrapping up soon, but what happens now, for you, when you hear these things from your mother? Like, you had a picture of her, right?	feeding lines, empathic formulation, structuring task around ending, exploratory Q	2.1.4.	F is secondary to task implementation formulation of what it's like to be mum and what mum is doing in relation to Candy A1 B3.3 C1 C2 D3 E1.1 B4.2 B5.1E2.2
C101	[Candy] I do picture her, and I don't know that, if she would ever express herself like that [Right] But when I was put in the position of being her, I did think about what she may have been feeling as far as what the facts that I know about her life [Sure] She didn't, it was never, her life was never, "Woe is me, poor me. "I was in an abusive marriage. "Poor me; my parents wouldn't help me." She never portrayed that to us. Never. She never talked bad about her ex-husband. She never talked bad about my aunts and uncles on my father's side that didn't accept her, and that made her life hard. It was just facts that I learned, or we learned, I should say, through the years of growing up. It was just said as facts, "Well, Gram and Pop "didn't want me to live with them with three kids; "it was just gonna be too much, so"	client elaborating previous F	3.2.	SF of changed image of mum A2 B3.3 B3.2 (admire mum for never complaining) C1 C2 C3.2 E1.2 B4.2 B5.1 E2.1
T102	[Dr Goldman] - Right, but it does sound like, so she wasn't a complainer, - [No, she was, no] and she wasn't going to ask for your sympathy No All right. And she sounds like she was pretty tough [Yes] Right?	empathic formulation (of changed image of mum, interpersonal F)	2.1.5	A1 B3.3 C2 C3.1 E1.2 B4.2 B5.1 E2.2
C102	[Candy] Yeah, she is tough. She's very independent	confirming F	2.2.1. 2.2.5	recycled A2 B3.3 C2 E1.2 B4.1 B5.2 E2.2
T103	[Dr Goldman] And there was this message of just, "Be tough. "Tough it out," right?	empathic formulation/with conjecture	2.1.3	A2 B3.3 C2 C3.1 E1.2 B5.1 E2.2

C103	[Candy] Like Yeah, "You don't need "a cheerleading squad; just do it." Yeah And yeah, but she is an amazing woman, she is. Like, she hurt me, and I didn't have the greatest childhood, but as far as the relationship with my mom, but to watch her as a woman, it's amazing.	elaborating change view of mum	3.2.	A2 B3.3 B3.2 C1 C3.1 E1.2 B4.2 B5.1 E2.1
T104	[Dr Goldman] Tell her that. Tell her a little bit about your admiration for her because that's another piece of it, right?	process suggestion	1.1.1.	
C104	[Candy] Okay, one thing, just happened last week, I was fixing, my husband, well, you know, Mom, Leslie's not a handy man. And I was fixing the kitchen sink, replacing the faucet, and Isaiah, my son, took a picture of me and put it on Facebook, and some comment about, I don't know, a woman fixing the sink, oh, no. And two of my sisters commented immediately, "She's just like Mom. She's just like Mom. "She can do anything." And Connie put, "Jack of all trades. "Mom taught her well, taught us well. "We can do anything we put our minds to." - [Right] And then, yeah, that's true, Mom, you did. You never told us we could do anything we wanted to. You never gave us the words and may have needed the words, but you're a strong woman and, you're a very strong woman.	adding examples to illustrate F	2.2.2.1	A2 B3.3 C1 C3.1 C4.1 E1.1 B4.2 E2.2
T105	[Dr Goldman] That's really important, what you just said. It sounds important to me, anyway, like this thing of, almost like, "I admire you "for your strength and I've been strong for it. "I needed some things from you, "and I really need it." I mean, it sounds like you really missed those things, and you really needed them, right? And that doesn't sort of end that all, right? - [Right] But that doesn't mean that you don't feel that she gave you some stuff, some other things, some strengths? - [Right] So, tell her. So, you're saying, like, "I admired you "for how strong you were." I mean, what she had to, from your description, she had to go through a lot.	experiential teaching, empathic formulation, process disclosure, fit Q, refocusing process suggestion/feeding lines	3.1	meaning perspective formulation alongside task implementation, F plays a central role here A1 B2.2 B3.2 B3.3 C1 C2 C3.1
C105	[Candy] Yes. Yeah, I admired you, especially as I got older and I realized just exactly what your young life was, being married in that situation, and then being married to Dad and being in a totally other situation, different from the first, but not necessarily that much better.	SF is secondary to task implementation	2.2.4	A2 B3.2 C1 C3.1 D2 E1.1 B4.2 B5.2 E2.2
T106	[Dr Goldman]"I appreciate all that you went through."	empathic reflection/feeding lines	1.1.3	
C106	[Candy] Yeah, I appreciate all that you went through and all that you taught me	F relevant detail	1.2.2	
T107	[Dr Goldman] "And all that you taught me." - And tell her a little bit about this thing, I just think this is really important, as well, this thing of your strength, right? That you feel you kind of got from her. Like this thing of fixing the sink. (laughter) That's a good image of a strong woman.	empathic repetition through feeding lines, then process disclosure (I think this is really important) process suggestion with conjecture (your strength)	2.1.4	A1 B3.2 C1 C2 C3.1 D2 E1.1 B4.2 B5.2 E2.2

C107	[Candy] I do appreciate that. There's not a lot of my friends, or their mothers, that I know of, that have done all the things that you have done and that you have given me the ability to do, whether it's around the house, or just anything. So, maybe somehow, even though you never gave me the words, you did, you gave me the actions. [Ah, interesting.] - Because I do know that I can do anything I set my mind to, because of you.	adding new element of F in relation to mum (you gave me the actions)	2.2.4	F done as part of task implementation, A2 B1 B2.3 B3.3 B3.2 B1.1 C1 C2 C3.1 D2 E1.1 B4.2 B5.1 E2.2
T108	[Dr Goldman] Say that again. That's really good. Say that again, to her. I know I can do anything.	process suggestion	1.1.3.	
C108	[Candy] I know I can do anything that I set my mind to because of you and what you've taught me.		2.2.1.	A2 B3.2 B3.3 C1 C3.1 D2 E1.1 B4.2 B5.2 E2.2
T109	[Dr Goldman] What happens now, inside of you? What do you feel when you say that?		0.1	
C109	[Candy] I feel like I can breathe. (laughter)		0.2	
T110	[Dr Goldman] Right, it's like there's more room inside to breathe [Yeah] In your chest. So, tell her one more time, about what it is that she's given you. And then, we're gonna have to finish.	process observation, then process suggestion with task structuring around ending	1.1.1.	
C110	[Candy] Ah, you've given me strength. You've given me strength and I don't think I realised it until right now. I always thought I was a wimp, but when I think about sitting there, and I think about all the things that I can do, and I have done, I know that I got them from you. And I know I got that sense of power, per se, that if there's a problem, - "I can do it." - I can fix it if you just give me a minute or two, I can fix it. [Wow, yeah, that's really]- And I get that from you, definitely, I get that from you	adding new element of F in relation to mum (you gave me strength) reflective, a story of image of mum and self	3.2.2	F done as part of task implementation, but F is significant and not secondary to it A2 B1 B3.1 B3.2 B3.3 B2.2 C1 D3 E1.2 B4.2 B5.1 E2.1
T111	[Dr Goldman] It was moving to hear you find that peace in you and just to hear you say that	Personal disclosure [of personal reaction	1.1.3.	
C111	[Candy] Yeah. It's nice to feel it. (laughter) -		1.2.1.	
T112	[Dr Goldman] And I mean, I guess that we only have this one session together, right, and so it's nice to do this piece of work with your mother. And it sounds like there was things that you really did need from her, like you needed that recognition, you needed that sort of verbal expression, and you needed her to see the positive, and to recognize And so, some things you really did need and you really missed, and I guess further work would be maybe working on how to kind of deal with those voices in you, that tell yourself you're not good enough, or you're too ugly, or you're too this, and to sort of help you to find that strength in you to fight back, when you own the strength - [Right, right.] that we just found here, right? - [Right] Because I guess like, that has left its mark, right? - [Right] You're not getting some of the things you really needed [Right] but at the same time,	task structuring around ending, process disclosure then empathic formulation with experiential teaching	3.1	Task ending big formulation, not subsidiary to the task ending but significant story building F A1 B1 B2.2 B3.1 B3.2 B3.3 C1 C2 C3.1 D3 E1.2 B4.2 B5.1 E2.1
	you really needed [Right] but at the same time, there is also other parts of you that you do appreciate what she did give you [Right] And she has given you some, a lot of strength, it sounds like. I'm sure that's just one piece of it [Right, yeah] So, how do you feel now, just ending?	exploratory Q		

G110	FG 1370 1111 7		1.00	
C112	[Candy] I feel like I want to tell my mom that, "Thank you for showing me "how to do all that stuff."		1.2.2.	
T113	[Dr Goldman] Like here or in real life?	clarification Q	0.1	
C113	[Candy] No, in real life. (laughter) - Okay Like I still don't think I'd be able to tell her the hurt part, but I do feel like I would be able to tell her, so maybe she can't, she's just not that type of person to be able to tell me what I feel I need from her, but I can definitely do it for her. And who knows?		3.2.	A2 B1 B3.2 C1 D3 E1.2 B4.2 B5.1 E2.1
T114	[Dr Goldman Wow, it's almost as it you can do what she hasn't been able to do for you, right? -	conjecture	2.1.5	interpersonal F A1 B1 B3.2 B3.3 C2 D3 E1.2 B4.2 B5.1 E2.2
C114	[Candy] Right, right [And it would be amazing]— - Because I don't think I've ever told her, "I'm so glad I'm like you "in these aspects."		1.2.1	
T115	[Dr Goldman] Right, right, right. So, it's like really finding a new sense of appreciation for what she did give to you [Right, right] And wanting to tell her and sort of understanding why maybe she wasn't able to give you all of the things that, right? So, some of the stories about her life sort of- [Right, right] Give us an idea of her, well, how she had to be tough and [Right] So, it was hard for her. It doesn't mean she didn't feel them, but she couldn't always express them, right? - [Right] But I mean, you did need those things, right, and I guess, maybe it would be helpful sometime, also, to kind of give yourself a little bit of appreciation, (laughter) right? [Right] Like, that would be another piece to work on. If we were gonna continue, that's the kind of stuff you might work on, but I really appreciate you doing this work, and coming here and being so open about all of the issues and the feelings of your mind. How are you now?	empathic formulation experiential teaching process disclosure exploratory Q	3.1	A1 B1 (progress) B2.2 B3.1 B3.2 B3.3 C1 C2 C3.1 D3 E1.2 B4.2 B5.1 E2.1
C115	[Candy] Now, I feel good [Good] I do. I feel good. There was a moment there where I was like, "Oh, this is horrible." (laughter)		0.2	
T116	[Dr Goldman] It's painful. This is painful stuff to process [Yeah, it is]. It is But it's good you found a good place. So, I guess this is a good place for us to end.	empathic affirmation of vulnerability personal disclosure structuring session (ending)	0.1	
C116	[Candy] Okay, yeah, I'm good Good I feel good. I'm happy I have a happy pause. (laughter) I can end it on here.		0.2	
T117	[Dr Goldman] Well, good. I hope you can sort of hold onto that. That strength, that peace in you. And to kind of go back inside and to remember that feeling of being able to breath, feeling good about what you have received. All right. So, we're gonna have to finish. So, we'll end it here?	personal disclosure structuring session (ending)	0.1	
C117	[Candy] Yeah		0.2	
T118	[Dr Goldman] Okay, thank you.		0.1	
C118	[Candy] Thank you		0.2	
T118	[Dr Goldman] Okay, thank you.		0.1	

Appendix G: Full Transcript and Analysis of Session 3

	Speaking Turn	Therapist Response Mode+ Client Agreement with Formulation or Self- Formulation	Degree of Formulation and Characteristics	What Kind of Formulation/ What is Being Formulated
T1	Yeah. So yeah, welcome and really glad you volunteered to participate in this. It's a bit of a nerve-wracking experience.	process disclosure with experiential teaching about the therapy process/process disclosure	0.1	
C1	Yeah.		0.2	
T2	Yeah, for sure. So just, I'm sure we'll both settle down a few minutes after we get rolling.	Empathic following, expert reassurance	0.1	
C2	Okay.		0.2	
Т3	So, I'll let you know a bit more about what you can expect from me, but we'll start off you telling me maybe what brought you here, what interested you, what you want to talk about, what you think would be useful for you.	Structuring task around therapy goal/ tell me question	1.1.1.	gathering data towards formulation
C3.1	Obvious. I don't really know how to say what I need to say. So, I guess I would like to discuss mostly emotional abuse that I've experienced from my mum [okay] I don't know like discussing the lack of my father being in my life, how that's impacted me.	client self-formulation/ troubles telling	3.2.	troubles telling on emotional abuse from mum and neglect/absence from dad; self-other themes (others abused me, neglected me) A2 B1 B3.3 C1 C2 E1.2 B4.2 B5.1 E2.1
T4	Okay	empathic following	1.1.3	therapist acknowledges client SF
C3.2	Do you need to know like what I'm struggling with right now?		0.2	
T5	Yeah, why don't you tell me what you're struggling with?	tell me Q (process suggestion)	1.1.1.	gather data towards F
C4.1	Okay, I guess the, I don't have an eating disorder like bulimia or anorexia, but when my father left when I was younger, I stopped eating. So now, as a result I don't have a healthy diet and I almost have the sort of fear of trying new foods, and I know that sounds ridiculous. I don't really know; I don't understand it. And then another thing that I struggle with is self-esteem issues [okay] and feeling like I'm worth something I guess [okay] so those are the things	client self-formulation/ troubles telling	3.2.	troubles telling, intrapersonal (but related to interpersonal: dad) themes, self-damaging split (stopped eating when dad left, no healthy diet), conflict split (struggle with self-esteem, feeling like I'm worth something) A2 B1 B2.2 B3.1 B3.3 C1 C2 E1.2 B4.2 B5.1 E2.1
Т6	So those are, from your perspective, those are some of the negative effects on yourself, of your mother's emotional abuse and your father's absence and neglect.	empathic reflection	2.1.1. consolidating, recycled, collaborative,	reflects back client SF (using the words "from your perspective" encourages client to begin to own SF) A1 B1 B3.3 C1 C2 C3.1 E1.2 B4.2 B5.2 E2.2
C4.2	Absence and neglect, exactly.	confirms formulation	1.2.1.	
Т7	Not being there for you	empathic reflection	0.1	
C7	yeah		0.2	
Т8	So can you tell me a little bit more about the emotional abuse and what was your mother like? [she, well] how has she emotionally abused you?	tell me Q (exploratory Q)	1.1.1.	gathering data towards formulation

C8	She would always talk down on me, like I was never good enough and like I would always try so hard to please her, like I - did well in school and I tried getting involved in school, to try to make it seem like I was doing things right and I never got in trouble like no detentions or anything like that, like in my opinion, I was doing what I needed to do to be a good kid, it's like those were like typical things to be a good kid. But no matter what I did, she was calling me worthless and	elaborating previous formulation with examples of habitual, repeated patterns	3.2.	self-others themes (others talk down on me, make me feel not good enough, worthless; self to others: pleasing (mum) A2 B1 B3.2 B3.3 C1 C2 E1.2 B4.2 B5.1 E2.1
Т9	never good enough no matter how hard you try,	empathic reflection	2.1.1.	recycled A1 B1 B3.3 C1 C2 C3.1 E1.2 B4.2 B5.2 E2.2
С9	that's how I felt. And I understand that she was in a stressful situation being a single parent, I understand that, but it's still no excuse to call me names like	client evaluates an aspect of formulation	2.2.3	self-other themes (evaluates mum's situation that may have led to the abuse but doesn't justify it) A2 B3.2 B3.3 C1 C3.2 C7 E1.2 B4.2 B5.2 E2.2
T10	There is no excuse, you said	empathic repetition	1.1.3.	
C10	it's hard		1.2.1.	
T11	Yeah, you don't feel like you deserved that.	empathic conjecture	2.1.2.2. and 2.1.3	conjectured detail, leaning towards client's sense of worth A1 B2.2 C1 C2 C3.1 E1.2 B4.1 B5.2 E2.2
C11	No, I don't. I don't know if you want me to get into the specifics of what she said.	confirming formulation and carrying forward F	1.2.1.	
T12	Sure, yes please.	implied tell me Q	0.1	
C12	a) okay, so she's called like a worthless bitch, cunt and she told me she never wanted kids b) and I get that, that's fine if she never wanted kids, but you shouldn't tell	a. adds example to consolidate SF b. evaluates aspect of SF	a. 2.2.2.1 b. 2.2.3	self-other themes (others verbally abuse me, hurt me) A2 B1 B3.2 B3.3 C1 C3.2 C7 E1.2 B4.2 B5.2 E2.2
T13	you shouldn't tell your child that you really don't want them.	empathic following	1.1.3.	
C13	Exactly and there was one time when she was drunk, she told me that she wished she would have aborted me and like, I don't know.	client adds examples to confirm self-formulation	2.2.2.1	A2 B1 B3.2 B3.3 C1 C3.2 E1.2 B4.2 B5.2 E2.2
T14	those are incredibly painful things to hear from your own mum	empathic affirmation with conjecture	2.1.2.2.	A1 B2.1 C1 E1.2 B4.2 B5.1 E2.2
C14	Right, right, exactly.	confirms formulation	1.2.1.	
T15	And you feel that now, it seems, like in touch with how much that hurt, for sure.	process reflection	1.1.2.	therapist checking client evaluation of F (conjecture about the pain) in the moment
C15	yeah, sorry.	confirms formulation	1.2.1.	
T16	Yeah, thats okay, breathe. it's okay. in fact, it's good to let the tears come out and I think, i know its weird in front of cameras but that's what real for you. yeah	empathic affirmation, process suggestion, experiential teaching (about letting tears out) conjecture (I know it's weird in front of cameras) refocusing (real for you)	1.1.1	

C16	I don't know, she was always so like angry and demanding and I felt like I am - suddenly take like the role of being a second parent, like helping raise my siblings and I don't know, I mean, so there are negatives to it. But positive aspects I feel like that helped me develop a close relationship with my siblings because we only had each other. So that's my incident.	problematic	3.2.	A2 B1 B3.2 B3.3 C1 C2 C3.2 C7 E1.2 B4.2 B5.1 E2.2
T17	So, you are stronger for that [yes] however, you paid a big price, it sounds like, as well, in terms of your self-esteem and [yes, absolutely, self-esteem] feeling unloved, unappreciated, uncared for by the one person you needed from the most. That's real tough, really tough.	refocusing, with conjecture, evocative reflection and	3.1	formulating self-self themes (image of self: stronger but the cost is low self-esteem) and self-other themes (feeling unloved, unappreciated, uncared for by mum) A1 B1 B2.2 B3.3 B3.1 C1 C2 C3.1 C3.2 C7 E1.2 B4.2 B5.1 E2.1
C17	and not really trusting either like, like I feel like [not really trusting] yeah, I feel like that's an issue, because I grew up without my father. So I obviously had no reason to trust him, if he wasn't there in the picture. And I don't trust my mother because everything she has done like why.		3.2.	self-formulation of self-other themes (can't trust others, e.g. mum, dad) A2 B1 B3.2 B3.3 C1 C2 C3.2 E1.2 B4.2 B5.1 E2.1
T18	Why would you?	empathic reflection	1.1.3.	consolidating, validating
C18	Why would I?	minimal response in relation to formulation	1.2.1.	
T19	she is just going to turn that around and hurt you, it sounds like. Yeah.		2.1.2.2.	A1 B3.3 C2 C3.1 E1.2 B4.2 B5.2 E2.2
C19	So I went, 15 years without seeing my dad. I didn't get in contact with my father until my mum kicked me out of my house, when I was 19. So, I have been living on my own for two years now.	formulation relevant narrative	1.2.2.	
T20	And how is that living on your own?	exploratory Q	1.1.1.	
C20	Good, because I feel like I finally have the freedom to actually better myself, like this has been one of the most beneficial years for me, because I no longer feel like I have to please her, like I feel like I can finally take the steps that I need to take in order to focus on myself instead of focusing on the demands of her, focusing on the household, everything that needed to be done with like my siblings. I feel like I can finally just focus on me.	self-reflection on progress in her life	3.2.	Self-self (freedom to better myself, focus on me) and self-other (no longer have to please her, respond to her demands) themes A2 B1 B3.1 B3.2 B3.3 C1 C2 C3.2 C7 E1.2 B4.2 B5.1 E2.1
T21	That's great, yeah, big load off.	process disclosure (that's great) with empathic following	1.1.3.	
C21	Right, so although being kicked out of my house was hard for me financially and emotionally, it's like a blessing in disguise because it's allowed me to finally move forward and try to put it in my past.	self-reflection on progress in her life	3.2.	self-formulation of self-self themes A2 B1 B2.2 B3.3 C1 C2 C3.2 C7 E1.2 B4.2 B5.1 E2.1
T22	Okay, so that's kind of where you're at, is putting all of that and trying to put it in the past.	empathic reflection	2.1.1. and 2.1.3	reflects back client SF A1 B1 B3.2 C2 C3.1 D1 E1.2 B4.1 B5.2 E2.2
C22	Trying to. But I don't know if I can differentiate between living in denial and just burying it or actually coming to terms with it, which is what I struggle with. I am not sure whether or not I should maintain a relationship with my mother, like be the bigger person or if I should just cut off ties.	formulation	3.2.	Self-self themes (self-denial, self-conflict about relationship with mum) A2 B1 B2.2 B3.1 B3.2 C1 C2 C3.2 C7 E1.2 B4.2 B5.1 E2.1
T23	cut off ties, yeah. So those are the issues you struggle, wrestle with [yes] what's going to be the healthiest way to go.	empathic repetition, empathic reflection.	2.1.1	A1 B1 B3.2 C1 C2 C3.1 D1 E1.2 B4.2 B5.2 E2.2
C23	yeah, I don't know what is healthier.	recycled self-formulation	2.2.1. and 2.2.5	A2 B1 B3.2 C2 C7 E1.2 B4.1 B5.2 E2.2

T24	So when you think about that dilemma between, okay, should I just bury it and let it go, forget it, stuff it in the past or should I try to come to terms with it, what is your, when it comes, how have you answered that for yourself?	exploratory Q	1.1.1.	gathering data towards formulation
C24	Well, in August I planned on cutting off all ties, because she wouldn't help me with financial aid. She just wouldn't give me her tax information, and because my scholarship demands that as well, I needed her information, but she wouldn't give it. So then, I was just at the point where like you don't help me, you don't benefit me, all you do is take, wants the point of maintaining a relationship with you so I said, so she went off and started calling me again like I am a worthless cunt, Im no good, nothing that really matters, blah, blah, blah. Im a selfish with, in a narcissistic, which I don't see at all, and I recognise that. [well] but so i said that your insults don't affect me anymore and I wanted to believe that, but it's not true, of course they affected me.	her F of her dilemma and evaluates an aspect of formulation	2.2.2.1	self-other themes (considering cutting ties with mum, she doesn't benefit me at all, she verbally abuses me, doesn't help me) self-self (her insults got in and affect me) A2 B3.2 B3.3 C1 C3.1 C4.1 C7 E1.1 B4.2 B5.2 E2.2
T25	of course.	empathic repetition	1.1.3.	consolidating, validating
C25	so, then she went to the point of saying that I can't see my siblings anymore and those are the most important people in my life to me. So, I've made amends not really, I faked to be okay with her just so I can see my siblings. that's the only reason. That is the only reason that I would maintain a relationship with my mother, it is just because I need to see them, because they're still at home.		3.2.	self-other themes (fakes to be okay with mum) A2 B1 B3.1 B3.2 C1 C2 C3.2 E1.2 B4.2 B5.1 E2.1
T26	sure, so you are faking it, basically.	empathic reflection	2.1.1. and 2.1.3	A1 B1 B3.3 B3.1 C2 C3.1 E1.2 B4.1 B5.2 E2.2
C26	Yes, I am. And I don't know if that's really a healthy way of handling it, but its working for the time being.	confirming formulation and repeated F (T23, C23)	2.2.1.2.2.3	A2 B1 B3.2 C1 C7 E1.2 B4.2 B5.2 E2.2
Т27	So, this is what you mean when you say I don't know if I should bury it or try to come to terms with it., How would it be different if you were trying to come to terms with it? what different decisions would you make and how?	a. empathic reflection, b. exploratory Q	a. 2.1.1.	A1 B1 B3.1 B3.2 C1 C2 C3.1 C4.1 D1 E1.2 B4.2 B5.2 E2.2
C27	I feel like I would have to confront her with, how she makes me feel [okay]but she is so stubborn, hot headed that I think she would just blow me off, shut me down and act like she is in the right and act like she dos no wrong, thats how I feel she would take it and that wold just frustrate me and I would break down.	troubles telling, what makes her afraid to confront mum	3.2.	self-other themes (others i.e. mum are stubborn, hot headed, ready to blow me off, shut me down, act in the right) self - other (mum:) frustrated with her, break down if I have to confront her A2 B1 B3.2 B3.3 C1 C2 C3.2 E1.2 B4.2 B5.1 E2.1
T28	yeah, so sometimes it isn't the best thing to confront an unreasonable person that is totally immovable, irrational, insulting person, right, it's like you said it's not going to helpful, she is not ready to hear what you have to say [right] but the other way and this is where this kind of theory comes in as to give you nonetheless an opportunity to say what you need to say and speak your truth without actually confronting her.	experiential teaching related to structuring task, formulation, offering rationale for task	2.1.4.	rationale for task being formulated A1 B3.2 B3.3 C1 D1 E1.1 B4.2 B5.2 E2.2
C28	okay	agrees on task	1.2.1.	

T29	so not to do it and it's not for practice for real life, it's	experiential teaching related to	2.1.4.	A1 B3.2 B3.3 C1 D1 E1.1
	for you to come to terms with things and to get clear	offering rationale for task		B4.2 B5.2 E2.2
	about where you stand, for you to get strong and then after that you make a decision about how you are able	process disclosure (my guess		
	to handle or how you want to handle things with your	is) with conjecture and		
	mother. Because my guess it's, you've never really	formulation		
	had a chance to say uninhibitedly how you feel, what you want, how angry you are, how sad you are, all	more experiential teaching		
	those things. and so, this kind of therapy is an	more experiential teaching		
	opportunity for you to do exactly that to express the			
	way, the ideas the way to healing is through expression of all of the feelings that you have and	exploratory/fit Q (does that		
	make sense of them for yourself. and then you are	make sense)		
	going to be a stronger person for having done that, does that make sense?			
C29	Yeah.	agrees on task	1.2.1.	
T30	Okay, so one of the ways we do this and again, if you		2.1.4.	task formulation, rationale for
130	don't feel like comfortable doing this, this is fine,	reassurance, experiential	2.1.4.	task, support and reassurance
	we'll work in a different way, but very typical way	teaching, process reflection		for task,
	that we work in this therapy is for you to confront you mum, put your mum here, in this chair [oh God].	implied formulation		A1 B3.2 B3.3 C1 D1 E1.1
	Yeah, so she is not here, right? [right] and she can't			B4.2 B5.2 E2.2
	shut you down, she can't hurt you, she can't do anything. It is a chance for you to say what you need			
	to say. And you are worried about telling what's going			
	on for you as I say that.			
C3.10	Oh, I don't know, it's just really scary to think [it's scary] think about saying that.	client expressing emerging emotion that is being	1.2.3.	
	scary] tillik about saying that.	formulated as part of task F		
T31	It's scary to actually say, think about saying the things	empathic reflection / process	1.1.1.	gather data towards F
	that you really, you really, really want to say.	reflection		
C3.11	Yeah, So I just, I don't want to say them out loud, its		3.2.	self-formulation of self-other
	[well for sure] i just process it in my head and just keep it there, the idea of saying them out loud is	unspoken schematic content (about her self-interruption)		themes (self-interruption in relation to mum) A2 B2.1
	intimidating.	(we can not cont interruption)		B2.2 B3.1 B3.2 C1 C2 C3.2
				D1 E1.2 B4.2 B5.1 E2.1
	It's intimidating	• •	1.1.3.	
	Yes	confirming F	1.2.1.	
		exploratory Q and reflection	1.1.1.	
	so you say it in your head, but saying it out loud is.			
C3.13	I guess it makes it more real.		2.2.3 and 2.2.5	self-formulation of self-
		formulation		interrupter A 2 B2.2 C7 E1.2 B4.1 B5.2 E2.2
T34	It makes it more real, okay, alright		2.2.1. and 2.2.3	recycled A1 B2.2 C7 E1.2
C3.14	yeah	following agrees	1.2.1.	B4.1 B5.2 E2.2
T35	but this is real		1.1.1	support and reassurance for
133	out tins is rear	task and rationale for task (part	1.1.1	task,
		of task structuring)		
C3.15	yeah.	noreas	1.2.1.	
	Right. And so I will be here to help and there is no kind of rules, yeah take it. So its sounds like what you		1.1.1	support and reassurance for task,
	have to say is pretty powerful.	empathic conjecture		work,
C3.16	Maybe. Or I just feel really emotional about it.	evaluating an aspect of	2.2.3 and 2.2.5	A2 B2.1 C7 E1.2 B4.1 B5.2
		formulation (feeling emotional about speaking her truth in		E2.2
		relation to mum)		

Т37	Very emotional, of course. Of course. Are you willing to give it a try?	empathic repetition with empathic affirmation, checking readiness for task	1.1.3	
C3.17	I'll try.	client agrees to try task	0.2	
T38	Okay. So can you see your mom here?	empathic following, task structuring	0.1	
C3.18	yeah		0.2	
T39	what does she look like?	task structuring / setting	0.1	
C3.19	What does she look like she has reddish gray hair; she is a little taller than I am.		0.2	
T40	What's the look on her face towards you is?	task structuring	0.1	
C3.20	It is a normal face I guess.		0.2	
T41	It's a normal face. So it's not an angry face.	empathic repetition, task structuring	0.1	
C3.21	A straight face, not angry.		0.2	
T42	Just a straight, so she is just neutral, smiling, nothing like that [yeah] and what is happening to you as you imagine her, it sounds like you're feeling anxious, you're feeling intimidated.	task structuring, exploratory Q, empathic reflection	1.1.1	
C3.22	yeah, normal I am just really cold [cold] distant, so that I try to act like she doesn't affect me, because I feel like she wants to get a rise on me.	making explicit previously unspoken schematic content (about her instrumental coldness and the role of it)	3.2.	A2 B2.1 B2.2 B2.3 B3.1 B3.2 B3.3 C1 C2 D1 E1.2 B4.2 B5.1 E2.1
T43	a) Okay. Alright. So normally that's how you are. b) So in this situation, can you put some you could start with that, normally mom, do you call her mom?	empathic following, empathic reflection, task structuring with process suggestion	a. 1.1.3 b. 0	
C3.23	Mom, yeah.		0.2	
T44	Normally mom, I keep my distance from you.	process suggestion (feeding lines)	1.1.1.	
C3.24	Normally, I I feel I'm going to cry.	client expressing emerging emotion that is being formulated as part of task implementation	1.2.3	
T45	You feel, so what's that about I am going to cry.	exploratory Q	1.1.1.	
C3.25	I don't know.		0.2	
T46	So emotional, so much there, so much there, okay.	empathic affirmation with process reflection	1.1.1.	
C3.26	Yeah, can I just take that? {a tissue}		0.2	
T47	Oh, yeah. Go ahead. This is so		0.1	
C3.27	Okay. Normally I have to act [I have to act] distant and cold and unresponsive to you when you try to talk to me about my life, because I don't want you to be close to hurt me. (repeat of C3.22)	secondary, repeated self- formulation, this time not in a reflective manner but as part of task implementation;	2.2.4 and 2.2.1	self-formulation of instrumental coldness and unresponsiveness with mum and reason for it A2 B2.1 B2.2 B2.3 B3.1 B3.2 B3.3 C1 C2 D1 E1.2 B4.2 B5.2 E2.2
T48	I don't want you close, I am afraid of you hurting me.	empathic repetition /(feeding lines)	2.1.1.	
C3.28	I don't want you to have any control, any knowledge of my life to give you any sense of control of my life. To put me through what you put me through in the past.	secondary self-formulation, part of task implementation	2.2.4	
T49	Okay. Tell her what she's put you through?	empathic following, exploratory Q	1.1.1.	
C3.29	You		0.2	

T50	Yeah, it's hard. It's hard. Yeah. You've put me through so much. You hurt me so much, it sounds like, you've hurt me so much.			
C4.10	I don't know how to say it. You've made me feel worthless, and that I'm never going to amount to anything. You put too much stress on my shoulders at a young age, that I should not had to have gone through.	self F as part of task implementation	2.2.4	A2 B2.2 B3.3 C1 C2 D2 E1.1 B4.2 B5.1 E2.2
T51	That I should never have had to have all that stuff to deal with.	empathic repetition and process suggestion (feeding lines)	1.1.3	
C4.11	I don't know		0.2	
T52	What's going on for you on the inside right now?	focusing, exploratory Q	1.1.1.	
C4.12	I don't know		0.2	
T53	Take a breath.	process suggestion (action suggestion for emotion regulation)	0.1	
C4.13	I just feel really nervous, and she is not even in the room.	client expressing emerging emotion that is being formulated as part of task implementation	1.1.3	
T54	That's right. So that's how much power she just the thought of her.	empathic reflection	0.1	
C4.14	God [yeah] like there's no excuse for you to have put me through me and my sister through, what you put us through.[No excuse for that.] It doesn't like God, I can handle okay,I can't handle you treating me the way you treated me, but I feel like it's worse to watch what you put my sister through.	secondary self-formulation of anger at mum, as part of task implementation	2.2.4	A2 B3.2 B3.3 C1 C2 D2 E1.1 B4.2 B5.1 E2.2
T55	Okay. And I can't - what's your sister's name, I can't stand the way you.	empathic following (okay) process suggestion (feeding lines)	1.1.1.	
C4.15	Her name is Amber.		0.2	
T56	The way you treat Amber, you put her through that stuff too, it's unacceptable.	process suggestion (feeding lines) with conjecture	1.1.1.	
C4.16	God. Is it bad that, that like upsets - like that upsets me more.	evaluating an aspect of formulation	2.2.3 and 2.2.5	A2 B2.1 C7 D2 E1.2 B4.1 B5.2 E2.2
T57	Okay. So is that even that upsets me even more than what you've done. Tell her how upsetting this is for you.	empathic repetition, process suggestion	1.1.1.	
C4.17	Oh god. I don't know how to say it.		0.2	
T58	Just try it. It's so awful.	process suggestion, empathic affirmation	0.1	
C4.18	It's awful the way you talked to us, we're supposed to come like families, are supposed to be the people are there for you, like that's your first support system and you made us feel like we had nobody.	secondary self-formulation of anger at mum, meaning protest as part of task implementation		A2 B3.3 C1 D2 E1.1 B4.2 B5.2 E2.2
T59	You made us feel like we had nobody, is that what you said or we were and we were nobody like we were worthless, yes, what kind of a mother does that? You're doing fine, just stay, stay in touch with what's going inside and this is for you to say how bad it's been and not right it is.	process suggestion (feeding lines) offering reassurance and rationale for task (task structuring) with formulation	2.1.4. and 2.1.1.	formulating self-other themes, anger at mum, mum as source of worthless PM feeling A1 B3.3 B3.2 C1 D2 E1.1 B4.2 B5.2 E2.2
C4.19	Don't know what else to say. Trying to blink.		0.2	

T60a	Okay. So just take a breath and go inside.	empathic following, process suggestion around emotion regulation,	0.1	
T60b	Are you feeling mostly what angry at her or sad at all you've missed out on.	focusing, exploratory Q with conjecture	2.1.2.2. and 2.1.3	A1 B2.2 B3.2 C3.2 D2 E1.2 B4.1 B5.1 E2.2
C4.20	I feel like I am going to trying to push it away, because I don't want to feel this way. Feel like that's what I am doing right now.	secondary self-formulation of self-interruption, as part of task implementation	2.2.4.	A2 B3.1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T61	You're pushing it away, okay.	empathic repetition, empathic following	1.1.3	
C4.21	Because it's hard to adjust to it [okay] I think that's why I may be giving.	evaluating an aspect of formulation	2.2.3	A2 B1 C3.2 C7 D2 E1.2 B4.1 B5.2 E2.2
T62	Okay, that makes sense. So you are pushing it away, there is a part of you that says don't go there [yeah]Alright. We can switch this up, and come over here, I'm going to ask you to —	empathic following (acknowledging receipt of information), empathic formulation (client agrees) structuring task with process suggestion	2.1.4.	task formulation A1 B3.1 C2 D2 E1.1 B4.2 B5.2 E2.2
C4.22	Sit over there?		0.2	
Т63	Yeah [okay] So this is this is the part of you that pushes it away, okay, this is just Jessica who feels those things, and this is the part of you who says don't go there. So what do you tell Jessica? What do you say? How do you - what do you say to her?	task structuring / setting with empathic formulation process suggestion / exploratory Q	2.1.4.	formulation is secondary to task implementation, formulating self-interruption A1 B3.1 C2 D2 E1.1 B4.2 B5.2 E2.2
C4.23	The one that pushing it away.	client doesn't understand	0.2	D3.2 E2.2
T64	No you're the one, yeah, now, as the part of you that is pushing it away, but you say that Jessica who has started to feel and started to get in touch with this stuff. You say, don't go there.	structuring task, process suggestion with repeated formulation	2.1.4.	A1 B3.1 C1 C2 D2 E1.1 B4.2 B5.2 E2.2
C4.24	I say don't go there.	client doesn't understand	0.2	
T65	No I am just giving you an example, what is going on inside for you?	structuring task with focusing, exploratory Q	1.1.1.	
C4.25	Don't go there, because it's easier to push it to the side as if it didn't happen.	self-formulation of self- interruption as part of task implementation	2.2.4	A2 B2.2 B3.1 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T66	Okay. Push it to the side, pretend it didn't happen.	empathic following, empathic repetition process suggestion (feeding lines)	1.1.1	
C4.26	Just move on and try to do the goal and live through the motions of life.	self-formulation of self- interruption as part of task implementation	2.2.4	A2 B2.2 B3.1 C3.2 D2 E1.1 B4.2 B5.1 E2.2
Т67	Go through the motions, pretend, none of this happened, do that more to her, so just pretend, live - be phoney.	empathic repetition / process suggestion, feeding lines	2.1.1 and 2.1.4	repeated F A1 B3.1 B2.2 C2 C3.1 D2 E1.1 B4.2 B5.2 E2.2
C4.27	Be a phoney, exactly.	minimal response confirming formulation	1.2.1.	
Т68	Okay. So, be a phoney, why? Tell her why. What's scary about because it sounds like that's part of what it is. It's scary to go there and if you go there, bad things are going to happen. Can you tell her what those bad things are?	empathic following, empathic	2.1.2.2.	A1 B2.2 B3.1 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C4.28	If you can find those issues, you feel week.	implicit agreement with conjecture and responding to exploratory Q with self-formulation of what fear is about	2.2.4 and 2.2.5	A2 B2.2 B3.1 C2 C3.2 D2 E1.1 B4.1 B5.1 E2.2

T69	You will feel week.	empathic repetition through feeding lines	1.1.3.	
C4.29	You feel like you could have done something to help the situation somehow, but you didn't.	secondary self-formulation of self-interruption, as part of task implementation	2.2.4	A2 B2.2 B3.1 C2 C3.2 D2 E1.1 B4.1 B5.1 E2.2
Т70	So you will end up looking weak rather than helpful. And what else? You express those feelings even in here.	empathic reflection, exploratory Q process reflection	2.1.1. and 2.1.3 1.1.1.	A1 B2.2 C2 C3.2 D2 E1.1 B4.1 B5.2 E2.2
C70	I don't know, just the idea of talking about her scares me, because like I don't, I mean, I don't want her to know that I am talking about her, because I would be scared of what she would do.	implicit self F as part of task work	2.2.4	A2 B1 B2.2 B3.1 B3.3 B3.2 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T71	Okay. But she is not here, right? [Yeah, I know it.] And somehow even though she is not here, it's still hard for you to do it. So there is still a part of you that says, don't go there even if she is not here. Don't say those things out loud. So what is that about? How do you say to prevent yourself from?	acknowledging receipt of information (empathic following) offering reassurance (part of structuring task), process reflection, empathic formulation, exploratory Q, process suggestion	2.1.4.	formulation subsidiary to task implementation A1 B1 B2.2 B3.1 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C71	What do you mean?	minimal response in relation to formulation, asking clarification	1.2.1.	
T72	Like you make yourself somehow not say your truth even in here. How do you that? Do it to her. Do it to Jessica.	process reflection / formulation process suggestion	2.1.4.	A1 B1 B2.2 B3.1 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C72	How do I do?		0.2	
Т73	Yeah. What do you say to her? How do you - or [To make her not] To make her not, it's like do not express your truth, no matter what, even in here, even though mom is not here, don't do it, because	process suggestion / formulation / feeding lines	2.1.4.	A1 B1 B2.2 B3.1 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C73	Because it's easier to pretend like it didn't happen [Its easier to pretend] Yeah		2.2.4	
T74	So it's too hard, I want you to just pretend it didn't happen, that's what you are saying? Is that what you say that to her?	conjecture (too hard), process suggestion, fit Q	2.1.1. consolidating, recycled, collaborative, also 2.1.4	A1 B1 B2.2 B3.1 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C74	It's easier to pretend like it didn't happen.		1.2.1	
T75	So I want you to	process suggestion	1.1.1.	
C75	So I want you to not talk about it [don't talk about it] Get distant and you don't want to feel vulnerable.	self-formulation of self- interruption as part of task implementation	2.2.4	A2 B3.1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T76	Don't ever feel vulnerable. Burry it, keep it deep inside [keep it down] Don't ever let it out. Is that what you are saying to her? Can you it say some more, give her?	suggestion, conjecture, fit Q	2.1.4.	A1 B2.2 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C76	More?		0.2	
T77	Yeah, keep it, tell her, definitely do not	process suggestion	1.1.1	
C77	do not open up about it.		1.2.2.	
T78	Definitely do not open up about it.	process suggestion / empathic repetition	1.1.1.	gathering data towards formulation through process suggestion
C78	Oh, but that sounds awful coming out of the mouth.		1.2.2.	

T79	Okay. So you come over here, so there is this is the	empathic following	2.1.4.	A1 B3.1 C1 C2 D2 E1.1 B4.2
	other part of you that says, again, tell her, this is you,	(acknowledging receipt of	formulation is	B5.1 E2.2
	right, that is stopping you right now, nobody else [yeah] So and you get in touch with that part that says	information) with process suggestion structuring task	subsidiary to task implementation	
	this is awful, saying that stuff it, don't ever talk about, tell her.	with formulation	Implementation	
C79	That was awful, it doesn't make any sense.		1.2.2.	
T80	Tell her. It doesn't make any sense.	process suggestion, empathic repetition	1.1.1.	
C80	It doesn't make any sense. Why you would not talk about it, because not talking about it is only going to make it worse, you're only going to keep bottling it up and you're probably going to over analyse it to make worse than it actually is.	evaluating an aspect of formulation (from experiencer chair)	2.2.3. and 2.2.4	A2 B1 B2.1 B3.1 C1 C2 C7 D2 E1.1 B4.2 B5.2 E2.2
T81	Okay. So I am just going to end up bottling it up, and what said tell her what that's going to feel like for you?	empathic repetition / process suggestion	2.1.1. and 2.1.3 1.1.1.	A1 B1 B2.1 B3.1 C2 C3.1 D2 E1.1 B4.1 B5.2 E2.2
C81	It's going to make you feel more stressed, like feel more anxious, have more doubts in yourself.	self-formulation of impact of self-interruption on experiencer	2.2.4.	A2 B1 B3.1 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T82	Okay. So it's going to make it worse if I bottle it up [yeah] and who's going to benefit? b.Can you tell her maybe some of the benefits ofagain, this was part of yourself, right? That's you are wrestling with, that part of yourself that	empathic following (acknowledging receipt of information) process suggestion (feeding lines) with motivational question and formulation	a. 2.1.4. and 2.1.1 b. 1.1.1	formulation is secondary to task implementation, formulating experiencer in relation to interrupter A1 B1 B3.1 C1 C2 C3.1 D2 E1.1 B4.2 B5.2 E2.2
C82	talking about it	minimal response in relation to formulation (clarifying the motivational Q)	1.2.1.	
T83	Why would that be a good thing?	motivational (exploratory) Q	1.1.1.	
C83	Roll over, get it off your chest. I don't know, make you come to terms with it in here, probably.	formulation is secondary to task implementation	2.2.4	self-formulation of experiencer part of self A2 B1 B2.1 C1 C2 C7 D2 E1.1 B4.2 B5.1 E2.2
T84	Help us come to terms with it. Feel a sense of relief getting it off your chest. Can you feel that in your body, how that would feel actually getting it out that sense of relief, how does it feel.	empathic reflection, process suggestion with exploratory Q	2.1.4. formulation is subsidiary to task implementation	formulating the experiencer as part of task implementation A1 B2.1 C1 C2 C7 D2 E1.1 B4.2 B5.1 E2.2
C84	I guess like lighter.		1.1.3	expression of experiencer part of self
T85	I feel lighter, I feel lighter.	empathic repetition	1.1.1.	
C85	Yeah, like in the chest region, it doesn't feel as tense.		1.1.3.	expression of experiencer part of self
Т86	Okay. So I don't like feeling, all that tension bottled up all the time?	empathic following, process suggestion (feeding lines) with conjecture	1.1.1	expressing) self-experiencer part
C86	No	confirming conjecture	1.2.1.	
T87	Yeah. So what do you want to say to this part of yourself, I want to get it off my chest, I want to feel free and feel.	receipt of information (empathic following) process suggestion (feeding lines) with formulation (of aspects of self) and conjecture		formulating (and expressing) self-experiencer part/ need A1 B2.2 B3.3 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C87	Yeah, I want to get it off my chest. I need you to talk about it, or else it's never going to get better.	confirming conjecture	2.2.4	self-formulation of experiencer part of self is part of task implementation A2 B2.2 B3.3 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
T88	And what is happening to you as you say that now?	exploratory Q	1.1.1.	

C88	I feel my more relaxed, not feeling so anxious. I know it's a harsh reality.		1.2.3.	expression of experiencer part
T89	Okay. Can you go back to the dialogue with your mom, I think you feel relaxed enough to put mom here again and [yeah] and just [okay] This is hard, I struggle with this, but I need to do it.	(empathic following) task structuring, process suggestion (feeding lines)	1.1.1	task structuring, returning to previous marker of UFB with mum and rationale (readiness) for returning to previous marker
C89	I don't know where to start.	client still struggling to start empty chair work again; response in relation to task F	1.2.1.	
Т90	Try putting your feet on the floor. Just get yourself a little grounded there. So, mom, all those years ofwhatever comes to mind.	process suggestion (emotion regulation) and offering encouragement for task as part of task structuring; feeding lines	1.1.1.	
C90	I don't know what to say.	client still struggling to start empty chair work again; response in relation to task F	1.2.1.	
T91	I'll suggest try coming over here and be mom [be mum?] be mum.	structuring task	1.1.1	
C91	oh god	starting this task	1.2.1.	
T92	How did mom treat you, be the way mom is [okay]If she if imagining that she you are going to confront her, what would she be like, she would say.	process suggestion (client in agreement) and task structuring	1.1.1.	
C92	She would be like, no, I'm not listening to this, you don't know what you're talking about, you're just a child.		1.2.2.	self-other themes (expressing internalised image of dismissing mum)
Т93	Okay, I'm not listening [right] You are just a child, this is	empathic repetition as part of feeding lines (process suggestion)	1.1.3	
C93	brush it off and nothing happened, that's what really you need to do.		1.2.2.	
T94	Nothing really happened. Yeah, nothing really happened.	empathic repetition / process suggestion	1.1.3.	
C94	You're overreacting you're pulling this out of proportion.		1.2.2.	
Т95	Okay, good, you're overreacting, so basically, it's not - there is nothing about me at all.	encouragement, empathic repetition as part of process suggestion (feeding lines) with conjecture		
C95	It all on you [it's all on you] It's not my fault. I never do wrong [I never do wrong] never do wrong	agreement with conjecture and adding more detail	1.2.2.	
T96	Never do wrong, you are overreacting, say that again to her.	empathic repetition as part of feeding lines, process suggestion	1.1.1.	
C96	you are overreacting		1.2.1.	
T97	You are overreacting, so come over here, that's the message coming, it's nothing to do with me. You are basically overreacting. I did nothing.	empathic repetition, structuring task, empathic reflection	1.1.1.	
C97	I feel like, I'm gonna sound like a jerk, but I feel like you're an oversized child, and I think you don't go where you want, you're short-tempered in terms and then you take it out on your children, that's all I feel.	mum	1.2.3.	
T98	Okay. And how do you feel when she says what is you are overreacting it's just you, feel angry.	empathic following, exploratory Q, process suggestion (be angry)	1.1.1.	
C98	Yeah, absolutely because I didn't do anything.	expression of anger towards mum as part of empty chair work	1.1.3	

Т99	Yeah I can't stand you, not taking responsibility [yeah] blaming me [yeah] Tell me more about your anger and your, all the anger you've sat with all these years.		2.1.4 formulation is subsidiary to task implementation	A1 B2.2 B2.3 B3.2 B3.3 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C99	I don't know	client struggling with task implementation (expression of anger)	1.2.3.	
T100	I hate it that you do this [yeah] its not right [it's not. I don't know]so what is happening?	feeding lines (process suggestion) exploratory question / process reflection (noticing client's self- interruption of anger)	1.1.1.	
C100	This makes me feel uncomfortable, I don't know why.	client struggling with task implementation (expression of anger)	1.2.3.	
T101	Then tell me more about that discomfort. Something about saying how angry you are.	tell me Q (exploratory Q) and exploratory reflection	1.1.1.	
C101	Yeah, I have never really addressed it, so I don't know how to address it.	troubles telling secondary to task implementation	2.2.4.	A2 B1 B3.1 C1 C2 C7 D2 E1.1 B4.2 B5.1 E2.2
T102a	Okay. It feels uncomfortable [yeah]Saying that it's like you shouldn't say that, you shouldn't be angry, you shouldn't.	receipt of information (empathic following) process reflection with empathic formulation	2.1.4. formulation is subsidiary to task implementation	A1 B2.2 B3.1 C1 C2 C3.2 D2 E1.1 B4.2 B5.1 E2.2
C102	I should be angry, [T102b: I should be angry, so I have a right to be angry]. But I feel like I've gotten to a little point where I'm so emotionally numb to it, that every time I feel it it doesn't faze me, so it never gets brought up. like a few minutes ago I was crying, but now, I'm not crying, it's like I pushed it away.	correcting therapist F then making explicit previously unspoken schematic content (making herself numb), formulation runs alongside task implementation T102b: empathic repetition and reflection	C102: 3.2. T102b: 2.1.1.	self self and self-other themes (self-interruption, making self- numb in relaxation to anger felt about mum) A2 B2.1 B3.1 B3.2 B4.2 B5.1 C1 C2 C4.2 D2 E1.2 E2.1
T103	Pushed it away again [yeah] shut down.	empathic repetition and formulation	2.1.1. consolidating, recycled,	self-formulation of self- interrupter A1 B3.1 B4.1 B5.2 C2 C3.1 D2 E1.1 E2.1
C103	Yeah, and like blocked out.	elaborating previous self- formulation (C102, T103)	2.2.5	self-formulation of self- interrupter A2 B3.1 B4.1 B5.1 C2 C3.2 D2 E1.1 E2.2
Т104	Blocked out. Okay. So that's again, so this is a part that you can you do this to yourself right [yeah] This process goes on. So come over here again. And it's like so how do you block yourself out, you get close to that anger, but you.	empathic repetition, empathic following, empathic formulation with task structuring, process suggestion and formulation		formulation of self- interruption, as part of task implementation but done in a reflective, building a story manner, bringing something new (you get close to that anger and then blocking it) A1 B3.1 B4.2 B5.1 C1 C2 C3.1 C3.2 D2 E1.2 E2.1
C104	And I pushed it away.	recycled self-formulation	2.2.1. (repeat of C102)	self-formulation of self- interrupter A2 B3.1 B4.1 B5.2 C2 C3.1 D2 E1.1 E2.2
T105	Pushed it, so just you say, you just pushed it away, pushed it to the side.	empathic repetition, process suggestion (feeding lines)	2.1.1 and 2.1.3	F of interrupter A1 B3.1 B4.1 B5.2 C2 C3.1 D2 E1.1 E2.2
C105	Push it to the side, pretend like it didn't happen.	recycled self-formulation	2.2.1.	self-formulation of self- interrupter A2 B3.1 B4.1 B5.2 C2 C3.1 D2 E1.1 E2.2
T106	Pretend like it didn't happen, okay. Can you do that to yourself over there, just push over there, go to the side, don't just pretend lie [lie] Be phoney. Pretend like it didn't happen. What's happening?	empathic repetition / process suggestion, conjecture, exploratory Q	2.1.4. formulation is subsidiary to task implementation	A1 B3.1 B4.1 B5.2 C2 C3.1 D2 E1.1 E2.2

C106	I don't know. I just don't know what to say, I don't	troubles telling secondary to	2.2.4.	A2 B2.1 B2.2 B3.1 C2 C3.2
	know what to say, I don't know how to address what I'm feeling.	task implementation		D2 E1.1 B4.1 B5.1 E2.2
	Till reening.			
T107	So you kind of numbed out. Zoned out.	process reflection / formulation with conjecture (zoned out)	2.1.3.	A1 B3.1 B4.1 B5.2 C2 C3.1 D2 E1.2 E2.2
C107	Yeah. That's exactly what it is [okay] That's exactly what it is.	it fits, client confirms	1.2.1.	
T108	You've zoned out.	process reflection / formulation	2.1.1. consolidating, recycled, and 2.1.3	A1 B3.1 B4.1 B5.2 C2 C3.1 D2 E1.2 E2.2
C108	I don't know if it's a coping mechanism	evaluating an aspect of formulation (the self-interruption)	2.2.3 and 2.2.5	A2 B2.1 B4.1 B5.1 C2 C7 D2 E1.2 E2.2
T109	Well, that's a way of escaping from difficult feelings [Yeah] so again, put your feet on the [sorry] And just grab no, no need to apologise, I'm just encouraging you to be present, centred and focused, so you zone out and how do you in a sense of how you do that, you just sort of go blank.		3.1.	formulation of self- interruption, as part of task implementation but done in a reflective, building a story manner, bringing something new (the role of the interruption to escape difficult feelings, by going blank) A1 B2.1 B2.2 B3.1 C1 C2 C3.2 D2 E1.2 B4.2 B5.1 E2.1
C109	Yeah. That's exactly I go blank and then when I am blank, I can't remember what happened in my past to address it, like.	it fits, client confirms conjecture, then continues to elaborate self-formulation	3.2.	self-formulation of self- interrupter A2 B3.1 B4.2 B5.1 C1 C2 C3.2 D2 E1.2 E2.1
T110	Okay. So go blank, just shut it all, shut it all out and then there is nothing there, it's like you've got a blank.	empathic following, process suggestion (feeding lines)	2.1.4. formulation is subsidiary to task implementation and 2.1.1	A1 B3.1 B2.1 B2.2 C1 C2 D2 E1.1 E2.2 B4.2 B5.2
C110	I feel like I'd have to like talk about a specific example of what's happened in the past in order to get emotional about it and to address how I felt.		0.2	
T111	Okay. Please.		0.1	
C111	Because right now I'm living in the present [okay] I'm not feeling that.		0.2	
T112	So can we do that, if you go back over to this chair, can you think of a specific incident? That happened in the past that was particularly troubling for you?	process suggestion,	1.1.1.	
C112	Yeah, so I'm gonna start again with my sister because that really bothered me [okay] Okay. So, my mom I don't know, I was too young to recognise if it was a drinking problem. But I noticed, now when she would have a drink is when her angry mood swings, what happen after. So, one time it was, she was hungover, and me and my sister were doing the dishes, trying to prevent her from yelling at us and talking down on us like we don't do anything around the house. So, we were trying to be proactive in a sense. Apparently, we were being too loud doing the dishes. So she slammed her door open and came into the kitchen and started yelling at us about waking her up, which was always a problem when we were growing up, we always wake her up and started yelling at my sister and telling her that she was fat, and my sister is overweight but, she started called her fat and saying how she needed to eat out of a dog bowl and she like brought out this big mixing bowl and saying that she from now on needed to eat out of that bowl and that bowl only.	her F of mum's abuse that angered her	2.2.2.1	A2 B1 B3.2 B3.3 C1 C3.1 C4.1 D2 E1.1 E2.2 B4.2 B5.2

T113	so insulting	process disclosure	1.1.3.	validating
C113	Exactly, absolutely and I - it was the first time I've ever stood up to my mom. I would never stand up to my mom, if it was about me, I would just take it and cry, I'll just take it and cry. But this is the first time I ever said so, I was just like, you have no right to talk to her like that at all. There was no reason ever.	self-reflection on progress in her life (standing up to mum for the first time)	3.2.	A2 B1 B3.2 C1 C2 D2 E1.2 E2.1 B4.2 B5.1
T114	Okay. I hear you.	acknowledging receipt of information (empathic following)	1.1.3.	validating
C114	Ever, it's that, no [great] And I said that and she didn't like that, she said don't tell me how to raise my kids, you don't know anything about raising children and so then she just didn't like that.		1.2.2	
T115	She didn't like that. So, she is not here now. So can you say that tell her more about that incident she can't shut you down, when you did that.	empathic repetition. process reflection / offering reassurance as part of structuring task, process suggestion	1.1.3 1.1.1	
C115	Yeah. You have no right to talk to your daughter like that at all. I don't know how you expect your children to ever become anything or want to become anything where they're constantly bogged down with insults after insults, as if they don't matter.	secondary self-formulation of anger at mum, as part of task implementation	2.2.4	A2 B2.3 B3.2 B3.3 C1 D2 E1.1 B4.2 B5.1 E2.2
T116	Okay, as if she didn't matter, how dare you talk to her and me like that. This is so damaging.	acknowledging receipt of information (empathic following) empathic repetition, process suggestion (feeding lines) with conjecture	2.1.1. 2.1.2.2.	A2 B1 B3.2 C1 C3.1 D2 E1.1 B4.2 B5.2 E2.2
C116	It is damaging [it is damaging] as a mother you should want your children to be the best they can be. And if you are the one bringing them down, there is no way [there's no way] It's so counterproductive. It doesn't make any sense at all. Doesn't make any sense.	confirming conjecture, stating a meaning protest	2.2.4.	A2 B2.3 B3.2 B4.2 B5.1 C1 C2 C3.2 D2 E1.1 E2.2
T117	Yeah, so this prevents us from being the best we can be.	empathic following, empathic reflection		A1 B1 C2 C3.1 D2 E1.2 E2.2 B4.1 B5.1
C117	yeah, oh (strong emotional reaction)	client expressing emerging emotion that is being formulated as part of task implementation	1.2.3.	
T118	what's happening, you're so furious	exploratory Q and process reflection /conjecture	2.1.2.2. and 2.1.3	formulating protective anger A1 B2.3 B2.2 B3.2 C3.2 C8 D2 E1.2 B4.1 B5.1 E2.2
C118	Furious. That's just so immature, you are a bully [you are a bully] to put it simply [okay, you are a bully]you just bully people		2.2.4	A2 B2.3 B2.2 B3.2 C1 C2 C3.2 D2 E1.1 E2.2 B4.2 B5.1 B3.3
T119	I don't like being bullied by you. And I don't deserve to be bullied by you [no] can you say that I don't deserve	conjecture, process suggestion	2.1.4. formulation is subsidiary to task implementation	A1 B2.2 B3.3 B3.2 B4.2 B5.1 C1 C2 C3.2 D2 E1.1 E2.2
C119	I don't deserve to be bullied by you.	expressing emotion being formulated	1.1.3	
T120	and how does it feel saying that?	exploratory Q	1.1.1.	
C120	good [what?] good [it feels great] Yeah, but it makes me like tear up a little bit.	expression of emotion being formulated as part of task implementation	1.2.3.	
T121	Like she, and so what are the tears?	exploratory Q	1.1.1.	
C121	I don't know. I guess		0.2	

T122	Put some words to them.	process suggestion	1.1.1.	
C122	Like a sense of relief [sense of relief] yeah		1.2.3.	
T123	Okay. To hear those words, to hear the truth of those words is that what, since that is a relief. So it hit home. I don't deserve to be, and it touches you, yeah. Anything else with your mother here [client silence] We don't have a lot of time, so are there some maybe final things you could say to kind of wrap it up for now and because_it sounds like you though have a whole lot else to say in your heart whether you say them to your real mother or not.	receipt of information (empathic following) with conjecture, process reflection; formulation; structuring task, [exploratory Q process suggestion] formulation	3.1.	formulation of experiencer, as part of task implementation but done in a reflective, building a story manner, bringing something new (the meaning of feeling relief in the experiencer chair, to have anger acknowledged, that there's a lot in her heart to say to mum) A1 B1 B2.2 B2.3 B3.2 D3 E1.2 E2.1 B4.2 B5.1
C123	I don't know [silence]	minimal response in relation to formulation	1.2.1.	
T124	How about if she bullies you again, in your real life anything you're going to.	exploratory Q / process suggestion	1.1.1	
C124	I don't need this anymore. I don't need you anymore.	expression of emerging boundary setting anger	1.2.3.	
T125	So it's like I refuse to put up with that.	empathic reflection	1.1.1.	
C125	Yeah, I refuse to put up with that anymore. There is absolutely no reason. It's like you are toxic for me, you don't benefit me at all. There is no benefit. It's all you do is take, all you do is bring me down and then you - then you try to act fake with me and then you try to pretend like oh, I love you, you know I love you right and you will say that like that, I don't be like actually, I don't know that. I don't know if you love me, you say it there is a difference between saying it	formulation (image of mum saying she loves her which doesn't fit with mum's	2.2.4	A2 B1 B2.2 B2.3 B3.2 B3.3 C1 C2 D3 E1.1 E2.2 B4.2 B5.1
T126	and showing it, and you don't show it. You don't show it, so I need you to put your money	actions) process suggestion with	2.2.3 1.1.1	
	where your mouth is. [Exactly] yeah	conjecture (feeding lines), client confirms		
C126	It's almost like you are saying, I love you, right, because you know that I don't think you love me and this is your way of trying to make amends because you don't know how to be an adult about the situation and address what you've done in the past, you don't.	evaluating an aspect of formulation (image of mum saying she loves her which doesn't fit with mum's actions)	2.2.3	A2 B1 B2.3 (instrumental love) B3.3 C1 C2 C7 D3 E1.2 E2.2 B4.2 B5.2
T127	Okay, so it's like I don't trust you, I don't trust your motives [no] I don't trust your sincerity [absolutely no] I don't, okay	acknowledging receipt of information (empathic following) process suggestion (feeding lines) with conjecture, client confirms		A1 B2.3 B3.2 C2 D3 E1.1 E2.2 B4.1 B5.2
C127	I do not trust your motives at all. I feel like you are manipulative, and you only have your own best interest at heart, you will do whatever it takes, just make sure that you are happy, you do not care about anyone else's happiness, you will use people to your own benefit, it's all about you, it's your big show.	confirming conjecture	2.2.4	secondary self-formulation A2 B2.3 B3.2 C2 D3 E1.1 E2.2 B4.2 B5.2
T128	It's your big show. So, I don't believe your concerns [exactly] are genuinely about me, okay	empathic repetition, process suggestion (feeding lines)	2.1.1.	repeated F A1 B2.3 B3.2 C2 D3 E1.1 E2.2 B4.1 B5.2
C128	I feel like that is just an act to look like a good mom.	evaluating an aspect of formulation	2.2.3	self-formulation of image of mum, self-other themes A2 B2.3 B3.3 C2 C7 D3 E1.2 E2.2 B4.1 B5.2
T129	Okay. And I'm not going to let you bully me anymore.	information (empathic following) with process suggestion (feeding lines) /conjecture	1.1.3	
C129	Right. I'm not going to.	expressing emotion being formulated	1.2.3	

T130	And how does it feel saying that?	exploratory Q	1.1.1	
C130	I feel pretty independent right now.	self-reflection on progress in her life (feeling independent in relation to mum)	2.2.5	A2 B1 B2.3 B3.1 B3.2 C2 D3 E1.2 E2.2 B4.1 B5.1
T131	You feel pretty independent, what, pretty solid?	empathic repetition, conjecture	2.1.2.2.	A1 B1 B2.3 B3.1 B3.2 C2 D3 E1.2 E2.2 B4.1 B5.1
C131	Yeah, I feel pretty solid right now. I don't think I could ever say that to her [okay] That's really, I feel like if she was actually there, I wouldn't be as confident saying that I feel like I would break down immediately.	self-reflection on progress in her life, then on what is still problematic (can't say this to her, I would break down)	3.2	A2 B1 B2.2 B2.3 B3.2 C1 C2 C3.2 D3 E1.2 E2.1 B4.2 B5.1
T132	For sure. I mean that make sense, that these things take time and you may never want to do that with her in your life, it will take time for you to decide whether you ever do want to confront her, but the point is you have a solid feeling within yourself about your own truth [yeah] And you feel like what you said just now is, your truth. And authentic- it sounds like, yeah [yeah] so how are you feeling?	[acknowledging receipt of information (empathic following), experiential teaching, expert reassurance with] formulation [(confirmed by client) exploratory Q]	3.1.	end of session story building F, self-other themes (speaking her truth to mum); self self: solid feeling within self about her truth and that her truth is authentic. A1 B1 B2.2 B2.3 B3.2 C1 C2 C3.1 D3 E1.2 B4.2 B5.1 E2.1
C132	I'm feeling okay. I'm feeling better [you're feeling okay] yeah, Im not like going to start crying, so that's what	F relevant detail,	1.2.2	
T133	you're feeling stronger [yeah] yeah [yeah]And so how are you feeling about what we did here in terms of your, what you may have gotten out of it or learned about yourself or —	process reflection / formulation (confirmed by client) empathic following exploratory Q	1.1.1.	gathering data towards F
C133	I've learned that I need to actually address how I'm feeling like rather than dwelling on me inside and to say that I love more to make it feel more real for me [okay] O think i need to	self-reflection on progress in life due to this session	3.2.	A2 B1 B2.1 B3.1 C1 C2 C3.1 D3 E1.2 B4.2 B5.1 E2.1
T134	Okay. So in terms of your original dilemma, should I push it under the table or push it under the carpet or should I try and resolve it, you are more <u>resolved</u> at least for yourself.	empathic following (receipt of information), empathic reflection with formulation	2.1.3. and 2.1.4 (task closure)	simple, single element F A1 B1 B3.1 C2 C3.1 D3 E1.1 B4.1 B5.2 E2.2
C134	I feel like yeah, I feel like I should resolve it at least for myself like find a way to find like positives I can take from the experience and I don't know, address that it shouldn't have happened but it happened and I need to move on, I need okay, I need to stop living in the past, that's how I feel. I should.	elaborating previous formulation	3.2.	A2 B1 B2.2 C1 C2 C3.1 D3 E1.2 E2.1 B5.1 B4.2
T135	You know that's what resolving it would be [yeah]It wouldn't be constantly nagging [nagging yeah] Could be more in the present and the future.	empathic reflection with experiential teaching	2.1.4. formulating marker for future work as bookmarking	A1 B2.2 C1 C2 C3.1 D3 E1.1 E2.2 B5.2 B4.2
C135	So then maybe I, if I ever if that does happen like, if I feel really confident in myself and that I have resolved it myself, then maybe I could be strong enough to resolve it with her.	elaborating previous formulation	3.2.	A2 B1 B2.2 B3.2 C1 C2 C3.1 D3 E1.2 E2.1 B5.1 B4.2
T136	In a way that made sense for you [yeah] Yeah. Wouldn't want you to go into a situation where you end up being hurt and dumped on again [exactly] Important thing is to feel strong in yourself.	process reflection, empathic following, personal disclosure with formulation and experiential teaching.	3.1.	A1 B1 B3.3 B2.2 B5.1 B4.2 C1 C2 C3.1 D3 E1.2 E2.1
C136	Yeah. Because I feel like if I don't feel strong on myself that I'd just really go into it, it's going to be pointless because I'm just going to break down and it's not going to go anywhere.	it fits, client agrees, then elaborates	3.2.	A2 B1 B2.2 B3.2 C1 C2 C3.1 D3 E1.2 E2.1 B5.1 B4.2

T137	So there are other there are therapies if you could find a therapy through the counselling centre or something which would give you an opportunity to express your feelings, I mean I think you could journal, I don't know if you have ever have thought about that, keep writing with your feelings, it would be important to write your feeling whereas all your thoughts and feelings without censoring yourself in any way that's very helpful for people [yeah]But it's also helpful to do it with another person who can you can there's lot of painful stuff there who people who could sort of professional who could provide support, who could some guidance and so on, but it seems the way to resolve is actually to do that, not to censor yourself.	end of therapy offering solution with experiential teaching, personal disclosure, empathic formulation, experiential teaching	3.1.	A1 B2.1 B3.1 C1 C2 C3.1 D3 E1.2 B4.2 B5.1 E2.1
C137	Yeah, absolutely.	client agrees	1.2.1.	
T138	Yeah. You will find a safe way to do that, so you can move on with your life [yeah] well that's great [yeah] Yeah, so we'll just we've got I don't know a few seconds, one minute [one minute] One minute we have so, anyway I appreciate you being here, it's been.	empathic following, expert reassurance, structuring task around end of session, process disclosure	0.1	
C138	It's been good, it's been beneficial.		0.2	
T139	Good to get to know you to have you express your feelings and be open, genuine and it's been an honour to work with you.	process disclosure	0.1	
C139	Thank you. I appreciate it [okay] its nice working with you		0.2	
T140	all right. so best of luck	empathic following, process disclosure	0.1	
C140	thank you		0.2	

Appendix H: Full Transcript and Analysis of Session 4

	Speaking Turn Session 2 of 6 EFT Over Time	Therapist Response Mode+ client agreement with Formulation	Degree of Formulation	What Kind of Formulation/ What is Being Formulated
T1	So, how are you today?	Exploratory Q	0.1	
C1	I feel okay.		0.2	
T2	Yeah. Okay.	empathic following	0.1	
C2	Yeah.		0.2	
Т3	You sound a little subdued, are you?	Focusing Q	1.1.1	gathering data towards F
C3	l didn't wake up anxious, so l didn't wake up overwhelmed today. l didn't wake up scared like l had in the past. l guess l'm getting a little bit more settled. A lot of things are more put away in the house so it's comfortable.	evaluating an aspect of F (carried forward from previous session)	2.2.3	A2 B1 B2.1 B2.2 C1 C3.2 C7 D1 E1.2 B4.2 B5.2 E2.2
T4	Yes. It is.	empathic following	0.1	
C5-6	But just had a little argument with my husband [T5:I see] We still had stuff we were moving from the other apartment [T6: yeah?] And yesterday a lot of the neighbourhood children helped me. They were very helpful, so I got most it out because he would have ended up doing it by himself. So I thought I was helping, but it's still, like there was a box with no tape on the bottom and he picked it up and everything fell out and so he was kind of upset about it and I told him, you know, he was just making it seem like, oh, you know, you guys don't care, you know, me and my kids, that we don't care, you know, that he helped move all our stuff and we can't help him and I'm like, I went over there and I did this yesterday, so I just felt like I never do enough to.	schematic memory	2.2.2.2.	self-formulation of self-other themes A2 B1 B3.2 B3.3 C1 C3.2 D1 E1.1 B4.2 B5.1 E2.2
Т7	To please him. You mean, in his eyes you can never do anything right	conjecture	2.1.2.2 conjectured narrative detail	self-other themes A1 B1 B3.3 C8 C3.2 D1 E1.2 B4.1 B5.1 E2.2
C7	Right. That's how I felt. So, I was upset about it. So that kind of just stopped me from going on and doing something maybe I had to do during the day before I had to, you know, come here, so it kinda made me feel kinda down [Down. Yeah. Yeah] Changed my whole spirit.	client confirms conjecture and schematic content	2.2.2.2.	self-formulation of self-self themes A2 B1 B2.2 B3.3 C1 D1 E1.1 B4.2 B5.1 E2.2
Т8	So, let's try and track that a little bit, I mean I can understand in general, but so you were sort of doing okay and then he, what happened, he gets upset with you, he yells at you, or he?	process suggestion, exploratory Q with exploratory reflection	1.1.3. then 1.1.1.	acknowledges client SF then gathering data towards F
C8	No, he wasn't yelling at me, he just, you know	unfinished sentence	0.2	
Т9	He's upset.	empathic repetition (picked up from C4.1/6)	0.1	
C9	Yeah, he's upset. He's making comments, you know, like throwing little wisecracks. <i>And I just get upset</i> .	F relevant detail	1.2.2	perceptual element (what the upset is about)
T10	Yeah. And this is you were helping move his stuff?		1.1.3 (for acknowledging client SF)	
C10	All of our stuff.		0.2	
T11	All of your stuff.	empathic repetition	0.1	
C11a	He made the comment that he moved our stuff, mine's and my children's.	formulation relevant narrative detail	1.2.2.	perceptual element

C11b	He always separates my children from our		2.2.2.2	A2 B1 B2.2 C1 D1 E1.1 B4.1
	daughter that we have together.			B5.1 E2.2
T12	I see. Yes.	empathic following	1.1.3. acknowledges client SF of her troubles	
C12	really don't, but honestly that's not the case. They may, they ignore him, they don't know how to be	formulation of their relational difficulties (his view of her children and her view of his attitude as the problem)	2.2.3. formulating others	A2 B1 C1 C7 D1 E1.1 B4.2 B5.2 E2.2
T13	To be very tense. Yeah. Yeah.		1.1.3 (for acknowledging client SF)	
C13	So they don't know what to do or say around him, or even sometimes to be with their little sister because he thinks that they're picking on her, they're teasing her, you know, and so they're very cautious when he's home, with her. They almost leave her alone. And she, you know, she's a typical toddler, she wants to have her way and do things, so it can create a problem.	implicit formulation relevant narrative	1.2.2	
T14	the middle and	exploratory reflection with		A1 B1 C2 C8 D1 E1.2 B4.1 B5.1 E2.2
C14	I am caught in the middle.		1.2.1. minimal response in relation to formulation	
T15	you understand (unfinished reflection)		0.1	
C15	a. Yeah. I'm not gonna let anybody abuse my children or do anything to hurt them, so I'm very cautious of that and so I'll stand up for them and so he feels like I'm taking their side and then you know if they do something wrong, you know, I am, but they don't really do anything towards him. b. They may not listen to him sometimes because I think they're fed up with him too.	evaluates an aspect of F	schematic content 2.2.3	A2 B1 B3.2 C1 C2 C7 D1 E1.1 B4.2 B5.1 E2.2
T16	But I think you're saying he perceives them as less respectful than they really are. It's more that they're cautious around him.	empathic reflection	interpersonal	reflects back client SF A1 B1 C1 C2 C3.1 D1 E1.2 B4.2 B5.2 E2.2
C16		minimal response in relation to F	1.2.1. confirms	
T17	But so then this morning, the box incident, he picked it up I guess, and the stuff fell out [Right] Then he gets upset, he says negative things [Right] And then somehow, this was in your old apartment, moving stuff from there [Right] So you're there and you were kinda feeling good or you were feeling okay.	empathic reflection	1.1.1	

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C17	l was at our new place, because it's		1.2.1. minimal	
	like right across the street.		response in relation to	
			formulation	
T18	Oh. I see.	empathic following	0.1	
C18	He went over there, and he came back, and he had just some of the bigger things, not even real, real heavy, but just a few of the bigger things. Otherwise, I probably, alone, would have taken him about four or five hours where he could have, everything he did took maybe less than an hour, if that much. And the box was not taped at the bottom. I kind of just, I couldn't find the tape, so I kind of just folded it up at the bottom so it would hold and so when he lifted it	formulation relevant narrative detail	1.2.2	
T19	lt sort of fell.	empathic following	0.1	
C19	It was mostly just like clothes and things, you know, and I know that's aggravating and frustrating when you've gotta move stuff.	formulation relevant narrative detail	1.2.2.	
T20	What I'm still trying to get you into is the moment where you start going down, because something happens. He's upset, there's this incident, he starts saying things and then sort of where did that happen, when you were in your new apartment? He came across?	Structuring task (mini unfolding) exploratory Q	1.1.1.	gathering data towards F (perceptual element of emotion scheme)
C20	He came back.		0.2	
T21	And he was expressing this to you.	empathic following	0.1	
C21	Right.		0.2	
T22	And then what happened? What does he actually say? Or when do you first notice yourself going down?	Exploratory Q focusing Q	1.1.1.	
C22	When he starts making negative, you know, he's frustrated, you know like the things that he says are very hurtful to me.	secondary self-formulation, part of task implementation (unfolding)	2.2.4	self other themes: others (husband) are hurtful, say negative things A1 B1 B3.3 C2 D2 E1.1 B4.2 B5.1 E2.2
T23	So, it's something about what he actually	empathic reflection with fit	1.1.1.	
C23	Yeah. It's what he says and his behaviour.	Q confirms, and adds detail	1.2.2	perceptual aspect of emotion scheme
T24	Like what?	Exploratory Q	1.1.1.	
C24	Like, what did he say? He said.		0.2	
T25	Well, it was like you said the one thing he said, l helped move	exploratory reflection	1.1.1.	
C25	I helped move all of <i>you and your kids'</i> stuff and you can't even do this one thing. You know, I have to move all this stuff. I'm like what do you mean? I said I did half of that work yesterday with the help of the children in the neighbourhood.	formulation relevant narrative	1.2.2.	
T26	But somehow, it's this thing about you and your kids. It's as though we're not, he's not together with me	exploratory reflection with conjecture	2.1.2.2 conjectured narrative detail	A1 B1 B3.3 C2 C8 D2 E1.2 B4.1 B5.1 E2.2
C26	Right.		1.2.1	
T27	Is that what it is?	exploratory / focusing Q	1.1.1.	

C27	Vach It was live both and may whom he gave your lide	self-reflection on what is	3.2.	A2 B1 B2.2 B3.2 B3.1 B3.3
	Yeah. It really bothers me when he says your kids [Yes. Yes.] Because I get the feeling that he doesn't like them. So then that creates a problem for me because I'm like well why am I with somebody who doesn't like my kids? It throws a lot of confusion into me and so I start thinking out my whole life again [Oh, wow. Yeah. Yeah] You know like why am I here, [why am I here} what's going on, what's gonna happen? You know?	problematic in her life		B4.2 B5.1 C1 C2 D2 E1.2 E2.1
T28/29	So, the whole thing, like the negative comments from him [Yeah, it just consumes me] about your kids, it just flips you into reviewing your whole life and then why am I here, I don't want to be, this isn't working or what am I getting?	formulation		A1 B1 B2.2 B3.1 B3.3 C1 C2 C3.1 D2 E1.2 B4.2 B5.2 E2.2
C29	Right. And then it brings up old things between us that never got settled. You know, because this is constantly every time something doesn't go his way.	elaborating previous F		A2 B1 B3.3 B3.2 C1 C2 C3.2 D1 E1.2 B4.2 B5.1 E2.1
T30	Right, so one thing and it just expands. Yeah. / So what does it bring up or what's the most painful thing or the most troubling thing that it brings up? You know, in the past, like he's What did it actually bring up today, do you know? / Because somehow you spiral off, right?	empathic following, empathic reflection with formulation //exploratory Q, exploratory reflection // formulation with fit Q		story building F with exploratory bit in the middle, which is also part of story building A1 B1 B2.1 B3.1 B3.3 B3.2 C1 C2 C3.2 D1 E1.2 B4.2 B5.1 E2.1
C3.10	Just, just hurt, I'm just hurt that I can't seem to find happiness and I know you can't be happy all the time and I know relationships require work, but I feel like.	making explicit previously unspoken schematic content (PM hurt)		A2 B1 B2.2 B3.2 C1 C2 C3.2 D1 E1.2 B4.2 B5.1 E2.1
T31/ 32	But it's almost like there's such a big pool of unresolved hurt. [a lot] That then when you get a little hurt, you kind of jump, it throws you right into that big pool.	evocative reflection / formulation, client confirms, empathic formulation		story building F of the PM hurt A1 B1 B2.1 B3.1 B3.2 C1 C2 C3.2 D1 E1.2 B4.2 B5.1 E2.1
C3.12	Right. Because we have been getting along for a few days. And so again, I told you with the vulnerability, for me even letting down my guard, and I have let down a little bit over the past week, it's hurtful when [when something comes in] he goes right back into those things again because I'm like why do I keep wasting my time?	client confirms and continues to elaborate F	3.2	inter and intrapersonal themes, story building formulation. A2 B1 B2.1 B3.1 B3.3 C1 C2 C3.2 D1 E1.2 E2.1 B4.2 B5.1
Т33	and thrown the key away or lost the key. But in a	process disclosure with empathic / evocative reflection, empathic exploration with formulation elements,		A1 B1 B2.1 B2.2 B3.1 B3.3 B3.2 C1 C2 C3.1 D1 E1.2 B4.2 B5.2 E2.2
C3.13	Right. I go right back in.	client confirms and continues to elaborate F		simple F A2 B3.1 C2 D1 E1.2 B4.1 B5.1 E2.2
T34	Right. You go right back. And then it's just	empathic following and empathic repetition		A1 B3.1 C2 D1 E1.2 B4.1 B5.2 E2.2
C3.14	Right, I've learned, I can go from being really, really emotional about things where I'll cry, it'll upset me and I can't function, to where I just can stop feeling.[right, so cut off]I just stop feeling. I don't feel anything. I can say I don't feel anything towards my children, I don't feel anything about anybody or anything around me, I don't cry anymore, I'm hard, just like forget it.	Making explicit previously unspoken schematic (about self-interruption)	3.2	self-formulation of self self themes (in order to cope with overwhelm, stop feeling, I'm hard, just forget it) A2 B2.1 B2.2 B3.1 B3.2 C1 C2 C3.2 D1 E1.2 E2.1 B4.2 B5.1
T35	Yeah. You steal yourself. Right. To deal with it.	empathic reflection / formulation	single element	reflects back client SF A1 B3.1 C2 C3.1 D1 E1.2 E2.2 B4.1 B5.2
C3.15	So, l kinda can go from one to another. It depends on, l guess, what's happening, how strong it is and how it's affecting me. And then it can affect my health, colds.	elaborating previous F	3.2	A2 B1 B3.1 B2.2 C1 C2 C3.2 D1 E1.2 E2.1 B4.2 B5.1

T36	You say you have a cold now, is that	empathic following	1.1.3.	bodily element
	rea say year nave a cora now, is muc		acknowledges client SF of her troubles	
C3.16	days before we were supposed to move and I had been feeling overwhelmed by the packing and	Client adds example that illustrates formulation (how her emotions/overwhelm affect her health)	2.2.2.1	A2 B1 B2.1 B2.2 C1 C3.1 C4.1 D1 E1.1 E2.2 B4.2 B5.2
Т37	Yeah, yeah, but still this hurt right seems to be like this big pool of past hurt with him right now			A1 B1 B2.1 B3.2 C2 C3.1 D1 E1.1 B4.1 B5.2 E2.2
C3.17	But then I think about, when I think about everything that's going on with me and him, [yes] I think about everything that went on in my past relationship with my ex-husband too [yeah], because I feel like I'm heading down the same road.	self-reflection on what is problematic in her life	3.2	self-other themes A2 B1 B2.2 B3.3 C1 C2 D1 E1.2 B4.2 B5.1 E2.1
Т38	The same path. Yeah, yeah	(acknowledging receipt of	1.1.3. acknowledges client SF of her troubles	
C3.18	into any of the signs that l, did l not wanna see them? You know? How do l change that? I've been	formulation (am I just heading down the same road,	2.2.3	A2 B1 C1 C7 D1 E1.2 E2.2 B4.2 B5.2
T39	Yes. Yes. So, what is it when you say you feel you choose the same kind of person, what is it that you think? You know, how does that? How do you make a comparison between now and before? This one and the previous one?		1.1.1.	gathering data towards F
C3.19	They're both, how are they alike or?	clarification Q, she doesn't understand the therapist Q	0.2	
T40	or I get myself involved I'm just trying to get an	confirming receipt of information, exploratory reflection, process disclosure		
C3.20		formulation (does she keep choosing the same kind of	2.2.3	A2 B1 C1 C7 D1 E1.2 E2.2 B4.2 B5.2
T41	This was your ex?	clarification Q	0.1	
C3.21	My ex doesn't drink at all, this one drank [so this is this one] and so, I don't think they were the same	formulation relevant narrative	1.2.2.	
T42	Yeah. I'm sure you didn't when you right, right, right		1.2.1. minimal response in relation to formulation	
C3.22	says they're both arrogant, you know they both have like an arrogance. And I did recognise that with my current husband a little bit. I don't know. That was something that kind of attracted me to him. He seemed very, I don't know, different.	evaluating an aspect of the formulation (i chose the same because I didn't see it at the time; evaluating mum's observation that both of them are arrogant to be true)	2.2.3	A2 B1 C1 C7 D1 E1.2 E2.2 B4.2 B5.2

T43	Yeah. Alright. Yeah, I mean, I understand. But I	empathic following,	2.1.5.	A1 B1 B3.2 C1 B3.1 C2 C3.2
	just imagine that when you're choosing them, you don't really know that it's the same. But then you can start turning it around on yourself and saying	acknowledging receipt of information, empathic conjecture, empathic formulation		D1 E1.2 E2.2 B4.2 B5.1
C3.23	I thought they were both funny. I like someone with a sense of humour and I thought they were both people that could make me kind of happy and laugh and you know?	making explicit previously unspoken schematic content (about choosing partners with a sense of humour because she thought they could make her happy)	3.2	A2 B2.2 B3.2 B3.3 C1 C2 C7 D1 E1.2 E2.1 B4.2 B5.1
T44	So, this is what attracted you to them.	empathic reflection	1.1.3 (for acknowledging client SF)	
C3.24	Yeah. But it turned out to be	client confirms	0.2	
T45	But still it seems the most central thing is this hurt and withdrawal, you know, when I get hurt, I really pull away and I'm gonna put up this steel wall to protect myself. And somehow, it's like how do you deal with being hurt and being in a relationship and managing it all	empathic formulation, exploratory reflection with formulation	3.1.	story building F of the self- interruption of PM hurt A1 B1 B2.1 B2.3 B3.1 B3.2 B3.3 C1 C2 C3.1 C3.2 D1 E1.2 E2.1 B4.2 B5.1
C3.25	l close. It varies. Like I said, sometimes I am, I'm distraught, I'm a mess, I can't function. And then sometimes I'm just, like whatever. I just get cold. I guess you could call it distant and kind of mean. I don't care. You know, leave me alone. I can go without talking to somebody for weeks.	client confirms, then elaborates	3.2.	A2 B1 B2.1 B3.1 B3.2 C1 C2 C3.2 D1 E1.2 E2.1 B4.2 B5.1
T46	Yeah. Yeah. So where are you now? With him?	empathic following, exploratory Q	1.1.3 then 1.1.1.	
C3.26	As of today?		0.2	
T47	Yeah. As of right now. I mean as you.	empathic following, implied exploratory Q	1.1.1.	
C3.27	I'm starting to close back up again. I don't, I'm tired of like a seesaw, I'm just tired.	SF of troubles telling	2.2.5 simple F	A2 B1 B3.1 B3.2 C2 D1 E1.2 B4.1 B5.1 E2.2
T48	A seesaw, yeah, of sort of opening and then getting hurt.	empathic repetition, empathic following, empathic formulation	2.1.1. recycled	A1 B1 B3.2 B3.3 B2.2 C1 C2 C3.1 D1 E1.2 E2.2 B4.2 B5.2
C3.28	I'm tired. Because I deal with mental illness, [okay] and sometimes things are a little harder for me and I want somebody to understand and don't make a bigger problem for me. Don't create more for me [Yes] Because like I said, I've always, sometimes I need somebody to be there for me. I don't wanna be a caretaker all the time. But I don't have that. I always have to be the caretaker. So, I get tired. I get extremely tired.	SF of troubles telling	3.2	A2 B1 B2.2 B3.2 B3.3 C1 C2 C3.2 D1 E1.2 E2.1 B4.2 B5.1
T49	And I hear that. And then it feels like it's just best to pull away and then to protect myself.	empathic following (acknowledging receipt of information), empathic reflection / formulation		A1 B1 B2.1 B3.1 B3.2 C1 C2 C3.1 D1 E1.2 E2.2 B4.2 B5.2

C3.29	Yeah. The only thing that makes me happy when	client confirms and	3.2.	A2 B1 B2.2 C1 C2 C3.2 D1
C3.29	I'm like that is shopping. I don't know why, but when I'm really, really down shopping even doesn't help me. [yes, yes, nothing helps] Nothing looks good. You know. But at other times, I just feel like I have to buy something to feel good. [yes, yes] And as soon as I'm home from the store, I wanna go right back out and buy something again.	continues to elaborate F		E1.2 E2.1 B4.2 B5.1
T50	a boost almost, right? [Right], Something for me	empathic formulation with conjecture	back and reflecting on the client's process by building a shared story but without connecting to key emotions	A1 B3.1 C1 C2 C3.1 D1 E1.2 E2.2 B4.2 B5.2
C4.10	Right.	client confirms	1.2.1. minimal response in relation to formulation	
T51	really dealing with him and your hurt and with him is one of the things that you are gonna have to do in order to get out of the seesaw, alright? I'm wondering if it would help us to try to bring him here, in imagination, you know, and to begin	formulation as part of task structuring, offering task, rationale for task, process suggestion, more formulation, closed Q checking client willingness to start task	2.1.4. task F	A1 B1 B3.2 B3.3 C1 C2 D1 E1.1 E2.2 B4.2 B5.2
C4.11		client confirms readiness for	0.2	
C4.11 T52	And you know this is not necessarily how you should be with him in the real world, but somehow these feelings of hurt and of withdrawal, they kind	task experiential teaching related to structuring task,	2.1.4. task F	A1 B1 B2.2 C2 C3.2 D1 E1.1 E2.2 B4.2 B5.2
	And you know this is not necessarily how you should be with him in the real world, but somehow these feelings of hurt and of withdrawal, they kind of get you into a knot, right?	task experiential teaching related to structuring task, formulation of rationale for	2.1.4. task F	
T52 C4.12 T53	And you know this is not necessarily how you should be with him in the real world, but somehow these feelings of hurt and of withdrawal, they kind of get you into a knot, right? Right. So let's try this. And what I'm going to suggest is imagine him here, if you will	task experiential teaching related to structuring task, formulation of rationale for task with fit Q client confirms process suggestion	2.1.4. task F	
T52	And you know this is not necessarily how you should be with him in the real world, but somehow these feelings of hurt and of withdrawal, they kind of get you into a knot, right? Right. So let's try this. And what I'm going to suggest is imagine him here, if you will	task experiential teaching related to structuring task, formulation of rationale for task with fit Q client confirms	2.1.4. task F	E2.2 B4.2 B5.2
T52 C4.12 T53 C4.13 T54	And you know this is not necessarily how you should be with him in the real world, but somehow these feelings of hurt and of withdrawal, they kind of get you into a knot, right? Right. So let's try this. And what I'm going to suggest is imagine him here, if you will Okay And his name is?	task experiential teaching related to structuring task, formulation of rationale for task with fit Q client confirms process suggestion	2.1.4. task F 0.2 1.1.1. 0.2 0.1	E2.2 B4.2 B5.2
T52 C4.12 T53 C4.13	And you know this is not necessarily how you should be with him in the real world, but somehow these feelings of hurt and of withdrawal, they kind of get you into a knot, right? Right. So let's try this. And what I'm going to suggest is imagine him here, if you will Okay	task experiential teaching related to structuring task, formulation of rationale for task with fit Q client confirms process suggestion	2.1.4. task F 0.2 1.1.1. 0.2	E2.2 B4.2 B5.2
T52 C4.12 T53 C4.13 T54	And you know this is not necessarily how you should be with him in the real world, but somehow these feelings of hurt and of withdrawal, they kind of get you into a knot, right? Right. So let's try this. And what I'm going to suggest is imagine him here, if you will Okay And his name is? Carlo Carlo. Okay. So we're gonna put Carlo there and can you actually see him? Try and stay in touch with him, not me [okay] It's as though he were really here [okay] So can you see him?	task experiential teaching related to structuring task, formulation of rationale for task with fit Q client confirms process suggestion	2.1.4. task F 0.2 1.1.1. 0.2 0.1	E2.2 B4.2 B5.2
T52 C4.12 T53 C4.13 T54 C4.14	And you know this is not necessarily how you should be with him in the real world, but somehow these feelings of hurt and of withdrawal, they kind of get you into a knot, right? Right. So let's try this. And what I'm going to suggest is imagine him here, if you will Okay And his name is? Carlo Carlo. Okay. So we're gonna put Carlo there and can you actually see him? Try and stay in touch with him, not me [okay] It's as though he were really here [okay] So can you see him?	experiential teaching related to structuring task, formulation of rationale for task with fit Q client confirms process suggestion client agrees/collaborates empathic repetition, acknowledging receipt of information (empathic following), task structuring,	2.1.4. task F 0.2 1.1.1. 0.2 0.1 0.2	E2.2 B4.2 B5.2
T52 C4.12 T53 C4.13 T54 C4.14 T55	And you know this is not necessarily how you should be with him in the real world, but somehow these feelings of hurt and of withdrawal, they kind of get you into a knot, right? Right. So let's try this. And what I'm going to suggest is imagine him here, if you will Okay And his name is? Carlo Carlo. Okay. So we're gonna put Carlo there and can you actually see him? Try and stay in touch with him, not me [okay] It's as though he were really here [okay] So can you see him? I can see him. What do you see, or what do you sense when you try to bring him in?	experiential teaching related to structuring task, formulation of rationale for task with fit Q client confirms process suggestion client agrees/collaborates empathic repetition, acknowledging receipt of information (empathic following), task structuring,	2.1.4. task F 0.2 1.1.1. 0.2 1.1.1. 0.2 1.1.1.	E2.2 B4.2 B5.2
T52 C4.12 T53 C4.13 T54 C4.14 T55 C4.15	And you know this is not necessarily how you should be with him in the real world, but somehow these feelings of hurt and of withdrawal, they kind of get you into a knot, right? Right. So let's try this. And what I'm going to suggest is imagine him here, if you will Okay And his name is? Carlo Carlo. Okay. So we're gonna put Carlo there and can you actually see him? Try and stay in touch with him, not me [okay] It's as though he were really here [okay] So can you see him? I can see him. What do you see, or what do you sense when you try to bring him in? Someone who wants to understand but doesn't	experiential teaching related to structuring task, formulation of rationale for task with fit Q client confirms process suggestion client agrees/collaborates empathic repetition, acknowledging receipt of information (empathic following), task structuring, process suggestion exploratory Q formulation relevant	2.1.4. task F 0.2 1.1.1. 0.2 0.1 0.2 1.1.1.	E2.2 B4.2 B5.2
T52 C4.12 T53 C4.13 T54 C4.14 T55 C4.15	And you know this is not necessarily how you should be with him in the real world, but somehow these feelings of hurt and of withdrawal, they kind of get you into a knot, right? Right. So let's try this. And what I'm going to suggest is imagine him here, if you will Okay And his name is? Carlo Carlo Okay. So we're gonna put Carlo there and can you actually see him? Try and stay in touch with him, not me [okay] It's as though he were really here [okay] So can you see him? I can see him. What do you see, or what do you sense when you try to bring him in? Someone who wants to understand but doesn't know how. Who wants to understand. So, tell him. I know you wanna understand.	experiential teaching related to structuring task, formulation of rationale for task with fit Q client confirms process suggestion client agrees/collaborates empathic repetition, acknowledging receipt of information (empathic following), task structuring, process suggestion exploratory Q formulation relevant narrative detail empathic repetition, process suggestion, empathic	2.1.4. task F 0.2 1.1.1. 0.2 1.1.1. 0.2 1.1.1.	E2.2 B4.2 B5.2
T52 C4.12 T53 C4.13 T54 C4.14 T55 C4.15 T56 C4.16	And you know this is not necessarily how you should be with him in the real world, but somehow these feelings of hurt and of withdrawal, they kind of get you into a knot, right? Right. So let's try this. And what I'm going to suggest is imagine him here, if you will Okay And his name is? Carlo Carlo. Okay. So we're gonna put Carlo there and can you actually see him? Try and stay in touch with him, not me [okay] It's as though he were really here [okay] So can you see him? I can see him. What do you see, or what do you sense when you try to bring him in? Someone who wants to understand but doesn't know how. Who wants to understand. So, tell him. I know you wanna understand. Carlo, I know you wanna understand, but you're not capable. You allow your anger to get in the way.	experiential teaching related to structuring task, formulation of rationale for task with fit Q client confirms process suggestion client agrees/collaborates empathic repetition, acknowledging receipt of information (empathic following), task structuring, process suggestion exploratory Q formulation relevant narrative detail empathic repetition, process	2.1.4. task F 0.2 1.1.1. 0.2 0.1 0.2 1.1.1. 1.2.2	E2.2 B4.2 B5.2

C4.18	lt's, it's making me a miserable person. I'm not happy.	secondary self-formulation, part of task implementation	2.2.4	A2 B1 B3.2 C2 D2 E1.1 E2.2 B4.1 B5.2
T59	Yeah. Tell him about it. I'm not happy	empathic following, process suggestion, empathic repetition	1.1.3. acknowledges client SF of her troubles	
C4.19	l'm not happy. (crying)	client expressing emerging emotion that is being formulated as part of task implementation	1.2.3.	
T60	Yeah. Breathe. Just let, you know, these are important tears. It's okay. Tell him about, what are the tears saying?	empathic following, process suggestion about emotion regulation, experiential teaching, reassurance as part of task structuring, process suggestion	1.1.1.	
C4.20	Can't you see I'm hurt?	client expressing emerging emotion that is being formulated as part of task implementation	1.2.3.	
T61	I feel so hurt.	empathic repetition	1.1.3	
C4.21	I feel extremely hurt [yeah], I'm tired.	secondary self-formulation, part of task implementation	2.2.4	A2 B1 B3.2 C2 D2 E1.1 E2.2 B4.1 B5.2
T62	Yeah. And I can hear that.	empathic following, acknowledging receipt of information	1.1.3	
C4.22	I don't know what to do		1.2.2	
T63	Right. And I'm really tired of the seesaw of trying or of even hoping, I guess. Right?		conjectured	formulating hopelessness A1 B1 B2.2 B2.3 C2 D2 E1.1 E2.2 B4.1 B5.1
C4.23	Yeah. I wanna give up. And when I wanna give up. I don't wanna give up, I wanna give up on life. I'm tired. It's like I can't see anything worthwhile anymore. Not even for my kids. But sometimes that's what keeps me holding on when I really dig deep inside. My kids are what keeps me here because they, I don't have my father, and so I know what that would do to them if I wasn't here.		3.2	A2 B1 B2.1 B3.1 B3.2 C1 C2 C3.2 D2 E1.2 E2.1 B4.2 B5.1
T64	And so that's I do wanna keep up the struggle just for my kids, but sometimes it's like I've got nothing left.	empathic reflection / refocusing	2.1.1. recycled	A1 B1 B3.2 B2.2 C1 C2 C3.1 D2 E1.2 E2.2 B4.2 B5.2
C4.24	I'm tired.		1.2.1. minimal response in relation to formulation	
T65	I'm so tired and I would so much want to just have somebody there for me but you're never there.	empathic repetition then conjecture through feeding lines (process suggestion)	2.1.2.2 conjectured narrative detail	formulating unmet need to be cared for A1 B1 B3.2 B3.3 B2.2 C1 C2 C3.1 D2 E1.1 B4.2 B5.1
C4.25	He's never there.		1.2.1. confirms	
T66	Yeah. Just breathe. Yeah. And so, it's this terrible sense of like there's no, you just wanna give up, right [Right.] And then what happens with you?	acknowledges receipt of information, process suggestion, empathic following, exploratory reflection / fit Q / then exploratory Q	1.1.1.	gathering data/building towards a F sequence (first there's this terrible sense of you just wanna give up, then what happens for you)
C4.26	I feel a little better. Saying it [Yeah. Yeah] If I could just listen and understand.	formulation relevant narrative	1.2.2.	the F relevant bit is naming the unmet need to be listened to and understood
T67	Sorry, if?	clarification Q	1.1.1.	
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C4.27	If he could listen and understand	formulation relevant	1.2.2.	
T68	If he could listen and understand. Yeah. Right.	empathic repetition, acknowledging receipt of information	1.1.1.	
C4.28	And believe me.	formulation relevant narrative detail	1.2.2.	unmet need to be acknowledged
T69	So, tell him what you need him to understand.	process suggestion	1.1.1.	
C4.29	I need you to understand that like when I cry, he doesn't like to see me cry, he gets angry.	formulation relevant narrative detail	1.2.2.	
Т70	Yeah. But tell him what you need.	acknowledges receipt of information, process suggestion	1.1.1.	
C70	I need you to listen [yeah] I need you to.		1.2.2.	
T71	To let me cry.	process suggestion with conjecture	1.1.1.	
C71	Exactly. Let me cry.	confirms	1.2.3.	
T72	And listen to me.	process suggestion / empathic repetition	1.1.1.	
C72	Be affectionate. [yes, yes] And open up to me.	client is expressing emergent emotion that is being formulated as part of task implementation	1.2.3.	
T73	Right. Rather than get angry and close me down.	empathic following, process suggestion with conjecture	1.1.1	
C73	Yes. Stop putting me down.	client is expressing emergent emotion (assertive anger) that is being formulated as part of task implementation	1.2.3.	
T74	Tell him that again.	process suggestion	1.1.1.	
C74	Stop putting me down [yeah] He gets mad at me a lot and he'll call me names.		1.2.2.	
T75	Yeah. So, tell him how that makes you feel.	empathic following, process suggestion	1.1.1.	
C75	That's very hurtful [yes, yes] He curses at me, he calls me out my names, calls me out my name. I'm tired of it. I don't deserve that.		1.2.3.	
T76	Tell him again.	process suggestion	1.1.1.	
C76	I don't deserve that		1.2.3.	
T77	Yes. Yes. Say I want you to stop.	empathic following, process suggestion with conjecture	1.1.1.	
C77	I want you to stop. And I want you to respect my children. That's very hurtful. Stop separating my children. [right] Because that puts me in another position, in the middle.	secondary self-formulation, part of task implementation	2.2.4	A2 B2.2 B3.2 B3.3 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
T78	Yes. Yes. I want you to support us all, be there for us all [right] yeah	empathic reflection / process		
C78	Be here for us all.	suggestion confirms conjecture		
T79	Why are you angry at him?	exploratory Q	1.1.1.	
C79	His attitude.		1.2.2.	
T80	Tell him what you resent. These are built up things, right?	process suggestion, then empathic formulation	2.1.4.	formulation is subsidiary to task implementation (chair work) A1 B1 B3.2 C2 D2 E1.1 E2.2 B4.1 B5.2 B2.3

C80	negative. It's hard to deal with. I'm angry with the fact that you drink. I know he hasn't been drinking a lot lately, but you could always fall back into that place and so I'm always on edge when we go to parties, on holidays, if he has a couple of days off. I worry that you're gonna drink and we're gonna, I'm gonna end up being by myself. Because I'm not gonna tolerate it.	part of task implementation		A2 B1 B2.2 B3.2 B3.3 C1 C2 D2 E1.1 E2.2 B4.2 B5.1 B2.3
T81	I see. So, this is the anxiety that you live in.	reflection / formulation	2.1.3. simple single element F (also 2.1.4.2)	
C81		formulation relevant narrative	1.2.2.	
T82		process suggestion, empathic repetition	1.1.1.	
C82	You are getting better and I'm glad that you have taken these steps but there are more steps that need to be taken to ensure me, to get me to a place where I'm comfortable and I'm not living in this anxious state all the time because I'm not comfortable.			A2 B1 B2.2 B2.3 B3.2 B3.3 C1 C2 C3.2 D2 E1.1 E2.2 B4.2 B5.1
T83	So, tell him what the steps are.	process suggestion	1.1.1.	
C83	Going to therapy. Alcoholics Anonymous, because you can't do it by yourself. I don't think you can do it by yourself I don't think you can do it by yourself. You need help. I need help. I'm getting the help that I need. You need help and I think we need, like counselling together to get us to a comfortable point with each other again because I don't know how to do it. And obviously you don't know how to do it because you would have done it by now and so I just don't see any movement.		1.2.2.	
T84	So, these are some of the things you want, right?		1.1.3. acknowledges client SF of her troubles as part of task implementatio	
C84	Yes	confirms	0.2	
T85	of a leap, but let's go to that really hurt place where you lock away inside if you can and if	process suggestion with structuring task and formulation, more process suggestion	2.1.4.	A1 B2.1 B3.1 C1 C2 D1 E1.1 E2.2 B4.2 B5.2
C85	It's hard to explain. I don't know, I just have a place inside of me that makes me feel safe. There's so much pain, there's so much hurt, there's so much anger, there's so much resentment, there's just all my feelings and I don't know where else to go or what else to do.	secondary self-formulation, part of task implementation	2.2.4	A2 B2.1 B2.2 B3.1 B3.2 C1 C2 C3.2 D1 E1.1 E2.2 B4.2 B5.1
T86	Yeah. Yeah. So, tell him what you do do.	empathic following, process suggestion	1.1.1	
C86	l go and l shut down. l shut down, I pull away, and		2.2.4.	A2 B3.1 C1 C2 C3.2 D1 E1.1 E2.2 B4.2 B5.1

T87	Right. I understand. But it feels like, once you're in	empathic following,	2.1.2.2	A1 B1 B2.1 B3.1 C2 C3.2 D1
	there, that it's out of your control.	empathic reflection with	conjectured narrative detail	E1.1 B4.1 B5.1 E2.2
C87		part of task implementation	2.2.4	A2 B3.1 B3.3 B3.2 C1 C2 C3.2 D1 E1.1 E2.2 B4.2 B5.1
T88	something else with the chairs now [ok] Can you come over here? I want you to be this wall, the protective wall over here. And over here we'll have the hurt. So, and I'll help you with this. So come	suggestion with task structuring and formulation, offering encouragement for task, more process suggestion in evocative manner, fit Q	2.1.4. task F	A1 B3.1 B2.2 C2 D2 E1.1 E2.2 B4.2 B5.1
C88	The wall		1.2.1. minimal response in relation to formulation	
T89	Okay, I want you to be the wall. And just describe yourself you know, as a wall, I'm big, I'm thick, or whatever.	suggestion, exploratory reflection	1.1.1.	gathering data towards F
C89	I know what you mean [yeah], I'm talking to?		0.2	
T90	Really just		0.1	
C90		secondary self-formulation, part of task implementation	2.2.4	Self-self themes (self-interruption) A2 B3.1 C2 D2 E1.1 E2.2 B4.1 B5.2
T91	So here, we'll put you here, so there's the wall and I'm protecting you.	process suggestion, empathic repetition	1.1.1.	
C91	I'm protecting you from any more hurt, anymore,		2.2.4.	self-formulation of self self themes (self-interruption) A2 B3.1 C2 D2 E1.1 E2.2 B4.2 B5.1
T92	Say this again	process suggestion	0.1	
C92	without me you'd fall apart		1.2.2.	
T93	So, I hold you together	process suggestion with conjecture	1.1.1.	
C93	I hold you together, I'm your backbone.	confirms conjecture, elaborates in evocative manner	1.2.2.	
T94		exploratory Q, exploratory reflection	1.1.1.	
C94		secondary self-formulation, part of task implementation	2.2.4.	A2 B3.1 C2 D2 E1.1 E2.2 B4.1 B5.1
T95		empathic repetition, process suggestion with formulation	2.1.4. F is secondary to task implementatio n	A1 B3.1 C2 D2 E1.1 E2.2 B4.1 B5.2

C95	Co you want ma to avalain?	client doesn't understand	1.2.1. minimal	
C93	So you want me to explain?	chent doesn't understand	response in	
			relation to	
			formulation	
T96	Yeah, actually do it to her because you know here	empathic following process	1 1 1	
170	you are, you've just been hurt, you know I've taken		1.1.1.	
	stuff for your children and all that stuff. So how do	structuring (offering		
G0.6	you do it?	rationale)	0.1	
C96	So what is the wall telling her?		0.1	
Т97	Yes. What do you say?	empathic following with process suggestion	1.1.1.	
C97	Just come behind me. I'm gonna.	F relevant detail	1.2.2.	
T98	Come behind me	empathic repetition / process	1.1.1.	
		suggestion		
C98		secondary self formulation, part of task implementation	2.2.4	self self themes (self interruption) and self other themes (others hurt you, Im gonna protect you from them) A2 B3.1 B2.2 B3.3 C1 C2 C3.2 D2 E1.1 E2.2 B4.2 B5.1
T99	Yes. Let him go.	empathic following,	1.1.3.	
		empathic repetition / process suggestion	acknowledges client SF	
C99	Or anybody who's hurting you, just let them go.	F relevant detail	1.2.2.	
T100	And just come behind me.	empathic repetition / process suggestion	1.1.1.	
C100	Just come behind me and I'll protect you.	recycled self F as part of task implementation	1.2.2	
T101	Right. Right. So I'll keep him out.		2.1.4.2. F is	
			secondary to	
			task implementatio	
			n	
C101		secondary self formulation, part of task implementation	1.2.2.	
T102	Tell her this again.	process suggestion	1.1.1.	
C102	We don't need anybody, just us.		1.2.2.	
T103	Just us?	empathic repetition	1.1.1.	
C103	Just me and you		1.2.2.	
T104	Just me and you. Why?	empathic repetition,	1.1.1.	
		exploratory Q		
C104		secondary self formulation, part of task implementation	2.2.4.	A2 B3.1 B2.2 B3.2 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
T105		process suggestion with empathic repetition, task	1.1.1.	
	me [right] Right. Right. Can you change? Come	structuring with process		
		suggestion		
C105	the wall, tell her. How I feel?		0.2	
T106	Yeah.		0.1	
				1.0 D1 D2 1 C2 0 D2 T1 1
C106	I feel the same. I don't feel like I can make it without the wall. I need you.	secondary self-formulation part of task implementation	2.2.4	A2 B1 B3.1 C3.2 D2 E1.1 E2.2 B4.1 B5.1
T107	I need you.	process suggestion with conjecture	1.1.1	
C107	I need you.	conjecture	1.2.3	

T108		process suggestion with conjecture	1.1.1	
C108	I appreciate you, you're my comfort, you're my,	secondary self-formulation, part of task implementation	2.2.4.	A2 B1 B3.1 C3.2 D2 E1.1 E2.2 B4.1 B5.1
T109	So, you saved my life.	process suggestion with conjecture	1.1.3. acknowledges client SF	
C109	Yeah. Yeah. A lot.	client confirms	1.2.1. confirms	
T110	So, I really, really need you.	process suggestion with conjecture	1.1.1.	
C110		client expressing emerging emotion that is being formulated as part of task implementation (interrupted emotion)	1.2.3.	
T111		empathic following and experiential teaching with process reflection	1.1.1.	
C111	Because it's not a way to live. But this is the way I	secondary self-formulation, part of task implementation	2.2.4	A2 B1 B2.2 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
T112	So somehow there's a part of you that's saying	exploratory reflection	1.1.1.	
C112		secondary self-formulation, part of task implementation	2.2.4 and 2.2.5	A2 B1 B2.2 B3.1 C2 D2 E1.1 E2.2 B4.1 B5.1
T113	But also, it's not fair and I'd like to, what?	exploratory reflection with refocusing	1.1.1.	
C113	I'd like to have more balance in my life. I'd like to	secondary self-formulation, part of task implementation	2.2.4	A2 B1 B2.2 B3.1 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
T114/T11	[C114: want to] Or, you know, I mean it's important that there are things out there, because you do need things out there, but it's like I don't	process suggestion with conjecture; experiential teaching, process suggestion and formulation with conjecture	2.1.4 conjectured narrative detail [0.2] for C114	A1 B3.1 B2.2 C1 C2 C8 D2 E1.1 E2.2 B4.2 B5.1
C115	Yeah. I'm safe at home with nobody but myself.		1.2.3.	
T116	So, what does that part of you wanna say to the wall?		1.1.1.	
C116	The part that?		0.2	
T117	That somehow doesn't wanna be so isolated or so cut off.		1.1.1.	
C117	I wanna be protected, but I don't wanna be	secondary self-formulation, part of task implementation	2.2.4	A2 B1 B2.1 B3.1 C1 C2 C3.2 D2 E1.1 E2.2 B4.2 B5.1
T118	Yeah.Say that again	process suggestion	1.1.1.	
C118	I wanna be protected but I don't wanna be trapped. I don't wanna be stay stuck. I wanna be able to reciprocate when someone is trying to.	secondary self-formulation, part of task implementation	2.2.1 and 2.2.4	A2 B1 B2.1 B3.1 C1 C2 C3.2 D2 E1.1 E2.2 B4.2 B5.2
T119	To come in.	conjecture	1.1.1.	
C119		part of task implementation	2.2.4	A2 B1 B2.1 b3.1 B3.2 B3.3 C1 C3.2 D2 E1.1 E2.2 B4.2 B5.1
T120	Then it just escalates.	empathic reflection	2.1.3. simple single element F	A1 B1 C2 D2 E1.1 E2.2 B4.1 B5.1

C120		recycled, confirms and repeats therapist F	2.2.1	A2 B1 C2 D2 E1.1 E2.2 B4.1 B5.2
T121	Right. Right. So, it both protects you but also	empathic following and empathic formulation	2.1.4. F is secondary to task implementatio n	A1 B1 B3.1 C1 C2 C3.2 D2 E1.1 E2.2 B4.2 B5.1
C121	What I really want.	F relevant detail	1.2.2.	
T122	Yeah, and what you really want So, what do you want from her? And she's really you [right] I want you		1.1.1.	
C122		secondary self-formulation, part of task implementation	2.2.4	formulating the experiencer needs A2 B1 B3.1 C1 C2 C3.2 D2 E1.1 E2.2 B4.2 B5.1
T123	Yeah. Can't move forward if you've got me locked or trapped.	process suggestion with conjecture (locked, trapped)	2.1.4. F is secondary to task implementatio n	A1 B1 B3.1 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
C123	Right, right	confirming conjecture	1.2.1. confirms	
T124	Okay. Can you come over here [sure] So, now as the wall, as the protector. What do you hear her say first?	empathic following, process suggestion with task structuring	1.1.1.	
C124	What did I hear her say?		0.2	
T125	yeah		0.1	
C125	That she wants to be more open and more loving.	F relevant detail	1.2.2.	
T126	What does she want from you?		1.1.1.	
C126	She wants me to probably become smaller and smaller and smaller and maybe just something that you can lean back on, but not get trapped, you know. Just a slight barrier, a slight protective barrier, but not like a cage or a prison.	secondary self-formulation, part of task implementation	2.2.4	A2 B3.1 B2.1 B2.2 C1 C2 C3.2 D2 E1.1 E2.2 B4.2 B5.1
T127	Or at least one with a door.	empathic conjecture	1.1.1.	
C127		secondary self-formulation, part of task implementation	2.2.4	A2 B2.2 B1 C1 C2 C3.2 D2 E1.1 E2.2 B4.2 B5.2
T128	Right. Right. So, what do you say? She's saying let me have a way out, or a door through the wall [yeah] What do you say to that?	empathic following, process suggestion,	1.1.1.	
C128	I'm the wall again?		0.2	
T129	Yeah. As the wall.		0.1	
C129	You can't make it without me. We tried that before. We started that way.		1.2.2.	
T130	Yeah. We started, yeah.		1.1.3. acknowledges client SF	
C130	Yeah, with every new relationship you start that way and people just keep hurting you or things just keep happening and so I can't go away. I don't know how to go away. You won't let me go away. It's her that won't let the wall go away, so the wall stays.	secondary self-formulation, part of task implementation	2.2.4	A2 B1 B2.1 B3.1 B3.3 C1 C2 C3.2 D2 E1.1 E2.2 B4.2 B5.1
T131	So, you want, you're saying you want me or you need me, and I know you?	process suggestion with conjecture	2.1.4. F is secondary to task implementatio	A1 B2.2 B3.1 C2 C8 D2 E1.1 E2.2 B4.2 B5.1
C131	Yeah	confirms	1.2.1. confirms	

T132	But she's saying also that I need you. See, I don't		2.1. 4 F is	A1 B2.2 B3.1 B2.1 C2 D2
	hear her saying she wants you to go away, I hear her saying she wants you to open a door.	formulation	secondary to task	E1.1 E2.2 B4.2 B5.2
	ner saying she wants you to open a door.		implementatio	
C132	Become smaller.		n 1.2.2.	
T133	Right. Tell her what you're afraid of. If I let you	process suggestion	1.1.1.	
	out, if 1?	1 55		
C133	If I let you out, you're gonna get hurt.		1.2.2.	
T134	Again	conjecture	1.1.1.	
C134	Again. And it may be worse this time. Who knows, I may not be able to bring you back, save you, this time.		1.2.2.	
T135	Yeah. So, this is the fear? [yeah] Because, tell her what happened before or what your fear is.	1 8/1	1.1.1.	
C135	You became extremely depressed. You couldn't function. You couldn't work. You couldn't take a shower. You couldn't brush your teeth. You couldn't go outside. You couldn't listen to music. You couldn't watch TV. You couldn't read. You couldn't watch your children.	Client adds example that illustrates formulation of where fear comes from	2.2.2.1	A2 B1 B2.1 B2.2 C1 C3.1 C4.1 D2 E1.1 E2.2 B4.2 B5.2
T136	So, I'm afraid that if you get hurt, if you get hurt so bad, then you'll go back there?	process suggestion with conjecture and formulation	1.1.1.	
C136	I'll go back there. Or I'll be worse.		1.2.2.	
T137	Right. Say that you'll be worse.	process suggestion	1.1.1.	
C137	You'll be worse.		1.2.2.	
T138	So therefore, I keep you?		1.1.1.	
C138	I keep you safe and grounded and alive because sometimes you don't wanna live anymore because life is too hard. So, I step in and protect you	secondary self-formulation, part of task implementation	2.2.4	A2 B1 B2.1 B3.1 B2.2 C1 C2 C3.1 D2 E1.1 E2.2 B4.2 B5.1
T139	Protect you. Right. So, it's a very important function, right? [yeah], but it also keeps her trapped.	1 1	2.1.4. F is secondary to task implementatio n	A1 B1 B2.1 B3.1 B2.2 C1 C2 C3.1 D2 E1.2 E2.2 B4.2 B5.2
C139	Yes		1.2.1. confirms	
T140	Change. So, what do you actually feel	task structuring, focusing,	1.1.1.	
C140	when she talks to you, right now? She's telling the truth.	exploratory Q	0.2	
T141	Yeah.Yeah.		0.1	
C141	And I agree with her. I don't know any other way to feel or think [yeah] Because I don't have any other coping techniques.	secondary self-formulation, part of task implementation	2.2.4	A2 B1 B3.1 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
T142	a. Yeah. So, it's like I need you [yeah] Right? You are an important coping technique [yes] Yeah. b. And how do you feel as you say this now?	empathic following, conjecture and formulation as part of process suggestion with exploratory Q	2.1.4.F is secondary to task implementatio n 1.1.1.	A1 B3.1 B2.2 C2 C3.1 D2 E1.1 E2.2 B4.1 B5.2
C142	Feel about, or just feel overall?		0.2	
T143	Yeah. Just feel.		0.1	
C143	I feel safe knowing that she's still there.		1.2.2.	
T144	So tell her.		0.1	
C144	I feel safe with you there. [Yeah.Yeah.] But I still want a way to come and go. [yeah], Or I'll wind up alone.	secondary self-formulation part of task implementation	2.2.4.	A2 B1 B2.2 b2.1 B3.1 C1 C2 C3.1 D2 E1.1 E2.2 B4.2 B5.2

T145	Yeah. So, this is the real dilemma.	empathic reflection	1.1.1.	
C145	I feel like I'll be alone [yeah, yeah] I really feel that way. I don't feel like I'll ever find anybody who will be able to understand me or, but then I also feel like if they didn't mistreat me I wouldn't get to that place with them because I can be, I am, not I can be, I am a loving person. However, I can be very mean and cold when you hurt me [right, right, right] So as long as you don't hurt me then we won't have any problems. I know that comes with life too, you know, nobody's perfect.	secondary self-formulation, part of task implementation	2.2.4	A2 B1 B2.2 B3.1 B3.2 B3.3 C1 C2 C3.2 D2 E1.1 E2.2 B4.2 B5.1
T146	l guess, also, there's something about how much you let yourself get hurt before you start protecting yourself		2.1.2.2 conjectured narrative detail	A1 B2.1 B3.1 C1 C2 C8 D2 E1.2 E2.2 B4.2 B5.1
C146	Right.	confirms conjecture	1.2.1. confirms	
T147	But I hear there's been this whole history of hurts, right?			A1 B1 B2.3 C2 C3.1 D2 E1.2 B4.1 B5.2 E2.2
C147	Yes	confirms	1.2.1. confirms	
T148	But somehow, when it starts off, I imagine the hurt is only small, in a new relationship, right?	empathic conjecture with formulation and fit Q		A1 B2.3 B2.1 B3.3 C2 C3.1 D2 E1.2 B4.1 B5.2 E2.2
C148	Right.	confirms		
T149	But then maybe it keeps going and you don't come in with the wall, I don't know.	formulation	2.1.4. F is secondary to task implementatio	A1 B1 B2.3 B3.1 B3.3 C2 C3.1 D2 E1.2 B4.2 B5.2 E2.2
C149	Not at first. I give people the benefit of the doubt, I trust completely and then when, if I start getting called out my name, or if things start happening, any type of abuse, I start to shut down. It's so much quicker now because of my ex-husband. We were together 15 years. We dated three, and he was my high school sweetheart an so I've tolerated a lot more with him and now I will not, I'm quicker with him to not tolerate.	therapist F	3.2.	A2 B1 B2.1 B2.2 B2.3 B3.2 B3.3 C1 C2 C3.2 D2 E1.2 E2.1 B4.2 B5.1
T150	Take it. But so, in a way that's a good thing.	conjecture		A1 B1 C8 D2 E1.2 E2.2 B4.1 B5.1
C150	Yeah. ls [right. Right.] Because it doesn't help you to allow people to keep abusing you year after year after year.		2.2.3	A2 B1 B3.2 B3.3 C1 C2 C7 D2 E1.2 E2.2 B4.2 B5.2
T151	And that's the protection [yes] but I understand, still a dilemma is, we're gonna need to finish off in a little while, but I mean the dilemma is, but then I'll be alone. So somehow, it's like, how do you negotiate.	empathic formulation with refocusing, task structuring around ending and conjecture	3.1. F alongside task closure	A1 B1 B2.2 B3.1 B3.2 C1 C2 C8 D3 E1.2 E2.1 B4.2 B5.1
C151	 a. Well, that used to scare me. b. When I left my ex-husband I left quite a few times. I moved out and moved back in in one day [I see] into an apartment and back into my house in one day. I was afraid. c. I'm not as afraid anymore because now I see that I can somehow make it by myself with my children even though now, I have an extra, I have one additional daughter, right. But it's not as scary. 			A1 B1 B2.2 B3.2 B3.3 C1 C2 C3.1 C4.1 C7 D3 E1.2 E2.2 B4.2 B5.2

T152	Yes. Yes. So that's important.	empathic following with	2.1.2.2	A1 B1 C2 C3.1 D3 E1.2 E2.2
1132		conjecture		B4.1 B5.1
C152		confirming conjecture and evaluates aspect of F	2.2.3	A2 B1 B2.2 C1 C2 D3 E1.2 E2.2 B4.2 B5.2
T153	But I mean, you also say that you don't wanna be alone, right?	empathic refocusing with fit Q		A1 B1 B2.2 C2 C3.1 D3 E1.2 E2.2 B4.1 B5.2
C153	I don't think I would on a long term.	evaluating an aspect of the formulation	2.2.3	A2 B1 B2.2 C7 D3 E1.2 E2.2 B4.1 B5.2
T154	But what you're saying is that if she shuts you down, closes you off, you will be alone.			A1 B1 B3.1 B2.1 C1 C2 C3.1 D3 E1.2 E2.2 B4.2 B5.2
C154	l will be alone. Yes I will.		1.2.1. confirms	
T155		and conjecture (about being overprotective)		A1 B2.1 B3.1 C1 C2 C3.1 D3 E1.2 E2.2 B4.2 B5.1 (it's about how you negotiate a new relationship, this also points the way forward)
C155	I don't see her as overprotective [right] I just want an opening.	evaluating an aspect of the formulation	2.2.3	A2 B1 B2.1 B3.1 C2 D3 E1.2 E2.2 B4.1 B5.1 C4.2
T156	Right. I want your protection [yes] but I want you to also let me come out if somebody is safe for me and if somebody's there for me.	refocusing and conjecture (if somebody is safe and there)	2.1.4. F is secondary to task implementatio	A1 B2.1 B3.1 C1 C2 C3.1 D3 E1.1 E2.2 B4.2 B5.2
C156		elaborate troubles telling (she keeps reminding me	2.2.4. secondary self- formulation of interrupter part	
T157	can continue to work on, you know, how to find a solution where both of you, because you're both	structuring around ending,	3.1	Formulation alongside task ending A1 B1 B2.1 B3.1 B3.2 C1 C2 D3 E1.2 E2.1 B4.2 B5.1
C157	Right	confirms	1.2.1	
T158	So how is it in your body now, today?	focusing, exploratory Q	0.1	
C158	I don't feel as tense as yesterday.		0.2	
T159	Did you manage to do any relaxation?	Q around homework	0.1	
C159	Yes, I did. And it's, I enjoy the progressive relaxation technique a lot. It's the one I have a problem with is the deep breathing. [Laughs.]		0.2	
T160	Because what happens?	exploratory Q	0.1	
C160	I feel like I'm probably breathing from the wrong spot. I'm probably breathing from here instead of here. Right.		0.2	
T161	But do you get anxious when you breathe, or you just can't?	exploratory Q	0.1	

C161	I get, I feel like my chest hurts, like maybe I'm doing it wrong. I don't know, I just can't allow myself to go there, but since I have been taking some classes and this has been really, really stress more and more and more and we've had to practice it more and more and more, I am getting a little bit more comfortable with it.		0.2	
T162	That's good. Yeah, yeah.	process disclosure with empathic following	0.1	
C162		F relevant detail (applying relaxation to her troubling, stressful situations	1.2.2	part of carrying forward, action tendency element
T163	Situation. Yeah.	empathic following	0.1	
C163	And it does help.		0.2	
T164	Right. Because you know, breathing is the most fundamental thing, to just be able to breathe when you start getting stretched.	experiential teaching	0.1	
C164	Yeah. So, I did practice the breathing techniques, and it helped me. It relaxed me.		0.2	
T165	Good. So will you continue to do that?	process disclosure with experiential homework	0.1	
C165	Sure		0.2	
T166		task structuring around ending and experiential homework related to formulation work done in session	1.1.1.	carrying forward the F work done into next session and in between sessions
C166	Okay. [Laughs.]		0.2	
T167	A possible door.		0.1	
C167	Okay.		0.2	
T168	Yeah. Yeah. Alright.		0.1	
C168	l will.		0.2	
T169	Good		0.1	

Appendix I: Full Transcript and Analysis of Session 5

	Speaking Turn Session 6 of 6 EFT Over Time	Therapist Response Mode+ Client Agreement with Formulation	Degree of Formulation	What Kind of Formulation/ What is Being Formulated
T1	So, this is our last meeting. This is an unusual kind of experience or as you were saying, it's gone so quickly.	task structuring, process reflection	0.1	
C1	Yeah, it did go quick.		0.2	
T2	Yes. So, I'm wondering where you're at since the last time we met and what	exploratory Q	1.1.1.	gathers data towards F
C2	I still have all the drama in my life. [laughs] I'm still dealing with the situation at home.	formulation relevant	1.2.2.	
Т3	Yes, yes, with Carlos.	empathic following	0.2	
C3	Yeah. With Carlo. And just trying to make it, just do what l can, function on the good days and just try to work through the bad days [right] you know	formulation relevant	1.2.2.	
Т4	And so, I mean, you're still hanging in there, right? [yeah], but one of your things was how do you protect yourself to make sure you don't really get sick or sort of get too depleted. How is that going?	empathic reflection, empathic formulation, exploratory Q	2.1.5.	Formulation that steps back and reflects on the client's process by building a shared story but without connecting to key emotions A1 B1 B3.1 B2.2 C1 C2 C3.1 D1 E1.2 E2.2 B4.2 B5.2
C4	Mostly I just want to leave. I want to leave the house. I want to you know; I have those feelings of running. I don't have anywhere to go, you know in the middle of the night, because he works, you know weird hours and when he gets home it's late or you know whatever. So, I just feel like, lost. You know, I feel lost, and I try, I want to call somebody but if it's three o'clock in the morning, I 'm not going to call anybody you know. I just don't know what to do actually.	troubles telling	3.2	formulating parts of emotion (action tendency; the emotion itself;) A2 B1 B2.2 C1 C2 C3.2 D1 E1.2 E2.1 B4.2 B5.1
T5	This is not easy.	empathic affirmation	1.1.3. acknowledges	
C5	No, it's extremely, it's an extremely tiring.	confirms	1.2.1	
Т6	And what's happening at three o'clock in the morning that you want to run?	exploratory Q	1.1.1.	gathers data towards F
C6	We're arguing	F relevant detail	1.2.2.	
Т7	You argue. So, he comes late maybe you're saying and that's when you sort of [From work] get into things.	empathic repetition, exploratory reflection with conjecture (about him coming late)	1.1.1.	
C7	It's like, right, he'll sit in the basement and he'll, he has dreadlocks, so he'll twist his hair, and he'll do it for like five hours. Seven hours. Four hours. He'll come home at twelve and then he'll come into bed about five, six o'clock in the morning. And sometimes I don't even know he's in the house. Because he'll come in and he doesn't even come up the stairs. But I think, personally I think he's sneaking and drinking a little bit. He's not violent like he used to be. So, I do give him credit for that [yes, yes, yes] but, when you're an alcoholic, you can't drink at all because, what happens is, that you want the, you know, increasingly more [yes, yes, that's right] and more.		1.2.2.	
Т8	So, you're thinking maybe he is drinking?	empathic repetition	0.1	

C8	Yes, I know he's drinking beer, but not every night, but on	adding narrative drawing	2.2.2.2	implied F
Co	occasion. And one time I was just like you know, I told him	on schematic content that	L.L.L.L	A2 B1 B2.2 C1 C3.2 D1
	I was through, I wanted to be, I just finished [yes] I just	implies an unstated F		E1.1 E2.2 B4.2 B5.1 B3.2
	couldn't deal with it and now he wants to talk and oh, you			B3.3
	know, he's trying, he's stressed out and you know, I'm trying			
	to understand him. But we're both kind of confused. [laughs] You know. [yes, yes, yes] but I			
Т9	So, it just sort of pushed [i actually] I mean, you want to	empathic reflection /	2.1.1.	recycled; therapist makes
	leave but then you stay	formulation		explicit previous implied F A1 B1 B3.1 B3.2 C1 C2
				C3.1 D1 E1.2 E2.2 B4.2
				B5.2
C9	Yeah, I actually that's what I want to say. I actually feel,	troubles telling		A2 B1 B3.2 B3.3 B2.2 C1
	when he's not in the bed and I know he's there, I feel very		3.2	C2 D1 E1.2 E2.1 B4.2
	distant from him and I feel like [when he isn't] we're apart. When he			B5.1
T10	When he is there.	empathic following	1.1.3.	
			acknowledges	
C10	XXI 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	F 1 4 4' 1 4 '1	F	
C10	When he's there and he's in the basement.	F relevant narrative detail	1.2.2.	
T11	Oh, in the basement, yes.		1.1.3.	
			acknowledges	
C11	You know, doing his hair or [yes] and he's not, there's no	F relevant narrative	1.2.2.	
CII	TV, there's no radio, he's just sitting there, and he'll sit there	1 Tolevant harranve	1.2.2.	
	for hour after, I mean, he'll sit there hour behind hour, just			
	twisting his hair.			
T12	Yeah, but you must feel so excluded. I mean, it's like	empathic conjecture,	2.1.2.2.	A2 B1 B3.2 B3.3 B2.2 C8
		exploratory reflection	conjectured narrative detail	D1 E1.2 E2.2 B4.1 B5.1
C12	Extremely. And I'm like why? He's in the house, he's not	confirms conjecture	1.2.1.	
C12	you know.	confirms conjecture	1.2.1.	
T13	Yes, why don't you come up? But somehow the message is,		2.1.2.2.	A1 B1 B3.3 C2 C8 D1
	you don't want to [exactly] have me near you or be near me.			E1.1 E2.2 B4.1 B5.1
		conjecture	narrative detail	
C13	Right. Right.	confirms	1.2.1.	
T14	Right? And that makes you feel?		1.1.1.	gathers data towards F
C14	I just feel very distant from him [distant] I don't feel a	repeat of C9	2.2.1 recycled	A2 B1 B3.2 B3.3 B2.2 C1 C2 D1 E1.2 E2.2 B4.2
	relationship, a closeness.			B5.2
T15	Yes, it's like there's nothing here.	evocative reflection	2.1.3.	simple single element F
				A1 B1 B2.2 C2 D1 E1.2
				E2.2 B4.1 B5.2
C15	Yes, that's what I just feel. Like we're pulling apart further	confirms, continues to		A2 B1 B3.2 B3.3 B3.1 C1
	[We're pulling apart, yeah] you know and then I'm thinking, well isn't this what you wanted. But then I'm like, no and	elaborate self F	3.2	C2 C4.1 C3.2 D1 E1.2 E2.1 B4.2 B5.1
	yes. You know, I'm like.			L2.1 D4.2 D3.1
T16	Yes, so then you oscillate between those two [right] yeah,	empathic reflection /		A1 B3.1 C2 D1 E1.2 E2.2
	yeah.	formulation		B4.1 B5.2
C16	So, I'll go down there, like I'll fall back to sleep, and I'll get up and he's still in the basement and I'll go down there and	adding narrative drawing on schematic content that	2.2.2.2	A2 B1 B3.2 B3.3 B2.2 C1 D1 E1.1 E2.2 B4.2 B5.1
	I'm like what are you doing? You know, and he won't open	implies an unstated F		D1 D1.1 D2.2 D4.2 D3.1
	the door, or you know, and then I'm just trying to talk to	1		
	him, and he says that I'm arguing with him. He feels like, l			
	guess he feels he's being attacked [yes] So then we start to you know, bicker back and forth and the kids, they don't get			
	up, they don't say anything, but they hear us. You know.			
T17	Yeah, and how bad does it get? The bickering. How	empathic following and	1.1.1	
	intense?	exploratory Q		

C17	Just, I mean, the name calling, you know. He, oh you're	adding narrative drawing	2.2.2.2	A2 B1 B3.2 B3.3 B2.2 C1
	crazy. I was like that's the worst thing you could say to me. Because I deal with my illness and my ex-husband used to do me the exact same way. Tell me I was crazy.	on schematic content that implies an unstated F		D1 E1.1 E2.2 B4.2 B5.1
T18	Crazy. So, then you just feel so invalidated right? [yeah], it's like he's calling	empathic repetition. empathic conjecture with fit Q, exploratory reflection	2.1.2.2. conjectured narrative detail	A1 B1 B2.2 B3.2 B3.3 C8 D1 E1.1 E2.2 B4.1 B5.1
C18	And I want to call my mom. But I don't. Because I don't want her to be in the middle.	adding narrative drawing on schematic content that implies an unstated F	2.2.2.2	A2 B1 B3.2 B2.2 C1 D1 E1.1 E2.2 B4.2 B5.1
T19	That's right. So when you want to call her, it's sort of like, what's happening? I want to call her and?	empathic following, exploratory reflection	1.1.3	
C19	I just want to		0.2	
T20	I need support?	empathic conjecture with implied fit Q	2.1.2.2. conjectured narrative detail	A1 B2.2 B3.2 C8 D1 E1.2 E2.2 B4.1 B5.1
C20	I just need some reassurance and support from somewhere	confirms conjecture	2.2.1 recycled	A2 B1 B3.2 B2.2 C4.1 D1 E1.2 E2.2 B4.1 B5.2
T21	Yes. And its reassurance that I'm not crazy? Is it because he's getting into you or it's just like I feel so	empathic following, empathic conjecture with implied fit Q, exploratory reflection with conjecture and formulation	2.1.2.2. conjectured narrative detail	A1 B1 B2.2 B3.3 C1 C2 C8 D1 E1.2 E2.2 B4.2
C21	I'm overwhelmed. I don't know what to do. I just need somebody to kind of just kind of calm me down. Because I feel, I feel stupid sometimes why I'm even in this situation.	Making explicit previously unspoken schematic content (overwhelmed; stupid)	3.2.3. 3.2	A2 B1 B2.1 B2.2 B3.1 B3.2 C1 C2 C3.2 D1 E1.2 E2.1 B4.2 B5.1
T22	So while you're there, you're sort of kicking yourself in a way or feeling like I'm an idiot to be here, why am I still here	empathic formulation	3.1.	formulating action on the self-A1 B1 B2.2 B2.3 B3.1 C1 C2 D1 E1.2 E2.1 B4.2 B5.1
C22	Why do I have to get up at three o'clock in the morning and go out and just to get peace of mind? Because I don't feel like I'm getting that at the house. And then I don't	adds example to illustrate F	2.2.2.1	A2 B1 B3.2 B2.2 C1 C3.1 C4.1 D1 E1.1 E2.2 B4.2 B5.2
T23	But then do you actually leave the house?		0.1	
C23	Sometimes		0.2	
T24	So go out, yes. So then you're kind of out. What do you do? Do you drive or walk?		0.1	
C24	Drive or l walk		0.2	
T25	Yes. So, then you're with yourself and you're sort of feel. >> Right. I'm just trying to?		1.1.1.	gathers data towards F
C25	a, but then I want to go back, while I'm out [yes] to finish [laughs] the argument. Because I want him to understand what he's doing to me. But I can't get it, there's just no getting him to understand. Except for when he really feels that I'm threatening to leave or be through with the relationship [yes] Then he wants to talk and he's going to do better and you know, then all the right things are said. You know, so.	narrative details drawing on schematic memory that implies an unstated formulation	2.2.2.2.	A2 B1 B2.2 B3.2 B3.3 C1 C3.2 D1 E1.1 E2.2 B4.2 B5.1
T26	a. Yes, sort of at the crisis point of leaving. What is it that you want to, when you say you want to understand what he's doing to me. What would you like to say to him? I mean, what is it?	empathic following, empathic reflection, exploratory reflection exploratory Q	1.1.3, then 1.1.1.	
C26	I actually say it to him. I mean, I tell him, it's like.	,	0.2	
T27	What do you?		1.1.1	

C27	I explain my situation, I explain what I want. That I'm not	elaborates self F		A2 B1 B3.2 B3.3 B2.2 C1
CZT	happy, that I feel distant from him, why you know, I don't	ciaborates sell F	3.2	C2 C3.2 D1 E1.2 E2.1
	appreciate him drinking. Even if it is just a beer [yes] That			
	he can't drink. That we don't go anywhere together alone. We don't spend time together. It's just like.			
T28/	Like I feel we're not together and so we're not connected,	empathic reflection with	3.1	A1 B1 B2.2 B3.2 B3.3 C1
29	and l just feel so alone [we're like roommates] But really, I want you to understand and respond to that in me, so then l	conjecture, empathic formulation with more		C2 C3.2 C4.1 D1 E1.2 E2.1 B4.2 B5.1
	feel more connected. I really want to be connected [yeah, I	conjecture (client		2.17 2 11.2 2011
	do] but l constantly try and l constantly get rebuffed, l guess, or not understood.	confirms), more formulation		
C29	Yes. Constantly.	confirms	1.2.1.	
T30	Yeah. And then I just get more and more	empathic following,	1.1.1.	
		exploratory reflection		
C3.10	I get angry [angry] and aggravated [right, right, right] I go through I guess a range of emotions because I become	Making explicit previously unspoken schematic	3.2.	A2 B1 B2.2 B2.3 B2.1 B3.2 C1 C2 C3.2 D1 E1.2
	angry, I'm hurt. My emotions like sometimes I can cry and	content (get through anger,		E2.1 B4.2 B5.1
	cry and then sometimes I'm so hurt or so upset that I can't	hurt, then i'm so hurt can't		
T31	even cry anymore [yes] I'm just, I flip-flop Yes, yes and then you sort	cry anymore, i flip-flop) empathic following,	2.1.3. single	A1 B2.1 B3.2 C2 D1 E1.2
	of become distant, right?	exploratory reflection with		E2.2 B4.1 B5.2
		formulation and fit Q		
C3.11	Right		1.2.1.	
T32	We've talked about that.		0.1	
C3.12	From my children and from him. Because my kids feel the	elaborates self F	3.2.	A2 B1 B2.2 B3.2 B4.2
	effect [yes, yes] You know. When I'm upset with him, I'm distant from them.			B5.1 C1 C2 C3.2 D1 E1.2 E2.1
T33	But it sounds like learning how to deal with this hurt is	task structuring, with	3.1.	story building F alongside
	what's so important. I mean, 1 understand it is very hurtful [right] but each of our hurt is so unique and kind of	formulation empathic reflection,		task F, formulating PM hurt and need for soothing
	personal, right? [yes], So I'm getting this image of you	experiential teaching,		and understanding and the
	really sort of really yearning or needing the understanding	empathic conjecture with		anguish when it doesn't
	and soothing from him [yes] and 1 just don't get it and when you feel hurt, what goes through you? What's it like for	exploratory Q		happen A1 B1 B2.1 B2.2 B2.3
	you?			B3.2 B3.3 B4.2 B5.1 C1
C3.13	l actually physically hurt	expressing emerging	1.2.3.	C2 C3.2 C8 D1 E1.2 E2.1 bodily focused element
C3.13	actually physically fluit	emotion that is being	1.2.3.	bodily locused element
		formulated as part of task		
T24	V 1 ii	implementation	1.1.2	
T34	Yes, yes. 1 can imagine.	empathic following empathic affirmation	1.1.3. acknowledges	
		-	F	
C3.14	l feel pain.	expressing emerging emotion that is being	1.2.3.	bodily focused element
		formulated as part of task		
		implementation		
T35	Where?	exploratory Q	0.1	
C3.15	Nauseated, in my stomach mostly and my head [yes, yes] But mostly my stomach.	expressing emerging emotion that is being	1.2.3.	the bodily focused element
	But mostly my stomach.	formulated as part of task		element
		implementation		
T36		empathic repetition,	0.1	
	any of that now as we talk	empathic, following, exploratory, focusing Q		
C3.16	My stomach is a little nervous, just a little.	expressing emerging	1.2.3.	the bodily focused
		emotion that is being		element
		formulated as part of task implementation		
		Implementation		

T37	Yes. But in the centre of that hurt, I wonder what, if you	empathic following,	2.1.2.2.	A1 B2.2 B2.3 B3.2 B4.2
13/	could put words into that place, you know when you're feeling just terribly alone, terribly abandoned, terribly unresponded to, if you would say what you felt, what would you say? What's it like for you? I feel			B5.1 C1 C3.2 D1 E1.2
C3.17	I feel lonely [yes], I feel this is like the second time this has happened to me [yes] I felt this way with my ex-husband too.	confirms conjecture and adds narrative detail drawing on schematic memory that implies unstated F (which therapist makes explicit in T38)	2.2.2.2	A2 B1 B2.2 B3.2 C1 D1 E1.1 E2.2 B4.2 B5.1
T38	Right, right. So I feel like I'm never going to be happy. This is how my life is going to be. So, it's kind of like my life is always going to be. Always going to be like this. Disappointment. Hurting. Disappointment and hurting.	empathic following, empathic formulation with conjecture	3.1.	A1 B1 B2.2 B2.3 B3.2 B3.3 C1 C2 D1 E1.2 E2.1 B4.2 B5.1
C3.18	Constantly.	strong confirmation	1.2.1.	
T39	Yes, yes.		0.1	
C3.19	That I just have to learn how to.	unfinished sentence	0.2	
T40	Like I'll never be able to get the love [right] that I want or need [exactly] Right. And so, then it feels like, I mean it's more than disappointing, I guess, because I don't know if it feels like I don't know if I can live without this love? I don't mean that you're thinking of killing yourself, but it's like a desperate feeling.	empathic conjecture, formulation with conjecture, exploratory reflection	3.1.	A1 B1 B2.2 B2.3 B3.2 C1 C2 D1 E1.2 E2.1 B4.2 B5.1
C3.20	I'm very. Yes, desperation is a good, is a good description [yes] Because I want that connection, that closeness and that peace. I know you can't be happy all the time but, I don't feel happy almost any of the time.	strong confirmation, continues by making explicit previously unspoken schematic content	3.2	A2 B1 B3.2 B3.3 B2.2 C1 C2 D1 E1.2 E2.1 B4.2 B5.1
T41	Any of the time. Right. Right.	empathic repetition, empathic following	1.1.3. acknowledges F	
C3.21	And most people think I'm like a really, really happy persor [yes] Because I can function well and I'm very joy, I mean, I joke around, I mean I engage in conversation with people. But I'm really like the saddest person in the room [yes, yes, yes] And but most people don't know that. You know, they don't understand that. They would be really shocked.	unspoken schematic content (I cover it up well	3.2	A2 B1 B2.1 B2.2 B3.3 C1 C2 D1 E1.2 E2.1 B4.2 B5.1
T42	I'm like the saddest person [right] because somehow, I'm never going to get the love that I really, I just want to be understood and held and [exactly] kind of responded to. And it feels like everything is such a struggle [it is] And I never get this kind of soothing, comforting at home. I did get it from my father [right] but I never got it again. This is such a painful place.	empathic repetition, evocative reflection with formulation and conjecture about the need, more formulation, empathic affirmation		A1 B1 B2.1 B2.2 B2.3 B3.2 B3.3 C1 C2 C8 D1 E1.2 E2.1 B4.2 B5.1
C3.22	Then I try to make everybody around me happy, I buy them things and I know you can't buy love but.	continues to elaborate the F	3.2.	A2 B3.2 C1 C2 D1 E1.2 E2.1 B4.2 B5.1
T43	I do for others, but nobody does for me, nobody takes care of me.	empathic formulation with conjecture		A1 B3.2 B3.3 C1 C2 C8 D1 E1.2 E2.2 B4.2 B5.1
C3.23	Exactly. I don't, I never feel safe. I don't feel like I have a safety net with my husband because, I can't go to him for things, but he can always come to me and I'm always there and available for his needs. and available for his needs. You know. Financially, whatever, you know. I take care of him.	strong confirmation, continues by making explicit previously unspoken schematic content (I never feel safe with my husband)	3.2.	A2 B1 B3.2 B3.3 C1 C2 D1 E1.2 E2.1 B4.2 B5.1
T44	I give to others what I would really like to get, but I don't get it [right] Right. And then somehow, I just feel more and more disappointed and get to feel desperate, like life will never yield to me the things that I would like. Then I get sort of, I don't know if you get panicky or?	empathic formulation exploratory reflection with conjecture	3.1.	A1 B1 B2.1 B2.2 B2.3 C1 C2 C8D1 E1.2 E2.1 B4.2 B5.1

C3.24	a. Yes, I do. I panic. I used to have panic attacks, but	a. confirms conjecture,	2.2.2.1	A2 B1 B2.1 B2.2 B2.3
	agitated [yeah] but not like before, I mean I was. I	b. evaluates an aspect of F (doesn't get as panicky as	2.2.3.	B3.1 C1 C3.1 C4.1 C7 D1 E1.1 E2.2 B4.2 B5.2
	just don't ever want to get to that place again.	before)		
T45	Yeah, yeah. To where you can't regulate	empathic following, conjecture	1.1.3. acknowledges F	
C3.25	I don't ever want to be that sick again. I couldn't function.	evaluating an aspect of F (was so sick I couldn't function)	2.2.3.	A2 B1 B2.1 C7 D1 E1.2 E2.2 B4.1 B5.2
T46	Yes, yes. I understand. But somehow it seems so important somehow to find a way of dealing with a very isolated abandoned feeling, where you feel so desperate, right? Because you just feel so alone. I don't know. It's not like I'm the only person in the world, but it's like nobody in the world looks at me or sees me and I'm left cold and isolated [right] and then I just feel desperate. What's the desperation like, I guess you've said it's, are we unhappy for the rest of my life, I'll never be happy for the rest of my life, is that	empathic following, task structuring with formulation, fit Q (right?) evocative reflection / formulation exploratory Q, exploratory reflection	3.1.	A1 B1 B2.1 B2.2 B2.3 B3.3 B3.2 C1 C2 C3.1 C3.2 D1 E1.2 E2.1 B4.2 B5.1
C3.26	Yes, that's how I feel.	strong confirmation	1.2.1.	
T47	Yeah, and that's what happens in that moment [yes] It just feels like the future will all be lonely and empty for me.	empathic following, evocative reflection / formulation	2.1.3. single element F and 2.1.1	A2 B1 B2.2 C2 D1 E1.2 E2.2 B4.1 B5.2
C3.27	to, like my two children [yes] sending them with their father and letting him take the baby, my current husband. And just being by myself b. because, I don't feel like I can function properly to give my kids what they need emotionally. And so, I feel like that would be a burden off of me. People always needing me,	will be all lonely and empty: I have thoughts of giving my children away	2.2.2.1.	A2 B1 B3.2 B3.3 B3.1 C1 C3.2 D1 E1.1 E2.2 B4.2 B5.2
T48	Yes, yes. I understand.	empathic following	1.1.3. acknowledges F	
C3.28		Client narrative detail drawing on schematic memory that implies an unstated formulation	2.2.2.2	A2 B1 B3.2 B3.3 C1 C3.2 D1 E1.1 E2.2 B4.2 B5.1
T49	l wouldn't want to put them through that.	empathic repetition	1.1.3. acknowledges F	
C3.29	But then I think about them like, could I really live with my kids, without my children? I don't think so. You know, so I back and forth in my head, back and forth [yes] and I know, same with my relationship. Can I be without him? Yes, no, yes, no. [yes, yes, yes, yes] You know. Confusing, tiring, keeps me up [yeah] and in all this, I'm trying to continue and function in school.	troubles telling self- formulation	3.2.	A2 B1 B3.1 B3.2 C1 C2 C3.2 D1 E1.2 E2.1 B4.2 B5.1
T50	Yes, yes, yes. But somehow, it's like I need to have somebody there for me [yes] who cares about me. But being alone seems too, I mean leaving him, seems too well I've got nowhere to go [right] but also somehow I desperately need him. It feels like I can't live on my own.	empathic following, empathic formulation with conjecture	3.1.	A1 B2.2 B3.2 B3.1 C1 C2 C3.2 C8 D1 E1.2 E2.1 B4.2 B5.1

	I used to feel that way with my ex-husband [yes] I just, there was just no way that I could do it. I'm not that extreme with him [yes] I just, I don't know what that little thing is that's holding me back. Because I guess I really do care about him and I love him and I want things to work. And I think that's what keeps me there [T51 that keeps, right] I don't feel really desperate. How do you, I mean, am I getting used to not getting.	last bit of therapist formulation and adds a corrected formulation (I used to feel that desperate with my ex, I am not that extreme now)	3.2.	A2 B1 B3.2 B3.3 B2.1 C1 C2 C4.2 D1 E1.2 E2.1 B4.2 B5.1
T52	What I need.	conjecture	1.1.1	
C4.12	The love or the attention or you know, because he does give it to me sometimes [yes, yes] You know, it's just painful the stuff that comes behind it, that takes away from what he does give.	confirms conjecture and continues to elaborate F	3.2.	A2 B1 B3.3 B2.2 C1 C2 C3.2 D1 E1.2 E2.1 B4.2 B5.1
T53	Yes, yes. But I don't know if it's like I stay for the crumbs I get [yes] or whether, I mean, that's the confusion thing [right] or it's like I really feel connected [right] somehow this time in the middle of the night, when you want to call your mother, it seems really important to try to get there because, that's the most painful place.	empathic following, empathic formulation with conjecture	3.1.	A1 B2.2 B3.2 B3.3 B2.3 C1 C2 C8 D1 E1.2 E2.1 B4.2 B5.1
C4.13	yes		1.2.1.	
T54	I need what from my mother?	exploratory Q	1.1.1.	
C4.14	l guess reassurance. Because she tells me. I mean, we've had this conversation before.	Client narrative detail drawing on schematic memory that implies an unstated formulation	2.2.2.2.	A2 B3.2 C1 D1 E1.1 E2.2 B4.1 B5.1
T55	Yes, so she tells you		1.1.1.	
C4.15	She says, you know you're not like, you know you're not crazy and you know, she hits everything right on the head. He's just doing you the same way Larry did you.	adds example to illustrate F	2.2.2.1.	A2 B3.3 C1 C3.1 C4.1 D1 E1.1 E2.2 B4.2 B5.2
T56	I see. So, one of the things is he gets to you and you start to doubt that maybe.	empathic following, then formulation	2.1.5.	A1 B1 B3.3 B3.1 C1 C2 C3.1 C3.2 D1 E1.2 E2.2 B4.2 B5.1
C4.16	Right. You start to feed into those lies, that they're, those, it's like tearing away at your self-esteem [yeah, yeah] And so, in the beginning, you're a little bit stronger and as it keeps on, I mean you get tired [yes] and you start to feel like well, maybe you know. So, my mom [gives you] gives me that [yeah, yeah] You know, but I don't really like to talk to her about it because I don't want her also to look at him and you know, it'll create a problem between them.	confirms, then making explicit previously unspoken schematic content (about her selfesteem)	3.2.	A2 B1 B3.1 B3.2 B3.3 C1 C2 C3.2 D1 E1.2 E2.1 B4.2 B5.1
T57	Problem, I understand	empathic following	1.1.3. acknowledges	
C4.17	You know.		0.2	
T58	Right, right.		1.1.3. acknowledges	
C4.18	So, I try not to [to yeah] do it often.	F relevant detail	1.2.2.	
T59	Because some of it is whatever happens eats away at your sense of your own validity. Of your own self-esteem, right? Right, right. I'm going to suggest we try and work with that again in this way that we do in the chairs, alright? [okay] So, what I'm going to suggest is you come over here [okay] And as Carlo or as you, how do you create in her, the sense that she, eat away at her confidence. Or sense of sanity.	formulation with conjecture, task structuring, process suggestion with formulation (about action on self)	2.1.4	task F around proposing marker and rationale for task A1 B1 B3.1 B3.3 C1 C2 D1 E1.1 E2.2 B4.2 B5.1
C4.19	How?		0.2	
T60	He says things to you, in a way, tell me because it gets in your head, right [right] So somehow, it's you and just be the things, what do you say to her that makes her doubt herself, that she's crazy here.		2.1.4.	F is subsidiary to task opening A1 B1 B3.1 B3.3 C1 C2 D1 E1.1 E2.2 B4.2 B5.1

C4.20	Oh, like Carlos saying negative things to me?		0.2	
T61	Yes, yes.		0.1	
C4.21		F relevant narrative detail	1.2.2	
C 4 .21	is this all you like to do? You argue every day, every day. It's the same thing. And I can drink if I want to. It's only one beer. It's not like I'm walking around butt naked and fighting with people, oh and I'm twisting my hair because, oh my dreadlocks have to grow back and oh, I don't know what your problem is. If it was, I wish I never had a baby with you, and we should have never met, and I should have stayed with my ex-wife. Just constant.		1.2.2	
T62	And the attitude towards and you're pulling a face and, so what's the attitude toward you, you're	process reflection with exploratory reflection	1.1.1.	
C4.22	Disgusted		1.2.3	
T63	Yes, yes. You're, it's like you're terrible.	empathic following, process suggestion / feeding lines	1.1.1.	
C4.23	You're trying to run my life, and you can't run my life. 'm ar adult. You're too controlling.		1.2.3.	
T64	Yeah, controlling. Yeah, definitely. Right. But you're disgusted. I mean, it's just pushing you away.	empathic following and repetition, process reflection	1.1.1.	
C4.24	It's like just stay over there and I'm going to go in the basement and twist my hair. I'll be back in fifteen minutes. <i>Then five hours passes</i> .	F relevant narrative detail	1.2.2.	
T65	Yeah, but it's real.	process reflection	1.1.1.	
C4.25	But that makes me feel like, ooh, what's wrong with me?	Secondary self F, part of task implementation	2.2.4. and 2.2.5	A2 B1 B3.1 C2 D2 E1.1 E2.2 B4.1 B5.1
T66	Change, yeah. So just what does that make you feel like just said it there, right, makes me feel what?	process suggestion, exploratory Q	1.1.1.	
C4.26	lt's hurtful. lt's demeaning.	Secondary self F, part of task implementation	2.2.4. and 2.2.5	A2 B2.2 B3.2 B3.3 C2 D2 E1.1 E2.2 B4.1 B5.1
T67	Yes, I feel demeaned.	process suggestion with empathic repetition	1.1.1	
C4.27	Unappreciated [yeah] Because I'll do many things for this person.	Secondary self F, part of task implementation	2.2.4.	A2 B2.2 B3.2 B3.3 C2 D2 E1.1 E2.2 B4.1 B5.1
T68	Tell him.	process suggestion	0.1	E1.1 E2.2 B4.1 B3.1
C4.28	Tell him?		0.2	
T69	Yeah		0.1	
C4.29	I feel very demeaned, you're demeaning me.	Secondary self F, part of	2.2.4.	A2 B1 B2.2 B3.2 B3.3 C1
	You're making me feel like I am crazy. You say hurtful things like you wish you never had Alyia with me or a child with me and I mean, that's very hurtful. You call me, he calls me a bitch all the time. Because he knows, now he knows that is just gets to me. So, that's the thing that he just loves to, when I'm walking away, he'll wait until I'm walking away or something like that, you know, and that's like the most hurtful thing to me.	task implementation		C3.1 C4.1 D2 E1.1 E2.2 B4.2 B5.1
T70	And what do you say to him then about this?	exploratory Q	1.1.1.	
C70	When he says that to me?		0.2	
T71	Well, what do you want to say to him, I don't know if you say it?	exploratory Q	1.1.1.	

C71	I say everything to him. I don't hold back because, holding back doesn't do anything. But it doesn't get me anywhere. But I say that, and you know, I'll tell his mother [laughs]	evaluating an aspect of F (saying things to him	2.2.3	A2 B3.2 C1 C2 C7 D2 E1.2 E2.2 B4.2 B5.2
	because I know that's going to hurt him [yes, yes] Then I start playing his game with him. Your mother's a bitch you know [yes, yes] You know and that's hurtful to him.	but it's going to hurt him; evaluates the instrumental intention behind telling his mother)		
T72	But really, I feel so demeaned.	process suggestion	1.1.1	takes client back to core
C72	I'm extremely hurt. I mean, and I don't mean that. I mean, I just, I'm just constantly being attacked, so I have to fight back [yeah, yeah, yeah] Otherwise I'm just going to, I'm going to just, I don't know what's going to happen to me [yeah, yeah, yeah] But I mention all these things to him you know, he's very hurtful and I just, I just don't understand why you have to stay in the basement so long to do your hair. I mean, he doesn't have that much hair on his head. I mean and I understand you're trying to upkeep your hair, and you know, but the drinking I won't tolerate.	evaluating an aspect of F (I mean, and I don't mean that. I am constantly attacked, and I have to fight back) secondary self-formulation, part of task implementation	2.2.3.	A2 B3.2 B3.3 C1 C2 C7 D2 E1.2 E2.2 B4.2 B5.2
Т73	But you know, it's how he erodes your self-confidence that's important. So, when you're demeaned right [yeah] you said at some point it starts to make you feel like you're crazy [yes] Right?	empathic formulation with fit Q		A1 B1 B3.2 B3.3 B3.1 C1 C2 C3.1 D2 E1.1 E2.2 B4.2 B5.1
C73	yes	client confirms		
T74	a. How does that happen? How do you make? Come over here [okay] b. Make yourself feel like you're cr, like it's not him but it's you.	exploratory Q, process suggestion with empathic formulation (of action on the self)	1.1.1. 2.1.4 F is secondary to task implementation	
C74	Make me? So, him talking to me?		0.2	
T75	Well, it's actually you talking to you.	task structuring	1.1.1.	
C75	Me talking to me?		0.2	
Т76	You know, you said, he makes me feel like I'm crazy [okay] But, make her feel like she's crazy.	task structuring, process suggestion	1.1.1.	
C76	You know he's right because Larry said the exact same things to you. So maybe something is wrong. I mean you do take medicine, you deal with this illness, you don't function the way you used to. You're not, you're never happy. You're always arguing. You can't enjoy your children. You know, just why are you even here? What's the purpose? You know. You're never going to be happy [yes] You know [yes] So [so] Just, I guess I just feed into what he's saying.		2.2.4.	A2 B3.1 B3.2 B3.3 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
Т77	Yeah, yeah, yeah. Change! So, what does this do to you? It hurts. Yes. Tell her, because now this is you. This is a part of you. Tell her what it does to you.	empathic following, process suggestion. exploratory Q empathic conjecture, process suggestion with task structuring, exploratory Q	1.1.1.	
C77	It hurts me.	expressing emerging emotion that is being formulated as part of task implementation	1.2.3.	
T78	It hurts really bad, right		1.1.1.	
C78	Yes. Because I don't, I don't want to live my life like this. I don't want to believe that, but I feel it. And I just give into it.		2.2.4.	A2 B3.1 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
T79	Yes, it can really get in and kind of really make you feel hopeless, kind of meaningless, like uh oh, like it's not worth it. Or I'm not worth anything [right] Uh huh. It really hurts.	exploratory reflection with conjecture	2.1.4. F is secondary to task implementation	A1 b1 B2.2 B2.3 B3.1 C1 C2 C8 D2 E1.1 E2.2 B4.2 B5.1
C79	lt's taking its toll	minimal response in relation to F	1.2.1	

T80	Tell her, it takes its toll on you.	process suggestion	1.1.1.	
C80	lt's taking its toll on me.		1.2.3	
T81	lt's so hard to keep going.	process suggestion with conjecture	1.1.1	
C81	It's extremely hard to function. But I pull it off almost every day [yes] Except at night [laughs] It's harder at night [at night, yeah] Around people I tend to I guess, mask everything and hide it [yes] enjoy being around people. I mean, there's a time when I couldn't even be around people. I couldn't function. But I mean, they kind of keep me preoccupied.	strong confirmation and continues to elaborate, secondary self F	2.2.4.	A2 B1 B3.1 B3.2 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
T82	Yeah, yeah, I understand. But it's at night, when you're on your own and this is going on inside. So, what do you need from that part of you?	empathic following, empathic reflection, process suggestion exploratory Q	1.1.1.	
C82	The part that's putting me, that's talking to me?		0.2	
T83	Yes. The part that's putting you down and telling you you're.	task structuring	1.1.1	
C83	Nothing.		1.2.3.	
T84	Nothing. That you're no good.	empathic repetition and reflection		
C84	To be on my side [laughs] not on the other person's side. To make me, to give me what I need to counteract all that negativity that's coming towards me and not let it consume me [yes] To a point where I can't function and I can't, I feel lost [yes] And I have no control and I want to do things that are dangerous or just like going outside at four o'clock in the morning is not safe [yeah] Walking around. But I need to just run [right] get away	self-formulation of need as part of task implementation		A2 B1 B2.1 B2.2 B3.1 C1 C2 D2 E2.2 B4.2 B5.1
T85	But I want you to make it very clear, there's a voice in you and you really were able to, you know, this is your previous husband said these things to you, you were sick, there's something wrong with you, is what that voice says [yes] So what are you saying you need from that part of you?	task structuring with formulation, process suggestion	2.1.4. F is secondary to task implementation	A1 B3.1 B3.3 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
C85	l need, I need to be taken care of. I need to love myself.	Secondary self F, part of task implementation		A2 B2.2 B3.1 C1 C2 D2 E2.2 B4.1 B5.1
T86	Yeah, I need you to love me [right] rather than put me down [right, right] is that? I mean [yes] See if you can imagine that voice in you. You know, imagine you over there, tell her what you need from her	empathic following, process suggestion / feeding lines	2.1.1 recycled 2.1.4. secondary F	A1 B3.1 C1 C2 D2 E1.1 E2.2 B4.1 B5.2
C86	I need you to take care of me and help me start changing my pattern, my thought patterns, just to focus on me and not all the negative that's around me. Because it empowers me to kind of not internalize all those things so much and become so hurtful and eat away at me. Yes.		2.2.4.	A2 B2.2 B3.1 C1 C2 D2 E2.2 B4.2 B5.1
T87	lt's a bit like, I need you to support me, not to	exploratory reflection / process suggestion	1.1.1.	
C87	Join the others.		1.2.2.	
T88	To join the others [right] Or I'd like to join the others. Don't put me down or don't.		1.1.1.	
C88	Don't feed into all the negative things that are being said to me. Don't automatically go there and agree because it happened to you before or yeah, you deal with mental illness or you know, all that should be pushed aside [right, right, right] Because you also have to look at the positive things that [yes], You're in school and	Secondary self F, part of task implementation	2.2.4.	A2 B2.2 B3.1 C1 C2 D2 E2.2 B4.2 B5.1
T89	Tell her some of the positive things. l, I'm.	process suggestion	1.1.1.	

C89	I'm in school [right] I am able to take care of my children. I think I'm a good person and I'm just trying to make it day to day		2.2.4.	A2 B1 B2.2 B3.1 C1 C2 D2 E2.2 B4.2 B5.1
T90	And from you I need	process suggestion	1.1.1.	
C90	And from you, I need your support. I need you to believe that, to reassure me when I'm feeling like no, that's not true, but that negative voice is always there, but I never hear the positive voice.	self-formulation of need as part of task implementation		A2 B2.2 B3.1 C1 C2 D2 E2.2 B4.2 B5.1
T91	Yes, yes, yes. But I need to hear a positive from you, not negative.	empathic following, empathic reflection.	2.1.1. recycled	A1 B2.2 C2 C3.1 D2 E1.1 E2.2 B4.1 B5.2
C91	I need to hear a positive. I need to hear positive feedback, not negative feedback, all the time, to help get me through these nights that are so hard. These things that just keep happening to me over and over again. And I can't seem to get an understanding why.	Secondary self F, part of task implementation	2.2.4.	A2 B2.2 B3.1 C1 C2 C3.1 D2 E2.2 B4.2 B5.2
T92	Change. What actually happens for you now from this perspective?	process suggestion, exploratory Q	1.1.1.	
C92	I feel good telling me what I need [yes, yes] I mean, I felt good	expressing emerging emotion that is being formulated as part of task implementation	1.2.3.	
T93	Right. So now what do you say from here?	empathic following, process suggestion	1.1.1.	
C93	I'll try. I'll try and support you. Be that positive voice in your head when someone is being so demeaning. I need that. I need it most when like, you know, in the heat of things [yes, yes, yes] There are, I mean, I sit by myself and still after things happen and I ponder on what was said to me. (yes) Which probably caused my you know, anxieties and [yeah, yeah] But if it could just come in and just keep reassuring me. Just keep reassuring me. Like I guess, like my mom does and like my dad did.	Secondary self F, part of task implementation	2.2.4.	A2 B1 B3.1 B3.2 B3.3 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
T94	So, I want you to do that; imagine yourself there in the heat of things. Feeling this very desperate, lonely kind of feeling.	evocative reflection / formulation, task	1.1.1	
C94	I would say, you know you're not like that. This is just an angry person talking out of desperation themselves [right, right, right] You know, trying to hurt you, hitting on all the, maybe the secrets you've told him, so he knows how to get to you. You're you know, you're a good person, you mean well, you know you take care of your know, you take care of your house, you manage the best way you can with what you have. I mean, and you've come a long way. You're in school.	Secondary self F, part of task implementation	2.2.4.	A2 B1 B3.1 B3.2 B3.3 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
T95	Say this again.	process suggestion	1.1.1.	
C95	You've come a long way. You're in school and you've got your own place. You don't live with your mother. You've never had to go there. I mean, just look at all the positive things around you [right, right] You know, so why are you hanging onto what one person tells you? And the person who you've got to help almost every day you've got to help them just get through life. You've helped them, to stop doing for the most part, a lot of things that were destroying, they were destroying themselves. You've built up a person, so you need to build yourself up the same way.	Secondary self F, part of task implementation	2.2.4.	A2 B1 B3.1 B3.2 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
Т96	Right, it's like you are worthwhile [yes] you are valuable. What do you feel as you say this? I mean is it?	empathic following, empathic formulation, exploratory Q	2.1.4	A1 B2.3 B3.1 C8 D2 E1.1 E2.2 B4.1 B5.1

C96	It triggers like, oh yeah, l did do that. And like, just right	client adds example to	2.2.2.	A2 B1 B3.3 B3.2 C1 C3.1
	now when I mentioned like, with Carlo [yes] You know, he used to drink a lot [yes, yes] He's an extremely heavy drinker and he smoked and you know, the lifestyle was just different and he had been doing this since he was like, he'd been performing since he was nine [yes] He never really lived in the real world. Couldn't drive. I mean, that backbone for him.	illustrate F		C4.1 D2 E1.1 E2.2 B4.2 B5.2
T97/98	You really kind of pulled him out of that [yes, exactly, I mean] So tell yourself you've done a lot for him, and you have a lot of worth.	empathic reflection, process suggestion / feeding lines	2.1.1 recycled 2.1.4. secondary F	A1 B1 B3.2 C1 C2 D2 E1.1 E2.2 B4.2 B5.2
C98	You've done, you've made him a much better person [person yeah] Yes. And he used to acknowledge that [laughs] you know, he used to tell me that but, I don't get that acknowledgment anymore. Now I'm just a nag [yes] You know, it's the same things, but now I'm just a nag. But you're not a nag, you're just, this person is just not happy with themselves, so they want to make you unhappy, and they don't know how to go about doing it themselves, so. You just have to take care of yourself. You have to take care of yourself.	task implementation	2.2.4	A2 B1 B3.1 B2.2 B3.2 C1 C7 D2 E1.1 E2.2 B4.2 B5.1
Т99	So, take care of her [yes] Actually do it, right? Take care of her. How can you do that?	process suggestion		
C99	How do I take care of her?		0.2	
T100	Do it. You're okay. You might even imagine you know, stroking her or comforting her. Can you do that?	process suggestion / feeding lines	1.1.1	
C100	You're somebody's child, yes. Nobody should be hurting you like this. I don't care who they are, and I'm going to always be here for you, you're going to always have me. And we're going to get through this. No matter what the outcome is. We're going to get through it and you're going to be able to function and you're going to be able to take care of your children and maintain what you have and what you want out of life. There's no reason to be sad. There's no reason to be sad. Or hurt or disappointed because these things happen in life and just have to start to learn how to adjust and don't let it consume you. But we'll always, I'll always be here to help you.	Secondary self F, part of task implementation	2.2.4.	A2 B1 B3.1 B2.2 C1 D2 E1.1 E2.2 B4.2 B5.1
T101	Say that again.	process suggestion	0.1	
C101	l'Il always be here to help you	expressing emerging emotion that is being formulated as part of task implementation	1.2.3.	
T102	What does it feel like when you say that?	exploratory Q	1.1.1.	
C102	Comforting		1.2.3.	
T103	Yes. Yes. I'll be here to comfort you.	empathic following, process suggestion	0.1	
C103	Yeah. When you feel like you have nobody. Because you do have somebody. You have me and that's like the most important thing. Because you aren't going to always have your mom. My mom is sick [I see] She has Lupus and other things so I don't know, you know, she can get sick anytime [yes] and so I kind of have been trying to prepare myself for that.	self F is secondary to task implementation	2.2.4.	A2 B3.1 B2.2 C1 D2 E1.1 E2.2 B4.2 B5.1
T104	Myself for that. Yeah, yeah, yeah.	empathic repetition and following	1.1.3. acknowledges F	

C104/105	So, I just, I put it outside though because, if I sit back and	secondary self F	C104/105 2.2.4	A2 B3.1 B3.3 C1 C2 D2
	worry about it, I'll just worry myself to death over it. My mom's not going to be here, everybody leaves one day, but then I feel like oh, my dad's gone, now my mom's gone, it's not fair, you know [yes, yes] So I try not to think about it, though. I just try to enjoy the time that I have with her. [T105 Yes. Yes, but so you in the end, you're] You're back by yourself [laughs]	T105 exploratory reflection	T105 1.1.1.	E1.1 E2.2 B4.2 B5.1
T106	Right, right, but maybe too, you've taken in your father and taken in your mother [yes] and you can be that for yourself.	empathic formulation with conjecture	2.1.4 F is secondary to task implementation and 2.1.2.2	A1 B1 B3.1 C1 C2 C8 D2 E1.1 E2.2 B4.2 B5.1
C106	Learn from them [yes] because, my mom always tries to talk to me about it [yes] constantly [yes] and it's very helpful. It's very helpful. Because she hits everything right on the head. [laughs]	evaluating an aspect of F (it is helpful to take in and learn from parents)	2.2.4.	A2 B3.2 B3.1 B3.3 C1 C2 C3.1 D2 E1.1 E2.2 B4.2 B5.2
T107	Right, right, right. But so that's how you can do this for yourself as well or take in those positive voices.	empathic following, experiential teaching as part of task structuring and formulation	2.1.4 F is secondary to task implementation	A1 B1 B3.1 C2 D2 E1.1 E2.2 B4.1 B5.1
C107		illustrate F (of the positives mum says about her that	2.2.2.1.	A2 B1 B3.3 B3.1 C1 C3.1 C4.1 D2 E1.1 E2.2 B4.2 B5.2
T108	All good things, right?	empathic reflection	1.1.3. acknowledges F	
C108	Yes, all the positive.		0.2	
T109	you.	empathic following, process suggestion / feeding lines	1.1.1.	
C109	l'll always be here for you.	expressing emerging emotion that is being formulated as part of task implementation (self-love, self-compassion)	1.2.3.	
	l'll always be here for you right. And you are a person of real worth. You've done such good, you've done many good things.	empathic repetition, process suggestion	2.1.4.	A1 B1 B3.1 C1 C3.1 D2 E1.1 E2.2 B4.2 B5.2
	You're worthwhile [yes] and your children need you. But you have to take care of yourself first. Because then you're no good for anybody [laughs] you won't be able to take care of your children if you don't take care of yourself.		2.2.4.	A2 B1 B3.1 C1 C3.1 D2 E1.1 E2.2 B4.2 B5.1
T111		process suggestion / feeding lines	1.1.3. acknowledges F	
	Right, I'll help you, I'll take care of you, and I'll be that support that you feel no one else is giving you. I'm the person who will be holding you up.		2.2.4.	A2 B1 B3.1 C1 C3.2 D2 E1.1 E2.2 B4.2 B5.1
T112	Right. Change, if you will. What happens when you get	process suggestion, exploratory Q	1.1.1.	
	I don't believe it sometimes. I want to believe it [yes] I do to an extent and sometimes I'm like, oh yeah, that's true, but then		2.2.4.	A2 B3.1 B1 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
T113	Then what happens?		1.1.1.	
C113	I just fall apart in the heat of all the battles.	Secondary self F, part of task implementation	2.2.4.	A2 B3.1 B2.1 C2 D2 E1.1 E2.2 B4.1 B5.1

T114	Yes, yes. So now change. Why don't you come back and make her fall apart. How do you do it?	empathic following, formulation as part of process suggestion	1.1.1	
C114	Oh, you're just saying that, you know you can't.		0.2	
T115	What, you can't?		0.1	
C115	You're not, you can't function. What's wrong with you? This is your second marriage, and you can't even make it work. You know.		2.2.4.	A2 B1 B3.1 C1 C2 D2 E1.1 E2.2 B4.2 B5.1
T116	So, this is the negative voice, right? [yes] Right, right. So, tell her what's wrong with her. It's your second marriage, you can't make it work.	empathic formulation with fit Q, process suggestion, empathic repetition	2.1.4. F is secondary to task implementation	A1 B1 B3.1 C2 D2 E1.1 E2.2 B4.1 B5.2
C116	You can't function, you lived depressed most of your life, you're never happy. I don't feel like l can provide for my children properly.		2.2.4.	A2 B1 B2.2 C1 D2 E1.1 E2.2 B4.2 B5.2
T117	You can't provide.	process suggestion	0.1	
C117	You don't provide for you children. You can't even take them to Disney World this year. Just little things. Just any little thing. You can't get them the clothes you want to get them. You know, you've got to constantly be little bit here, little bit there, putting things in little, you're just [you're just] I mean, there's nothing. I mean	client adds examples to illustrate previous F (C116)	2.2.2.1	A2 B1 B2.2 C1 C3.1 C4.1 D2 E1.1 E2.2 B4.2 B5.2
T118	Your life is		0.1	
C118	Yeah, this is your second marriage and it's the same thing. You feel right back into the same situation. I mean, you don't even know how to just, you know, distinguish the bad anymore and let it go.		2.2.4.	A2 B1 B3.1 C1 C3.1 D2 E1.1 E2.2 B4.2 B5.1
T119	To distinguish the good and the bad. Yeah, yeah, yeah. And your attitude towards her is one of the pointless face, right	empathic repetition, empathic following, exploratory reflection	1.1.3, then 1.1.1.	
C119	Like disappointment. Like what's wrong with you?	expressing emerging emotion that is being formulated as part of task implementation (self-love, self-compassion)	1.2.3.	
T120	Yes, right. Change [okay] So, what happens when you do that to yourself?	empathic following, process suggestion, exploratory Q	1.1.1.	
C120	I start feeding into it. I'm like.	secondary self F	2.2.4	A2 B1 B3.1 C2 D2 E1.1
T121	What actually happens inside? I imagine.		0	E2.2 B4.1 B5.1
C121	I get like, nauseated.		1.2.3.	
T122	Yes, yes. Tell her. I feel nauseous when you do this.	empathic following, process suggestion with empathic repetition	1.1.1.	
C122	I feel sick [yes] nauseated, upset	страние теренноп	1.2.3.	
T123	Now just start	process suggestion (interrupted by client)	0.1	
C123	Then it's just a snowball effect in my head and 1 start going over all these things in my head and then 1 try to figure out ways to make things happen in my life. You know.	significant self F alongside task implementation but not secondary to it	3.2	A2 B1 B3.1 C1 C2 C3.2 D2 E1.2 E2.1 B4.2 B5.1
T124	Yeah. I sort of get all disorganized and panicky and overwhelmed.	empathic following, process reflection / formulation	2.1.1	A1 B1 B3.1 B2.1 C1 C2 C3.1 D2 E1.2 E2.2 B4.2 B5.2
C124	Yes, and then I feel like I can't do my homework. That I'm not smart enough.		2.2.4	A2 B1 B3.1 C1 C2 C4.1 D2 E1.1 E2.2 B4.2 B5.1

T125		empathic following, feeding lines	1.1.1.	
C125	l can't concentrate. I don't want to cook. I just want to stay in my room and feel safe. I want to be separate from the children [children] They annoy me. Sometimes they make me happy. They'll come in and start playing with me and it's really sad because, she knows she's seen me cry so much.		2.2.4.	A2 B1 B3.1 B3.2 B3.3 C1 C2 C4.1 D2 E1.1 E2.2 B4.2 B5.1
T126	Yes, so she can see	empathic repetition	1.1.3. acknowledges F	
C126	So, she comes to me and goes mommy, don't cry, you're a big girl. Don't cry and she'll sing my favourite song to me. And that always makes me happy. You know, even though when she first came in, I may have been irritated or embarrassed by the fact that she recognised it.		2.2.4.	A2 B1 B3.1 B3.3 B3.2 C1 C2 C4.1 D2 E1.1 E2.2 B4.2 B5.1
T127	So, she can get to you [yes] yes, yes	empathic reflection	1.1.3.	
C127	She's got that one song that makes me happy.	F relevant detail	1.2.2.	
T128	So then, listen, you know, we're going to have to end shortly, but this negative voice has all this impact on you, right? [yes] So, what do you need from her?	task structuring around ending, empathic formulation, exploratory Q	2.1.4. F is secondary to task ending	A1 B1 B3.1 C2 C3.1 D3 E1.1 E2.2 B4.1 B5.2
C128	I need her support. And just stop being so negative all the time. Don't just look at the negative, look at the positive. And be that person that she said she was going to be. Be the person that's going to hold me up when you feel like you have nobody else. You know, just.		2.2.4.	A2 B1 B3.1 C1 C2 C3.2 D3 E1.1 E2.2 B4.2 B5.1
T129	I need you to support me and to be there for me [right] Rather than to just put me down.	process suggestion / empathic reflection	2.1.4; also 2.1.1. (recycled)	A1 B2.2 B3.1 C1 C2 C3.1 D3 E1.1 E2.2 B4.2 B5.2
C129	Put me down. Because it's just, I feel like I'm getting put down on the outside and on the inside from myself, you know. So I'm taking double.		2.2.4.	A2 B1 B3.1 B3.3 C1 C2 D3 E1.2 E2.2 B4.2 B5.1
T130	Yes, yes, exactly	empathic following	1.1.3. acknowledges F	
C130	And it's easier when you yourself feel that way about, when you feel that way about yourself, when somebody else says it, it's like wow, t's like really validated.			A2 B3.1 B3.3 C1 C7 D3 E1.1 E2.2 B4.2 B5.2
T131	Yes, yes, yes, So, I need your support.	empathic following, process suggestion	1.1.3. acknowledges F	
C131	I need your support. First I need strength from you.		2.2.4.	formulating the need A2 B2.2 B3.1 C2 D3 E1.1 E2.2 B4.1 B5.1
T132	Yeah. Because I don't feel, I feel so weak, and tired and defeated, and I just need, I need you to stop being so negative and just help me learn how to be a more positive person. Change. And we are going to have to end [okay] but let's just see, right? Because you know, this is the struggle inside, right?	empathic following, formulation, process suggestion, task structuring around ending, more formulation	2.1.4 F is secondary to task work and closure	A1 B1 B3.1 B2.2 C1 C2 C3.1 D3 E1.1 E2.2 B4.2 B5.2
C132	Yes	confirms formulation	1.2.1.	
T133	What's your reaction?	exploratory Q	1.1.1.	
C133	l like that. I want that [umm, hmm, okay] If you could just stay like that, things would just get so much better. Things will seem so much clearer. And decisions will be made much quicker.	evaluates an aspect of F (things would be better if I kept getting more support from myself)	2.2.3	A2 B3.1 C1 C2 C7 D3 E1.2 E2.2 B4.2 B5.2
T134	Tell her something that's good about her. Because she says support me.	process suggestion	1.1.1.	

C134	Oh, tell her something good You are a good mother. You do take care of your children and you're able to still do things with your children that, even though you may think they're little. I mean, they're really not little, they're big, you've taken them to Las Vegas this year, you've taken them to Disney World, well it was only for a weekend, but		2.2.2.1	A2 B3.1 B3.2 C1 C3.1 C4.1 D3 E1.1 E2.2 B4.2 B5.2
T135	it was still a weekend in Florida. But you were actually a very giving and loving person	empathic formulation	2.1.3. single	A1 B3.2 C2 C3.1 D3 E1.2
C135	[right] I mean you. I meet their needs, they have clothes, they're able to get their hair done when they need it and I take them places, I do things with them. I don't know, I'm giving in my family. You're a good person inside.		element F 2.2.4.	E2.2 B4.1 B5.2 A2 B3.2 B3.1 C1 C2 C3.1 D3 E1.1 E2.2 B4.2 B5.2
T136		process suggestion	0.1	
C136	You're a good person inside. You mean well.		2.2.1 recycled	A2 B3.1 B3.2 C2 C3.1 D3 E1.1 4 B4.1 B5.2
T137	And this is what's important to hold onto, right? [yes], but I understand it's a difficult struggle.	experiential teaching, empathic affirmation with formulation	2.1.5.	5 Formulation that steps back and reflects on the client's process by building a shared story (you want to hold on to this truth but it's a difficult struggle) without connecting to key emotions A1 B3.1 C2 D3 E1.1 E2.2 B4.1 B5.1
C137	Yes	client confirms	1.2.1.	
T138	And we do need to end here.	task structuring	0.1	
C138	okay		0.2	
T139	But my understanding that you will be carrying on [yes] working, you know, in an ongoing therapy, right? [yes], you know, I think really important to continue with this kind of [dialogue] dialogue or at least this process, right, of how do you really support yourself.	process disclosure	0.1	
C139	It's helped me a lot. Because even though when I'm going through something, I think about a lot of these things that happen [about yes] you know. So, it's something I carried with me for sure.		0.2	
T140	Good, good. And you know, as homework almost, I think it would be good to try to practice this right.	awareness homework	0.1	
C140	I'll teach my therapist how to do it [laughs] with me. [Laughs] She'll know how to work with me.		0.2	
T141	And the first step is just identifying that negative voice and really knowing when it's there right? Because it just comes in and gets you.	awareness homework with formulation	2.1.4 F is secondary to task closure	A1 B1 B3.1 C1 C2 D3 E1.1 E2.2 B4.2 B5.1
C141	Yes, it does.	confirms formulation	1.2.1.	
T142	And then it's how to stand up to it, and then it's also how to be compassionate to yourself [okay] So good luck.	awareness homework with formulation; process disclosure (good luck)	2.1.4 F is secondary to task closure	A1 B1 B3.1 C1 C2 D3 E1.1 E2.2 B4.2 B5.1
C142	Thank you.		0.2	
T143	lt's been really.		0.1	
C143	lt's been great working with you.		0.2	
T144	end.	process disclosure	0.1	
C144	Yes, I know. [laughs] It's sad [yes, yes] You gave me a lot of tools to work with.		0.2	
T145	Good, good and maybe we can have some email connection and just find out how you're doing.		0.1	

C145	Yeah, when I graduate [right] I'll let you know that you know, I did something positive.	0.2	
T146	Yes, yes, yes, great.	0.1	
C146	And I'm proud of myself, so [okay] Okay. Thank you.	0.2	
T147	So, take care. Right, right.	0.1	