

SUPERVISING EMOTIONALLY FOCUSED THERAPISTS: A SYSTEMATIC RESEARCH-BASED MODEL

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Emotionally Focused Therapy (EFT) is an empirically validated relational therapy that recognizes the complexity of couple's therapy and supports the need for specialized training of therapists. Until now, there has been little research on effective methods for EFT supervision and no systematic model for conducting EFT supervision. The findings of a qualitative study of certified EFT therapists' experiences with EFT supervision and training are presented in this study, along with a systematic model of EFT supervision. The model of EFT supervision is based on the findings of this study, relevant research regarding effective clinical supervision, and the authors' experiences with EFT supervision. This model of EFT supervision is isomorphic to the clinical practice of EFT, in that it is theoretically grounded in attachment theory and emphasizes experiential and emotionally based processes.

Emotionally Focused Therapy (EFT) was developed in response to the lack of “clearly delineated and validated couple interventions” (Johnson, 2004, p. 4). The EFT model emerged as a result of empirical observation of couples' processes in therapy and identification of key therapeutic interventions that successfully contributed to restructuring a couple's emotional interactions. These interventions were incorporated into a carefully researched protocol for treatment with specific steps and stages. Because of this specific protocol, the EFT model lends itself well to replication and empirical validation and has become one of the most empirically validated models of couple's therapy (Johnson et al., 2005).

The success of this model in treating couples has led to an increasing demand for effective EFT training and supervision. An EFT certification process has been established by the International Center for Excellence in Emotionally Focused Therapy (ICEEFT) for therapists desiring to achieve a verified level of competence in the model (see <http://www.eft.ca> and <http://www.iceeft.com> for more details on training). The criteria that must be met in order for a therapist to receive EFT certification are based on both observational process and outcome measures of effective EFT therapy. There is also a certification process for EFT supervisors and EFT trainers. However, there is currently no research-based model of EFT supervision or training.

The purpose of this article is to (a) identify the key variables of EFT supervision that most effectively facilitate learning EFT and (b) develop a cohesive model of effective EFT supervision by integrating these identified variables. To identify these key variables, a phenomenological investigation was conducted, exploring certified EFT therapists' experience with EFT supervision and training. The results of this study contributed to the development of the EFT model supervision presented in this article.

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REQUISITE COMPONENTS OF A SUPERVISION MODEL

A supervision theory or model allows a supervisor to organize, conceptualize, and integrate into practice various pieces of information relevant to the supervision process. This includes information about (a) the supervisee (experience level, self-of-the-therapist issues, and goals for supervision); (b) the model of therapy being used (in supervision and in the supervisees' practice with their clients); and (c) the specific issues of the supervisees' clients (Mead, 2007).

Ideally, a supervision model provides a comprehensive approach and an operational rationale (Patterson, 1986) to guide the supervisory relationship and interventions utilized with the supervisee (Bernard & Goodyear, 1998). A cohesive supervision model should also provide a training structure that is logical and consistent, parsimonious, and practical (Patterson, 1986), with clear and measurable goals for competency (Bernard & Goodyear, 1998). Once a model of supervision has been formulated, the supervisor can then attend selectively to those aspects of the supervision that are most important, depending on the specific needs of the supervisee (Mead, 2007).

Based on a thorough review of the supervision research, Mead (2007) proposed several essential elements necessary for developing a comprehensive model of supervision. Utilization of a treatment manual was found to be important as a means of theoretically grounding the supervisees' practice of therapy (Corrigan & McCracken, 1997; Milne & James, 2000). The research also supports the importance of supervisors modeling therapy interventions for the supervisees as an integral part of their learning experience (West, Bubenzer, Pinsoneault, & Holeman, 1993) and providing the supervisees with opportunities to practice the modeled interventions (West et al., 1993). It is also imperative that supervisee's clinical work be directly observed (Liddle, 1991).

The supervisory relationship is complex in that it embodies both evaluative and clinical components (Bernard & Goodyear, 1998; Holloway & Neufeldt, 1995). The effectiveness of direct supervision hinges on the effectiveness of the supervisor providing clear, direct, and specific feedback in the context of a secure supervisory relationship (Heatherington & Friedlander, 1990; Horvath & Bedi, 2002; Kluger & DeNisi, 1996). The supervisor and supervisees must also be clear about specific interventions being observed and the therapeutic goals. The supervisor must provide specific supportive and corrective feedback to supervisees. Negative feedback should be limited, especially in regard to feedback about self-of-the-therapist issues (Kluger & DeNisi, 1996).

Part of establishing and maintaining a strong supervisory relationship is establishing clear expectations for supervision and addressing the power within the supervisory relationship throughout the supervisory process (Zygmund & Boorhem, 1989). The supervisor must also be aware of and responsive to supervisees' personal and professional histories and the ways in which self-of-the-therapist issues impact the supervisees' clinical work (Mead, 1990; Storm, McDowell, & Long, 2003; Wampold, 2001). The quality of the alliance in the supervisory relationship is also of paramount importance in that it directly impacts the degree to which the supervisee is able to effectively identify and accomplish their goals for clinical learning and professional growth. Because of the importance of this alliance, developing and maintaining the supervisory relationship is an important ongoing part of the supervisory experience.

BECOMING AN EFT THERAPIST

The landmark article "Becoming an Emotionally Focused Couple Therapist" by Gail

Palmer and Johnson (2002) addressed the need for a clearer model of EFT supervision and outlined several key principles necessary for effectively practicing EFT. Many of the principles outlined as necessary for practicing EFT seem to also be necessary for supervising therapists in learning the EFT model. These principles include (a) creating and maintaining a strong therapeutic alliance, (b) emphasizing the processing and utilization of emotional experience to choreograph interactive change, and (c) identifying relational patterns from an attachment perspective (Palmer & Johnson, 2002).

Becoming an EFT therapist can be a challenging process. For most clinicians, becoming an EFT therapist requires them to not only shift their theoretical orientation but also learn new therapeutic interventions and new ways of working with emotion (Johnson, 2004; Johnson

et al., 2005; Palmer & Johnson, 2002). Therapists learning EFT must often relinquish interventions that have become a natural part of their repertoire in exchange for a completely new theoretical approach. Becoming an EFT therapist requires learning a distinct set of carefully outlined steps and stages with corresponding interventions to be used at specific times in the therapeutic process. In addition, an entirely new theoretical approach for working with emotion and couple process must also be learned and integrated.

The process of participating in supervision is different depending on the therapist's (a) level of clinical experience, (b) prior theoretical approach, (c) degree to which his or her prior approach differs from that of attachment theory, and (d) comfort level in dealing with emotion. These differences need to be considered in developing and implementing an EFT supervision model. For example, it is the experience of these authors as EFT supervisors that seasoned therapists often experience the greatest difficulty with the process of learning EFT owing to the challenge of shifting from the theories and interventions they have come to rely on. They frequently describe feeling as if they are starting over again, stating that the experience is analogous to having their first clients in graduate school. Graduate students and less-experienced therapists seem to have fewer difficulties with the process of learning EFT and effectively implementing the model in their practice. This may be because they have not yet committed years to a different therapeutic approach. Regardless of experience level, many clinicians have not learned to stay with, expand, and process emotion as most models do not focus on using emotion as a way of restructuring relationships.

THE THEORETICAL PREMISES OF EFT

EFT Supervision: Creating a Secure Attachment Alliance

EFT is an integrative approach to treatment utilizing elements of experiential, person-centered, constructivist, and systems theory, but it is philosophically grounded in attachment theory. Applying an attachment lens to supervision provides a framework for understanding the relational dynamics that facilitate, as well as those that hinder learning EFT (Johnson, 2004; Johnson et al., 2005). Secure relationships provide people in distress with a source to which they can turn for reassurance, guidance, and renewed emotional resources (Bowlby, 1969, 1988). In EFT supervision, the supervisor ideally becomes a secure base for the supervisees to whom they can turn during times of insecurity, distress, and general need for reassurance as they are learning EFT. In our experience, these emotional and relational "check ins" are paramount in the EFT supervisory process. It is also our experience that, consistent with attachment theory, in addition to assessing the supervisees' level of confidence and competency with EFT, the EFT supervisor is actively attuning to and assessing the supervisees' present emotional experience of the supervision process.

In order for this secure supervisory bond to develop, the supervisees must first experience their supervisor as being approachable, respectful, and genuinely concerned with the supervisees' welfare (Mead, 1990). EFT supervisors who provide a safe learning context and serve as a secure base to their supervisees in their process of learning EFT provide their supervisees with the following: (a) knowledge of the model, (b) reassurance regarding their areas of competency, (c) assistance and direction regarding areas needing improvement, and (d) courage to take the risks necessary to progress in their learning (Palmer & Johnson, 2002). It is the authors' experience as EFT supervisors that it takes courage for supervisees to shift their theoretical views and apply new interventions, especially when they have little confidence in their ability to facilitate EFT. Supervisees have shared with us that they are better able to accept and integrate corrective feedback, rather than feeling criticized and defending against such feedback, to the extent that their alliance with their supervisor is secure. It has also been our experience that a secure supervisory alliance serves as an emotional safety net for EFT supervisees to be able to take risks necessary to integrate the entirety of EFT in their work with their clients.

Emotional Regulation in EFT Supervision

Palmer and Johnson (2002) noted that the isomorphic nature of supervision and therapy has been extensively addressed (Haley, 1987; Liddle & Saba, 1983; Minuchin & Fishman, 1981; Todd & Storm, 1997) and that "the assumptions underlying EFT also apply to the training and supervision

process” (p. 18). The EFT supervisory experience is isomorphic to the EFT therapeutic process in that in order for supervisees to effectively assist clients in identifying and processing their own emotions and attachment needs, supervisees must be able to successfully identify and process their own emotion and attachment needs, often in supervision (Palmer & Johnson, 2002).

It is common for EFT supervisees’ own emotional process and attachment history to become activated as they are learning the model theoretically and clinically. EFT supervisors who have established a secure alliance with their supervisees are able to effectively assist the supervisees in identifying and understanding their own emotional process and how it relates and translates into their clinical work. Rather than being overcome by their emotional experiences and impeding the clients’ therapeutic process, the supervisor can help the supervisee feel safe enough to identify, integrate, and process these experiences within the supervisory relationship.

Some models of therapy and supervision avoid or discourage supervisees’ emotional reactions and self-of-the-therapist issues (Fisch, 1988; Haas, Alexander, & Mas, 1988; Haley, 1988; Papero, 1988; Todd & Storm, 1997). EFT takes the stance that it is not emotion that derails the therapeutic or supervisory process, but rather the inability to manage and utilize emotion effectively. EFT purposefully utilizes emotion as the agent of change to restructure bonds. EFT therapists must therefore know how to skillfully identify and utilize the power of their clients’ emotion and their own emotion. The EFT therapist choreographs change events in which they assist partners to “exit from emotional reactivity and defensiveness” and “articulate needs and fears” while staying engaged with their own emotional experience and remaining emotionally connected to their partner (Johnson, 2004, p. 235). As Johnson (2004) describes,

“Once both partners are engaged, both are able to attune to the other and respond to the other while staying in contact with their own experience. They are at once more completely themselves and more completely connected with and responsive to the other. This is a picture of a coherent, well-articulated sense of self in action. It is also a picture of secure attachment, where both partners can regulate their emotions in such a way as to send the emotional cues that pull the partner closer and maintain connection (p. 235).”

When therapists can stay present with their own emotion and use their emotional responses as a guide, *rather than becoming overwhelmed by or shutting down their own emotional process*, they are better at working with the clients’ emotion and utilizing it to create change. Supervisees who are unable to successfully regulate their own emotions in therapy with their clients will not be able to successfully assist their clients in processing or regulating their own emotions (Bradley & Furrow, 2010; Wittenborn, 2010). The therapists must remain emotionally grounded themselves and effectively regulate their own affect to serve as a secure base and calming presence for the clients as they engage in this emotionally challenging process (Bradley & Furrow, 2010). Johnson (1996) explained that an EFT therapist must “be able to create a safe context for both partners, a secure base in attachment theory terms, to access emotion and restructure interactions” (p. 33). Johnson (1996) summarized the complex process of creating a secure base for the partners by saying that therapist must “flexibly move from processing inner experience with an individual to choreographing interactions between partners, from following and tracking experience and interactions to moving such experience and interactions forward (p. 33).”

The ability to move between processing intrapsychic and interpersonal emotions requires that therapists be securely grounded and confident in the EFT model and confident in their ability to effectively utilize EFT interventions to choreograph experiences between the partners that will facilitate change. For an EFT therapist to stay connected to his or her own emotional experience, as well as to simultaneously maintain an empathic awareness of each partner’s emotional experience, requires a great deal of emotional stability. Inexperienced EFT therapists and supervisees can find this process of simultaneously being aware of their own emotional reactions while tracking their clients’ separate emotional responses to be overwhelming.

The EFT therapist is somewhat analogous to a conductor of an emotional symphony. Knowing what direction to take and how to proceed within the model to effectively produce change can be challenging and requires fine emotional attunement. This becomes impossible if supervisees are overwhelmed by their own emotional reactions to the couples’ dance and process. In the context of a safe supervisory relationship, when supervisees become activated or

triggered by a clinical issue, the supervisor can guide and model for the supervisee how to identify and process these emotional reactions so that they will become an asset to treatment rather than a hindrance (Sandberg & Knestel, 2010). Having the safety to process their emotional experiences within the supervisory relationship will reduce their anxiety and help them to gain a sense of self-efficacy. Supervisees are more likely to be successful in developing proficiency in the EFT model when they are able to face their fears, rather than avoiding, defending, denying, or becoming immobilized by them. A model of EFT supervision must address these key elements to effectively assist supervisees in their process of becoming an EFT therapist.

A PHENOMENOLOGICAL STUDY ON EFT SUPERVISION

To extend the existing research, Polkinghorne's (1989) and Colaizzi's (1978) methods were used to conduct a phenomenological study on certified EFT therapists' experience with EFT supervision and training.

Participants

Participants included a nonrandom sample of 17 certified EFT therapists (receiving EFT supervision is a prerequisite to becoming certified) between the ages of 25–65, spread throughout the United States and Canada. Ethnic makeup included 6.3% Hispanic, 7% American Indian, and 86.7% Caucasian/White. Only 35.7% of the participants were originally trained in attachment theory, and 73.3% of the participants were AAMFT-approved supervisors. The years of couple and family therapy experience varied among the participants from 5 to over 20 years. The participants' clientele consisted of families, individuals, and couples, with 42.9% of participants reporting they saw between 6 and 10 couples every week.

Procedures

The data gathered in this study were generated through a series of open-ended questions created, utilizing Colaizzi's (1978) suggestions for generating questions. Follow-up phone interviews were not necessary in the data collection phase of this research because all 17 of the participants' answers were clearly articulated and detailed. The data collection process consisted of three steps. The first step was for the interviewer to engage in self-reflection on the topic being investigated; this allowed the interviewer to uncover *prima facie* dimensions of self-exploration (Polkinghorne, 1989). The second step included creating possible research questions developed by both the founder of EFT, Dr. Sue Johnson, and a group of her colleagues, Drs. Scott R. Woolley, Mark Kaupp, and Lisa Palmer-Olsen. These questions were generated after reviewing taped interviews of the participants in the advanced EFT supervision group.

These questions were integrated into the survey used for this study, which consisted of 62 open-ended questions relating to the experiences with EFT supervision and training, as well as with a demographic survey. The questions were designed to capture central themes of the participants' experiences as EFT supervisees. All questions were open ended, allowing themes to emerge across multiple experiences. The third step consisted of collecting the data from the participants' answers via the WEBSurveyor site.

Analysis

The participants' responses were analyzed and grouped using a 7-step process based on Colaizzi's (1978) method of analyzing phenomenological research. The resulting themes were analyzed three different times to ensure the integrity of the results and to distill the essential components of EFT supervision and training. The demographic data were collected and graphed on the Websurveyor site. In addition, the Websurveyor site collected and pulled out phrases and sentences directly relating to the phenomenon being studied that were repetitive across participant responses via Colaizzi's method. Once the responses were grouped by the Websurveyor computer program into themes, the lead author then reanalyzed the responses for purposes of validation.

The themes that emerged from the computer analysis and from Palmer-Olsen's analysis were identical. Once these analyses were conducted, the themes were grouped and summarized around the specific topics being investigated. Responses were grouped based on the content and

similarities of the responses. Next, formulated meanings were ascribed to the significant statements, and six themes emerged around EFT supervision and training. The data were analyzed for a third time, seeking responses that may not have been clustered into these six themes. From this step, four additional formulated meanings were identified and incorporated into the six identified themes. Unintended effects were also accounted for by removing all responses that did not relate to or fall into a grouping of themes or formulated meanings.

RESULTS

Six themes emerged from the participants' reported experiences regarding the key elements of effective EFT supervision: (a) A secure supervisory alliance, (b) Processing self-of-the-therapist issues and emotional regulation, (c) Modeling and practicing EFT Interventions, (d) Live and recorded session review with specific positive and corrective feedback, (e) Utilizing the EFT workbook and creating connections, and (f) Goal-setting and evaluation.

A Secure Supervisory Alliance

One hundred percent of the participants commented on the necessity of a secure supervisory alliance in order for EFT supervision to be effective. The participants' verbatim responses included the following:

Without an open, encouraging, and safe EFT supervisor, I would not have learned how to apply EFT.

An EFT supervisor must be safe, supportive, and transparent; helping the EFT trainee to see their strengths as well as be willing to point out areas of growth.

In contrast, study participants indicated that supervisors who did not establish a secure supervisory alliance were less effective in helping their supervisees learn to implement EFT. Issues with the supervisory alliance and lack of safety during the learning process accounted for 100% of the participants' reports of the "least helpful" experiences with EFT supervision. For example, participants stated:

My EFT supervisor had moments where he/she 'acted like an expert or took the one up position with me,' and this made me feel very uncomfortable when I would make a theoretical mistake. You have to be able to ask questions and feel safe enough to share EFT failures if you want to grasp this model.

I think my EFT supervisor thought I was more experienced with couples than I really was. If I felt more comfortable, I would have said I was not understanding what he/she was asking me to do.

EFT supervisors who are over corrective or critical. . . have the potential of impeding the EFT training process.

Processing the "Self-of-the-Therapist" Issues and Emotional Regulation

One hundred percent of the participants concurred that "self-of-the-therapist" issues must be addressed during EFT supervision. The majority of the participants reported that difficulty in choreographing a softening in EFT was related to their own personal and emotional responses to the couple. A softening event is when pursuing partners articulate and share their needs and ask, from a position of vulnerability, that their needs be met. (Johnson, 2004). For instance, one participant stated, "My own personal and emotional reactions to the intense dynamics of a case often got in the way of me seeing how to use EFT effectively and create a softening."

Participants particularly emphasized the "damaging" effects of not addressing these issues. One participant reported,

[when my] EFT supervisor did not question or comment on my emotional state during a very intense EFT moment, it felt as if she didn't care and. . .didn't even notice I was

having an emotional response; this ultimately was harmful to me and made me afraid to open up to her. I got the message that I could not share my personal reactions during such intense cases.

Participants reported that having their supervisor model appropriate use of “self-of-the-therapist” issues was the most helpful method of teaching them how to address these issues. For example, participants stated:

In modeling self of the therapist issues. . . [my supervisor] is transparent and completely uses herself within the supervisory relationship; this helped me to feel safe enough to address self of therapist issues in EFT supervision.

My EFT supervisor would ask me how this couple impacted me on a personal level when I was getting stuck. He would share how this couple impacted him on a personal level as well in a transparent and safe way. [sic]

Despite the anxiety that can be generated surrounding self-of-the-therapist issues and emotional regulation, with a strong supervisory alliance, addressing “self-of-the-therapist” issues can be a very positive experience, as one participant noted

This [addressing self-of-the-therapist issues in EFT supervision and training] was one of the most encouraging aspects of EFT supervision for me; it helped me to feel more confident in being an EFT therapist. My EFT supervisor reviewed qualities I displayed as an EFT therapist personally and I was able to nurture these aspects of self through this encouragement.

Modeling and Practicing EFT Interventions

Eighty-seven percent of the participants stated that modeling and practicing specific EFT skills and interventions was necessary to incorporate the EFT model into real-life practice. Modeling provides a theoretical map for understanding what the EFT therapist is trying to achieve in a much more powerful way than teaching through discourse alone. It provides supervisees with an experiential illustration of how specific interventions look and feel. A simple review of a skill or technique was not found to be helpful during the EFT supervision and training process. As these participants explain:

EFT supervision and training should never just rely on case presentation. Without practice I would never have been able to go into a session and do what I had been taught that day.

Role playing was reported to be the most effective method of practicing EFT interventions. Some participants reported anxiety regarding playing the role of the therapist prevented them from experiencing role plays as helpful. However, these same participants reported that playing the role of the clients was helpful to them in their learning process. This concurs with the authors’ EFT supervision experiences that supervisees often report that playing the role of a client has helped them develop greater empathy for their clients’ emotional experience. This seems to be especially true when supervisees’ role play the part of a client with whom they are having difficulty empathizing or understanding. Supervisees who have participated in role plays in the role of the client also report to the authors’ greater acceptance of attachment theory and greater trust in the efficacy of the EFT interventions to elicit specific attachment responses in clients.

Live and Recorded Session Review with Specific Positive and Corrective Feedback

Sixty-two percent of the participants reported participating in live supervision and/or reviewing their recorded sessions with specific feedback to be the most helpful formats of EFT supervision. Viewing recorded video EFT sessions was reported to be helpful regardless of the level of experience of the therapist performing the session. However, the benefits associated with viewing sessions of novice EFT therapists were reported to be different from the benefits of viewing sessions of seasoned EFT therapists. Reviewing recorded sessions of peers as a

process of group supervision was helpful because it normalized the difficulty of learning EFT and provided opportunities for processing those difficulties.

Live supervision was strongly recommended by the participants in this study, as long as the supervisory alliance was safe. Although supervisees reported reviewing their own recorded sessions and/or receiving live supervision were the most helpful EFT supervision formats, they were reported to be anxiety provoking. In addition, participants reported the anxiety they experienced reviewing that their own work was “rarely processed in EFT group or individual supervision.” These findings support the importance of addressing “self-of-the-therapist” issues around emotional regulation related to learning EFT and the necessity of creating a secure supervisory alliance as a context for processing this anxiety.

Utilizing the EFT Workbook and Creating Connections

One hundred percent of the participants stated that reading and/or working through the *Becoming an Emotionally Focused Couple Therapist: The Workbook* (Johnson et al., 2005) or some form of EFT written materials was helpful during their EFT supervision and training process. They also reported that as they completed the EFT workbook activities with more ease and success, their confidence increased. Additionally, participants reported reading *The Practice of Emotionally Focused Couple Therapy: Creating Connection* (Johnson, 2004) and additional attachment-related articles and books during the EFT learning process was helpful. Conversely, it was reported that reading these materials without support or mentoring increased supervisees’ confusion and insecurity. Consequently, it appears that there is a synergistic relationship between supervision and reading materials.

Goal-Setting and Evaluation

One hundred percent of the participants responded that their experience with EFT supervision was positive. However, some of the participants reported wanting more “structure and direction in EFT supervision so that they could make sense of when they were making progress.” Participants noted the following:

EFT is such a structured and detailed model, it seems that as trainees we also need to have a map for learning the model, rather than going case by case. If we have to complete certain competency criteria in order to be a certified EFT provider, then we should know what those are and should be able to use the same EFT competencies in order to track our progress during the EFT trainee phase.

Participants whose supervisors established clear goals and evaluation described the importance of doing so, while those whose supervisors did not provide this clarity, described their frustrations:

When I was coding tapes with my EFT supervisor I was expected to be able to recognize specific interventions. We set up goals for me at each tape review and as I achieved these goals, the expectations were increased. I was always aware when I was making progress.

I knew when I was making progress in EFT because my supervisor would highlight what I had done well. However, I never really knew what exactly I had accomplished. I would have like to have milestones mapped out so I would know which direction to focus on while in EFT training.

These statements support the need for measured goals and steps to be articulated more clearly during the EFT learning process.

AN EFT MODEL OF SUPERVISION

The six themes identified in the above-mentioned study, the associated participant comments, the literature on supervision and EFT, and the experiences of the authors with EFT supervision have been integrated to create a model of EFT supervision. This model is unique in

that it is isomorphic to the practice of EFT, theoretically grounded in attachment theory and emphasizes experiential and emotionally based processes.

Two grids are presented to outline and clarify the model: (1) a grid of EFT supervision theory and (2) a grid of EFT supervision goals and tasks. The first grid outlines the primary goals, concepts, interventions, as well as the nature of the supervisory relationship and the supervisory methods utilized in EFT supervision. The second grid outlines in greater detail the EFT supervisor's goals for assisting supervisees in developing competence in EFT and accompanying tasks and methods. The primary goals for EFT supervision are outlined identically in each grid. The purpose of providing two distinct grids is to provide both a broad overview of the concepts, interventions and methods (as presented in grid 1) and a detailed description of the ways in which these concepts, interventions, and methods are utilized to accomplish the specific goals of EFT supervision.

An EFT supervision theory grid

Primary goals	Relationship	Primary concepts	Primary interventions	Supervision methods
1. Co-create and maintain a secure supervisory alliance. 2. Insure supervisees' theoretical grounding in EFT stages and attachment theory. 3. Insure supervisees' ability to deepen and regulate clients' emotions and facilitate bonding processes. 4. Insure supervisees' ability to regulate and use their own emotional processes in therapy.	<ul style="list-style-type: none"> • Collaborative • Transparent • Supervisor acts as a secure base for the supervisees to turn to regarding their insecurities about learning and practicing EFT. • Supervisor accepts responsibility for assisting supervisees in identifying their needs and establishing their goals for supervision • Supervisees accept responsibility for identifying their own needs and communicating them to their supervisor regarding their goals for supervision 	<ul style="list-style-type: none"> • Secure attachment • Bonding • Primary and secondary emotions • Negative and positive interaction cycles • Effective dependency • Safe haven and secure base • Working models of self and other • Relational emotional regulation • Accessibility, responsiveness, and engagement • Vulnerable reaching • Transparency and authenticity • Attunement & tracking • Cultural sensitivity • Experiential change 	<ul style="list-style-type: none"> • Reflecting emotional experience • Validation • Evocative questioning • Heightening • Empathic conjecture • Tracking, reflecting, and replaying interactions • Reframing in the context of the cycle and attachment processes • Choreographing enactments 	<ul style="list-style-type: none"> • Using a supervisory contract. • Processing supervisory relationship • Utilizing The EFT Workbook (Johnson et al., 2005) and other written EFT materials • Processing supervisee emotional responses • Modeling & Role plays • Recorded session review • Live supervision

EFT supervision goals and tasks

Supervisor's goals for assisting supervisees in developing competence in EFT	Tasks/methods of facilitating supervisee in developing competence in EFT
<p>1. Co-create and maintain a secure supervisory alliance.</p>	<p>a. Assessment Clinical experience with couples Areas of competencies and deficiencies in practicing EFT Understanding of the EFT model (attachment theory, steps, stages, interventions etc.) Acceptance of the EFT model and desired level of competency Confidence in practicing EFT Comfort level with supervision methods (i.e., live, video review, role plays etc.) Preferred learning styles Openness to discussing “self-of-the therapist” issues</p> <p>b. Establish supervisory contract, including the following Goals and expectations for the supervisory relationship (transparency, supervisor as secure base, etc.) Process for addressing conflicts and ruptures in the supervisory relationship Goals for the supervisory learning process: specific knowledge and interventions about which the supervisee desires greater competency Methods for acquiring theoretical integration and practice of the model (based on supervisee's learning style and preferences) Process for evaluating the goals</p>
<p>2. Insure supervisees' theoretical grounding in attachment theory and EFT steps and stages. Understanding and being able to apply attachment theory Accurately identify and understanding the stages and steps Accurately identify clients' negative interaction cycle and each person's positions in the cycle. Accurately identify each partner's secondary and primary emotions and unmet attachment needs.</p>	<p>a. Utilize written materials, including the EFT Workbook, and other articles and books on Attachment Theory and EFT</p> <p>b. Requiring memorization of EFT steps and stages</p> <p>c. Create experiential learning events through live sessions, review of expert videos, modeling, and role plays</p>

Table 1. (Continued)

Supervisor's goals for assisting supervisees in developing competence in EFT	Tasks/methods of facilitating supervisee in developing competence in EFT
<p>3. Insure supervisees' ability to deepen and regulate clients' emotions and facilitate bonding processes. Effectively be able to access primary emotions and attachment longings. Effectively choreograph enactments and facilitate withdrawer reengagement and blamer softening</p>	<p>a. Create experiential learning events Review case presentation, recorded session segments, or provide real-time live supervision. Provide specific feedback, model the feedback, and implement the feedback through role play Support and encourage the supervisee, paying close attention to potential self-of-the-therapist issues Practice choreographing enactments</p> <p>b. Help supervisee's view partners' emotional responses and interactions through the lens of attachment theory</p>
<p>4. Insure supervisees' ability to regulate and utilize their own emotional processes in therapy. Supervisees' effectively organize and use their emotional responses to each partner's process and the couple's interaction</p>	<p>a. Provide a safe context for processing supervisees' emotional responses</p> <p>b. Assist supervisees in identifying their own emotional responses to each partners emotional processes and the interaction of the couple.</p> <p>c. Help partners organize their own emotional responses and the responses of clients through attachment theory.</p> <p>d. Model appropriate use of "self-of-the-therapist" to effectively assess and intervene in therapy</p> <p>e. Utilize role play to help supervisees practice using "self-of-the-therapist" to effectively assess and intervene in therapy</p>

Primary Goals

Goal one: co-create and maintain a secure supervisory alliance. The primary goals for EFT supervision, as presented in each grid, include establishing a secure supervisory alliance as the foundation and context for accomplishing the remaining three goals. In order for EFT supervisees to learn the theory and acquire the skills necessary to effectively practice EFT, they must have a secure supervisory relationship.

The participants' responses regarding the EFT supervisory relationship consistently supported the paramount importance of a secure alliance. Palmer and Johnson (2002) summarized well the elements that are necessary for establishing the quality of alliance that best facilitates supervisees' learning EFT:

The supervisory relationship needs to be characterized by mutuality, collaboration and respect in order for the learning to take place in an atmosphere that allows for creativity and risk taking. . .The novice therapist needs then to feel not only heard, but also held emotionally and resonated with by the supervisor. (p. 18)

The EFT supervisor is explicitly transparent about the collaborative nature of the supervisory relationship and emphasizes providing a secure base to the supervisees in their process of learning EFT (see Grid 1). A secure supervisory alliance ideally provides supervisees with the emotional safety they need to sufficiently reduce their anxiety, allowing them to process the thoughts and emotions evoked in their practice of EFT (Palmer & Johnson, 2002).

To establish this type of secure supervisory relationship, the supervisor must provide certain structural and emotional support to the supervisee. The tasks and methods of establishing this type of supervisory relationship include a thorough assessment and supervision contract. The assessment should address each of areas outlined in the assessment section of Grid 2. Assessment of each of these areas is essential to establish a clear supervisory contract that addresses the supervisees' specific needs and desires regarding their EFT supervision experience.

Once the supervisees' level of experience has been accurately assessed, a contract for supervision should be established based on collaboratively set goals that match their experience and comfort level with clinical work in general and with the EFT model. The contract should include the elements outlined in Grid 2. Establishing a contract creates a dialog between the EFT supervisor and supervisee about confidence and competence levels during the supervision process and will assist in developing and maintaining a secure supervisory alliance (Falender & Shafranske, 2004; Mead, 2007).

Supervision by its very nature involves evaluation and, therefore, should have a structured format for what and how to evaluate the supervisee (Mead, 2007). Once the goals for supervision have been set, the EFT supervisor should routinely evaluate and readjust these goals throughout the learning process in coordination with the supervisee's feedback. This process of checking in is consistent with an attachment perspective, where people "check in" with one another regarding each person's needs and expectations. Maintaining the degree of safety and security necessary for learning EFT requires this evaluation or "checking in." Clear expectations, as well as identifying and expressing needs, provides the predictability necessary for maintaining and strengthening the supervisory alliance.

If the supervisee is pursuing EFT certification, specific goals should be established toward this end and incorporated into the supervision process and contract. The EFT certification process emphasizes reviewing recorded segments and performing specific EFT stages, steps, and interventions. Using the EFT certification criteria is a helpful tool for establishing goals for EFT supervision.

Establishing and maintaining a secure supervisory relationship is both a precursor to the other goals of EFT supervision and a foundation that supports each of the other goals. Consequently, it continues to be a focus while accomplishing the remaining goals of EFT supervision.

Goal two: insure theoretical grounding in attachment theory and the EFT steps and stages. Insuring supervisees' theoretical grounding in attachment theory and the EFT steps and stages includes teaching the primary concepts listed in Grid 1 as well as the proficiencies outlined in Grid 2 for Goal 2. The methods found to be most effective in accomplishing this include a combination of utilizing written materials and creating experiential learning experiences for supervisees to practice the concepts they are learning. The EFT Workbook (Johnson et al., 2005) was found to be consistently helpful in learning the model.

The EFT model is multidimensional and therefore requires supervision that incorporates learning on several different levels. Based on the findings of this study, it is recommended that these materials are reviewed together and not left to the supervisee to process alone. An EFT support group can be helpful so that the supervisee will have allies when working through difficult material rather than feeling alone.

Goal three: insure supervisees' ability to deepen and regulate clients' emotions and facilitate bonding processes. In addition to insuring that EFT supervisees develop their theoretical grounding in attachment theory and EFT steps and stages, EFT supervisors must also insure that supervisees develop the ability to work with emotion and facilitate couples' bonding process. Supervisees must be able to effectively choreograph enactments and facilitate withdrawer reengagement and blamer softening. Developing supervisees' abilities to work with emotion can be facilitated through creating experiential learning events. This would include reviewing case presentations, recorded segments and/or providing real-time live supervision. The supervisor must provide specific positive and corrective feedback, model this feedback, and then support the supervisee in their implementation of that feedback through practicing it in a role play. During this process, the supervisor must provide support and encouragement to the supervisee, paying close attention to potential self-of-the-therapist issues that may arise.

Goal four: insure supervisees' ability to regulate and use their own emotional processes in therapy. EFT supervisees must develop the ability to effectively identify and process their own emotional responses pertaining to their clinical work. This is supported by both the findings of this study and the work of Palmer and Johnson (2002). Learning to be emotionally grounded, instead of becoming overwhelmed by or detaching from their personal affect, is an essential part of becoming an EFT therapist. EFT therapists must attend to their clients' primary emotions and attachment affect to guide the couple out of their negative interactive cycles and into new patterns that promote secure attachment. Therapists who are unable to successfully regulate their own emotions will have difficulty choreographing bonding processes (Palmer & Johnson, 2002; Wittenborn, 2010).

The EFT supervisor must provide a safe context for supervisees to be able to learn to effectively organize and use their personal emotional responses to each partner's process and the couple's interaction. This goal can be accomplished by assisting supervisees to identify their own emotional responses to each partner's emotional processes and the couple's interaction. The supervisor can then help the supervisee view each partner's emotional responses and interaction through the lens of attachment theory. By assisting supervisees to understand the attachment needs and longings underlying the client's behavior that is triggering the supervisee's emotional response, the supervisee will be better able to empathize with the client's experience. This process helps produce greater clarity regarding supervisees' own emotional responses and provides them with an increased ability to stay connected with the clients' experience, rather than becoming overwhelmed or detaching from it. The supervisor can model appropriate use of "self-of-the-therapist" to effectively assess and intervene in therapy. The supervisee can then practice through role play how they would approach their client differently now using their new emotional experiences and abilities.

Additional Supervision Methods

Most of the methods are discussed previously along with the goals they serve. However, modeling, practicing, review of recorded sessions, and live supervision are the methods that are central to all aspects of EFT supervision and therefore require further explanation. Each method helps supervisors provide specific feedback regarding supervisees' work, rather than simply focusing on theory.

Modeling and practicing. Modeling and practicing through role play is an important method of assisting supervisees in learning interventions and addressing impasses. With this method, the supervisor and supervisees review a recorded session of an experienced EFT therapist, or the supervisor provides a model by demonstrating a particular intervention. Once the supervisees have observed an example of correct implementation of EFT interventions, the supervisees practice the demonstrated interventions through role play. The supervisor provides specific supportive and corrective feedback to the supervisees either during or following the role play.

Prior to engaging in a role play, the supervisor should assist supervisees with identifying the type and frequency of feedback that best fits their learning style and that will most effectively reduce any anxiety they feel about participating in the role play. For instance, some supervisees prefer to have the supervisor sit next to them and provide specific language to utilize in the role play, while others prefer to receive feedback after having completed the role play. Just as with other methods of EFT supervision, these "check ins" are important in maintaining a secure supervisory alliance and providing ongoing assessment of the most effective methods for facilitating each supervisee's particular needs. As supervisees progress in their confidence and competence in EFT, it is not uncommon for them to need modifications in the type and frequency of feedback they receive from their supervisor.

When supervisees report that anxiety about role playing the therapist interferes with their learning, it can be helpful for them to play the role of the client. This can help them develop greater empathy for the clients' emotional experience, particularly if the supervisees are having a hard time empathizing with the client. It can also assist them in having greater confidence in the effectiveness of EFT interventions in accessing attachment emotions and restructuring relational interactions.

Live supervision and reviewing recorded sessions. Live supervision is an important part of EFT supervision. The issue of safety within the supervisory alliance needs to be addressed before reviewing supervisees' live or recorded session(s) to prevent a rupture in the supervisory subsystem. In the context of EFT group supervision, the safety of the group must be addressed prior to engaging in these methods of supervision. The group should be given guidelines and structure for providing feedback to protect the EFT supervisees from a harmful group supervision experience. The EFT supervisor should process all concerns, fears, and questions about the live and/or recorded review supervision sessions before and after the experience.

Providing live supervision to EFT supervisees requires particular expertise. Live supervision has the potential of negatively impacting the supervisees' ability to learn EFT. Prior to conducting live supervision, EFT supervisors and the supervisees must collaborate and develop a plan regarding supervisory feedback during the session. For instance, some supervisees prefer to check in with their supervisor half way through the session and privately receive feedback outside of the session and then return to the session to implement the feedback. Others prefer to have the supervisor direct them through the use of an audio earpiece or computer screen with specific EFT language and/or theoretical guidance. If an audio earpiece is used, it is important that feedback is succinct and the earpiece is not over used. It can be very harmful for the supervisor to try to run the session through the earpiece.

Reviewing recorded sessions is also an important method of doing supervision regardless of the level of expertise of the supervisee. Video is most helpful, although audio recordings can be used if video is not available. Instructing supervisees to locate a section of the recording where they are stuck or want help is valuable. The supervisor can then use the material from the tape to provide guidance and role playing using specific interventions to address the issues in the case. Supervisees should also be encouraged to show work they believe went well. It can be very helpful for supervisees to know what they are doing well so they will continue to do it.

In general, an EFT supervisor should be a "strength detective" (Liddle, Breunlin, & Schwartz, 1988). While delivering any one of these methods of EFT supervision, the EFT supervisor should be supportive and encouraging, pointing out effective implementation of EFT as well as areas needing correction and growth. Highly negative and insensitive feedback is hindering and harmful, especially during a live session or recorded review. Supervisees are better able to incorporate feedback given regarding their observed clinical work when their supervisors refrain from giving theoretical feedback alone and provide clear, specific, supportive, and corrective feedback directly related to their work.

RECOMMENDATIONS FOR FUTURE RESEARCH

EFT was developed through careful analysis and coding of specific interventions and change events to determine the most effective strategies for restructuring couple's attachment bonds. Similar rigorous studies evaluating EFT supervision could provide data that would enrich the findings of this phenomenological study and enhance the model of EFT supervision presented. Research comparing the various methods of EFT supervision would be helpful in determining what is most effective for various learning styles and stages of development.

The effects of EFT therapists' attachment security on their ability to learn and effectively implement EFT is another area that merits future research. Several studies have found that clinicians with greater insecurities tend to have difficulty providing effective intervention (Dozier, Cue, & Barnett, 1994; Tyrrell, Dozier, Teague, & Fallot, 1999; Zegers, Schuengel, van IJzendoorn, & Janssens, 2006). However, those studies were conducted on case managers and institutional caregivers and cannot be generalized to marriage and family therapists. Given the even greater emphasis that the EFT model places on attention to and use of emotion and attachment processes, it would seem that the therapist's degree of attachment security would have at least the same importance, if not even greater ramifications for therapeutic effectiveness.

CONCLUSION

Learning EFT requires a secure supervisory alliance. This alliance is the very foundation from which all other goals of EFT supervision are made possible. EFT is a difficult model of therapy to learn in that it requires not only acquiring certain knowledge, but also requires the supervisee to develop their ability to effectively work with clients' emotions and to authentically process their own emotional responses. The model outlined in this article presents a guide for effectively assisting supervisees through this journey of acquiring the knowledge and developing the skills necessary to effectively implement EFT with clients. Further research is needed to expand our knowledge and understanding of how to best accomplish the goal of facilitating therapists' in learning EFT. However, we now have a model to guide and assist us as we continue to increase our understanding.

Sue Johnson (Personal Communication April 24, 2010), the developer of the EFT model, has stated:

I learn something new about EFT all the time. This model is ever evolving based on what works, and on emerging research from attachment, neuroscience, the process of therapy, and the lived experiences that facilitate and promote healthy emotional bonds between people who love each other. EFT therapists must be open to professional and personal growth throughout a lifetime.

Just as the EFT model continues to be enhanced by the latest research, the development of the model of supervision must be enhanced by the latest research to most effectively assist supervisees in the process of becoming competent, effective EFT therapists.

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