

**Focusing manner and posttraumatic growth**

**Alicja Zwiercan and Stephen Joseph**

**School of Education, University of Nottingham**

**Final submitted manuscript, now published online and cited as:**

Zwiercan, A., & Joseph, S. (2018). Focusing manner and posttraumatic growth. *Person-Centered & Experiential Psychotherapies*, 1-10.

## **Abstract**

Recent scholarship in the person-centred experiential approach has theorised how organismic valuing might be an important process factor in the development of posttraumatic growth. In a test of this prediction we investigated the association between Gendlin's focusing and posttraumatic growth in 87 participants. All completed measures of focusing attitudes, posttraumatic stress, and posttraumatic growth. The results showed that higher scores on focusing attitudes were significantly associated with lower scores on posttraumatic stress ( $r = -.39, p < .001$ ), and higher scores on posttraumatic growth (lowest  $r = .32, p < .001$ ), and that the associations with posttraumatic growth remained even with scores on posttraumatic stress partialled out (lowest  $r = .33, p < .001$ ). Implications of these findings are discussed for therapeutic work with trauma survivors. Specifically, the results provide support that the use of Gendlin's focusing and/or focusing evocative language may be effective in supporting those who suffer from severe and chronic trauma-related problems. These results provide sufficient support to warrant further clinical research using more sophisticated experimental approaches to test whether therapeutic work using focusing is able to promote posttraumatic growth.

*Keywords: focusing, posttraumatic growth, organismic valuing, felt sense*

## **Introduction**

More than 80% of individuals in the general population have experienced at least one incidence of trauma during their lifetime (American Psychiatric Association, 2013). It is estimated that posttraumatic stress disorder (PTSD) along with the co-morbid conditions such as depression, panic disorder, generalized anxiety disorder, obsessive compulsive disorder - all rooted in traumatic experiences, affect at least 6.06% of the UK's adult population (Murphy, Archard, Regel and Joseph, 2013). Person-centred experiential theory and case study evidence is able to account for the wide range of human reactions to adverse events and the idiosyncrasy of the clients' needs in various post-trauma environments (e.g., Rutherford, 2007; Murphy 2009; Brice, 2011; Carrick & Joseph, 2013; Tickle & Murphy, 2014). However, there remains a need for empirical research to test specific predictions for how the person-centred experiential approach might be helpful to survivors of trauma.

To date the most sophisticated theoretical conceptualisation of PCE therapies for trauma is described in the Organismic Valuing Theory of Growth Following Adversity (OVP) (Joseph & Linley, 2005; Joseph, 2015). This account is based on Rogers' (1959) theory of how experiences incongruent to the self-structure lead to a process of breakdown and disorganisation. According to the OVP theory of posttraumatic growth, after a person's pre-trauma assumptions become shattered, the process of "working through" the adverse experience is signified by alternating phases of intrusion and avoidance, typical of the diagnostic category of PTSD. However, the eventual accommodation of the new trauma-related experience as self and experience become aligned involves not only a reduction in these experiences of intrusion and avoidance, but also a shift in the person's assumptive world and is a manifestation of an intrinsic drive for moving towards posttraumatic growth (Joseph & Linley, 2005).

This internal directional force, a guide which informs us that something is wrong or that an action is needed in order to amend a situation, is what person-centred experiential theory recognises as the organismic valuing process. For Rogers (1961; 1964), to be able to follow one's organismic valuing was to find balance between all important internal and external sources of information and to assess how these interactions are going.

The available empirical evidence from the field of positive psychology validates the thesis that the OVP is a real and a fairly tangible force which aspects can be discriminated and observed. Research into human ability to attain goals (Sheldon & Elliot, 1999), intrinsic goal orientation (Schmuck, Kasser & Ryan; 2000) and people's preference for choosing directions that enhance well-being (Sheldon, Arndt, & Houser-Marko; 2003) continuously supported evaluative and progressive character of human nature. Striving toward the fulfilment of psychological needs, self-actualisation and psychological well-being, as well as research into its correlates e.g. intrinsic motivation and the concept of flow, are all viewed as supportive of the concept of the organismic valuing process (Joseph & Linley, 2005).

Restoring contact with the organismic valuing means opening access to one's living experience. Rogers' (1961) view of experiencing as a living, fluctuating and directional process is consistent with Gendlin's perspective. 'Experiencing is a constant, ever present, underlying phenomenon of inwardly sentient living, and therefore there is an experiential side of anything, no matter how specifically detailed and finely specified, no matter whether it is a concept, an observed act, an inwardly felt behaviour, or a sense of a situation' (Gendlin, 1962, p.15).

Gendlin (2004) states that experiencing is inherently a valuing process. As such, it always involves confronting, differentiating and discovering the specific good or bad, resolved or conflicted ‘feel’ of a direct referent. The process of experiential valuing can simultaneously hold aspects of being completed and being open for interaction with further differentiated, newer felt senses that appear next, ‘queuing’ to be approached (Gendlin, 1967). The organismic inherency of values, their directional nature and purposefulness are also discussed in Gendlin’s ‘A Process Model’ (1997). Gendlin notes that the acts of ‘experiencing’, ‘expression’ and ‘understanding’ never occur as separate but are involved in a simultaneous and self-enhancing process that signifies progress which, in the context of this study, can be thought of as growth.

Whereas both Rogers and Gendlin emphasised the importance of the bodily dimension to experiencing (Rogers, 1980; Gendlin, 1991, 1992), Gendlin furthered this line of thought. He stated that the very essence of experience, the bodily-based felt sense can be grasped by extracting it, saying it out loud and giving it the accurate conceptualisation (Gendlin, 1978). Based on the arguments introduced above, we conclude that the concept of the organismic valuing process is equal to Gendlin’s felt sense and as such, it can be intentionally sought for and made explicit through the practice of focusing.

Focusing is a well-researched practice for restoring contact with the flow of experiencing (see for review Hendricks, 2001; Krycka & Ikemi, 2016). It has been effectively used to facilitate the process of working through trauma-related experience (Morse, 2003; Parker, 2009; Phillips & Phillips, 2012) also by approaching its embodied forms (McGavin, 1997). Focusing involves six steps which are: clearing a space, felt sense, a handle, resonating, asking and receiving. The steps can be adjusted to the specifics of working with posttraumatic stress (Coffeng, 2004; Scharwachter, 2005; Santen, 2014) and destructive

patterns of behaviour underlain by trauma (Gunst & Vanhooren, 2017). Rappaport (2010) supports her trauma therapy work with focusing practice combined with tools provided by expressive arts. Focusing can be used in accordance with the naturally evolving process of trauma recovery which often involves stages of establishing safety, remembrance and mourning, and finally, reconnection with ordinary life (Herman, 1992).

The aim of the current quantitative study was to contribute to building a theoretically-informed evidence base for person-centred experiential trauma work by investigating the associations between focusing attitudes, posttraumatic stress, and posttraumatic growth. It was predicted that stronger focusing attitudes would be associated with lower posttraumatic stress and higher posttraumatic growth.

## **Methods**

### ***Participants***

Participants were recruited online from several trauma and PTSD informed groups which were moderated and all inquired about the ethical approval of the research before the link was placed online. Participants of above 18 years old who within the last six months experienced a significant stressful event were invited to the study. A total of 87 participants completed the survey with 75 (86%) of them describing their gender as female, 8 (9%) as male and 4 (4%) who defined their gender as non-binary.

### ***Procedure***

The ethical approval for the study was granted by the University of Nottingham, School of Education Research Ethics Committee. Potential participants were required to read an information sheet containing the details of the study and to provide consent to taking part,

prior to being able to proceed. Participants were offered advice on forms of accessing psychological support in case such was needed as a result of exploring their experience. The measures described below were made accessible via Bristol Online Surveys.

## ***Measures***

### *Traumatic experience*

The Distressing Events Checklist (DEC: Vrana and Lauterbach, 1994) was adapted for the purpose of this study. This checklist asked participants to discriminate between recent adverse events and to focus the attention on the most upsetting one. This event was placed on a six to one month time frame and its intensity was indicated on a 0-6 Likert scale.

### *Posttraumatic stress*

The Impact of Event Scale (IES, Horowitz, Wilner and Alvarez, 1979) is a 15-item self-report measure of subjective distress which is based on a Horowitz's (1976) model of processing following a trauma. It assesses the frequency of intrusive and avoidant phenomena. Possible participant scores could range from the total of 0–75, with Intrusion (0–35) and Avoidance (0–40) subscales.

### *Posttraumatic growth*

Posttraumatic Growth Inventory (PTGI, Tedeschi and Calhoun, 1996) is a 21-item (e.g. “I have a greater appreciation for the value of my own life”) measure of reported PTG. Each participant rates their responses on a six-point Likert scale. Possible participant scores could range from 0–105.

The Changes in Outlook Questionnaire - Short Form (CiOQ-S, Joseph, Linley, Shevlin, Goodfellow and Butler, 2006) is a method of assessing positive and negative changes following a traumatic experience. This two-factor tool consists of a total of 10 items, with 5 items per scale where changes of a positive character are seen as indicative of growth (Joseph and Linley, 2005). Participants were asked to place their answers on a 6-point scale and the possible scores could range from 10–60 for the total score and 5-30 equally for both subscales. In the current study we were only concerned with positive changes.

#### *Focusing/experiential attitudes*

Focusing Manner Scale (FMS-A.E., Aoki and Ikemi, 2014) is a 25-item tool based on the original Focusing Manner Scale (FMS, Fukumori and Morikawa, 2003) which measures the degree to which one has focusing attitudes. These are understood as paying inward bodily attention to one's felt senses, acknowledging them and having a friendly attitude toward them. The review of correlational studies has consistently shown positive associations between FMS scores and positive psychological or somatic health (Aoki and Ikemi, 2014). Participant scores could range from 25–100.

## **Results**

All participants reported having experienced a significant traumatic event within the past six months at the point of taking part in the study. The most common event as assessed using the DEC was 'relationship breakdown' (35%) followed by 'bereavement' (18%), 'someone else's serious illness or an accident' (12%), 'participant serious illness' (10%) and other (20%).

The means and mean item ratings for all measures suggested that participants in the present study were generally experiencing high level of posttraumatic stress (IES cut off score for



PTSD- 35), low to moderate level of growth and moderate level of focusing attitudes (Table 1.)

[insert Table 1 about here]

Pearson correlation analysis was used to test the association between scores on measurements of posttraumatic stress (IES), perceived posttraumatic growth (CiOQ and PTGI) and focusing attitudes (FMS-A.E.). Table 2. shows all correlations between posttraumatic stress, posttraumatic growth and focusing attitudes.

[insert Table 2 about here]

Statistically significant positive correlations were found between scores on the FMS-A.E. and the total score in PTGI ( $r=.43$ ,  $p<.000$ ) and the positive changes subscale of the CiOQ ( $r=.32$ ,  $p<.001$ ).

Statistically significant negative correlations were found between scores on the FMS-A.E. and IES ( $r=-.39$ ,  $p<.000$ ) including subscales of Intrusion ( $r=-.26$ ,  $p<.008$ ) and Avoidance ( $r=-.42$ ,  $p<.000$ ).

Partial correlation was used to further explore the relationship between the focusing attitudes and posttraumatic growth controlling for the severity of posttraumatic stress. The association between scores on the FMS-A.E. and the PTGI ( $r = .43$ ,  $p < .000$ ) and the positive changes subscale of the CiOQ ( $r = .33$ ,  $p < .001$ ) remained statistically significant.

## **Discussion**

The current quantitative study is the first attempt to explore the relationship between focusing attitudes and the potential for growth from adverse experiences. The findings provide support for the prediction that focusing/experiential attitudes are significantly positively correlated

with posttraumatic growth. The results suggest that people who are aware of their felt senses, accept and act on them, but also are capable of finding a comfortable distance from them, find it easier to overcome and grow from traumatic situations. Several limitations to this study should however be noted.

First, the convenience sampling methodology did not permit to clarify how typical the final participant group was of the general population. In particular, those who use online trauma-related groups and forums might not be representative of trauma exposed people. The current participant sample were characterised by a significant predominance of women which made it difficult to explore the potential influence of gender.

Second, previous research has shown that higher self-reports of posttraumatic growth may sometimes reflect defense styles (Boerner, Joseph & Murphy, 2017). As such, we cannot be certain that our measures of posttraumatic growth are not influenced by defensive processes. Therefore, future studies would potentially benefit from including a relevant measure to control for defense styles. Research in this area would also benefit from a longitudinal character which enables capturing the actual PTG as a difference in scores of participant well-being at different points of coping with an adverse event (Joseph & Linley, 2008; Flanagan, Patterson, Hume & Joseph, 2015).

Third, the results of the current study suggest that stronger focusing attitudes are accompanied by higher capability to grow from traumatic experiences. However, our cross-sectional study does not provide direct evidence for this. Following individuals through the ongoing processes as they emerge would potentially elucidate how focusing attitudes influence perceived and actual posttraumatic growth. It is important that further studies in this

area investigate as to what degree focusing attitudes change naturally as an outcome of person-centred experiential therapy. Available research indicates that focusing attitudes measured with FMS-A.E. remain rather stable without interventions but can be enhanced by certain activities specifically designed to have experiential effects (Aoki and Ikemi, 2014). Consequently, therapeutic proceedings that have a definite experiential influence should present high potential for developing capabilities that are crucial in resolving and growing from trauma. Practice-based research with its potential for pre-/post- therapy and other longitudinal study designs seems to hold promise for bringing new insights and involving us more deeply in an understanding of the phenomena of human change in the face of trauma.

## References

- American Psychiatric Association, 2013. *Diagnostic and statistical manual of mental health disorders*. 5th ed. Washington, DC: Author.
- Aoki, T. and Ikemi, A., 2014. The Focusing Manner Scale: its validity, research background and its potential as a measure of embodied experiencing. *Person-Centered and Experiential Psychotherapies*, 13(1), pp.31-46.
- Boerner, M., Joseph, S. and Murphy, D., 2017. Reports of post-traumatic growth and well-being: moderating effect of defense style. *Journal of Social and Clinical Psychology*, 36 (9), pp.723-737.
- Brice, A., 2011. "If I go back, they'll kill me..." Person-centred therapy with lesbian and gay clients. *Person-Centered & Experiential Psychotherapies*, 10(4), pp.248-259.
- Carrick, L., and Joseph, S., 2013. Working with traumatized clients and clients in crisis. In: W. Cooper, M. O'Hara, P. Schmid, A. Bohart. 2nd ed. *The Handbook of Person-Centred Psychotherapy and Counselling*. Basingstoke: Palgrave MacMillan. Ch. 24.
- Coffeng, T., 2004. Trauma, imagery and focusing. *Person-Centered and Experiential Psychotherapies*, 3, pp.277-290.
- Flanagan, S., Patterson, T., Hume, I., Joseph S., 2015. A longitudinal investigation of the relationship between unconditional positive self-regard and posttraumatic growth. *Person-Centered & Experiential Psychotherapies*, 14(3), pp.191-200.
- Fukumori, H., and Morikawa, Y., 2003. Relationship between Focusing and mental health in adolescents. *Journal of Japanese Clinical Psychology*, 20, pp.580-587.
- Gendlin, E.T., 1962. *Experiencing and the Creation of Meaning: A Philosophical and Psychological Approach to the Subjective*. Evanston, Illinois: Northwestern University Press.

- Gendlin, E.T., 1967. Values and the process of experiencing. In A. Mahrer (Ed.), *The goals of psychotherapy*, pp. 181-205. New York: Appleton-Century. [online] Available at: [http://www.focusing.org/gendlin/docs/gol\\_2100.html](http://www.focusing.org/gendlin/docs/gol_2100.html) [Accessed 24 May 2018].
- Gendlin, E.T., 1978. *Focusing. How to gain direct access to your body's knowledge*. Ed. 2003. London: Rider.
- Gendlin, E.T., 1991. Thinking beyond patterns: Body, language, and situations. In: B., den Ouden and M. Moen. *The presence of feeling in thought*. New York: Peter Lang. pp.21-152. [online] Available at: [http://www.focusing.org/gendlin/docs/gol\\_2159.html](http://www.focusing.org/gendlin/docs/gol_2159.html) [Accessed 24 May 2018].
- Gendlin, E.T., 1992. The primacy of the body not the primacy of perception. *Man and World*. 25(3-4), pp.341-353. [online] Available at: [http://www.focusing.org/gendlin/docs/gol\\_2220.html](http://www.focusing.org/gendlin/docs/gol_2220.html) [Accessed 24 May 2018].
- Gendlin, E., 1997. *A Process Model*. The Focusing Institute.
- Gendlin, E.T., 2004. Five philosophical talking points to communicate with colleagues who don't yet know focusing. *Staying in Focus. The Focusing Institute Newsletter*, 4 (1), pp. 5-8. [online] Available at: [http://www.focusing.org/gendlin/docs/gol\\_2187.html](http://www.focusing.org/gendlin/docs/gol_2187.html) [Accessed 24 May 2018].
- Gunst, E. and Vanhooren, S., 2017. The destructive pattern: an experiential and existential theory building case study. *Person-Centred and Experiential Psychotherapies*, pp.1-18.
- Hendricks, M.N., 2001. Focusing-Oriented/Experiential Psychotherapy. In: D., Cain and J., Seeman. *Humanistic Psychotherapy: Handbook of Research and Practice*. American Psychological Association.
- Herman, J., 1992. *Trauma and Recovery: The Aftermath of Violence - From Domestic Abuse to Political Terror*. Ed. 2015. New York: Basic Books.

- Horowitz, M., 1976. *Stress response syndromes*. New York: Jason Aronson.
- Horowitz, M. J., Wilner, N. and Alvarez, W., 1979. The impact of event scale: A measure of subjective stress. *Psychosomatic Medicine*, 41, pp.209–218.
- Joseph, S., 2015. A person-centred perspective on working with people who have experienced psychological trauma and helping them move forward to posttraumatic growth. *Person-Centered & Experiential Psychotherapies*, 14(3), pp.178-190.
- Joseph, S. and Linley, P.A., 2005. Positive adjustment to threatening events: An organismic valuing theory of growth through adversity. *Review of General Psychology*, 9(3), pp.262-280.
- Joseph, S. and Linley, P.A. eds., 2008. Psychological assessment of growth following adversity: A review. In: S. Joseph, and P. A. Linley. *Trauma, recovery, and growth: Positive psychological perspectives on posttraumatic stress*. Hoboken, NJ: John Wiley & Sons, Inc. pp.21–38.
- Joseph, S., Linley A.P., Shevlin, M., Goodfellow, B. and Butler, L.D., 2006. Assessing Positive and Negative Changes in the Aftermath of Adversity: A Short Form of the Changes in Outlook Questionnaire. *Journal of Loss and Trauma*, 11(1), pp.85-99.
- Krycka, K.C. and Ikemi, A., 2016. Focusing-Oriented - Experiential Psychotherapy from Research to Practice. In: D.J., Cain, K. Keenan and S. Rubin. 2nd ed. *Humanistic Psychotherapies: Handbook of Research and Practice*. Ch.8, pp.251-282.
- McGavin B., 1997. Focusing with Small Physical Ailments. *The Focusing Connection*, September Issue.
- Morse, D., 2003. *Assimilating Trauma Through Focusing*. The Focusing Institute. [online] Available at: <[http://www.focusing.org/morse\\_assimilatingtrauma.html](http://www.focusing.org/morse_assimilatingtrauma.html)> [Accessed 10 October 2017].
- Murphy, D., 2009. Client-centred therapy for severe childhood abuse: A case study.

- Counselling and Psychotherapy Research*, 9(1), pp.3-10.
- Murphy, D., Archard, P.J., Regel, S. and Joseph, S., 2013. A survey of specialized traumatic stress services in the United Kingdom. *Journal of Psychiatric and Mental Health Nursing*, 20, pp.433-441.
- Parker, R., 2009. *Complex trauma. The Focusing Institute*, 9, pp.1-8.
- Phillips, A. and Phillips, S., 2012. *Identity Restoration, Posttraumatic growth and Cultural Connectedness*. The Focusing Institute. [online] Available at: <<http://www.focusing.org/newsletter/nov2013/articles/Identity-Restoration-Phillips.asp>> [Accessed 10 October 2017].
- Rappaport, L., 2010. Focusing-Oriented Art Therapy: Working with Trauma. *Person-Centred and Experiential Psychotherapies*, 9(2), pp.128-142.
- Rogers, C., 1959. A Theory of Therapy, Personality and Interpersonal Relationships as Developed in the Client-Centred Framework. In: S. Koch. *Psychology: A Study of a Science*, Vol. 3: Formulations of the Person and the Social Context, pp.184-256.
- Rogers, C., 1961. *On Becoming a Person: A Therapist's View of Psychotherapy*. Houghton Mifflin: Boston.
- Rogers, C., 1964. Toward a modern approach to values: The valuing process in the mature person. *Journal of Abnormal and Social Psychology*, 68(2), pp.160-167.
- Rogers, C., 1980. *A way of being*. Boston, MA: Houghton Mifflin.
- Rutherford, M. C., 2007. Bearing Witness: Working with clients who have experienced trauma - Considerations for a person-centred approach to counselling. *Person-Centered & Experiential Psychotherapies*, 6(3), pp.153-168.
- Santen, B., 2014. Into the fear-factory: connecting with the traumatic core. *Person-Centered & Experiential Psychotherapies*, 13(2), pp.75-93.
- Scharwächter, P., 2005. The Integration of Focusing-oriented Psychotherapy into the

- Three-phase Model for the Treatment of Post-traumatic Stress Disorder. *Person-Centered & Experiential Psychotherapies*, 4(1), pp.4-19.
- Schmuck, P., Kasser, T. and Ryan, R.M., 2000. Intrinsic and Extrinsic Goals: Their Structure and Relationship to Well-Being in German and U.S. College Students. *Social Indicators Research*, 50(2), pp.225–241.
- Sheldon, K. M., Arndt, J., and Houser-Marko, L., 2003. In search of the organismic valuing process: The human tendency to move towards beneficial goal choices. *Journal of Personality*, 71, pp.835–886.
- Sheldon, K.M. and Elliot, A.J., 1999. Goal striving, need satisfaction, and longitudinal well-being: the self-concordance model. *Journal of Personality and Social Psychology*, 76(3), pp.482-497.
- Tedeschi, R.G. and Calhoun, L.G., 1996. The posttraumatic growth inventory: Measuring the positive legacy of trauma. *Journal of Traumatic Stress*, 9, pp.455–471.
- Tickle, E. and Murphy, D., 2014. A journey to client and therapist mutuality in person-centered psychotherapy: a case study. *Person-Centered & Experiential Psychotherapies*, 13(4), pp.337-351.
- Vrana, S. and Lauterbach, D., 1994. Prevalence of traumatic events and post-traumatic psychological symptoms in a nonclinical sample of college students. *Journal of Traumatic Stress*, 7(2), pp.289-302.



Table 1. Descriptive statistics for all measures used in the study

	N	Minimum	Maximum	Mean	Std. Deviation	Cronbach $\alpha$
DEC (Distressing Event Checklist)	87	3	35	20.14	6.42	
Total IES	87	2	69	43.17	15.72	.87
IES – Intrusion	87	1	35	24.16	8.66	.87
IES – Avoidance	87	1	38	19.01	9.29	.79
CiOQ-S (Positive)	87	6	30	20.60	5.23	.82
CiOQ-S(Negative)	87	5	30	16.59	6.65	.87
Total PTGI	87	1	94	46.15	22.44	.93
Total FMS-A.E.	87	46	91	72.24	9.17	.80

Note: DEC=Distressing Events Checklist, IES = Impact of Event Scale; CiOQ = Changes in Outlook Questionnaire; PTGI = Posttraumatic Growth Inventory; FMS = Focusing Manner Scale – A.E.

Table 2. Pearson correlation between variables, N=87, one tailed significance test.

	DEC (Event Intensity)	Total IES	IES – Intrusion	IES – Avoidance	CiOQ-S Positive	CiOQ-S Negative	Total PTGI
DEC (Event Intensity)	-						
Total IES	.34**						
IES - Intrusion	.41**	.87**					
IES - Avoidance	.19*	.88**	.53**				
CiOQ-S Positive	.11	-.03	.09	-.14			
CiOQ-S Negative	.28**	.55**	.45**	.51**	-.31**		
Total PTGI	-.10	-.10	.005	-.17	.68**	-.42**	
Total FMS-A.E.	-.17	-.39**	-.26**	-.42**	.32**	-.34**	.43**

Note: DEC = Distressing Events Checklist, IES = Impact of Event Scale; CiOQ = Changes in Outlook Questionnaire; PTGI = Posttraumatic Growth Inventory; FMS–A.E. = Focusing Manner Scale, \*\*Correlation is significant at the 0.01 level, \* Correlation is significant at the 0.05 level.