
Rejoinder to Webster

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I have always maintained great respect for 'emotionally focused therapy' (EFT), dating back to my collaboration with Susan Johnson on one of my casebooks (Johnson, 1998). As a result, I read Michelle Webster's response with enthusiasm. Michelle wondered what might have happened in this case had the therapist directed his empathic attention to invite Ana to speak from the 'pained place', and then to have her speak to Arnie about her experience directly. Clearly, this was one possible approach to take, but I decided against this avenue simply because this couple was already so polarised by the time they entered my office that I was concerned that such a request might alienate them further, particularly Arnie. I did attempt to encourage them to talk to each other, especially when Ana tried to talk to Arnie through me.

One must keep in mind that this couple was raised in a culture that would not support seeking therapy for personal problems, and that this factor made it difficult for them to submit for treatment, let alone to emote in the presence of a stranger. Knowing this, I felt that it was best to approach this case from more of a cognitive perspective so that it might be less threatening to the couple, which ended up to be true. Perhaps, subsequent to earning Ana and Arnie's trust, it might have been effective to gently ease them into addressing the emotional components that Michelle suggested. Even a combination of the two approaches might have yielded some positive results. I think that it is essential to recognise that each of us, as therapists, selects the medium with which we feel comfortable and which we believe is amenable for the couple. In addition, it is also important that the approach used has a proven track record of effectiveness. Actually, it is likely that, assuming a level of skill on the part of the

therapist, any number of approaches could be effective in this case.

As for the statements made by me and described by Michelle as 'bold assertions', they were merely facts. Two quotes in particular come to mind:

The EFT assumes that the most efficient and effective path to reorganizing attachment behavior is through affect and new affectively primed interactions, and the interventions of cognitive-behavior therapy would detract from this focus (Johnson, 1998: 470).

We realize that the primary assumption of a cognitive therapist is that to change behavior, one must change thoughts. However, in our 20–30 years of clinical experience, we find that the extent to which the therapists begin to decline into myriad thoughts, recollections, and memories that a client might have about a given event actually slows the therapy down. It's a lot easier and perhaps a lot more fun to do this, but we do not think that it [cognitive therapy] contributes directly to the progress in the case (Forgatch & Patterson, 1998: 104).

Despite my disagreement with the overall perspective, I do appreciate Michelle's insights.

References

- Forgatch, M. S. & Patterson, G. R., 1998. Behavioral Family Therapy. In F. M. Dattilio (Ed.), *Case Studies in Couple and Family Therapy: Systemic and Cognitive Perspectives*, NY, Guilford.
- Johnson, S., 1998. Emotionally Focused Couple Therapy. In F. M. Dattilio (Ed.), *Case Studies in Couple and Family Therapy: Systemic and Cognitive Perspectives*, NY, Guilford. 