

Building a Resilient Self: Does the Felt Sense Inform the Discovery of the Self in Neuro-linguistic Psychotherapy

For presentation on the Psychotherapy Diploma

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Abstract

This paper summarises a piece of research undertaken in order to:

1. Understand if the felt sense informs the archaeology or discovery of the self in neuro-linguistic psychotherapy
2. Determine which were the pivotal moments of change in therapy
3. Ascertain if these are more emotional than cerebral experiences
4. Understanding how this felt sense or feeling experiences are represented for the client
5. Establish if clients who do not or cannot access that felt sense miss out on therapeutic change

The rationale for doing the research will be explained but no prior hypotheses will be made in order to allow all conclusions and meanings to emerge from the research itself. The paper presents the methodology used before going on to explore the findings in details. The paper concludes by stating whether the aims have been achieved and will close with some personal reflections by the author.

Word Count

4,536 excl. bibliography and appendices.

Rationale

The author was interested in how the journey to self (sense of self) is discovered in neuro-linguistic psychotherapy and commenced this research with a clear sense that, after over 450 hours of clinical experience, clients' access to their felt sense facilitated that journey. Often the author would have a feeling experience come up in therapy that mirrored the client's in an important moment, which the client would go on to verbalise, or perhaps a felt sense that informed of counter-transference or projection.

Nevertheless, in conducting this research the author honored the philosophy of a phenomenological approach: to challenge oneself to be open to finding new things, rather than to prove a hypothesis; be sensitive to multiple possible theories and interpretations; be open to what the 'data' presents let the common pattern/theme emerge of itself; put aside any prior assumptions. An interesting side effect of this was that the research changed the author in her therapeutic practice as findings coming back from the research, during the course of the six months over which it was undertaken, were lending importance to other senses and a cognitive 'understanding'. In recognizing her own preference for kinesthetic representation system, the author stayed open to letting go of any 'attachment' to the felt sense being important.

Method

Sample Procedure

The sample consisted of 6 randomly selected clients, who had 'enough' experience of therapy to be a significant way through their journey to answer the questions of the research (see Appendix 1 for a full overview of clients' profiles). A 45-90 min 'depth' interview was conducted with their full permission (see Appendix 2 for the questionnaire used) and due regard for ethics, and the interviews were recorded in full for later analysis. The interview was guided by the use of a questionnaire but was very free form to allow the author to go with what came up and immerse herself in the process. Copious notes were made and the recordings were used to write up fuller notes. The clients had signed consent forms giving full permission, and the session was not charged. The research was undertaken face to face, in person.

The table in Appendix 1 summarises the respondents profiles, a quick summary shows:

NLPT Research project summary										
Date inter	Sex	age	meta programs			Rep systems	Started	Finished	No.	
			t/a	e/i	convincer pattern				Sessions	At cause?
08-Apr	f	40-55	T (a)	E	2-3 times/ see	V > AD > A >= K	march 2012	aug 2013	15	80%
12-Apr	M	40-55	T/A	I	2-3 times/ see	AD > V-K-A	aug 2012	may 2012	24	100%
25-Apr	F	40-55	T	I	twice, rapid, see	V > K > A > AD	july 2012	apr 2013	18	100%
09-May	F	25-40	T (A)	I	Hear, see, duration 6 months	V > K > AD > A	oct 2012	aug 2013	15	80%
03-Jul	M	25-40	A	E	do, hear: 3 times	V > AD > A > K	dec 2012	ongoing	24	70%
16-Aug	M	25-40	A	E	do, never	V > A/D > K > A	nov 2012	ongoing	16	70%

Research Process

This was a phenomenological study with an application of grounded research. The author looked for evidence of NLPT patterns and let the common pattern/theme ‘emerge’ by putting aside any prior assumptions. A period of intense immersion in the notes and findings allowed the key points of the journey to self and the therapeutic change process to emerge, and how the felt sense informs this. After this, desk research was also conducted to corroborate findings. The process of analysis can be summarized as (McLeod, 2011):

Open coding – with notes on notes, colour coded and categorised:

- Examine notes and recordings
- Compare interviews
- Conceptualization of themes/findings
- Categorise data – notes and colour coding
- Continually ask ‘What else could this mean?’

Categorisation:

- Framing of emerging themes
- Filing – with quotes
- Hierarchy – clustering of themes/categories

Constant comparison

- Checking for similarities and differences in meaning between and within categories

- Emergence of main category
- Identify an overall set of meanings and general themes that capture the core meaning of the phenomena being studied

Findings and Results

After over 40 hours of analysis of the data, a fuller picture of the findings has identified an overall set of meanings overarched by the emergence of a core meaning of the phenomena studied in the interview process.

Felt Sense and Connection with Sense of Self

The overarching core theme of the research seems to be that the felt sense is vital to respondent's connection with their sense of self in therapy, past, present and future.

Respondents described their awareness or connection to their sense of self in various ways: 'deeper understanding of the person I have grown to be', an understanding of 'I am that way because of where I am come from', 'knowing it wasn't me', 'the real me', 'more connected, understanding of self', 'knowing who I am', 'gives me 'me time' to discover my self'.

This sense of self equates to Damasio's autobiographical self (Damasio, 1999) and parallels what Birch (1997) describes as being able to refer to oneself through language, distinguishing self and not self, being aware of own personal history, experiences, skills and abilities.

Respondents' Description of the Felt Sense

All respondents unanimously had experience of the 'felt sense' in therapy variously referring to it feelings, negative feelings, emotions, and physical sensations in their body. When asked to describe their experience of the felt sense or feeling sense respondents often struggled to put it into words, when helped they described it in a number of different ways:

'A general sense of a feeling of that was how important that was'

'A light misty feeling, around my heart space, a greater knowledge than I had'

'The physicality of it not so clear'

'Whole range - sometimes peaceful, sometimes troubled, been really surprised, quite a big range of emotions, sometimes thought provoking, sometimes more of a jolt, a bit of unease, sometimes discomfort (fear)'

'Also physical bodily feelings, release of tension more relaxed, being able to breathe'

'less anxious more comfort, shoulders dropped (when I got it)'

'The experience was the tearfulness'

'And also a sense of weight lifting of your shoulders a release, feeling of lightness like you've carried a heavy load and then the freedom, don't need to be burdened'

'It's not easy to get to'

'It's deep inside you, hidden away, but powerful'

These descriptions refer to respondents being aware of their own body, its state and appearance, which is implicit in the sense of self (Birch, 1997) and this intimate connection with the body is crucial to a robust sense of self, being an important function of the right hemisphere of the brain (Schoore, 2002).

Understanding

When asked about the importance of the felt sense in the process of change in therapy, they unanimously answered, unprompted, that the felt sense was important in particular with connection to sense of self. What they noted was important to them about it was:

'it makes me understand my sense of self is there'

'it makes me understand my self more'

'Knowing who I am'

'Looking away today it's me that's the past this is me now.'

'I'm me, I'm an individual, this is who I am'

'More in tune ... with actually who I am and sort of ... the skills that I have got and the person that I am'

The felt sense gives them a better understanding of their self and also felt sense seems to be an indicator that there is a sense of self – like the feeling of having a feeling changes one’s sense of self or becomes a reminder of their connection to their sense of self. As Damasio (1999) posits, “and the very knowing of feelings can change consciousness and the sense of self”.

Respondents recognized the importance of the felt sense for change in therapy:

‘it is necessary to be able to access it for long term change’

‘I could see a solution, I could see a way forward and a way to resolve a situation’

‘I had that sense of release, I was able to move forward, let go’

And several of them saw this change as like a process of filling in gaps in self-concept or discovery of new aspects of self. Phrases used include: filling in the gaps, jigsaw pieces, piecing bits of the jigsaw puzzle together, finding the missing pieces, and discovery. One respondent talked about the impact of the felt sense on them in this respect:

“There was a big impact there that without that understanding I’d still be ... Almost a surface level and I hadn’t got into deep rooted stuff, deep rooted feelings that were attached to it. There’s an awareness understanding to get the missing jigsaw piece , feeling, the one little element that wasn’t there had a bigger impact in change on my life, like getting deeper into something rather than on the surface. It has had a bigger impact in terms of getting things done and changing things.”

These gaps or missing pieces mirror the research on development of personality and self, in that the individual matures psychologically through development stages. Through the accumulation of life stage ‘virtues’ the ego is integrated and the individual accrues a strong sense of self. (Erikson, 1951). Development of the self may be arrested or thwarted if these development stages are not passed through successfully. Korzybski stated that: ‘...“mental” illnesses are connected either with arrested development or with regression to phylogenetically older and more primitive levels, all of which involve lower order abstractions’ (Korzybski, 1958). And Schore (2002 2nd) concurs, “there

is evidence that the adult brain may regress to an infantile state when it is confronted with severe stress". Thus the development of the self is diverted from its adaptive course, and personality is not fully formed. (Schorer, 2002 2nd).

These more primitive or infantile levels of thinking are what get "affectively burnt in" to the right hemisphere of the brain from 'injurious' childhood experiences (Schiffer, 1988) and result in a kind of 'arrested development' of the sense of self (Schorer, 2005; Hudson Allez, 2011; McGilchrist, 2009). In reviewing the clinical log, the author noted that all of the respondents had re-accessed, through their negative feeling experience, adverse childhood events where their psychological development had been affected and were able to 'fill in the dots, understand the links' thereby filled in the gaps in self-concept. Rothschild (2000) sees the body as a 'superhighway' to the past to help the client connect both with forgotten memories and forgotten resources, and this sense of filling in the gaps perhaps alludes to the biological change in the right hemisphere that can be achieved in psychotherapy (Hudson Allez, 2011) literally precipitating neurogenesis in the brain (Rossi, 2002) and new pathways between the right (limbic) and left (prefrontal cortex) hemispheres (Hudson Allez, 2011).

The Process of Understanding

In reviewing the findings of the research, there was a common theme of how this process of understanding happened through the felt sense and facilitated change. The process can be summed up in four stages as:

1. The negative feeling experience was accessed in a safe environment
2. An understanding started to emerge from it which often involved other representation systems such as visual and auditory
3. New understanding or meaning was created usually accompanied by a sense of surprise, being stopped in one's tracks, interesting, being taken aback, a shock or jolt (not unpleasant), a moment of silence or absolute stillness (an 'aha!' moment)
4. This understanding then lead to a positive feeling experience.

One respondent sums this process up in talking about the importance of the feeling experience to her:

“I think when the intellectual side of things gives me space to just feel it ... as it is, as it’s happening .. that’s when it works, that’s when I think it has the biggest change really.”

The Element of Surprise

Whilst stages 2 and 3 may be experienced simultaneously, the element of surprise experienced in pivotal moments of change indicate that the creative process is being accessed (Rossi, 2002) and Asplund et al (2010) posit that the sense of surprise triggers an orienting response that allows us to pay intense attention to the new item.

“Quite shocking, quite profound reaction, like a really big jolt it felt, much more in the body, quite powerful, couldn’t fail to notice, - huge amount of surprise, I am not often surprised!! I thought I knew myself but I got some small side-shift and it was like the scales fell from my eyes ... it had been a bit ... thinking ‘oh my goodness!’. The jolt helped visual sense to clear - understanding”

The felt sense is important in initiating this sense of surprise which facilitates the level of attention required for change:

“Quite important, quite strong thing, if I feel that (points to belly) then I will engage this (points to head). It made me sit up and take notice - caused me to turn things around”

Positive Experiences

When the positive feeling experience was felt, the client had a sense that something had changed, a missing piece had been filled in the self-concept. These positive feelings are described variously as: relief, release, joy, letting go, or something dropping away, a release of tension in body, or a warmth in body, and a feeling of calm, or peacefulness.

“Getting it out looking at it head on and thinking it’s not my fault. I don’t blame myself now it’s a lovely feeling”

It was that joy .. I know I had got some really good stuff around me .. but there was no joy .. and that really started to happen ...

Just there in my chest there, warmth - it's a good feeling'

Rossi proposed that novelty and enrichment (new learning), including moments of humour, awe and joy etc, can create new neuronal connections in the brain (Rossi, 2002) which supports the possibility that new connections are being forged between right and left hemispheres.

The four stage process observed represents Korzybski's orders of abstraction (Korzybski, 1958) where the cortex can be presented with more of the original experience, so that thalamic thinking can be properly influenced by the higher order processes. (Korzybski, 1958). Reasserting the prefrontal cortex over the limbic system (Hudson Allez, 2011) makes the unconscious conscious and enhances affect regulation involving a more positive feeling commensurate with a more complex and resilient organization of self (Schore, 2005). This is the ratification of conscious and unconscious mind achieved in the process of neuro-linguistic psychotherapy (NLPt).

The Feeling Sense Leads to Understanding

When asked how the felt sense helps them feel more in touch with their sense of self the common themes were that the feelings helped them understand who they are and who they would like to be, recognizing and accepting themselves as they are which means that they could then move on.

"Gets the negative feelings out of you, and (helps with) understanding yourself as you go through the emotions of it, that frustration ... You step back and .. step out, ... Taking a step back and looking at myself"

"So grateful like bits of a puzzle, I'm glad to have experienced it, have that particular knowledge/understanding - has taken me forward, is taking me forward, ... I am more connected, have a better understanding of myself, I've soaked up a bit more up

(understanding of me) and it has propelled me forward a bit, life being more like I would like it to be “

This ‘space’ where the respondents felt that they were able to ‘step back’ and understand the feeling experience is what Korzybski (1958) and Gendlin (1962) used in their methods of promoting silence and facilitating orders of abstraction in creating new meaning and understanding of self (Gendlin, 2002), and thereby scripting a new life story in language. This combination of neuro and linguistics is one of the foundations of change in NLPt.

Respondents rated the overall impact of the feeling experience as being significant in their journey in therapy, with three out of the six saying it had a big impact. Two of those explain it as:

“I have done 90-180 degree turn, It set me on a course, in the true sense transformed . It set me on a course I would never have been on, I go down a path now that I choose We live within such narrow parameters and we all exist on this track and it is just like the track got quite a lot wider. Got in touch with own self - who would like to be - didn’t know who I was until 45. A strong sense of this is the way forward that I choose now”

“Better quality of life, being able to sleep without not beating up my other half or breaking my own arm. Very practical benefits, improvement. And I almost trust my responses to things at times, I have allowed myself to feel angry about things rather than thinking that I am not allowed to be ... I don’t feel bad about feeling angry “

One respondent also grounded that by stating the importance of ‘seemingly superficial conversations’ perhaps alluding to the importance of the client-therapist relationship being a ‘profound encounter’ in creating the meaning and the journey to self (Schore & Schore, 2008).

“The feeling sense is a massive part of what I do, but not what I have most benefitted from. Best part is wide awake eye to eye contact been best ... seemingly superficial conversations”.

Although, to a greater or lesser degree, all respondents found accessing the felt sense difficult, it seems to be important in the rediscovery of that which makes the individual whole (Jung, 1933). A respondent sums this up:

‘I think getting me to that point was very crucial, you persisted, helped me, which was right because it was like a little piece of the jigsaw was missing, and when I got that I got more out of that... so I think there was a big value in your persistence in trying to tap into get all of the senses going, would almost make sure the individual gets whole experience. And investing that time into doing that really helped get the holistic approach’

Acceptance

All respondents alluded to the importance of getting to a place of self-acceptance as being an important step in the journey to a more resilient self. This was often recognized as beginning with being in a relationship with the therapist that was accepting and non-judgmental:

“A feeling I get when I walk in the door association of being in an environment where I can say what I need to say, no concern it being judged or criticized”

“But know that I am doing with someone who is compassionate in a safe environment, non-judgmental - it was important to have all of that relationship that you can do that and the safe environment (where no one can walk in see me crying) - it was the whole experience that was important.”

In understanding why they behave like they do, or why others behaved like they did, respondents reported a sense of ‘it’s not my fault’, ‘it wasn’t me’, ‘it wasn’t about me’, or realized the positive intentions in the seemingly ‘bad’ behaviours. This gave them a sense of letting go of self-criticism thereby clearing a way to move forward with their lives.

“There was a sense of acceptance and realisation that I’ve not been wrong all these years it just the way I’ve held it in. The sense of release and sense relief. The word acceptance is coming up again ... linking in with the sense of self is a bit like hmmm ... being emotional means that I can be open with myself, being emotional having those feelings being able to

let go has meant that I have been able to accept that I have been hanging on to stuff and its ok to let go.”

“Acceptance ... being true to yourself ... having that freedom .. now I have got emotional and let it out It’s ok to be like that ... yes it’s about acceptance very much for me.”

For Birch (1997) this sense of ‘acceptance with what one is like’ represents a mature sense of self. An early experience of self-acceptance in therapy, seemed to facilitate the growth to self which was often described metaphorically as a journey which started off with trepidation or difficulty and got easier during the course of therapy: ‘a nice road’; ‘now a path over pleasant terrain’; ‘a bubbling brook over stepping stones’. This sense of a journey, moving forward, is facilitated by the outcome focus that enables change in NLPt.

How the Felt Sense Changes the Construction of Self

In looking at the how the felt sense affected or changed the construction of self and lead to a more mature or resilient sense of self, questioning using the neurological levels elicited a common theme of resilience across all levels (see Appendix 3 for full results):

- increased self-knowledge
- moving forward with life
- acceptance of self and others
- happier, calmer, peaceful, content, joyous, more balanced
- more confident in self and abilities
- able to handle difficult situations better and not react
- able to connect with self better and happier being alone/on own
- more trusting of self and others
- assertiveness increased: speaking up for self, not focused on what others think
- more sociable and outgoing
- more proactive
- better at goal setting

- more adult relationships/ better relationships with family, friends etc

The findings support the fact that through accessing the felt sense in neurolinguistic psychotherapy, respondents increased their levels of mental toughness or resilience as identified by Crust & Clough (2011) across all the key components of: control, challenge, commitment and confidence. Given that a mature sense of self includes a feeling of self-worth or self-esteem (Birch, 1997) and that differentiation (individuation), which is the hallmark of a mature self, involves the ability to maintain a sense of self even when emotionally or physically close to (important) others (Schnarch, 2009), the findings support that the felt sense contributes to building a resilient, mature self.

Role of the Therapist

Whilst it wasn't an overt question in therapy, it is apparent from the findings that the role of the therapist is a pivotal one in NLPt. Respondents alluded to feeling comfortable with the therapist, building trust in a non-judgmental, supportive and safe environment where they could express themselves and not hold back. It was felt there needed to be a 'good fit' between the client and therapist, and the fact that the therapist carried out a combination of teaching/explaining (especially 'scientific' concepts like the unconscious mind, attachment theory etc) and 'being with' and guiding respondents into their felt sense was seen as powerful.

“But I think that it's coming over to me how important the relationship with therapist - good at what they do etc I think I've achieved what I achieved because of who you are, the way you build non judge safe environment”

“Non-judgmental, compassionate environment helps you to move forward, If I held back and won't be true to myself it wouldn't happen or would take longer to get there”

“If I was with someone I didn't trust or who thinks I'm stupid - it wouldn't work - therapist keeping clean and in the individual's reality (is important)”

In addition, the therapist providing accurate insight or wisdom was useful in the respondents' own creation of meaning. Clarke (1989) posits that the client's creation of experiential self-knowledge is facilitated by an interpersonal knowing, the knowledge that one is known by another (the therapist) requiring that the therapist accurately models the client's map, another cornerstone of NLPt.

For all respondents their issues or gaps in self-construct related to 'injurious experiences' from important relationships in the past, usually with the primary caregivers (mother or father) or siblings. That the self-other interaction is the driving force behind self-development (Chaminade & Decety, 2003), makes the responsiveness and sensitivity therapeutic relationship especially important in healing. The sense of self develops in the first two years of life in the right hemisphere of the brain (Schoore, 2005) in attachment experiences primarily with the mother (Schoore, 2002), if these early attachment experiences are insecure the limbic brain is encoded to 'recognise' and repeat such patterns. The therapeutic relationship can help the client form a new 'imprint' of relatedness (Lewis et al, 2001) in a new secure attachment template (Hudson Allez, 2011) freeing them to a new way of being.

Conclusion

The research sought to establish whether the felt sense was involved in the discovery and building of a more mature sense of self and if so, how it facilitated this. It has been shown that the felt sense is pivotal in the journey to self as experienced in NLPt in that it is crucial in the understanding that the client has in creating their new life script, in that it facilitates the pivotal moments of therapy that ensure ratification and integration of conscious and unconscious mind. Whilst the conscious, cortical 'understanding' is the most crucial element, this is 'presented' to the conscious mind through the knowing or experiencing of the felt sense.

NLPt is a therapy of personal construct with roots in Kelly's personal construct psychology (Fransella, 2005) in that people have created themselves and can therefore re-create themselves in a more useful and resilient way. This creation of a new sense of self therefore relies on a coming to know the self and the creation of new meaning informed by the felt sense. This is a diverse and

personal experience, by its nature, difficult to put into words and difficult to access and which does include other senses such as the visual and auditory.

The fundamental principles of NLPt of modeling, cognitive linguistics, systemic approach and outcome focus are all involved in creating the change in self-construct that the client experiences, but the felt sense is fundamental to this change process.

Whilst the research has shown the importance of both the cerebral understanding and the more limbic felt sense, it is clear that, overall, the felt sense led to the powerful moments in therapy. In the course of this research, the respondents, over a number of sessions which ranged from 15 to 24, all accessed the felt sense with the sensitive help of the therapist. While it is difficult to ascertain whether clients who don't access a felt sense miss out on therapeutic change, the author proposes that behavioral change can be affected without access to the felt sense (i.e. in a purely cognitive way of understanding). However the felt sense is pivotal to the identity level change that NLPt facilitates.

On personal reflection, the author is aware of the importance of the terminology used in the questions and being flexible in re-phrasing if the respondents fail to understand. Also, during the process of therapy the author was very aware of asking non-leading questions so as to not pre-empt any 'desired' or expected response. In hindsight, the author is left asking more questions about how the respondents experienced the therapist as helping guide them into the felt sense and what qualities and attributes contribute to this.

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APPENDIX 2. Research Questionnaire

Main Research Question: How does the felt sense (see above) inform the archaeology of the self (ie discovering the true self, or the journey to self) in therapy (if at all)?

Code Name:

Date:

1. Welcome

Thanks for giving me an hour of your time and for participating in this research on how clients experience the journey of therapy as a journey to Self and how, if at all, the feeling sense informs this journey. Please answer the questions below.

Firstly I have few questions which will help me to calibrate my assessment:

2. ABOUT THEM

1. Are you male or female? Male

2. What is your age group? 25 & under 25 to 40 40 to 55 55 to 70 70 & over

3. What best describes your experience of therapy?
Current Therapy with me
 - I have finished/completed my course of therapy
 - I have finished the contracted sessions, just wrapping up
 - I have nearly finished current contract
 - I am mid way through
 - I have only just started

Other Therapies

- I have not participated in counselling and/or therapy prior to this
- I have had a number of sessions with one counsellor/therapist prior to this
- I have had a number of sessions with more than one counsellor/therapist prior to this
- Other:

3. ASSESSMENT OF PREFERENCES

META PROGRAMS

1. Why did you leave your last job? (or, what would make you set and attain goals?) (T/A)
2. How do you know when you've done a good job (at home/ work, new car etc)?(E/I)
3. How do you know that someone else is good at their work? (type – see, hear, read, do)
4. How many times do they have to demonstrate this before you are convinced?

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Representational System Assessment © Renewal Technologies 2003

1. When vacationing at the beach, the first thing that makes me glad to be there is:
 - a __ The feel of the cool sand, the warm sun or the fresh breeze on my face.
 - b __ The roar of the waves, the whistling wind or the sound of birds in the distance.
 - c __ This is the type of vacation that makes sense or the cost is reasonable.
 - d __ The scenery, the bright sun, and the blue water.

2. When overwhelmed, I find it helps if:
 - a __ I can see the big picture.
 - b __ I can hear what's going on.
 - c __ I can get in touch with what is happening.
 - d __ I make sense of things in my head.

3. When given an assignment at work, it is easier to carry out if:
 - a __ I can picture what is required.
 - b __ I have a feeling for what is required.
 - c __ I have an understanding of what is required.
 - d __ I have tuned into what's required.

4. I find it easier to follow a presentation if:
 - a __ I feel in touch with the presenter and the material is within my grasp.
 - b __ There is a visual display so that I can visualize the concepts.
 - c __ The presentation is based on facts and figures and is logically presented.
 - d __ The presenter speaks clearly with varying tonality or uses sound to emphasize message.

5. When buying a car, I make my decision on:
 - a __ The purchase price, gas mileage, safety features, etc.
 - b __ How comfortable the seats are or the feeling I get when I test drive it.
 - c __ The colour, styling or how I would look in it.
 - d __ The sound of the engine or stereo system or how quiet it rides.

6. When I am anxious, the first thing that happens is:
 - a __ Things begin to sound different.
 - b __ Things begin to feel different.
 - c __ Things begin to look different.
 - d __ Things begin to not make sense.

7. During a discussion, I am most often influenced by:
 - a __ The other person's logic.
 - b __ The other person's tone of voice.
 - c __ The energy I feel from the other person.
 - d __ Seeing the other person's body language or being able to picture the other person's viewpoint.

5. Can you think of any particular powerful or key moments (ah ah moments etc)? If so, please specify :

What was involved? (senses, rep systems, submods)

What was important?

6. How would you describe these powerful moments? For instance more in terms of Emotional/feeling/somatic or Intellectual/rational/cerebral, or images/sounds etc?
Please specify:

7. What are your experience 'feelings or emotional experiences' in the context of therapy? How would you describe them?

8. How important do you think an emotional or feeling experience is in the process of change during therapy?

9. How does this feeling or emotional experience help you feel more in touch with your (sense of) self?

10. Thinking of the last time you access a emotional experience, felt sense, or feeling experience in therapy:

What did this mean to you? What was important to you about it?

What did you believe about it?

What purpose do you believe it served?

What did you think that it meant about you and your strengths/ skills/capabilities etc?

How did it inform your relationship to the world /environment around you?

What impact did it have on your behaviour?

11. Have you ever experienced any periods of being stuck or of resistance to changing, during therapy?
- Yes
 - No

12. If yes, can you describe this experience?

13. If no, what factors do you think contributed to this?

14. How would you describe your ability to connect with emotional experiences/ felt sense in therapy (ie easy or hard)? And what factors influence this?

15. How does/did that change during the course of therapy?

16. What do you feel is the impact of emotional experience/ felt sense in your journey in therapy?

17. How successful do you think therapy has been in achieving your outcome?

- Very/completely successful - 80-100%
- Quite/fairly successful – 60-80%
- Somewhat successful – 40-60%
- Not very successful – 20-40%
- Not at all successful – 0-20%

Wrap UP

Thanks for time.

You can certainly have a copy of my final report if you want it.

Appendix 3. Summary of Neurological Levels

Q13. Thinking of the last time you accessed a felt sense or emotional experience in therapy:

What purpose did you believe it served?	Understanding, moving forward, create a happier me, eureka moment, understanding who I am, knowing who I am, sense of self worth, acceptance
What did you believe about it?	Removal of what was stopping me, took a step forward, more in control, I decide to change, understand myself, let go, move on
What do you think that it meant about your skills and capabilities?	Gave me more confidence, ability to communicate (connect with) deeper aspects of self, made me realize/recognize/appreciate the abilities I have, more respect for self, allowed me to be kinder to self, have joy and other positive emotions, realize that I have more potential, ability to trust self and therapist, ability to exercise choice, believe in myself, confidence in dealing with emotions, acceptance/forgiveness
What impact did it have on your behavior?	More choice in how to deal with things, enjoy more time alone with myself, not reacting, calmer, more content, more peaceful, a lot more balanced, not getting angry, stepping out of the (drama) triangle, I can watch programmes on abuse and it doesn't affect me, confidence and ability to speak up and be more assertive, be able to say what you want to say, better understanding of others (improved relationships), not spending so much time focusing on what others think but on what I think, stopped being so hard on myself, more positive, more sociable and outgoing, more proactive and timely on dealing with challenges, more goal setting
How did it inform your relationship to the world and the environment around you?	Appreciate my family more, it gave me joy, better understanding of relationships, more 'adult' with parents, improved marital relationship, building better relationships, acceptance of others for who they are

