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**Finding Father, Finding Mei Mei:
A Chinese Counsellor's Exploration on the Integration of
EFT and Christian Prayer in Trauma Recovery**

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degree of Doctor of Psychotherapy and Counselling

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Declaration

I declare that this thesis has been composed solely by myself and that it has not been submitted for any other degree or professional qualification.

Part of it has been published online (Open Access) as an article ‘Emotion Focused Prayer with an Emotion Friendly God - My exploration of prayer with EFT techniques as a Chinese Christian counsellor’ in Person-Centered & Experiential Psychotherapies in June 2021.

Signature:

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Abstract

This thesis is an in-depth self-as-subject heuristic inquiry into the integration of EFT and Christian prayer in trauma recovery. It aims to support therapists who work with clients who have a personal relationship with their God, whether the therapists themselves do or not. This research is original in bringing together EFT and Christian prayer. Existing research mainly focuses on the integration of CBT or the psychodynamic tradition with Christian spirituality.

This project adopts heuristic inquiry as its methodological foundation, echoing the power of experiential counselling techniques. This inquiry draws from my experience of counsellor training in the UK that exposed my emotional block to anger to myself and others. I explore how my identity as a Chinese woman encouraged this (non-)relationship to anger (or other commonly unwelcomed emotions). Both emotion-focused therapy (EFT) procedures and Christian prayer healing contributed to a breakthrough on my work with the emotional block, which fascinated and motivated me to explore the integration of the two.

I bring my own personal experience that serves the purpose of reflecting the nature of trauma therapy. At times, as in trauma recovery itself, it is sometimes messy, sometimes incoherent and fragmented and sometimes adopts a voice from a younger part of myself. By applying the integration of EFT and Christian prayer on my own therapy following an internal calling of finding father for a dissociated part of me, I have found Mei Mei (an infant part of me) and God, leading to a personal integration and development. EFT techniques are shown helpful in improving the client's relationship with their emotions and their spirituality (relationship with God), while a relationship with God may be a pre-existing client resource and a product of therapy which continues to strengthen and consolidate the client's recovery. I then discovered that the theme of integration applies in both my personal and professional life as a client, counsellor and researcher, whereby I have a constant need to balance 'being and doing', 'relationship and technique' and 'deconstruct and re-construct' in a dialectic/dialogical manner facing complex human issues.

By comparing EFT and the Christian value of relationships and unconditional love to people, the thesis concludes by clarifying the potential of the integration of EFT and Christian prayer in trauma recovery.

Lay Summary

This is explorative research using myself as a subject. Explorative means I did not know what my discoveries would be and how it would turn out. The project was a response to my passionate internal calling, coming from a personal and professional longing to seek truth and knowledge in the field of counselling and psychotherapy. It is I testing out an innovative approach on my own, for the benefit of the larger community, though I first benefited from it. I have invested past four years in this project, not only the time and energy but also tears and pain.

Early childhood relational traumas regardless of if it were abuse or neglect could hamper one's emotional brain development which affects one's view of self and one's relationships with others. I grew up in a culture that values academic achievement over social emotional development, while my inability to express my feelings and needs in a healthy way went unnoticed. Such inability was perpetuated when I misunderstood Christian teachings on denying one's bodily feelings or disapproving certain emotions. With numbness to my emotions, I had difficulties to form sincere and close relationships, with people and God. I was confused, helpless and lonely in my struggles, but it is a struggle many others may have too.

The thesis records a personal story of recovery from early childhood relational traumas (unknown) using EFT and Christian prayer. Both EFT and prayer helped me to find my lost emotions and make good use of them. The function of emotions is to enable a dialectic between one's reflexive or concepts of how things ought to be and one's direct experience of how things actually are, thus forming a healthy view of self and relationship with others. While EFT provides theories and techniques to help me access and deepen my emotions, God has been a good Parent/Therapist to contain, hold and respond to my flooding emotions in prayers. I observed myself developing emotional maturity through the freedom to feel, to connect, to explore, to make sense and to integrate, which is recorded in this thesis. With the vital, creative emotional part of me restored, I found God an emotion friendly Person, whom I can relate to and develop an intimate relationship with. He became a constant companion in my work as a counsellor and researcher in my need to balance tensions from 'being and doing'.

People may ask why EFT by itself is not sufficient for my trauma recovery. EFT is an approach that has been developed and is still developing to cater for complex human needs. I believe no theories or approaches are sufficient to solve human problems. Therapists are individual researchers who constantly integrate their personal experiences, training and theories while facilitating clients to mobilize their agencies and resources. Including prayer in EFT is one way of utilizing the client's existing relationship and resource. In my case, since I was in an interlocking situation affected by past wound, a strong external agency and long-term safe relationship (with God) were necessary in the journey of recovery.

People may ask why prayer by itself is not sufficient since God is almighty from a Christian's perspective. I would say God often answers our prayers through natural or social emotional laws. I believe God is One who created emotions and EFT is a good tool for many to be helped. Having the channel to pray to God does not mean we can live a life without a need to rely on other people, rather, to enable us to relate and love better, sometimes through therapy.

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Chapter 1: Introduction

This is a long-term single case heuristic inquiry on the integration of emotion-focused therapy (EFT) and Christian prayer in trauma recovery, focusing on the insider's experience of the researcher. It is an explorative process on the extension of EFT to clients who are faith-based by including conversations with God¹ (prayer) in therapy².

The research question is: 'What is the process of the integration of emotion-focused therapy (EFT) and Christian prayer in trauma recovery'. It is shown from the research question that the target of the study is therapy. Hence, the thesis provides rich, layered, in-depth and detailed descriptions to capture the complexity of the therapy phenomenon, being uncovered in this explorative journey. The whole research process is multi-layered and often messy, reflecting the very nature of counselling work especially in the domain of trauma recovery. It is a dialogical and organic process venturing into the unknown and unexpected, coming from a personal and professional longing to seek truth and knowledge in the field of counselling and psychotherapy.

Heuristic inquiry and EFT therapy share many commonalities in terms of philosophical foundations (refer to Chapter 3 for further arguments). They have been circularly interacting with each other in this project. For example, therapy is the target of the study, yet it is a major part of the research process. Additionally, it is an avenue to equip the researcher with a whole set of counselling practice wisdom useful for research through personal development and therapy. On the other hand, like many other doctoral projects, research serves a personal development for the

¹ I understand people may have different concepts of God. In this writing, God refers to the Christian God. A Christian God is commonly seen in Trinity: God the Father, the Son (Jesus) and the Holy Spirit. While I do not differentiate them usually, I will be specific when I see Jesus in my vision. I capitalize names and pronouns referring to God, such as Person, Therapist, Parent, He and You.

² I use counselling and psychotherapy, counsellor and therapist interchangeably in this writing. Though I understand 'therapy', 'healing' and 'recovery' may have different meanings, I do not usually differentiate them in my writing.

researcher.

I have felt alone in the research process as spirituality is not everyone's cup of tea. In my qualification training program, I received conflicting messages in terms of the application of spirituality in counselling practice. As a Chinese Christian, I felt that I had lost my voice, perhaps also because I hail from an actual minority in the United Kingdom (UK) and in the programme. During the journey, at many times that I was stuck, I have been encouraged by many, particularly by reviewers for my paper published in the *Journal of Person-Centred and Experiential Psychotherapies* in Jun 2021. All three of the reviewers recognize the originality and significance of the research, pointing out that this paper 'will probably draw fairly polarized responses' and yet 'many clients have strong spiritual affiliations...Therapists should ideally be comfortable working with that in the process of change and healing' (citing from an anonymous peer reviewer with their permission).

Researchers assert that human-human relationships share similar structures with human-divine relationships (Buber, 2004; Grimes, 2007; Schreurs, 2006). Therefore, I adopt a relational definition of spirituality, hoping it is accessible for counsellors who may not be familiar with spirituality but have expertise in handling human relationships (Schreurs, 2006). I hope this thesis can assist counsellors, who may or may not share the same spirituality or belief systems with me, to be more comfortable working with clients' spirituality in assisting them in the process of growth and transformation. I confine my research to mainstream Christian spirituality throughout this writing for the sake of clarity and focus despite the potential of applying the research findings on other forms of spirituality.

In the following sections, I will introduce my relationship and motivation to this research project, followed by an introduction of the structure of this thesis.

1.1 Researcher's motivation and relationship with the topic

1.1.1 The researcher's relationship with counselling training and research

Called to be a counsellor and a researcher

He has sent me to bind up the broken-hearted, to proclaim freedom for the captives and release from darkness for the prisoners.

—Isaiah 61:1b Holy Bible, NIV³

I was called to be a counsellor through Isaiah 61:1b with a mission to comfort and care for others in their distress several years before I studied counselling in Edinburgh. While attending a talk about trauma therapy in my initial stage of qualification training, I deemed myself lucky because I thought I had nothing to do with trauma. It never occurred to me that I was a trauma survivor, having prisoners in me who needed to be set free.

I originated from China, migrated to Singapore 20 years ago, and stayed in Edinburgh, the United Kingdom for four years. I am a foreigner, not only in terms of geographic locations but also because I had been walking around as a high functioning 'false self', an alien to my emotions and true self (Winnicott, 1965) and an alien to people around me.

In 2016, I made the decision to receive counselling training in Edinburgh. In 2018, God encouraged me to take the opportunity in a further study in the doctorate programme, promising it would be a good gift. Additionally, He spoke through a sermon indicating that I would be broken and be a blessing to many after the

³ Considering my targeted readers are not confined to Christian believers, I try to use everyday language to describe spiritual experiences and only quote Bible verses and the version used (the New International Version or NIV) when it is necessary. I quote Bible verses in italic.

suffering. Reluctantly I took the opportunity, which was a decision against my culture and the usual me (refer to Chapter 4).

One year later He (God) told me the research project was for me and I would enjoy my relationship with Him while doing it (refer to Chapter 3). I did end up having a closer relationship with Him, after being broken, just like how He warned and promised. The taste of intimacy with God marked my development in relational capacities and a shift to a more relational stance in personal and professional life.

A stormy sea: training in a foreign country

Training in a foreign culture quickly exposed that something was not quite right in me.

Day 1

Sep 2016, I flew a long journey from Singapore to Scotland joining a counselling training program in the University of Edinburgh full of anticipation and energy. I thought I would easily adapt to the UK training systems as I had been moving between countries, exposing to various cultures and clientele.

Day 2

In groups, I was totally confused when people expressed anger towards me: “I am annoyed when you...!”

The training was conducted in various learning groups when we were expected to exchange feedbacks. Growing up in a face-giving culture, I had never experienced such confrontations. Also, I was the only one Christian (or known Christian) among forty-plus peers and tutors. Mentioning God’s name seemed triggered something in the groups, such as spoken or unspoken anger or uneasiness. I felt that I was a minority not only in colour but also in my faith in a place I thought had a rich Christian heritage. From the mirror of peers, I almost sensed myself as dumb, blind, crippled. Or an ugly duckling. I was terrified and confused.

Cultural, religious, language barriers and my individual personality were all factors contributing to my sense of loss (Liu, 2013; Wu, 2015).

Day 3

I failed the placement readiness! (See more details in Chapter 4)

The feedback given was “Match her anger, volume up!”

What I perceived was “Change your personality! Be angry!”

Two months into the program, I did not pass the assessment for placement readiness the first time around. This would determine whether I can begin working with clients. Failing a test was not only a personal failure, but also connected to ‘face-losing’— losing dignity or honour (St. André, 2013). Passing examinations and pursuing studies had been my route to career mobility and part of my identity (Cheng, 2011) when I had a successful history being a scholar and researcher in a natural science domain.

I cried and shouted towards the sea at Portobello (a place in Edinburgh). “How can I change my personality! I am a gentle and calm lady. My character has been valued in my home country. What a strange and horrible programme this is!”

Tan (1993) observes ‘Racism in the transference is a defence against growth, and it is lodged at a primitive (infantile) level of the paranoid-schizoid position’ (p. 35). By blaming the cultural differences that my talker brought about and the ‘strange programme’, I was defending myself from the horrible possibility that there might be issues in me.

Day 4

Or am I the problem?

I started to doubt if I was a right candidate to be a counsellor.

The counselling training program in Edinburgh had laid out a most comprehensive safety net for students with various groups, professional development mentors and tutors. Additionally, we were encouraged to attend personal therapy and self-care activities. Even with all those resources, I was overwhelmed with unexpected shocks, feeling as though I was lost and drowning.

1.1.2 Researcher's relationship with God

It seemed the support was not sufficient to balance the pain. I was seriously contemplating quitting the programme. I started to question God's calling for me to be a counsellor.

I was born in China — an atheist country with both parents believing that there was no God⁴. Since around 5 years old, I have asked existential questions such as 'Where did human beings come from? Where am I going?'. However, I could not find an answer and had to give up thinking and asking and suppressed my need to know the answer. I was seriously unhappy and sad. By my mathematician's logic at my twenties, I wondered if I live to die one day, and become nothing after death, what was the point of living. Additionally, I had failed my attempts to look for truth from various temples and seek 'true love' from men. The pain motivated me to search for an answer by migrating to Singapore 20 years ago.

There I was touched by a song and a sermon during my first visit at a church, deciding that God was what I had been searching for – God being the only One who can satisfy my innermost need. I was very happy when God was put in the centre, many of my puzzles (existential questions) were put into place. In the 'honey-moon' stage of my faith journey, I formed a secure attachment with God as described by a compensation model (Grimes, 2007). However, my relationship with Him went into an 'impasse' as my old relational pattern took over.

⁴ They became Christians at an old age, influenced by my conversion.

People told me Christianity was not a religion but a relationship with God (Walker 1971; Jones 1996) and spending time with God in devotions fosters this relationship. I was happy to attend church, attend or lead bible studies, serving church and people, but I was frustrated that I could not feel Him intimately.

JW looked out for me after a Sunday service (10 plus years ago). 'I don't know if it is relevant to you or not. If it is not, just ignore it, 'she told me with some hesitance, 'your face popped up in my devotion. Then I saw this Chinese character in front of me...' JW did not speak much Chinese but she happened to recognize this specific Chinese character.

I broke down into tears: 'It does.' Sobbing on her shoulder for a long time, I was grateful for God did not forget me in my distress and sent someone to look out for me!

I wanted to have a closer relationship with God. I wondered, 'Why did not God speak to me?' 'Is there anything wrong with me? Or does God show favouritism as people in my life often did?'

Experience of hearing God

God answered me: 'I called you to Edinburgh like how I called Abraham to wander through a desert.'

I laughed silently. Edinburgh – a beautiful, compact and convenient city where I lived for a few years was then a desert to me. Nevertheless, it was true for I knew nobody and I was nobody then in Edinburgh. It was a painful loss when I was away from my familiar language, culture, ideologies and identity (Liu, 2013).

I went for a hiking to distress myself. A double rainbow appeared at the summit of the Arthur's Seat (a scenic hill in Edinburgh). I was deeply touched. There was a Promise Land in Abraham's desert sojourn too.

As if the assurance was not strong enough, I came across the story of Jesus calming the stormy sea three times in different settings during the weekend.

Being thrown into a stormy foreign training programme was the beginning of the awakening and thawing of my internal defences. It was also painful enough for me to call out for help.

Rogers (1990) lists the client's incongruence as one of the necessary and sufficient conditions of therapy. Hutchison suggests a workable intensity of feelings be evoked in training groups within a caring, empathic and accepting climate (Hutchison, 2015). In other words, pain served as a motivation to therapy and development as long as an adequate balance of support is being provided (Walker, 1971, p. 81).

Experience of healing prayer

In my desperation to seek help and answers, I took various opportunities for therapy or healing during the training period. One of these was Christian inner healing prayer. In a prayer healing session, a miraculous restoration of my feelings happened in that I noticed that I could feel irritations which I would previously be oblivious to (refer to Section 4.1, Chapter 4).

After the excitement of tasting the miraculous effects of prayer healing, I had a not-so-good experience one week later. In this following prayer healing session, I told the counsellor about a family secret. There I was able to feel and express my anger toward the persecutors, quite different from my usual self who could not express anger easily. The Christian counsellor was able to empathize with me. However, she quickly prompted me to forgive the persecutors, stressing the consequences of not forgiving. I was reluctant but did according to her prompting after some struggles. Soon, she asked me to submit my anger to Jesus. I would not, because at that moment when I pondered on my anger, I believed the Lord was with me. In fact, the ability to feel the anger at that moment was a gift from God — a result of overcoming my emotional block.

This later event struck me and left me wondering about how Christians' views of emotion impacted my prayer and relationship with God. It motivated me to investigate teachings that I took for granted for years. Modern theologies have been influenced by the views that we have to be controlled, be rational to the extent of separating thinking, behaviour from feelings (Walker, 1971; Willard, 2012). I am curious to know what would happen if I adopt an emotion-friendly attitude in my prayer (meaning my range of emotions, including anger, being accepted by myself during prayer). I will talk more about it in the following chapter.

1.1.3 Researcher's relationship with EFT

I have experienced tremendous cultural shock studying in the UK as a Chinese student, being lost in the vastly different ideologies. I struggled to choose between listening to new or old authorities, in the debate of 'being or doing', 'relationship or technique', 'arts or science' in a non-directive person-centred therapy (PCT) approach (with psychodynamic perspective) training program. I observed clients from Chinese culture dropping out from therapy if they did not see themselves being helped quickly, while they tended to hope for counsellors to be more directive (Zane et al., 2004).

In my search for an answer to my confusion, I attended an EFT Level 1 training in Glasgow. I was struck by the powerful effectiveness of EFT in the skills practice and embraced it instantly. EFT met my needs as a trainee counsellor in the integration of 'being and doing', 'following and guiding', 'relationship and technique' in that the counsellor works actively and collaboratively with the client.

Soon I idealized EFT and was keen to receive EFT therapy for myself. I was frustrated that I could not find an EFT therapist for a long period of time, partly due to the small number of EFT therapists available and trainer/trainee boundary issues. I was so desperate that I literally used EFT training as part of my treatment on top of my personal therapy, which benefited me significantly.

1.1.4 Researcher's relationship with trauma therapy

I was disappointed that I was declined to join an EFT supervision group and was given the reason that I had unresolved significant personal issues. I had not yet realised how unaware I had issues that I needed to address then.

Both the qualification training in the University of Edinburgh and EFT training provided limited training on trauma therapy. I learned trauma therapy through reading and experimenting on myself, sometimes with my therapists.

1.1.5 Researcher's relationship with self-as-subject heuristic inquiry

When I shared about using our subjectivity for research, Y, a Chinese doctorate student in the area of human science research, gave me an expression—something like unbelievable.

Later, I told her that my research project has shifted from researching others to myself, she gave me an even more intense 'unbelievable' expression.

'If you trust your subjectivity, will you not be biased?' She asked. I laughed. That was how I felt three years ago.

(Quote from my personal journal).

I used to be a researcher in the area of engineering with an education background that upholds rational logical deduction imported from modern western thinking (Cheng, 2011).

Exploration into the unknown without a pre-assumption using heuristic inquiry was extremely scary while research into self was another huge 'leap of faith' for me. The journey was not only scary but also lonely and painful.

Two feeble feelings from within attracted my attention. My curiosity of following their calling had offset my fear and pain, as I embarked on the process of seeking answers to questions that have 'been a personal challenge and puzzlement in the search to understand one's self and the world in which one lives' (Moustakas, 1990, p. 15).

One is light from God, a 'dim light' in the beginning that attracted me to look for something valuable. In the journey, the light became brighter and stronger.

Another one was a vague, weak voice seemingly from nowhere, prompting me to pay attention to her and her desire for a father. I now know she is the wounded infant in me. I call her Mei Mei (refer to Chapter 5 and 6). I was filled with her

sadness during the second year of counselling training (2017-2018). I heard her complaint after my dad passed away in mid-2018:

A voice in me keep saying: 'I am now an orphan. I have no parents anymore. Oh, I had never been a child yet.' I was puzzled whose voice this was. Her weak and lingering voice prompted me to look for a father for her. The mission sounded impossible to me for I did not know who she was nor who she was looking for.

Maybe EFT can help me? Maybe God can help me?

(Quote from my personal journal).

Unknowingly, I stepped into the domain of trauma therapy integrating EFT and prayer, using self as a subject. In this journey, following the faint voice and emerging emotions, I found two of my inner children who were affected by possible childhood trauma.

One of them is the infant girl Mei Mei. She was stuck in the dark place. She probably had been calling for help but her voice had been ignored for a long time, which became weaker and weaker. Researchers call this type of inner child the exile, homeless or prisoner (van der Kolk, 2015; Walker et al., 2015). The research turned out to be a pampering experience for Mei Mei because a variety of resources were recruited to look for her. The result was, Mei Mei was probably the first one being set free after I was called to be a counsellor to liberate people from their prisons.

Another inner child I found was Xiao Tao Qi (meaning naughty child) who was curious and playful, yet who constantly felt a sense of inadequacy and shied away from attention.

In this thesis, I intend to reflect the non-linear nature of a heuristic inquiry and characteristics of my inner children in my writing. At times, I feel myself stuck in dark muddy places which coincide with the phase of immersion in heuristic inquiry. At a certain period of time, I could not bear seeing the word 'trauma'. I was easily triggered. I cried a lot. It was a dark and turbulent emotional process in which I was

lost. As my reader, you may come across my inner children in some part of my writings. Because they have a limited language ability, they may not have proper words to link emotions to language, or they may speak like in staccatos, or even childish babble. At other times, especially toward the end of my writing in phases of illumination and explication, I have a sense of clarity as if the puzzles are fitting into their positions. Finally, I found a way-out utilizing EFT and prayer. In the end, the path of research about therapy turned out to be a healing journey for me, leading to a restoration of the ‘true self’, whereby I was set free to experiment innovative combinations of approaches in the playground of psychotherapy, and walk a new way — in the company of God. Finding, knowing and integrating those inner children are important part of my development as a person, therapist and researcher.

This thesis written from the perspectives from a client, therapist and researcher, adds knowledge to the field of counselling and psychotherapy that may not be accessible using other modes of research. I wish you, my reader, an enjoyable reading journey and hope you find it interesting and useful.

1.1.6 Additional discussion on faith issues

Faith, religiosity and spirituality

Like those terms ‘religion’, ‘spirituality’ and ‘prayer’ that I will discuss in Section 2.1, faith is difficult to define: ‘There is hardly a word in the religious language, both theological and popular, which is subject to more misunderstandings, distortions, and questionable definitions than the word “faith”’(Tillich, 2001, p. ix).

Webster 1828 dictionary illustrates some aspects of its definition

(<https://webstersdictionary1828.com/Dictionary/faith#:~:text=1.2>). It can relate to belief: ‘the assent of the mind to the truth of what is declared by another, resting on his authority and veracity, without other evidence; the judgment that what another states or testifies is the truth’. It can relate to emotion: ‘FAITH is an affectionate practical confidence in the testimony of God’.

Similar to Jones' observation that there is a paradigm shift to both relational psychotherapy and relational theology (Jones, 1996), Tillich (2001) embraces a relational definition of faith, saying that the traditional view of faith as without doubts or tensions is dead faith. I adopt a relational definition of faith, which is an umbrella term including religiosity and spirituality, particularly a relational spirituality in this project, 'to include a search for, and a relationship to, the sacred or divine, both within and outside an institutional context' (Miller-Perrin and Mancuso, 2015, Chapter 1). 'Human emotions, thoughts, behaviors, and interactions might be conceptualized as faith variables' (ibid). Over the years, my understanding of faith has evolved from beliefs without doubt to a relational view as I will illustrate in the following example.

Dad's faith

Dad chose to believe Christianity after reading a book when he was 70. He lost his speech and became paralyzed after he had a stroke at 73. Later, he survived and recovered. He told me: 'God healed me.' I asked him: 'how do you know it is God who healed you?' He answered with a question: 'who else?' I was astonished. At that moment, dad could not remember his previous personal encounters with God before the stroke. Thus, it occurs to me that dad could have spoken from a relational faith with God.

For the purpose of simplicity and focus, I will use terms such as prayer, spirituality and relationship with God instead of religion or faith in this thesis, though I understand they may have overlaps because my spirituality has been influenced and developed in a faith community as well as through my personal encounter with God.

Hearing God

God spoke to my friend not me

JH looked out for me after a Sunday service about 10 years ago. 'I don't know if it is relevant to you or not. If it is not, just ignore it', with some hesitance, JH continued, 'your face popped up in my devotion. I saw this Chinese character "endurance" in

front of me...’ JH did not speak Chinese but she happened to recognize this specific Chinese character.

I broke down into tears: ‘It does.’ Sobbing on her shoulder for a long time, I was grateful thinking that God did not forget me in my distress and sent someone to look out for me!

Later, I was wondering why God did not speak to me directly. I envy JH and several other friends who had direct revelations from God. ‘Does God show favouritism like how people often do in my life?’ Or ‘Could it be my problem?’

This event sowed the seed of my curiosity and desire to hear from God. JH’s tentativeness in sharing with me her experience caught my attention too.

Willard argues that hearing God can be supernatural but mostly natural, for example, through other people, through our reading, or our inner thoughts and it is a skill that can be learned through practice, just like how we learn to identify a person’s voice.

Even among Christians, not everyone hears from God conversationally. How do I know what I perceived is from God? I guess I can never prove anything I received as absolutely without error. According to Willard, due to our limitations, no one can guarantee what they heard is one hundred percent correct, but it can be good enough when people learn to identify God’s ‘voice’, like how they learn to identify each other’s voices or how animals identify their master’s.

How can I know I am not mad ‘hearing God’?

Since there are many lunatic people who claim that they hear from God, how can I know if I am not mad ‘hearing God’? Actually, when I look back on my journey of ‘leap by faith’ in responding to what I ‘hear from God’, I could be seen as mad by many, including myself.

I used to be a gymnast in my undergraduate time. I had certain confidence that I would land on the balance beam when I jumped up on it. Yet, at the same time, I understood that I might fall from it. I did fall from it a number of times. Those

painful falls humbled me and made me more cautious while I performed all actions on it.

I had experiences hearing God 'wrongly' which devastated me, while on other occasions, I lost opportunities after I hesitated or disbelieved what I heard from Him. Those experiences humble me in my daily walk and listening to God.

Despite the fact that hearing God is possible and can be natural, I understand it is important to discern if the response is from God. In this research journey, I have constantly doubted, surprised by what I perceived as God's response. Those seemingly simple prayers are rich, dynamic and unfolding over time, and some of them I still only half believe, being half suspicious. I have made an effort to record my multifaceted reactions when I sense a response from God, including emotional (e.g., surprise or disbelieve), cognitive (e.g., insights, doubts), physiological (e.g., heat up in my body), psychological (impact on my self-image or God image) and behavioural (my change in interactions with God and people). I have checked my experiences again and again in my writing and recollection. Due to my own disbelief, I would ask for God's confirmation again and again for fear of hearing Him wrongly as shown in an example on a decision-making process recorded in Section 4.3, Chapter 4. I have recorded them according to my best personal sense at the time of journaling, while in the early stages I was yet to develop a strong critical ability. For example, I recorded 'Jesus removed the emotional block' (Event 4b, Chapter 4) in an early stage of my research when I might be in a less critical or reflexive stage. I do not think what I have recorded are fixed 'truth'. I understand the data might be read as faith declaration, but it is not my intention. Rather, I present the data, hoping to attract future research on them, for them to be examined, interrogated, understood or corrected. I am open to being challenged and even being proven wrong.

The parallel connection between faith and therapy

Researchers assert that human-human relationships share similar structures with human-divine relationships (Buber, 2004; Grimes, 2007; Schreurs, 2006). I adopt a

relational definition of spirituality, speaking a relational language that is familiar for counsellors who may not be familiar with spirituality (Schreurs, 2006).

I adopt a relational spirituality perspective rather than religious perspective in this project (refer to Section 2.1.2 for discussion of the concept of religion and spirituality). The reasons for doing so are:

1) Being a counsellor-researcher in the field of counselling, I have been developing an expertise in understanding relationships, including self–self, self–other (including self–divine) relationships. Hence, I am more qualified to observe spiritual relationships from a personal subjective relational perspective.

2) My main readership is counsellors who may or may not be familiar with religious knowledge of Christianity, but they are experts in dealing with human relationships. By adopting a relational perspective, I am speaking their language.

3) I am offering a personal relationship with God as an example to study the integration of therapy and prayer in this project. Being a lay Christian, it is not likely for me to study general Christian theology terms within the time-limit and word-limit of this project. The examples I include in this thesis are a recording of the phenomenon of my personal encounters in this searching journey. I have analysed most data from the EFT theoretical framework, rather than a religious perspective. There are occasionally personal encounters with God that I consider beyond the psychotherapy framework. I recorded them as my best knowledge at the time even though some of them I could not understand.

4) One of the purposes of this study is to provide information for counsellors who work with spiritual clients, with an emphasis on working closely with the client's 'personal theology' and their individual religious frame of reference rather than a collective or institutional theology—though 'personal theology' may be heavily influenced by an institutional theology or culture (refer to Section 2.2).

Prayer and therapy, God and therapist

‘Prayer can be broadly defined as any kind of communion or conversation with God, including focusing attention on God and an experiential awareness of God’ (Hall & Hall, p. 93).

Both prayer and therapy involve relationships and communication. Gubi (2008) argues that prayer may be applied when counselling the spiritual client because ‘prayer has similar properties to some psychotherapeutic interventions’ (p. 18). He notes possible effects of prayer in a counselling context, such as achieving hypnotic suggestion, de-automatization of perception and cognition and a lowering of arousal and desensitization (refer to Section 2.4).

In the field of counselling and psychotherapy, it is common to link the therapist’s role with parents or caregivers. According to attachment theory, caregiver-child relationships play a central role in children’s development of a healthy sense of self and other, as well as emotion regulation capacity (Bowlby, 1988). The self and other representations, including perceptions and beliefs regarding self and others or conditions of worth, are formed in caregiver-child relationships, which then guide actions, emotions and cognitions in a person’s life. Individuals learn emotion regulation skills in caregiver-child interactions (Bowlby, 1988; Schore, 2003), through ‘emotion coaching’ by an empathic responsive caregiver (Greenberg, 2015). Without sufficient ‘emotion coaching’, individuals develop emotion avoidance strategies such as numbing, suppressing and more extreme strategies like dissociation (Greenberg, 2015), resulting in interpersonal and intrapersonal difficulties in life. One essential element of trauma therapy is re-parenting the client to develop emotional and relational capacities that early trauma deprived them of. A therapist functions as a good-enough mother who empathically attunes to her child/client’s need, helping the child/client to develop ‘true self’ (Winnicott, 1965) and provides a secure base for the child/client to explore the world (Bowlby, 1988, p. 140). In PCT tradition, therapists are fostering the client’s trust in their own senses through providing core conditions (Rogers, 1990), reparative experience or ‘emotion

coaching’ (Greenberg, 2015). By offering those conditions, therapists are functioning in the role of a good enough parent from my perspective.

Among researchers in the domain of integrating spirituality in counselling and psychotherapy, it is common to link human–God relationships with child–parent relationships, especially in psychodynamic perspectives, often in terms of attachment and God image theories. For example, Jones argues that the internal representations or Internal Working Models (IWMs) of God are carriers of early relationships (Jones, 2007). Spero posits that Christian believers relate to God in the same way as they relate to their parents (Spero, 1992). The person-centred perspectives focus on spirituality being an extra dimension of therapeutic conditions which can be applied in therapy. Thorne (2002) radically raises the idea of embodying the core conditions to the extent of bringing in God Himself and pointing to God in therapy. Practicing in CBT framework, Tan (2011) has demonstrated a clinical application of a seven-step inner healing prayer in which the client sensed Jesus’ presence and company—a ‘deeply touching and healing experience’. Tan’s application echoes Thorne’s radical proposal of bringing in God Himself who embodies therapeutic conditions.

During my research journey, I experienced God as a good Parent who mirrors, holds and contains me while I also felt His empathy, presence and acceptance. Hence, I make the connection that God can be included in therapy as a (Co-)therapist.

1.1.7 Reflection on the choice of the words in the research question

Integration

Hall and Hall define the integration of psychotherapy and spirituality as ‘the incorporation of religious or spiritual beliefs, values and methods into the process of psychotherapy that results in a different way of being a therapist, understanding the

client, and/or doing therapy' (1997, p. 86). Their definition fits well with my idea of integration.

Messer classifies a few types of integration in the field of counselling and psychotherapy: 1) Theoretical integration, which integrates theories of change from two or more approaches and mixes them within a new theory; 2) Technical eclecticism, which involves combining procedures from two or more approaches, regardless of their original theories, that are beneficial to meet the needs of the individual client; 3) Assimilative integration, a mode of integration in which a concept or a technique or a viewpoint from another therapy is incorporated into one's main therapeutic approach (Messer, 2019).

My type of integration fits into assimilative integration according to Messer (2019) since I have mainly incorporated prayer and a relationship with God into the EFT framework with a goal of improving practice. The rationale for assimilative integration is based on my training as a counsellor: that I am qualified to use and comfortable in using EFT as my 'home' theory while applying my personal knowledge of prayer as a spiritual technique or procedure into this 'home' theory. I am aware of my position as a lay Christian without formal training in theology. Hence, I am not confident in discussing faith-related issues (spirituality, prayer or religion) theoretically as that is beyond my personal experience and training at this stage of my development.

Recovery

Both therapy and recovery have their origin as medical terms. I adopt non-medical approaches such as PCT and EFT, and I do see clients as agents seeking help. However, I borrow the medical terms such as 'therapy' and 'recovery' in my thesis. The definition of 'recovery' in Cambridge Dictionary is 'the process of becoming well again after an illness or injury' (<https://dictionary.cambridge.org/dictionary/english/recovery>). In Chinese, recovery is interchangeable with rehabilitation or healing, which has a holistic implication. I

acknowledge the impact of trauma that causes damage to an individual in both interpersonal and intrapersonal connections, and that damage may not be eliminated. However, the client can be facilitated to move towards being a fully functioning person. In choosing the word ‘recovery’, I emphasize the client’s perspective and resources in the therapeutic process. I believe the person’s growth tendency can be facilitated by professional intervention while not restricted to it.

1.2 Overview of the Chapters in this thesis

In Chapter 2, I will introduce concepts on EFT theories and definition of spirituality and prayer. Cultural and religious influences on Chinese Christian’s attitude to emotions and relationship with God will be included in the background review. I will review proponents of including spirituality in counselling and psychotherapy, followed by a survey of research on the application of the integration. Subsequently, I will discuss trauma theories, particularly the EFT perspective in trauma work while giving an example of using prayer as a technique in treating trauma memory. Based on the literature review, I will address the current research gaps in the field of counselling and psychotherapy and state my research question.

I will explore some difficulties and questions in research ontology and epistemology presented in the first part of Chapter 3, including challenges concerning research in the area of spirituality, such as: ‘How can you research God when God is not a material thing?’ In the second part of Chapter 3, I will illustrate how I applied heuristic inquiry as a way of generating knowledge on the research topic, followed by recounts on how I came across my research questions. Later, I will present forming my research methods integrating emotion-focused therapy and prayer to augment this heuristic inquiry, in another word, using therapy approaches as research methods. I will further address questions on doubts and challenges on researching into self. I will finally discuss data collection, analysis and presentation.

Chapter 4 to 6 will consist of collections of significant therapeutic events and analysis, while each chapter will cover a different stage of my trauma therapy. I will present the research journey a personal therapy when God is the (Co-) Therapist.

In Chapter 4, I will present Stage 1 of the trauma therapy — therapeutic relationship building and show the development of emotion-focused prayer, in which EFT techniques facilitated my connections (contact) with emotions resulting in my connection with God and others in prayer. I will illustrate that experiential techniques functioned as a sharp surgical knife, which facilitated the penetration of an emotional block, enabling a contact with important aspects of myself—the internal experiences. On the other hand, God Himself functioned as a surgeon, an attuning empathic caregiver and a safe attachment. This chapter coincides with the initial engagement phase of heuristic inquiry.

I will present Stage 2 of the trauma therapy — emotion deepening and memory work when God is a secure attachment in Chapter 5. I will explore unfinished business with my parents and God following my internal calling and pain compasses. This chapter coincides with the immersion phase of the heuristic inquiry.

In Chapter 6, I will focus on Stage 3 of the trauma therapy — Emotional transformation and meaning-making regarding the unfinished business with my parents and God. I will write on the final stage of my therapy in which I reached the darkest trauma and started to make meaning of my suffering and gradually learn to live a different narrative in life. The change was beyond the ending of my personal therapy. This chapter coincides with the incubation, illumination and explication phase of heuristic inquiry.

Chapter 7 concludes the thesis with a creative synthesis, discussion of contributions, potential applications and future research interests.

Chapter 2: The Concepts, Context and Literature Review

In this Chapter, I will first offer an introduction of concepts in Section 2.1: (1) EFT and the main concepts related to this project; (2) Christian spirituality and prayer. The introduction of these main concepts is aimed at providing a basis for an understanding of the later part of this thesis.

Secondly, in Section 2.2., I will examine Chinese Christians' general attitudes to emotions and relationships with God and/or authorities which are influenced by both Chinese culture and Christian church teachings. The background information helps to situate me – the single research subject in a larger context. Thirdly, I will present a literature review on the trend of including spirituality in counselling and psychotherapy, followed by a survey of research on the application of the integration. The reason why I have extended the literature review to the integration of Christian spirituality and counselling is that there are sparse publications on the integration of Christian prayer and counselling/psychotherapy. This is evident from searching databases such as PsychInfo, ProQuest and EBSCOhost via search engines provided by the University of Edinburgh. The main keywords used for the literature search involved terms and phrases such as *prayer, spirituality, God, Christian, therapy, counselling, psychotherapy and treatment*. After the keyword search, I conducted a backward search tracking the references of the articles yielded from the keyword search mentioned above and a forward search reviewing additional sources that have cited the articles. I further asked and received recommendations from people who are in the field while repeating the backward and forward tracking with those recommendations.

Fourthly, I will conduct a brief introduction on trauma therapy. It will be beyond the scope of this study to review all the related theories on trauma therapy. Rather, the introduction is to provide information on some theories of trauma therapy relevant to EFT and prayer. I will discuss how EFT and prayer are applied in trauma therapy in this section.

Subsequently, I will clarify the research gaps based on the literature review.

2.1 Research-related Concepts

As I mentioned briefly in the Introduction, both EFT and Christian prayer impacted me. My curiosity asks: ‘What will happen if I integrate the emotion-focused therapy (EFT) and Christian prayer in trauma recovery together?’ I am interested not only in exploring these approaches in their singularity but also exploring integrating the two approaches so that they may spark something spectacular, as it often happens in a chemical experiment. At the start of the exploration, I will first introduce related concepts.

2.1.1 Introduction of Emotion-focused therapy (EFT)

EFT is one of the Person-Centred Experiential Psychotherapy and Counselling approaches that ‘integrates active process-guiding therapeutic methods from Gestalt therapy and focusing within the frame of a person-centred relationship, but gives emotion a central role in therapy’ (Elliott & Greenberg, 2016, p. 212).

EFT adopts neo-humanistic principles, which were influenced by romantic and existentialist thinkers such as Soren Kierkegaard (Howard, 2000). Generally speaking, humanists advocate ‘free thinking’ that ‘separate themselves from the current religious, cultural, and scientific dogmas’ (Coates, White, & Schapiro, 1966 as cited in Elliott et al., 2004, p. 20). The six humanistic principles listed by Elliott et al. (2004) are: ‘(a) experiencing, (b) agency and self-determination, (c) wholeness, (d) pluralism and equality, (e) presence and authenticity, and (f) growth’ (p. 21).

EFT theories are based on the belief that emotions are basically adaptive in nature, as the processing speed of emotion is about twice the speed of cognition (LeDoux, 1998). Emotions provide information on what is happening in our situation and help identify our need and how we can act to meet the need. However, people can develop maladaptive emotions due to traumas or because they are taught to dismiss them. Distinguished according to the functions of emotions, there are types of emotions such as secondary reactive, primary maladaptive and primary adaptive

emotions. EFT therapists pay attention to clients' emotions, use them as compasses to guide the therapeutic work and aim to work collaboratively with the clients to help them know and use their emotions productively (Elliott et al., 2004).

Philosophically, EFT considers therapy as dialectically constructed by therapist-client interaction as well as the client's internal conversations. Dialectical constructivism believes the 'fact' we are coming to know is 'a joint construction of the "things themselves" and one's knowing process' (ibid, p. 36). Often, such dialogues require the differentiation of internal sides, followed by conversations between the opposing sides, in interactions that are often creative, truth revealing and meaning making.

As I have discussed in Chapter 1, I chose EFT because I personally experienced its evocative power (more details in Chapter 4). It fits my personal philosophies such as person-centred conditions, process-directiveness and dialectical constructivism. Additionally, EFT is well researched, with evidence of highly promising therapeutic effects (Elliott, 2016; Elliott et al., 2018; Elliott & Shahar, 2017; Mlotek & Paivio, 2017).

I will briefly introduce some EFT concepts and techniques that I will use in this research.

Concepts

a) Emotions and organismic valuing

Emotions are 'automatic evaluations of situations in relation to needs', a 'moment-by-moment feeling of what is good for us or bad for us and acts as our most fundamental guide', and they closely resemble Rogers' organismic valuing process (Elliott & Greenberg, 2021, p. 22).

b) Emotion schemes

Emotion schemes are dialogical automatic self-organization, with emotion at the centre, linking a network of five broad aspects in a person's experiencing: (a) 'The

perceptual/situational component’; (b) ‘The *bodily/expressive* component’; (c) ‘The *meaning* component’; (d) ‘The need/action tendency component’; and (e) ‘Emotions’ (Elliott & Greenberg, 2021, pp. 25–27). Different emotion schemes like inner ‘voices’ can communicate with each other in negotiation or conflictual manners (Elliott et al., 2004). Webster (2019) describes emotion schemes as internalized experiences, which can be illustrated by Bowlby’s internal working model (IWM). I often use relational patterns as an alternative for emotion schemes in this writing.

c) Emotion response types

‘Emotion that informs, opens someone up, promotes deeper exploration, or leads to something new is probably adaptive. Emotion that confuses, overwhelms, or is repetitive and stuck is not adaptive...’ (Greenberg, 2015, p. 90).

Emotions are distinguished according to their functions into four types as described in the following paragraphs.

(1) Primary adaptive emotion

‘A primary adaptive emotion response is our first, natural reaction to a current situation and helps us take appropriate action’ (Elliott & Greenberg, 2021, p. 35). Primary adaptive emotions come and leave quickly because they help us deal with a ‘here and now’ situation and once the problem is settled, they disappear. Examples of primary adaptive emotions are: (a) ‘Sadness seeks comfort when there is loss’; (b) ‘Anger asserts when there is violation’; c) ‘Fear/anxiety seeks safety when there is danger’; (e) ‘Interest/curiosity explores new or unusual things (ibid, pp. 32-34).

(2) Secondary reactive emotion

Secondary emotions ‘cover up other emotions’ and often ‘are reactions to primary emotions, or are feelings about primary emotions’ (ibid, p. 35). For example, a person might feel angry when they are sad. This anger is likely a secondary emotion. Since secondary emotions cover up primary emotions, it prevents individuals from getting what they need.

(3) Instrumental emotion

Instrumental emotions ‘are feelings expressed with the intent to influence others, independently of whether we actually feel them’ (ibid, p. 36). An example of instrumental emotions ‘include “crocodile tears” (instrumental sadness)’ (ibid, p. 36).

(4) Primary maladaptive emotion

Primary maladaptive emotions are ‘a person’s first, automatic reaction to a situation’ which ‘are overlearned responses from the past, based on previous traumatic experiences, failures by caregivers to help us regulate our emotional pain or experiences of abandonment, neglect or humiliation’ (ibid, p. 36). Those emotions are more a reflection of past wounds rather than a current situation, have characteristics of old familiar feelings, being stuck and being imprisoned in them. They are maladaptive because they disorganize or give false information, while past pain intrudes into a current situation. An example of primary maladaptive fear is like an alarm which is switched on even when there is no danger (ibid, p. 36).

d) Emotion-deepening process

Though researchers find Rogers intentionally guiding a client to look inward and connect with their organismic process in his practice (Crisp, 2019), they did not see him explicitly term his practice as process direction. Rather, he relied highly on his intuition to facilitate therapeutic changes (Rogers, 1990, p. 227). Rogers’ student Gendlin does not believe change happens only mysteriously. Gendlin asserts that the client might be turning round and round on the surface level, while the therapist can guide the client to deepen their experiencing (Gendlin, 1968).

Based on Gendlin’s focusing and contemporary emotion theories, Elliott and Greenberg (2021) developed an emotion-deepening model, providing a big map for the therapist to guide the client in moving from more surface level, less useful emotions (e.g., global undifferentiated emotions) to deeper level, more productive emotions (p. 43). The aim of the deepening process is to facilitate the client reaching the bottom of the pain (core pain) and uncover their unmet needs, and finally helps

the client to receive the emerging truth about themselves and subsequently connect them with their agency.

e) Internal voices

Sullivan (1964) says that individuals have as many internal objects as they have various external relationships (as cited in Wallin, 2007). Stiles puts forward a similar phenomenon in different terms: ‘Each of us seems to carry many voices, representing people, ideas, or events that we’ve encountered or that have been passed to us by signs’ and those signs could be verbal, non-verbal or images (Stiles, 1999, p. 3) and other people term those internal figures as ‘configurations’ (Mearns & Cooper, 2005) and ‘internal family systems (IFS)’ (Schwartz, 2013).

‘Multiple voices within people can represent depth of resources and flexibility, or they can represent fragmentation and dissociation’ (Stiles, 1999, p. 3). Stiles suggests that ‘there is a formal similarity between interpersonal communication and intrapersonal communication’ (p. 4). A traumatic experience which is forgotten or dissociated has a voice that desires to be heard. The suppression of such a voice contributes to symptoms or problems. Therapy aims to promote the expression of the voices, allowing them to evolve to be more coherent and finally assimilated. Stiles gives a clinical example that a client was able to be in control of her assertiveness when her explosive angry voice was heard. EFT researchers developed various tasks to create meaning bridges—the sign-mediated connections between the voices or creative dialogues contributing to negotiation, meaning-making and integration of the conflictual or unresolved voices (Elliott et al., 2004).

Techniques

a) Two-chair work

Greenberg and colleagues (Greenberg et al., 1993) developed the two-chair task in which the conflictual aspects of the client are differentiated and arranged on the two different chairs to allow dialogue. Two-chair work can be applied to differentiate between internal selves, e.g., the critical self and the experiencing self, by imagining

them in different chairs, subsequently having dialogues between them. Once the harsh and oppressive part is activated and expressed, it is possible for the client to be aware of the extent and impact those negative voices have on their organism, and further express their organismic needs. As a result, it is then possible for the client to learn to nurture and treat themselves empathically.

b) Empty chair work

Empty chair work is designed (Greenberg et al., 1993) to facilitate clients to handle unfinished business with significant others. In an empty chair work procedure, the client is asked to imagine the significant person sitting in the empty chair; such imagination facilitates evocation of the experiential memory of the significant other, allowing access to feelings and emotions the imagined person might arouse in the client. The imagined enactment would then provide an opportunity for the client to process and make resolutions with the significant other. Considering it might often be difficult for trauma clients to face their abuser in the chair, Sandra Paivio modified the empty chair work to the imaginal confrontation work, whereby the client would imagine confronting the person without the use of the chair (Mlotek & Paivio, 2017; Paivio, 2014).

In my research, a procedure similar to imaginative confrontation is applied in my prayer, by imagining God is in the room, and how He would respond. I termed this procedure as imaginative encounter (see Section 3.1.3, Chapter 3).

c) Focusing on an unclear felt sense

Gendlin's focusing is a way of being present with oneself and being friendly with one's feelings. He believes our body knows more than our mind. By paying attention to their bodily senses, the client has opportunities to access subtle, implicit experiences. Often there is a shift after a feeling was symbolized accurately (Gendlin, 1981). Robert Elliott adapted Gendlin's focusing and developed it as an EFT technique (or task, a special EFT term) (Elliott et al., 2004).

2.1.2 Concepts of Spirituality, Relationship with God and Prayer

Since Christian prayer—the second element in this research—is closely knitted with Christian spirituality and a relationship with God, I will define those three terms in this section.

Definition of spirituality

There are vastly different opinions on the definition of the often overlapping terms of religion and spirituality (Clark, 2012; Gubi, 2008; Koenig, 2018; Loue, 2017). Overall, spirituality connects more to personal experience while religion is a more structural expression or practice.

Since spirituality has a Latin root which means ‘breath of life’, it has been expressed as ‘breath’ or life force (Gubi, 2008). Similarly, Walker suggests ‘spirituality means liveliness, vitality, creativity, excitement, excitability, and so on’ (Walker, 1971, p.41). Thorne describes spirituality as a human being’s search for meaning, intimacy, and the quality of tenderness (Thorne, 2012). Even though ‘we may fail to acknowledge that, because we are spiritual beings, we have access to levels of experiencing which transcend by far the narrow boundaries of our rational world’ (Thorne, 2012, p. 119). Likewise, O’Murchu (1994) deems spirituality as our ability to make sense of our true nature and purpose in life (as cited in Gubi, 2008). Other scholars see spirituality as the capacity to pay attention to one’s internal world, and the ability to trust and be open to the infinite (Shafranske and Gorsuch, 1984, as cited in Gubi, 2008). According to Schreurs, spirituality ‘is about an individual’s ideals, attitudes, thoughts, feelings, and prayers directed toward the Divine, and about how these find their expression in his daily way of life’ (Schreurs, 2006). In another word, it is about the person’s relationship with God.

I focus my research to mainstream Christian spirituality throughout this writing for the sake of clarity and simplicity. However, the discoveries in this research may be relevant to other forms of spirituality.

Development of spirituality (a relationship with God)

According to Schreurs (2006), a person can develop ideally towards greater depth and intimacy with God. Schreurs cites Brummer's three types of relational structures and discusses the advantages and disadvantages of each: the first being manipulative or impersonal relationships, whereby the divine or the person has the absolute control and the other party cannot act as a free and responsible person; the second being contractual or mutual agreement relationships; and the third being relationships of mutual love or fellowship in that they presuppose both partners to be interested in each other's unique personhood and in the quality of the interaction. Individuals may have to overcome many obstacles to become open, authentic, and trusting in order to form mutually loving and intimate relationships. Likewise, 'A spiritual relationship resembles sometimes very closely a human relationship in which initial stereotypes, projections, and illusions may be replaced by mutual apprehension of each other's true person' (ibid, p. 189).

Here are several examples of spiritual development. Nouwen, a Catholic preacher, illustrates a relationship development with God in his *Return of the Prodigal Son*, wherein a prodigal son could grow from a rebellious irresponsible man to be a compassionate father (Nouwen, 1994). Similarly, Willard (2012) describes how the relationship can grow deeper from phases of communication, communion to union. Likewise, Teresa of Avila recorded her stunning experience when her relationship with the Lord progressed from the First Dwelling Place to the Seventh, reaching the sense of superb joy and peace of union with the Divine (Frohlich, 1993).

Definition of Prayer

Prayer as a human experience is as difficult to define as the term of spirituality. Gubi (2008, p. 26) lists a variety of descriptions of prayer, such as 'being in touch with a sense of transcendent inter- (or intra-) connectedness', 'an encounter and communion with God', 'I connect with the Other, where Other relates to a non-physical object or being.' Prayer can take various forms, including silence.

Hall and Hall (1997) emphasise the conversational nature of prayer: ‘Prayer can be broadly defined as any kind of communion or conversation with God, including focusing attention on God and an experiential awareness of God’ (p. 93).

2.2 The researcher-participant’s cultural and religious context

I will acquaint you with the cultural and religious background that I came from in this section. As I am the sole researcher, it is important to let my readers know where I came from to show my perspectives, limitations and potential bias as a demonstration of the researcher’s reflexivity. Additionally, this background information situates me in the larger context because this is not only a study about myself, but a study intending to add knowledge to the community as well (Throne, 2019). It will also provide explanation on some of my struggles which will serve as a reference of my development before and during the research.

2.2.1 Chinese people’s attitudes to emotions and relationships

Chinese characteristics

It is almost impossible to define Chinese culture, partly because it is vast, long (more than 5,000 years) and rich, and partly because there are many Chinese sub-groups globally, such as Chinese people living in Taiwan, Hong Kong and other countries besides the 1.3 billion people in Mainland China (Lee, 2002). Additionally, Chinese culture is still evolving rapidly in a dynamic conversation with external cultures (Berry, 2005). Traditions including Confucianism, which are undeniably influential on various facets of social interactions in China, have also been impacted by radical economic, societal, and cultural transformations that have been swiftly happening in modern Chinese communities (Wang & Chang, 2010).

Nevertheless, it is still worth noting the Chinese characteristics researchers commonly list, such as emotional self-control, hierarchical structure of relationships,

valuing academic achievement, collectivism and family system (Jim & Pistrang, 2007; Lee, 2002; Sue & Sue, 2016; Yeo et al., 2013). These characteristics are meant to provide information on the context of this study but not to stereotype the uniqueness of each Chinese individual.

Non-expressiveness of emotions

Traditionally, Chinese are less expressive in their emotions. Confucius taught that a mentally mature person is ‘satisfied and composed’, implying that the ability to contain one’s emotions is a sign of maturity (Lee, 2002, p. 122). Chinese idioms present the virtue of emotional self-control, such as ‘Do not show either your anger or joy’ (喜怒不形于色), for women particularly ‘Do not show your teeth when you smile (笑不露齿)’ and a typical condolence saying ‘to control your sadness’ (节哀顺便).

There are some emotions that are more expressed than others. In terms of gender expectations, there is a saying in China that goes, ‘men are not allowed to express any feelings except anger, whereas women are to express any emotion except anger’. When I was young, I was often reprimanded and would be ashamed of myself for throwing temper tantrums. I gradually grew to be a gentle and calm lady with a high threshold for anger, and as a result was praised by people around me.

Hierarchical structures of relationships

The influence of Confucius’ emphasis on the order or hierarchical structure in society and family is still prevalent in Chinese communities, seen in filial piety, the respect for seniors, the submission to authority and the appropriate gender roles (Lee, 2002). For example, the father has unchallenged authority over his household as the head of the family in a traditional Chinese family, though there are individual differences on how families follow such social norms. The hierarchical structures are applicable to work, school and other social organizations. Lee argues that the hierarchical structures have an advantage in that everybody knows their position and hence it is easy for them to fit in. However, according to Lee, the downside of

sticking to such a structure is that relationships become superficial while people have difficulties connecting at a heart-to-heart level.

The Chinese culture is often termed as the culture of ‘shame’ or ‘guilt’ (St. André, 2013). Parents use guilt and shame to enforce compliance to family rules (Lee, 2002) and more towards pushing children to achieve academically in contemporary China (Wang & Chang, 2010).

My family was not fully conventional because both my parents were educated and working with equal pay. On one hand, my father used to tell me with emphasis that I should not let people look down on me for being a girl. I could tell that I was his pride as I ‘won face’ (brought credit) for him through doing well in school. On the other hand, he upheld his authority in the family with no apologies, winning arguments with a louder and angry voice.

External locus of evaluation

The education system in China has great influence on both parents and students as Chinese parents commonly value academic success (Chen, 2006; Wang, 2010). During the 7th and early 20th century, ‘Millions of young people (and in many cases until they were quite old) turned themselves into scholars who knew nothing but reading and writing, memorizing the classics by heart, to become successful candidates for the Civil Examinations’ (Cheng, 2011, pp. 593-594). Though the Civil Examination had been abolished since early 20th century, the University Entrance Examination ‘*Gao Kao* 高考’ in mainland China resembles the Civil Examination that heavily impacts the educational system and students’ learning modes. Students are expected to memorize standard answers and refrain from disagreement with their teachers since it is not respectful to do so. Generally speaking, such an education system fosters conformity, and an external locus of evaluation rather than individual self-expression, creativity, critical thinking and internal locus of evaluation, the latter being more permissible in a Western culture (Cheng, 2011; Wang, 2010). In class, Chinese students tend to keep silent to achieve self-protection, or to show that their views are in harmony with the majority

(Liu, 2013). Similarly, East Asian students prioritize group harmony and collectivism, and suppress individual self-expression, critical thinking and creativity (Laungani, 2004).

As a Chinese studying in a Western country, I was very lost in relating to the new authorities—my tutors, not knowing if I should agree with them because what they introduced to me was drastically different from what I was taught.

Pent up emotions in a nation with many traumas

Lim et al. indicate that there are 100 million of the population in China who suffer from mental health illness, and a high suicide rate of 20-30 per 10,000, compared to the world's average rate of 14 per 10,000 (2010). The highly competitive education system and the immigration from rural areas to urban areas contribute to immense psychological stress in people. In contrast to Chinese people's reservations in expressing their emotions, EFT founder Leslie Greenberg revealed that the Chinese trainees manifested the most intensive emotions in training compared to their counterparts in other parts of the world (EFT Level 2 training, 2021, Shanghai). Dr Greenberg posits that it could relate to the prevalence of relational traumas, such as left behind children phenomenon, meaning parents migrate to larger cities to work while children were left behind to be taken care of by grandparents or relatives (Mu & Hu, 2016). In my family of origin, because both of my parents were working, my siblings were looked after by my grandmother in another town while I was looked after by nannies when I was a baby.

Additionally, Chinese people endured multiple national traumas, especially after the First Opium War in 1840 (Cao & Sun, 2010; Clements, 2019). The First and Second Opium Wars were fought between the Qing dynasty and Western countries in the mid-19th century. In each war, the European countries who were equipped with modern army technologies won over the Qing army. Subsequently, the Qing government was forced to grant favourable business concessions, monetary reparations and territory to the Westerners.

Following the two Opium Wars, China was invaded by the Japanese during World War II. Both my parents experienced the invasion. My dad witnessed Japanese soldiers killing a gate guard when he was young. My mum's family were victims of the Nanjing Massacre, a holocaust in which 300,000 civilians were killed (Chang, 1998).

After World War II, China went through a civil war during 1945-1949 when millions of non-combat civilians were killed (Cao & Sun, 2010; Clements, 2019; Rossabi, 2014) and the Cultural Revolution during the 1960s-70s when records of historical legacies were banned and destroyed (Chang, 1991).

The Chinese history books term the century after 1840 as the humiliation century (Cao & Sun, 2010; Clements, 2019), stressing the importance to develop science and technology to prevent China from being bullied by foreign forces, while 'shame' and past trauma were important motivators for developing economy and technology (Higgins et al., 2008; B. K. Lim & Lim, 2013; Yeo et al., 2013).

Those historical traumas affected Chinese in many layers. One possibility is that the 'shame' driven approach parallel with common parenting strategies may add an extra layer on an individual's inner-critic. Another possibility is that people's tendency to 'worship' science and technologies and take in Western rational thinking further pulls people away from holistic traditional ways of handling body, mind, soul and relationships. I grew up as a person who became task-oriented with little knowledge of my inner needs.

The anxiety-driven environment can provide opportunities for people to seek meaning and help, in the example of myself, from religion and spirituality. The Chinese Christian population has been increasing consistently over the years since China's open door policy and economic transformation in 1979 (Chen, 2006; Wu et al., 2017). There are approximately 23.05 million Chinese Christians in China in 2013 (Wu et al., 2017) and an estimation of 25%-32% of the Chinese in the United States are Christians (Chen, 2006). However, how Christian spirituality impacts

Chinese Christians' mental health or relationships is understudied (Lu et al., 2013; Wu et al., 2017).

2.2.2 Christian's attitude to experiences and emotions

I had been caught in the middle of an ongoing debate on whether one should follow tradition (e.g., the Bible) or experience (e.g., being led by the Spirit). Many churches fall in the spectrum between a charismatic type, which emphasizes the experiences of being led by the Spirit with less need for structures, and another pole of evangelical type, which emphasizes tradition and legalistic submission to the Bible and pays little attention to the power of the Spirit (Fyall, 2007). Person-centred theorist Thorne (2003) is against the practice of following the rigid 'human formulation (albeit divinely-inspired) of a certain stage in the process of God's revelation of Himself rather than risking the leap of faith' (by trusting the Spirit) (p. 56). He argues against a judgmental fundamentalist stance some churches present which does not consider the individual's experience and context (p. 65).

After my counselling training, I agree more with the scholars' belief that experiences are the foundation of knowledge proposed by philosophers, theologians and therapists such as Lonergan (1973), Buber (1958) and Thorne (2003). A few more examples are listed here: C. S. Lewis (1955) remarks 'Doctrines are like maps...based on the experience of hundreds of people who really were in touch with God' (p. 131), indicating the limitation of doctrines despite their significance, and their origin from earlier experience; Morimoto argues that experience is essential in dialogue with scripture and creed, cumulatively redefining Christian tradition and practice, which is a dynamic dialogical view (2011).

It is not uncommon for me to hear church teaching judging 'negative feelings' or encouraging a suppression of them, particularly 'anger' or 'jealous' as sinful emotions (Noffke & Hall, 2007; Thorne, 1991). There is also a calling for denial of 'body', 'flesh' or 'self' (Walker, 1971). As a result, I often observe Christians equating self-love with selfishness or narcissism. A non-believer course-mate

commented that Christians have more rules as he experienced from his Christian mother. My personal experience and work with Christian clients made me realize that as well, as if Christian believers often have an extra layer of conditions of worth (COWs) preventing them (including myself) from freely experiencing. I began to be concerned for and then wanted to challenge those conditions of worth in my research.

2.2.3 Christian's view on conversation with God

Dallas Willard (2012) is a Christian scholar who holds a relational view in conversation with God. He explains common ways of how God speaks to us, for example, through written words, other human beings, our own thoughts and feelings, nature, and through dreams or visions. He argues that verbal communications are powerful, using the example of a king's command, and saying the world is not running only mechanically or materially but rather through relationships. Willard's relational view is in line with both my person-centred and relational psychodynamics perspectives as in the realm of relational paradigm.

Willard discusses common myths among Christians about conversation with God. Firstly, people do not usually expect prayer to be conversational. The second obstacle according to Willard is the seeming unreality of the spiritual life: is it scientific?

The third obstacle is the belief that the Bible is sufficient. Willard argues that the Bible is God's written Word but God's Word is not only the Bible. On top of how God speaks generally, it is logical for Him to speak personally because we are all unique and He is personal too.

The fourth obstacle is Christians' distrust of their own thoughts or experiences as there is an emphasis on God's view of things being different from ours. Willard (2012, p. 102) argues:

Of course, there is an important point in all of this that stresses the difference between God's view of things and the view of the normal person apart from God. But this point must not obscure the simple fact that God comes to us precisely in and through our thoughts, perceptions and experiences and that He can approach our conscious life only through them, for they are the substance of our lives.

According to Willard, though God could choose to respond to people in supernatural ways for special difficult conditions, He speaks more to people in 'normal' ways such as in our thoughts or through other people. Individuals have an opportunity to learn to identify the quality of His voice just as we would identify another person's voice.

Willard's book which explains the common ways and obstacles of hearing from God in a conversational way verifies my communicative encounters with God (see more from the following chapters), being a rare source of guidance and support to me during the research.

2.2.4 Chinese Christians' attitudes to emotions, relationships and conversations with God

Chinese Christian groups are influenced by both the Chinese culture and religious teaching in their general attitude towards emotions and experience.

Chinese Christians show a tendency towards suppressing unwelcomed personal experiences such as emotions or desires in order to please God, avoid bringing shame to God or incur His abandonment. For example, one of the interviewees said 'We should give good testimonies on earth [through the way we live, so that we] do not make God ashamed. [We should] practice not to be angry...' (Lu et al., 2011, p. 132). Another interviewee says, 'I will seek God's will, whether or not this is God's pleasure, rather than whether I myself like it or not' (p. 142). Wu et al. (2017) find that general happiness indexes among Chinese Christians are not superior to those of non-Christians, which is contrary to prior research with non-Chinese Christian

groups. The authors explain that the Chinese Christian might incur shame and guilt which offset their happiness, in their fear of God's abandonment or punishment if they fail to do what Bible tells them to do. From my perspective, this explanation is consistent with the shame and guilt of Chinese culture, and how parents use shame to control their children (Higgins et al., 2008; B. K. Lim & Lim, 2013; Yeo et al., 2013).

In Lu and colleagues' investigation on how faith embraces traditional Chinese values and thus influences many Chinese families who 'are also exploring, transitioning into, or striving to "live out" a new faith in a new land' (the United States) (Lu et al., 2011), reveals that many of those Chinese Christians who did believe in the Christian God did not 'know who He was' before they immigrated to the United States. In another word, they knew attributes of God but did not feel a relationship or connection with Him (p. 130). It seems that the overseas Chinese adopt a more relational theology in a Western country in that they report connecting with God in a more personal way. However, they still show a tendency of complying to a church teaching by suppressing their thinking or feeling process. For example, individuals or couples would proclaim, 'We would not address divorce easily. This idea cannot emerge into my mind' (p. 136). In another research, an interviewee went to her room to pray whenever a conflict arose between she and her husband. The strategy she learned from others after she became a Christian was shown effective in that she had peace after her prayer and felt no need to argue (Son et al., 2018, p. 655). Nevertheless, I agree with researchers' concern that by adopting teachings or strategies rigidly which were effective in the short term, in the long run the pray-er might develop a passive fatalism or dependency on God to do the work for them rather than developing personal maturity (relationship to self) (Lu et al., 2011) or genuine interpersonal conflict management skills and dealing with complex relationships in an organic way.

Though scholars assert that it would be harmful if doctrines were misinterpreted or misapplied, and its potential for relational abuse in the example of male headship (Lu et al., 2013, p. 238) and attitude to sexual feelings (Wyatt, 2014) , there is little

literature investigating how doctrines can be examined, deconstructed and reconstructed according to personal context or experiences among Chinese Christians. A 10-year study of Christian church's support for domestic violence victims showing churches' marginal improvement in willingness to help victims leaving abusive relationships (Zust et al., 2018) implies the lack of such organismic inspection of doctrines among non-Chinese Christian churches, which I suspect applies to Chinese churches as well.

In a focused group interview I conducted prior to this doctorate project, one Chinese Christian shared that she did not enjoy prayer as she enjoyed conversation with people because God did not communicate with her conversationally. An answered prayer in a week was a nice surprise for another interviewee. A third interviewee was not able to accept the good feelings after his prayer as he thought he should not believe his own experience but rather in Bible verses. I suppose that the obstacles Willard (2012) discussed for people to have conversation with God among Christians are applicable to Chinese Christians too.

Based on the above review I observed two contrasts. Firstly, the population of Chinese Christians is large and is growing but research on how Christian spirituality impact their mental health is sparse. Secondly, there are pent-up emotions among Chinese people due to historical trauma and current drastic social economic changes and yet Chinese Christians are often bound by extra layers on top of possible personal trauma, preventing them from freely expressing their emotions, influenced by both cultural and religious teaching. The first contrast shows it is significant to conduct research on Chinese Christians. The second contrast reveals how hard it could be for them, and I am one of them, to be 'set free' from the bondages, and how conventional approaches may not be sufficient to help those spiritual clients. Therefore, there may be a necessity for them (including me) to seek help from both secular therapy and God, and/or their integration.

2.3 Literature review on the integration of spirituality and counselling and psychotherapy

Since research about the integration of prayer and psychotherapy is very scarce, I have extended the literature review on the Christian spirituality and psychotherapy. The purpose of the literature review is (1) to verify my hunch that including prayer or Christian spirituality in therapy can be ethical and practical; (2) to understand how other therapists apply the integration so that I can learn from them; (3) to understand what has been done and what has not been done so that my research will fill the gap.

2.3.1 Significance of including spirituality in counselling and psychotherapy

Despite the fact that most founders of psychology viewed spiritual and religious issues as significant and apparent facets of human experience, a general anti-religious atmosphere filled the field, with most practitioners objecting to the idea of including such issues in psychology during the 1980s (Gubi, 2008; O' Grady et al., 2012; Van Manen, 2014).

The importance of the inclusion of spiritual issues received more attention in the late 20th and early 21st centuries. Just like EFT is part of the integral approaches that emerged in the so called 'third wave' in the development of psychotherapy, whereby the recognition of the significance of emotions in therapeutic change is boosted by neuroscience discoveries, more research and therapies are becoming focused on meeting the needs of religious clients by integrating psychotherapy and spirituality since multiculturalism is seen as the 'fourth force' in psychology (Clark, 2012; Hall & Hall, 1997; Koenig, 2018; Peteet, 2018; Tan, 2011).

As I am trained in person-centred approach with psychodynamic perspectives, I paid specific interest in those two schools' perspective in the integration of spirituality with psychotherapy.

Psychodynamic perspectives of spirituality and therapy

The psychodynamic tradition seems to focus more on the relational aspect of spirituality. Freud generally perceives a patriarchal God of law and conscience and ‘guilt-engendering’, and ‘a religion with patriarchal culture’ and a ‘patriarchal deity’ (Jones, 1996, p. 16). He also says religion originated from ‘a longing for the father’ (p. 13), infantile fusion or illusion (p. 85). While I experienced all the above, I have reservations on Freud’s assertion that illusion and reality has a hard distinction just like sickness and health while religion is unhelpful.

Contrary to Freud’s anti-religious stance, both Fairbairn and Winnicott adopt a welcoming relational theology concept in line with their ontological and epistemological beliefs on a relational psychoanalysis theory (Jones, 1996).

Fairbairn’s theory consists of clear religious themes, such as creation, fall and redemption, and comparing the ‘love of God’ and the therapist’s love (Hoffman & Hoffman, 2014). Theorists after Fairbairn ‘contributed the following presuppositions: (1) science and religion are complementary disciplines, (2) personal human relations derive from a relational first cause, (3) the basis of social life is loving relationships, (4) humans seek relationship, not drive discharge’ (ibid, p. 73). According to Fairbairn, a person’s personality is a combination of object relationship, otherwise known as internalized interpersonal experience. He argues that the internal representation or Internal Working Model (IWM) of God are carriers of early relationships (Jones, 2007).

Based on Fairburn’s internal object model, Rizzuto researched into an internalized God image, which is about relationship (1979). Her research implies that the construction of the God image is far more profound, and could not be transformed by merely cognitive means such as preaching, debating, or reading. God image is ‘a psychological construct concerned with how an individual feels toward God, and how they feel God feels about them’ (Grimes, 2007, p. 12).

Winnicott (1971) proposes the development of the third place by using transitional objects. Linking external and internal reality via the transitional experience

surpasses the clear distinction of objectivity and subjectivity, for it is an 'intermediate area of *experiencing*, to which inner reality and external life both contribute' (Winnicott, 1971, p. 2). Inner world is both found and created, experienced and made sense of. Following Winnicott's proposal of a third place, Spero (1992) argues that experiencing God is the third place of internal God image and external God. Spero believes the infant has a preverbal sense of God's existence caused by the movement of an external God object. The primordial awareness is similar to Bollas' (1987) 'unthought known', which are the bodily sensations, primitive smells, and sights associated with objects, and the experience of interacting with them, that the child incorporates before the emergence of mental representation and language. Contrary to Rizzuto (1979), Spero does not support that God experience is only internal, rather he argues that Christian believers relate to God in the same way as they relate to their parents (Spero, 1992). I personally agree more with Spero's view that God experience is internal, transitional and external through my own experience and theoretical perspectives, essentially a dialectical/dialogical relationship with Him.

Kirkpatrick and Shaver (1992) note that people who have a secure attachment style tend to have a closer relationship with God compared to people who have an insecure attachment style, which they named as the correspondence model (as cited in Grimes, 2007). However, follow-up research indicates that insecure individuals report more reparative experiences from God over the years and become securely attached to God, forming a so-called compensation model (Kirkpatrick, 1997, as cited in Grimes, 2007). Their conclusions support my hypothesis that individuals carry their relational pattern into the relationship with God and yet this relationship is evolving and may provide a reparative experience. Clark (2012) illustrates how the maladaptive God image affects the client using clinical cases from a wider perspective of spirituality, providing evidence that rigid or extreme religious teaching or practice has an adverse impact on a person's God image and their view of self and others.

Counted's in-depth interviews reveal how Christian youths describe God as a wiser and stronger attachment figure, a secure base for them, who would respond to their internal conflicts (2016). Their findings support my hunch that God may be included as a secure attachment in the therapy process.

Person-centred views of spirituality and therapy

West points out that several famous therapists embraced spiritual aspects of life when they grew older (West, 2000). One of them is Carl Rogers, who went through a journey of moving away from his Christian life and then acknowledged the spiritual realm in his later life (Thorne, 1998, p. 37).

Referring to a group member's recount of a spiritual sense in the group, Rogers (1990, p. 138) writes:

I realize that this account partakes of the mystical. Our experiences, it is clear, involve the transcendent, the indescribable, the spiritual. I am compelled to believe that I, like many others, have underestimated the importance of this mystical, spiritual dimension.

Both West (1997) and Thorne (2002) describe PCT therapeutic conditions including spirituality. Several PCT concepts are believed to be related to spirituality. The first concept is that of relational depth. Mearns and Thorne suggest that entering into relational depth could potentially open up realms of profound connectedness which enable change of a client's self-sense and sense of hope and meaning (Thorne, 1991). In another research on relational depth, a sense of spirituality or magic is one of the characteristics in a relational depth encounter (Wiggins et al., 2012). Another concept is 'trusting the process of therapy'. For some counsellors, 'trust the process' is to 'trust God' (Gubi, 2008, p. 99). Thorne (2002) cites Mearns and Thorne (1988, 1999, 2000) and argues that trusting the process of therapy facilitates a deep relational encounter, which is transformative as a result of touching the core experience of the client. West (1997) lists Rogers' 'presence', Thorne's 'tenderness' and Buber's 'I/Thou' as spiritual terms.

Additionally, Thorne links the goals of therapy with spirituality, furthering Rogers' theory of personal growth by asserting that a human being is undergoing an infinite process of becoming, and 'we can hasten the process towards our own divination – towards, if you will, mystical union with God – or we can retard it or even deny it completely' (Thorne, 2003, p. 55).

Finally, Thorne (2002) asserts that therapy can be perceived as a spiritual journey when counsellors are secular priests, while the mystic, unknown and intimate aspects of counselling are beyond psychological language. He radically raises the idea of embodying the core conditions to the extent of bringing in God Himself and pointing to God in therapy.

Like Thorne (2002), West (2000) proposes the future of therapy as a spiritual activity or a faith journey. West reminds us that spiritual healing has a long history, and it can continue to facilitate the client's therapeutic process if applied appropriately (West, 2005), while 'We need more counsellors who are both highly competent as counsellors or therapists and sensitive to the transcendent and spiritual dimensions of human existence' (Lyall, 1995, as cited in West, 1998, p. 373).

In summary, psychodynamic perspectives provide a concept in human-divine relationship, especially in terms of attachment and God image theories while person-centred perspectives focus on spirituality being an extra dimension of therapeutic conditions which can be applied in therapy.

From above mentioned literature, I draw a conclusion that integrating spirituality in therapy can be ethical, beneficial and necessary for religious clients. I am influenced by both PCT and psychodynamic perspectives in developing a relational theology and welcoming stance in integrating spirituality in therapy for self and clients.

Nevertheless, only one third of the training programs provided training in spiritual and religious issues while only 23% of faculty members indicated awareness of such needs for training (Schulte et al., 2002, as cited in O' Grady, Worthington and Aten, 2012). Both West and Gubi describe difficulties for counsellors who wish to discuss spiritual related issues with their supervisors (Gubi, 2007; West, 1997, 1998),

raising the need for supervisors to be educated and prepared for spiritual matters brought up by their supervisees. I agree with West and Gubi's view that there is a need for strengthening education on spiritual matters in counselling training, and I think more research effort should be focused on the topic to back up such needs.

In the following section, I will review existing research on the clinical integration of spirituality and therapy.

2.3.2 Clinical integrations of spirituality and therapy

Implicit and explicit integration

Tan (2011) suggests clinical integration of counselling and Christianity to be implicit and explicit. He asserts that those integrations can be viewed as two ends of a continuum of integration. Implicit integration consists of the therapist praying for the client on their own or silently, respecting a client's religious beliefs, and working with religious issues raised by the client, whereby explicit integration directly includes spiritual goals and overt use of spiritual resources and techniques such as prayer and Scriptures. The client's need and the therapist's training are two of the factors to determine where along the spectrum the therapist should practise, according to Tan (2011).

Due to my training in non-religious counselling approaches and my position as a lay Christian, my intention is to explore Christian spirituality in a relational term to psychotherapy and counselling, so that both believer or non-believer practitioners might benefit from the research findings (Schreurs, 2006) in their working with Christian clients, or clients who have a relationship with a divine Being. I am starting the research about my relationship with God from my human experience and perspective (Gubi, 2008; West, 2004). In doing so, I identify myself working more from an implicit way of integration, such as work with religious or spiritual issues raised by the client as defined by Tan (2011) in this project despite my overt use of prayer.

Therefore, my literature review focused on the integration of non-religious counselling and psychotherapy approach with Christian spirituality and prayer. I did not include other branches of related areas in my literature review, such as Christian psychology, Christian counselling, spiritual guidance, and inner healing. These branches usually belong to the categories of explicit integration (Tan, 2011) in which the counsellor has to be a Christian. For example, Christian psychology emphasizes the significance of the Scripture (Mcfee & Monroe, 2011; Tan, 2011), while the practitioners have to be Christians. I deem them as different streams of practice (Tan, 2011). Nevertheless, I have touched on some of those areas (e.g., inner healing prayer) where they were relevant to my exploration.

Various approaches and the integration

Cognitive Behavioural Therapy (CBT) approaches are among the most reported in publications to work with spiritual issues. It is commonly believed that CBT is appropriate to help clients with strong religious orientation because the clients' religious views influence their generalized views. For example, Tan (1987 and 2007) discusses approaches to changing resistant assumptions and incorporating Christian beliefs in cognitive restructuring (as cited in Tan, 2011). Deusen and Courtois present a case study on treating a child with complex trauma, integrating Christian spirituality and trauma-focused cognitive behavioural therapy (TF CBT) with a good outcome (Deusen & Courtois, 2015). Plante proposes that therapists can adapt 'the examen', a five-step daily prayer as a cognitive behavioural therapy tool in clinical work with both religious and nonreligious clients (2021). Tan (2011) proposes a seven-step inner healing prayer as part of a CBT approach in treating trauma (refer to Section 2.4.3 for further discussion). CBT approaches emphasize changing the client's cognition with the application of spiritual techniques such as prayer or citing the Scriptures.

A second large group of researchers focus on the integration of relational psychodynamic approaches to treat people's God image (Garzon, 2007; Grimes, 2007; Noffke & Hall, 2007). They emphasize an experiential intervention with affective natures in order to enhance the therapeutic effect by accessing and

modifying implicit memories that are stored in the right brain structures. For example, Noffke and Hall (2007) present a clinical example of how the therapist's facial expression of compassion contributed to a positive shift in the therapeutic relationship when the client was narrating a painful experience. Then the client was helped to express his anger, and subsequently experienced improved relationships with others with authentic expression of emotions. The authors adopting a 'bottom up' approach believe that the therapist functioned as a good attachment figure initially (a good transient object) to help the client to form a safer relationship with others and God.

From PCT, Thorne (2002) demonstrates a clinical example in which he upheld his clients in mind for a few minutes in silent prayer each day. The prayer was proved to be lifesaving for a client even though the therapist prayed on his own. Thorne's case is an example that prayer can be applied as the therapist's resources to help the client with the therapist acting as a secular priest.

Another group of researchers look into the possibilities of translating secular techniques for Christian communities. Jones et al. investigate a Christian accommodative mindfulness approach in treating Christian clients who had shame, anxiety and depression issues (2021). The approach is found significantly effective with decreased depression, anxiety, and shame and increased resiliency measures in the small group of clients.

Three other publications are related to EFT. The first one is a collaboration between Sue Johnson, founder of Emotionally Focused Couple Therapy (EFCT)—a close relative of Emotion-focused Therapy (EFT)—and Kenneth Sanderfer, an experienced EFCT Christian therapist (Sanderfer & Johnson, 2016). The book aims to introduce a non-religious psychotherapy approach to the Christian community.

The second one is Mcfee and Monroe's exploration on the translation of Emotion-focused Therapy into a Christian Psychology, for example, phrasing emotion evocative techniques as everyday intimate relationship skills. They hope the empirically proven effective approaches and techniques might be accepted by

Christian counsellors. Interestingly, the clinical examples they employed in the paper are all limited to Sue Johnson's EFCT rather than Emotion-focused therapy (Mcfee & Monroe, 2011).

The last paper on EFT and Christian spirituality is written by Hardin who advocates a more radical view on creating a Christian emotion-focused therapy (2014). He appraised EFT philosophy from a Christian perspective, supporting the significance to bring the spiritual dimension to care for deep soul wounds. Yet I think Hardin shows a lack of understanding of EFT's dialectical constructivism, criticizing that it 'focuses almost exclusively on the temporal experience of the client to the exclusion of the eternal'. On the contrary, from my perspective, dialectical constructivism describes a dynamic interaction between self and others which is ongoing, living and not limited to time (Elliott et al., 2004).

From the above-mentioned literatures, I conclude that integrating Christian spirituality in counselling and psychotherapy is doable and can be beneficial. However, I have found no research based on a client's perspective of the integration from the mainstream counselling field. I have also discovered that there is no research on the clinical integration of EFT and spirituality.

2.3.3 Ethical application of prayer in therapy

Despite the benefits of integrating Christian spirituality in therapy, there are ethical pitfalls such as using prayer as a defence or to avoid pain, or when therapists impose power or value onto the client (Gubi, 2008; Hall & Hall, 1997; Tan, 2011). Since religion can be a source of comfort and/or distress for a client (Walker et al., 2015), Schreurs (2006) stresses the importance of adopting the client's religious frame of reference while working with the client on spiritual issues which is a practice that is commonly acknowledged (e.g. Gubi, 2008; Walker et al., 2015). It requires therapists' sensitivity when spiritual techniques such as prayer is applied in clinical settings, including to receive consent from the client and to be aware of the risks of using prayer in practice.

2.4 Trauma recovery

2.4.1 Why research trauma recovery?

I slip into the domain of trauma because I had never connected myself as a trauma client before the research probably because of emotional blocks and dissociation. My personal and professional experience made me realize how one may lack of awareness and yet trauma could be very near to us.

Paivio and Pascual-Leone (2010) categorize two broad types of traumas, (1) Type I trauma which associates with single incidents, such as a car crash or a single attack; (2) Type II trauma which associates to recurring experience of violence or neglect. Type II trauma is also termed as relational trauma or multiple complex trauma.

Amongst individuals seeking psychotherapy, an estimation for a history of childhood trauma is up to 90% (Pilkington & Kremer, 1995, as cited in Paivio and Pascual-Leone, 2010). The high percentage of childhood relational trauma strongly implies that early trauma affects those clients negatively in the long-term. Researchers argue that exposure to early trauma increases the risk of an individual's subsequent victimization while victimization or violent behaviour continue their influence through trans-generational transmission of trauma and parenting difficulties (Paivio & Pascual-Leone, 2010). They conclude that majority practitioners will need to be prepared in treating clients who are disturbed by older or newer traumas. Though Pilkington & Kremer's research was based in the United States, I believe it is the same among Chinese communities considering the nationwide historical trauma and current huge social economic changes as I discussed in Section 2.2.

In short, it is important to research trauma recovery because trauma is prevalent among counselling clients while trauma therapy is complicated and challenging.

2.4.2 Trauma theories relates to EFT

Trauma has been widely researched and written about with a huge body of literature. It is impossible for me to list many but a few here. Van der Kolk proposes knowing through embodied experiences, emphasizing the integration of the self through reclaiming ownership of body and mind (van der Kolk, 2015). Rothschild works to establish emotional safety progressively with clients (Webster, 2019). Schore (2003) uses the perspectives of neuroscience, child psychiatry and attachment theory to explain that exposure to trauma in childhood is associated with delayed brain development, which affects cognitive and emotional development.

Paivio and Pascual-Leone (2010) propose an emotion-focused therapy for complex trauma (EFTT), an integrative approach based on emotion theories, affective neuroscience, psychodynamic theories, narrative theories and trauma theories. EFTT is a short-term approach for childhood trauma which requires the client to have the ability to form a therapeutic alliance in a short time.

Paivio and Pascual-Leone (2010) posit that multiple complex trauma affects individuals in three interconnected issues:

- 1) Feeling fear and powerlessness as a result of exposure to early traumatic event/events (refer to my intense anxiety in Chapter 5);
- 2) Holding negative self and other concepts originating from painful attachment experiences (refer to my beliefs that ‘I am bad’ and ‘others will reject me’ listed in Table 3, Chapter 3);
- 3) Applying emotion avoidance as habitual coping mechanism (refer to my emotional block in Chapter 4 and dissociation in Chapter 5).

Webster (2019) has developed emotion-focused psychotherapy (an Australian branch of EFT) by integrating psychodynamic theories to cater for the needs of long-term clients. In contrast to Greenberg’s emphasis only on the real relationship between the client and the therapist, Webster utilizes both real and symbolic relationship (transference). She further develops inner child work including body touch when the client regressed to a child status with ‘childlike mannerisms,

expressions, speech and other expressions' and states that the therapist should act like 'an affectionate mother' (p. 19). She argues that counsellors need to pay attention to the client's emotional age when they re-live childhood trauma.

According to attachment theory, caregiver-child relationships play a central role in children's development of a healthy sense of self and other, as well as emotion regulation capacity (Bowlby, 1988). The self and other representations, including perceptions and beliefs regarding self and others or conditions of worth, are formed in caregiver-child relationships, which then guide actions, emotions and cognitions in a person's life. Individuals learn emotion regulation skills in caregiver-child interactions (Bowlby, 1988; Schore, 2003), through 'emotion coaching' by an empathic responsive caregiver (Greenberg, 2015). Without sufficient 'emotion coaching', individuals develop emotion avoidance strategies such as numbing, suppressing and more extreme strategies like dissociation (Greenberg, 2015). Self-

I adopt EFT trauma theories and techniques, such as Paivio and Pascual-Leone (2010)'s imaginal confrontation and memory work, and Webster (2018)'s inner child work.

The two main mechanisms in EFT for treating trauma are emotional co-regulation in a relationship and emotion processing. Firstly, trauma is addressed through re-experiencing the traumatic experience in the presence of an empathic and safe therapist (Paivio & Pascual-Leone, 2010; Webster, 2019). The clinician sensitively attunes to the client's feelings in order to co-regulate the client's dysregulated affective states. When the client's deepened emotions are shared with someone who can contain them, they can better sustain the painful feelings and build up the capacity to regulate them subsequently.

The second main EFT mechanism in treating trauma is emotion processing. Early trauma causes imprints in the child's emotional brain and will function automatically throughout their life unless they find a way to change it (Schore & Sieff, 2015). Changes are made through emotional arousal in contact with 'here and now' and subsequently emotion processing to deepen emotions, access trauma

memories and transform emotions and narratives (Paivio & Pascual-Leone, 2010). Avoiding trauma memory potentially leads to stagnation, while going there too quickly might cause re-traumatization. The therapist helps the client to re-experience the original trauma in a bearable dose and learn to regulate their emotions without a need to dissociate.

2.4.3 Prayer as a spiritual technique adopted in trauma therapy

As I mentioned in Chapter 1, my interest in integrating prayer in therapy stemmed from a personal taste of its power. Many researchers argue that prayer used appropriately in a counselling context can be transformational and benefit mental well-being (Gubi, 2008; Hall & Hall, 1997; S.-Y. Tan, 2011). Gubi (2008) lists possible benefits of prayer in a counselling context, such as achieving hypnotic suggestion, de-automatization of perception and cognition and a lowering of arousal and desensitisation. Counsellors can pray for themselves and the client before, during and after the session, either silently or aloud. He contends that prayer may be used when counselling the spiritual client because ‘prayer has similar properties to some psychotherapeutic interventions’ (p. 18).

Here, I will investigate using prayer as a spiritual technique particularly in trauma therapy.

Hall & Hall (1997) suggest two forms of prayer that could be applied in therapy, one being the contemplative prayer and the other being the inner healing prayer. Finney and Malcony define contemplative prayer as ‘a particular form of Christian prayer in which one gives one’s full attention to relating to God in a passive, non-defensive, non-demanding, open way’ which has meditative effects (Hall and Hall, 1997, p. 93).

The inner healing prayer is described as ‘a form of prayer designed to facilitate the client’s ability to process affectively painful memories through vividly recalling those memories and asking for the presence of Christ (or God) to minister in the midst of this pain’ (Garzon & Burkett, 2002). It is believed to be appropriate for

treating memory for victims of childhood traumas such as sexual/physical abuse or abandonment.

Tan (2011) proposes an integration of CBT and prayer healing approach to heal memories of childhood traumas that still afflict the client. The CBT inner healing approach is similar to EFT technique such as imaginal re-entry (refer to Chapter 6), in which the therapist facilitates the client to walk back to the past event and re-experience it in the imagery presence of Jesus. In a hypothetical transcript, Tan shows a successful clinical application of inner healing prayer in which the client sensed Jesus' presence and company—a 'deeply touching and healing experience'. The client was able to forgive her father after hearing Jesus gently telling her 'to let go any resentment' she may have toward her father with a new perspective of her father's love (p. 349). In Tan's example, prayer can be used as the client's resources for emotion regulation with soothing effect, memory revelations, and bringing in God's companionship in trauma re-entry.

2.4.4 The rationale to integrate EFT and prayer in trauma therapy

Paivio and Pascual-Leone (2010, p. 21) assert that 'effective psychological treatment for prolonged exposure to complex interpersonal trauma must be multidimensional and integrative'. They point out major challenges in trauma work: (1) the client might lack the relational/emotional capacities which is necessary for trauma work, for example, to form therapeutic alliance; (2) they may have difficulties to access or regulate their own emotions; (3) they may have difficulties in accessing trauma memories.

I have a sense that prayer may enhance the client's emotion regulation, considering its soothing effect, memory revelations, and potential in bringing in God's companionship as demonstrated in Tan (2011).

On the other hand, there are limitations in Tan (2011)'s CBT approach which involves a seven-step prayer healing model. Tan indicates that 'inner-healing prayer does not always go so well' because 'some clients may have difficulty recalling their

painful memories in a vivid way in imagery' (p. 349). He did not discuss how a therapist can facilitate the client to access their painful memories and what contributes to different therapeutic effects while applying his seven-step of prayer. Freud criticises prayer as 'routine and mechanistic, through which the pray-er attempts to cheat the laws of nature, or prayer that is construed as a form of begging favours of a benevolent Divinity' (Gubi, 2008, p. 36). His criticism flags out that therapists need to be aware and differentiate healthy prayers from unhealthy prayers, for example, healthy prayers are authentic, open, spontaneous, and relational while unhealthy ones are instrumental, ritual, and rigid (Paine & Sandage, 2015). Maybe helping a client to pray in an authentic and relational way makes a difference.

My hunch, stemming from my own experience, is that EFT can help the client access and connect with their emotions, resulting in authentic prayers and a strengthened relationship with God, while emotional arousal leads to connection to implicit memories. Subsequently, the client may experience a therapeutic change when they are more connected with their emotions and with God.

2.5 Research gaps and the research question

Rice (1992), one of the founders of EFT, describes her observations on the client's resources in effective therapy, leading to exploration on how a therapist could work actively to tap on such resourcefulness. In my personal view, a safe attachment or good relationship either internal or external could be valuable resources that a client may have. I understand many EFT practitioners improvise inviting God into the counselling room, sometimes as a significant other, when they facilitate chair works (personal communication with some EFT counsellors) and I have experienced such a practice as a client. I have also discussed that EFT and Christian prayer may complement and strengthen each other. Yet there is no research to-date that investigates the process of bringing God into EFT counselling room.

I believe this research is the first that will bring together EFT and Christian spirituality particularly prayer in clinical application. From my review of the literature, I come to the conclusion that there is no other research that creates this contrast.

Additionally, from the literature surveyed relating to the integration of psychological intervention and Christian spirituality, the majority of the qualitative research focuses on strategies rather than therapeutic process (Gubi, 2008) while writing from the therapist's perspective. This project is a rare exception in providing a client's perspective on therapeutic process.

Obviously, there is no integration of EFT and Christian prayer on Chinese Christian clients nor in the context of trauma work. Since how Christian spirituality impacts Chinese Christians' mental health or relationships is understudied (Lu et al., 2013; Wu et al., 2017), and Chinese populations are experiencing pent-up emotions due to historical trauma and current drastic social changes, this project would be a timely contribution to both counselling for Chinese Christians and/or in the field of trauma work. However, I think the study could potentially benefit non-Chinese Christians clients or clients who have other forms of spirituality.

These research gaps will be the focus of this study as I come to my research question:

What is the process of the integration of emotion-focused therapy (EFT) and Christian prayer in trauma recovery?

2.6 Conclusions

In this Chapter, I have presented an introduction of concepts on EFT and Christian spirituality and prayer to lay a foundation on main concepts used in this thesis. I then offered a background exploration on Chinese Christian's attitude to emotions and relationships with God. I have shown that it is significant to conduct research on Chinese Christians as this group of people are growing in their numbers while

related studies are sparse. I argue that Chinese Christian clients might be doubly bounded in emotions influenced by culture and religious teaching and hence they may require the help from both counselling and Christian spirituality.

Subsequently, I conducted a literature review on the perspectives of including spirituality in counselling and psychotherapy, followed by a survey on how therapists from various approaches include spirituality in their practices. Based on the literature survey, I assert that integrating Christian spirituality in counselling and psychotherapy can be practical, beneficial and ethical. Further, after having examined trauma theories particularly EFT theories in working with trauma clients and having studied an application of prayer in trauma therapy, I argued that EFT and prayer may be a good match in enhancing trauma therapy for spiritual clients.

From the above-mentioned literature reviews, I conclude that there is no research on the clinical integration of EFT and spirituality, nor in trauma recovery, nor exploring a client's perspective and process. Hence, this project is a novel study venturing into the new territory with a purpose to bridge those research gaps.

Chapter 3: In search of the research questions and methodology

路漫漫其修远兮，吾将上下而求索

The way ahead is long and has no ending; yet high and low I'll search

—ancient poet Qu Yuan

In this chapter, I will start with a discussion of my philosophy and methodology, a description of my journey in formulating the research questions, the process of developing my research methods utilizing therapy methods, followed by a discussion of the challenges regarding self-as-subject research, and finally data collection/analysis/presentation. These sections are interrelated and developed in a dialogical way, but they are presented in a sequential order for simplicity. Examples of prayer are included to give you (my reader) — a taste of this experiential qualitative method.

3.1 My philosophy

During the four-year stay in Edinburgh for study and research from September 2016 to August 2020, I have been experiencing the creative tension between the old me and a new me: the old one who brought a familiar home culture and upbringing and a new me developed in a foreign culture. I was torn between the positivism background I was previously educated in and the newly introduced post-modern ideology in Edinburgh.

In my formative years of education in China, knowledge was mainly fed to us (Cheng, 2011; Wang, 2010) and the examination system left me with little room to doubt the authority of the textbooks or authorities in charge. What made me successful academically was mainly due to a good memory and an ability to attune to what teachers or textbooks told me.

The strong non-directiveness and postmodern research philosophies in the University of Edinburgh were a cultural shock for me. I was almost drowned in a foreign 'sea' wherein I struggled to listen to the current authority which contradicted what I had taken for granted.

I was stuck in a position as a new investigator who lacked self-awareness and confidence in my internal locus of evaluation in a study which requires high self-awareness and relational skills. The progress of therapy and development as a person, are closely knitted with my personal development as a researcher and the progress of the research.

Searching for the Golden Mean, a Confucius concept I heard since young, becomes a theme running through all facets of this research or life. The Golden Mean which is also called *zhongyong* 中庸 means neither go beyond nor fall short and 'if people do follow the principles of Golden Mean, they can always remain unbiased and impartial, while at the same time, never going too far or falling short of what is necessary' (Li, 2020, p. 4). Confucius, who is an ancient Chinese saint, said it was difficult to walk the middle way because in order to do so he has a need to find 'a person who can stick to the middle way' (ibid). Hence, there is no easy solution to work with human beings, being constantly caught in the tension between emotion and cognition, arts and science, doing and being, task and relationship, deconstruct and (re)construct, doctrine and experience, Bible verses and God's living Word. Finally, the struggles and pains in the dialectical/dialogical construction of non-directiveness and the aim for efficiency and effectiveness have contributed to my current position. I believe clients are both agent and patient, and research needs both structure and flexibility in a disciplined relational stance (Elliott et al., 2004; Kramer & Stiles, 2015; Kvale, 1999; Rennie, 2000, 2004; Stiles, 2007).

3.1.1 Ontology

Ontology addresses 'what you see as the very nature and essence of things in the social world' (Mason, 2002, p. 14). Moustakas (1990) expresses the 'truth' seeking

passion throughout his book which resonates with me, even though I may not reach the 'truth' due to human limitations. Person-centred researchers have been using clinical recording to find out what factors or conditions are likely to contribute to therapeutic changes. For instance, Rogers used gardening as an analogy, proposing 'core conditions' to foster the client's growth. Though it is impossible to predict what happens in therapy as each client and therapist are unique, there is essence or likelihood of impact from various factors of the therapist's intervention (Elliott, 2002; Timulak, 2008b), like how 'most stars (including our sun) follow a common path' (Elliott & Greenberg, 2021, p. 43). On the other hand, 'Human freedom, will, and emotions, however, do not conform to the laws of physics' (Zimmermann, 2015, p. 30). Rather, the human interactions are so complex, multi-layered that unknowns and uncertainty are a common theme within the social context (McLeod, 2001).

In summary, I adopt an ontology that there are multiple 'realities', and subjectivities can be realities (Lonergan, 1973; Rogers, 2004). I also adopt a relational perspective of the reality about God (Jones, 1996). He is seen not a cosmos boss but a Person who can have a relationship with people (Willard, 2012). Hence, a human's subjective experiences of God can be a reality.

3.1.2 Epistemology

Prayer 1

How can I research about God as God is not a material thing?

I heard similar doubt from both Christians and non-Christians.

(I started to feel uneasy, puzzled. I wanted to cry).

Oh Lord. I think You are not only internal, but You are also external as well. You said in the Bible that You are a revealing God. Please help me to find and present my ideas and discoveries.

I sensed His compassionate presence and embracement.

I was soothed. Ideas came to me:

In counselling, therapists are using ourselves as tools. Our feelings, reactions, senses, intuition, inter-subjectivities can be used as therapy tools. Similarly, in this research, I will use myself—the researcher—my subjectivity, intuition, curiosity, honesty, interpretation as tools of research.

(Quote from my personal journal).

Epistemology concerns ‘the nature of evidence and knowledge’ or ‘concern the principles and rules by which you decide whether and how social phenomena can be known, and how knowledge can be demonstrated’ (Mason, 2018, p. 15). Firstly, I take the heuristic/phenomenological view that non-material things such as human experience are realities which can be known through our subjectivity (Giorgi, 2016; Moustakas, 1990; Van Manen, 2014). I also see a human relationship to God from a human experience perspective (Gubi, 2008).

Secondly, I adopt an epistemology termed as dialectical constructivism. Dialectical constructivism believes that the ‘fact’ we are coming to know is ‘a joint construction of the “things themselves” and one’s knowing process’ (Elliott et al., 2004, p. 36). Often, such dialogues can be interpersonal and/or intrapersonal, with tensions which could lead to creative meaning-making process.

Referring back to my question in the prayer on how we can know the God-related phenomenon, I argue that we can know God through conversation or prayer—a relational way of knowing. Jung says, ‘I don’t believe, I know’ (Thorne, 1998). This seems to echo the emphasis of the relational knowing. It is common to hear that Christianity is not a religion but a relationship with God, and God-human relationships has similarities to human-human relationships (Schreurs, 2006; Willard, 2012).

Contrary to a radical’ constructivism where reality is irrelevant, dialogical constructivism is an elegant balancing between relativism and realism (Rennie, 2000). It fits my concept of God who is both an internal and external reality (Spero, 1992).

Despite the similarities between God-human relationships to human-human relationships, God-human relationship should not be treated as just human-human relationship because God is both transcendent and immanent (meaning: God is active and in the world) (Buber, 2004; Lewis, 1955).

I argue that we can find God through inward searching as Rogers suggests that ‘if God were to be found the search must be inward’ (Thorne, 1998, p. 69). Rogers’ view coincides with Jesus’ declaration that He lives in His disciples (John 14:20b Holy Bible, NIV). From EFT perspectives, the ability to search inward is closely connected with relational abilities to self and others (Greenberg & Pascual-Leone, 2006).

Considering God’s transcendence, I posit that the condition for people to receive God’s Word is to adopt an attitude of love and humility (Carrera, 2005). By adopting the attitude of humility, ‘the knowing subject acknowledges God’s omnipotence, becomes receptive to His teaching, reduces the interference of his own personal preferences, preconceptions or prejudices, and ensures his openness to being corrected’ (Carrera, 2005, p. 53).

Hence, I assert that knowing God can be through search inward (self-dialogue) and search above (communication with God).

3.2 Methodology

3.2.1 Qualitative research methodology on counselling and spirituality

Qualitative researchers challenge doubts about research into non-material things, such as human experiences. Flyvbjerg asserts that quantitative and qualitative approaches are radically different and are suitable for different arenas, with qualitative approaches being the most powerful in social science, dealing with non-material things (2001). Social science studies ‘phronesis’ (practical wisdom) and it has a unique character of ‘double hermeneutic’ (Bondi & Fewell, 2016a).

According to Bondi and Fewell, in qualitative studies, our insider status can be used to paint a colourful, rich and exemplified personal experience of self and others. The vivid description could touch and impact readers in a powerful way.

Though research about communication with God or hearing from God is deemed as unscientific among researchers from the western civilization for the last several hundred years (Willard, 2012), many other researchers deem spiritual experience as basically human experience (e.g., Gubi, 2008) and hence they can apply qualitative research methodology on God-human interaction.

West, a prolific writer on integrating spirituality and counselling, introduces three qualitative methodologies that he employed in his research in the domain of spirituality and therapy (West, 2004). For example, he applied heuristic inquiry in his study of a group of counsellors' spiritual experiences relating to their clinical work (West, 1998).

Frohlich discusses how she applied an inter-subjectivity methodology to study the mystical experience of Teresa of Avila (1993). Other researchers employ case studies, interpretive phenomenological analysis or narrative approaches on clinical integration of Christian spirituality and counselling (Gubi, 2008; Hattendorf, 2014; Noffke & Hall, 2007).

On the theological side of research, Lonergan describes a process that is very similar to qualitative research methods in the human science area. He talks about the actualization tendency of human's ability to grow in wisdom or intelligence, which 'steers through all things' (Lonergan, 1973, p. 3), sometimes via long and difficult process similar to heuristic inquiry through sequence knowing by 'inquiring, understanding, formulating, then reflecting, weighing and marshalling the evidence, and finally to affirming and denying' (ibid, p. 9).

Hence, I conclude that though research into this spirituality is difficult, it is possible using qualitative research method such as heuristic inquiry (West, 2004) .

3.2.2 The choice of Heuristic Inquiry

Prayer 2

Lord, please help me to find a few smooth stones or shells in the vast ocean of knowledge, as Isaiah Newton quoted.

(Quote from my personal journal).

Heuristic inquiry is a 'way of self-inquiry and dialogue with others aimed at finding the underlying meanings of important human experiences' (Moustakas, 1990, p.5). Douglass and Moustakas claim 'the heuristic scientist seeks to discover the nature and meaning of the phenomenon itself and to illuminate it from direct first-person accounts of individuals who have directly encountered the phenomenon in experience' (ibid, p.2). It is an experiential and dialogical methodology which both matches my philosophy as a practitioner and researcher and the EFT approach I choose to practice with.

I fell in love with heuristic inquiry when I first read Moustakas (1990), a concise and poetic book. I would say there was a quality of blind love in that initial stage as I had little knowledge of it (quite similar to my love for God and EFT when I first got into contact with them). Upon reflection, however, I deduce that I followed my intuition, as several reasons prompted me to adopt heuristic inquiry as my methodology.

Firstly, one of the most important reasons for me to choose heuristic inquiry is that it shares similarity with PCT/EFT in ideology, philosophy, attitude and manners (Moustakas, 1990). These similarities would allow me to apply the skills and abilities I have been developing as a counsellor in the heuristic research project.

Heuristic inquiry and PCT interconnect and interrelate with each other in many aspects. O'Hara argues that PCT is 'a heuristic investigation into the nature and meaning of human experience' (Moustakas, 1990, Chapter 5). EFT seems have more common grounds with heuristic inquiry as a person-centred experiential approach. For example, both EFT and heuristic inquiry are experiential; both recognize the

importance of dialogues, including self-dialogues and dialogues with others as creative constructive processes; both trust the individual's actualization tendency, and both emphasize the courage to penetrate defense mechanisms and dive deep into one's experience. EFT adopts structural help and emphasizes process directions within a safe therapeutic relationship. Likewise, heuristic inquiry offers structural guidance by describing its six phases and core processes including intuition, indwelling and focusing while respecting the individuals' uniqueness, frame of reference and inner experience. Though traditionally, PCT is more on the non-directive spectrum, both heuristic inquiry and EFT are an answer to my need to find a middle way in the balance between 'being and doing' and 'relationship and techniques'.

The second reason for me to choose heuristic inquiry is related to the novelty of this study. 'Heuristic' means 'to find out or discover', which can be applied 'in any research endeavor where the inquiry is on the cutting edge of new territory being explored... The inquiry is open-ended with only the initial question as the guide' (Sela-Smith, 2002, p. 58). Hence, it suits this highly innovative project considering the size of the research gap that I am aiming to fill up.

Thirdly, it is a methodology that has been applied and studied in researching spirituality (West, 1998; 2004) and using self as a research subject (Sela-Smith, 2002; Moustakas, 1990). I have encountered doubts from both Christians and non-Christians about the possibility of studying spiritual experience. Researching using self as subject could also be as tricky if not worse (refer to Section 3.4). Hence, as a novel researcher facing multiple challenges, I need a methodology that is well recognized with a detailed structure. Moreover, heuristic inquiry does not only provide structures, but also allows flexibility which suits this unique research project in a complex counselling domain. The methodology is based on trust in my integrity as a researcher to adopt disciplined subjectivity (Moustakas, 1990; Rennie, 2012; Van Manen, 2014). Rogers asserts that 'science is what scientists do...there are as many scientific methods as there are individual scientists' (p. 83, as cited in Moustakas, 1990). Coming from an education system that fosters an external locus

of evaluation, and being a person who had emotional blocks and lived as a ‘false self’ (Winnicott, 1965) for most of my life, I am now allowed to explore freely and play with my inborn creativity and imaginations. A requirement to follow certain rigid procedures could easily curb such creativity.

Further, in the searching journey, I felt heuristic inquiry becoming an old friend, who encourages my curiosity for something unknown infused in my being (p.43). Being a caring, sacrificial Chinese woman, this old friend understands my need to explore something that really matters to me, empowering me to engage intimately with the research topic. Finally, heuristic inquiry has an advantage of not losing the ‘holistic totality’ (West, 2004) and keeping the relational essence of persons, which I value, in addition to maintaining a stance of exhaustive inquiry.

3.2.3 Phases of Heuristic Inquiry

Heuristic inquiry consists of six phases: initial engagement, immersion, incubation, illumination, explication and creative synthesis. The following is a brief description of these six phases according to Moustakas (1990).

Initial engagement is a phase to locate the questions that have strong personal meaning through an inner search. It is to capture an intense interest, a concern that cries out for passionate investigation, which has significant personal and/or professional meanings.

Immersion is a phase to live the question, awake or asleep. In this phase, one engages intimately with the research question, being alert to clues or hunches and being in constant self-dialogue and searching by intuitively drawing from mystery and tacit knowledge.

Incubation is a phase to retreat from the intense, concentrated focus on the question. The detachment from the research focus enables intuition and the tacit dimension to process and clarify understanding.

Illumination is a phase to be open and receptive to insights or new awareness that emerge naturally. Illumination may be a breakthrough of an insight, a correction of distorted understandings, an integration of fragmented knowledge, or an awakening of new awareness.

Explication is a phase to understand and explain the meaning utilizing focusing, indwelling, self-searching and self-disclosure and focusing on the internal frame of reference. In this phase, the researcher fully examines what has been illuminated in the illumination phase, in order to understand and explain the multiple layers of meaning.

Creative synthesis is a phase to put the components and core themes into a creative synthesis after becoming thoroughly familiar with the main themes and qualities of the data, which is a process reached through tacit and intuitive efforts.

Those six phases represent more a guideline than a 'linear process' or 'rigid framework' (West, 2001, p.129). They often overlap or alternate in my project which is common among researchers (Throne, 2019). The following text shows examples of heuristic phases, one in the search for the research questions using heuristic inquiry; another one in a single prayer event.

3.2.4 Search for the research questions

All heuristic inquiry begins with the internal search to discover, with an encompassing puzzlement, a passionate desire to know...a question that is strongly connected to one's own identity and selfhood...to discover a fundamental truth regarding the meaning and essence of one's own experience and that of others. (Moustakas, 1990, p. 40).

According to Moustakas, the first task in heuristic research is to decide on the research questions. I feel ashamed of myself whenever people ask about my research question as I was not sure for a long time. Polanyi proposes the dilemma of either you know what you are looking for and then you don't really have a question; or you do not know what you are looking for and hence not looking for anything (1964). I

laughed and felt relieved. Maybe it is okay to be not sure. The searching journey was not linear. I have had many loops of the six phases of heuristic inquiry (Moustakas, 1990).

Field (1979) endorses the subtlety and difficulty of locating the exact question because even the position of a word in a sentence can lead to a different focus of the research (as cited in Moustakas, 1990).

Looking back on this project that I have dedicated the past four years of my life and is continuing to dedicate my time to it, the search for the research questions takes almost as long as the research itself. The following text shows how I embarked on the search for the research questions using heuristic inquiry.

Stage 1 of the search for question—excitement

In the first stage of my research, being struck and excited by the evocative power of EFT approach and the miraculous impact of prayer healing (refer to Section 4.1, Chapter 4), I was keen to explore the phenomenon of integrating both.

There was a period of time when I was immersed in the research ideas or forming such ideas, initially by reading and dialoguing with what I read. For example, when I was reading Mason (2002), I would jot down my answers to her questions and continued writing wild ideas and let deep thoughts emerge. A few months later, I could sense the movement of my own ideas and the change of my being from the paper.

My second action of immersion was talking to various people about my research. For instance, one group of people are counsellors who are Chinese Christians based in Asia. They encouraged me to conduct such research, saying ‘Chinese churches need to know the importance of expressing emotions.’

My third act of immersion focused on myself. I was not sure what I was looking for. I then resorted to my conversation with God, I had a sense of being attracted to ‘dim lights’ and a tickling, vague internal call—or what Gendlin (1981) terms as a ‘felt

sense’, something in me wanted my attention but could not verbalize itself. In this stage, even though I chose the research focus on ‘Prayer with experiential counselling skills—to explore how emotion impacts Chinese Christians’ experience of relationship with God’, I was not fully settled with it.

Stage 2 of the search for question—a logical design

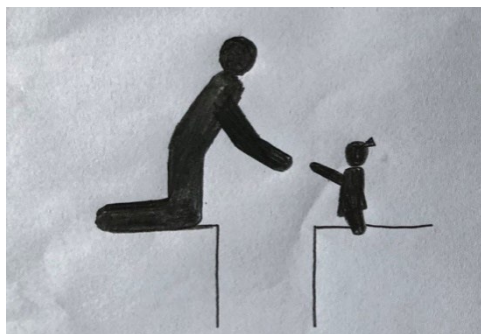
Prayer 3

One day, on a bus to my personal therapy, I attended to my stomach churning and asked the felt sense what happened. ‘I am scared,’ my feelings told me, ‘because of the uncertainty of this research.’ I told Him my fears, and tears just streamed down. To hide my tears, I had to turn my face to the side panel of the bus. After I stopped crying and praying, I waited and asked for God’s response in silence. I was impatient. I did not really expect Him to respond.

To my surprise, an image came to my mind. An adult who reached out his hands is asking his little girl to jump over a big gap. ‘Jump, don’t be scared, I am here. I will protect you and help you’. The adult looked like Jesus while I was the little girl. My tears streamed down again. This time, joyful and grateful tears.

(Quote from my personal journal).

Figure 3.1 ‘Jump, I am here’



I accidentally prayed and then have been consciously praying to God in an emotion-focused way. This prayer was the prototype of an emotion-focused prayer. In an emotion-focused prayer, EFT techniques such as focusing or chair works help the pray-er to access their emotions so that they could express the emotion in prayer to God (Greenberg et al., 1993). Then EFT techniques such as empty chair work (ibid) or imaginal confrontation (Paivio and Pascual-Leone, 2010) allow the person to wait and receive responses from God. Many Christians do not expect God to be conversational (Willard, 2012), nor did I. It happened that He responded and responded repeatedly when I applied emotion-focused prayer. God's responsiveness in an emotion-focused prayer and the therapeutic effect it demonstrated in my personal experience seems the 'light' that attracted me to search, which became brighter. I will further discuss about what in an emotion-focused prayer contributes to therapeutic effect in Chapter 4.

Since 'responsiveness' is listed as one of the therapist's qualities with 'presence', 'compassion' other than empathy (Elliott et al., 2018), my research was probably answering 'How would emotion-focused prayer impact other clients? What are the changing mechanisms of emotion-focused prayer?'

It seems like a logical research design if I could include emotion-focused prayer in clinical work with volunteer clients who have a relationship with the Christian God and who are willing to do so, aiming to find out the 'what' and 'how' it contributes to therapeutic change and the effectiveness of this new integration (Greenberg, 1991). At this stage of my development, I would choose a more conventional way of research, say researching others.

Stage 3 of the search for question- research into self

I was very excited to do research on others. But my plan failed. I had to switch the research focus on myself mainly due to the ethical constraints on applying an innovative therapy approach on volunteer clients.

Prayer 4

JM: Lord, ...I am disappointed (that my plan could not carry through). I (feel like) I am an alien, no one seems to understand me... Techniques and effectiveness are important and part of a relationship for many clients in Asia (Arthur, 2018).

Lord: Darling, I know this is hard for you. You are in a situation that not many people understand you. However, I want you to enjoy My relationship with you in this project. You are the focus. You are the project.

(Quote from my personal journal).

I was surprised and my anger dissipated. I came from a position where efficiency is utterly important. It is perhaps His plan to put me in another pole where I learned to slow down, self-care and enjoy relationships. Studying in Edinburgh is a reparative experience for me to balance work and play, enjoyment and efficiency, technique and relationship.

This prayer contributed to a shift in me (an ‘aha’ moment in the illumination phase) in searching the research question), accepting the importance of relationship in counselling and a need to care for myself. I had perfect excuses for not researching about self because research about self is criticized as self-indulging and biased (Ellis et al., 2011). There were conditions of worth (COWs) embedded in me, thinking that ‘my value is based on my ability to care for others’ and ‘I should be a sacrificial woman, putting others’ welfare ahead of mine’.

Additionally, God’s reassurance in prayer 4 contributed to my ‘leap of faith’ whereby I ventured into a completely unknown and scary journey of researching self. Conscious or unconscious avoidance of digging deep into one’s wounds or exposing oneself (Sela-Smith, 2002) was previously one of my resistances. I will further discuss challenges on researching self in Section 3.4. Hence, the research is targeting my therapy – a journey of self-discovery and re-integration. My research questions at this stage are:

Research question:

What is the process of integration of EFT and Christian prayer in trauma recovery?

Looking back at the research journey, I could not help wondering: ‘What is my research question that has been held as the ‘wondering gaze and passionate commitment’ of me being the researcher (Moustakas, 1990, p. 40)? What motivated me for such a long painstaking search triathlon, in which I took on the role of a client, a counsellor and a researcher, mobilizing all my resources: the training, research, therapy, support network, and God Himself? My tacit bodily feelings tell me that the motivation is to answer the inner infant (Mei Mei)’s desperate call for help even when she had no voice, and to search for her, a father she had been looking for, all her life. I was dying to know the answers and how I might be healed. My research domain includes the researcher’s interiority which Sela-Smith claims as the last frontier of mankind knowledge (Sela-Smith, 2013) which is not easily accessed. Maybe this is the real heuristic question that come from my inner most being many people including Moustakas may fail to find due to resistance (Sela-Smith, 2002). Hence, I am entering a more explorative heuristic inquiry which aims not to answer whether the approach is effective but how the approach works (or not) (West, 2002, p. 266).

Locating and finalizing the research question is an explication process. Polanyi asserts that the identification of a meaningful problem is ‘half the discovery’ (1969, p. 118) which ‘is to see something hidden that may yet be accessible’ (p. 131). For me, understanding the research question is the discovery. I was wondering why it took so long for me to decide on the research question and had such difficulties to settle on it. As I stepped into the domain of trauma therapy, I wonder if the research question awaits my development, relating to the nature of trauma work when it takes time for the researcher-client to overcome resistance such as emotional blocks and/or dissociation as I will further discuss in later chapters.

3.2.5 Six phases in a single emotion-focused prayer event

A single emotional event may consist of a complete heuristic inquiry. Here I will use Prayer 3 from the previous section as an example to show that a prayer event may manifest all six heuristic phases.

Prayer 3

One day, on a bus to my personal therapy, I attended to my stomach churning and asked the felt sense what happened.

The above paragraph consists of the initial engagement phase where I noticed and was curious about some churning in my stomach. ‘What is this about?’ was the heuristic question.

‘I am scared,’ my feelings told me, ‘because of the uncertainty of this research.’ I told Him my fears, and tears just streamed down. To hide my tears, I had to turn my face to the side panel of the bus.

When I paid attention to this feeling, I entered the immersion stage of heuristic inquiry. Focusing on this vague feeling helped me to realize that it was related to my fear of the uncertainty in this research.

After I stopped crying and praying, I waited and asked for God’s response in silence. I was impatient. I did not really expect Him to respond.

I then entered the incubation phase, waiting for God’s response in an imaginative encounter while wondering ‘what will God respond to me if He is here?’. I waited (im)patiently, which provided time and space for me to sense His presence and answer.

To my surprise, an image came to my mind. An adult who reached out his hands is asking his little girl to jump over a big gap. ‘Jump, don’t be scared, I am here. I will protect you and help you’. The adult looked like Jesus while I was the little girl.

In the illumination phase, I received God's response which is an image 'Jump, I am here' as shown in Figure 3.1, despite my disbelief and impatience.

My tears streamed down again. This time, joyful and grateful tears.

This response from God changed my image of God whom I thought showed favouritism to others and my self-image whom I thought was less lovable. More layers unfolded when I kept pondering on the image He revealed to me in the explication phase.

Finally, I wrote down the events and termed this event an emotion focused prayer which captures the quality and essence of this prayer event as a creative synthesis.

3.2.6 Heuristic phases in trauma work

Heuristic phases are parallel with therapy and spiritual development as I will explain in the following paragraphs.

Referring to Chapter 4, in Stage 1 of the trauma work, or an initial engagement phase of the heuristic inquiry, I developed a connection with God after He responded to me, forming a 'therapeutic alliance' with Him while He manifested therapeutic conditions like a good 'Therapist'.

Referring to Chapter 5, in Stage 2 of trauma work, or an immersion phase of the heuristic inquiry, my trust in God enabled me to dip into the deep emotional pain while His containment further enhanced my trust in Him.

Referring to Chapter 6, in Stage 3 of the trauma work, I entered into the incubation phase, with sometimes angry encounters with God and sometimes long waits for His response (Event 6.1.1, Section 6.1, Chapter 6). When I entered into the illumination phase, I was attentive in receiving new insights and making new meanings. My relationship with God became more intimate while I continued pray, examine and question what had been illuminated. Subsequently, I entered the explication phase.

Finally, after I checked again and again, written and re-written, edited and re-edited what I had written in the explication phase, I concluded the research journey with a creative synthesis—a prayer which reflects the essence of the whole therapy and research journey. Simultaneously, I entered a relational depth with God (referring to Chapter 7)

3.3 Research methods

I did not always enjoy the freedom of heuristic inquiry. In fact, I struggled for a long time, doubting if I have chosen a right method and if I was a good enough researcher, a common phenomenon among new researchers who are yet to build up confidence in the method and an identity as a researcher (Throne, 2019). I read Moustakas (1990) again and again, being confused by his description on passionate, timeless self-search and in later chapters detailed procedures of interviewing others, which is not applicable for my study. Finding research methods that suit my project was part of the research.

3.3.1 Forming research methods

I will use two metaphors to illustrate the struggles and how I find therapy methods I invented (e.g., emotion-focused prayer) that were the focus of my research becoming my research method.

Metaphor one: Learning cycling

My dad taught me cycling. In the beginning, he helped me mount and dismount the bike as I was too short to reach over the paddles. He would let go of me when I could keep balance on my own. Whenever I was about to fall, he would quickly reach out and hold the control.

Similarly, as a beginner researcher in human science, I was equipped with heuristic inquiry being a shiny brand-new bike for me to embark on my adventure.

I often experience the sense of loss or discomfort as the new bike is difficult for me to handle. I need more external support (Sela-Smith, 2013; Throne, 2019). I added two external supporting wheels, one of them is EFT framework, another is prayer.

Metaphor two: Swimming to my dream island

Heuristic inquiry is a swimming style that appeals to me. I read about it, practising this swimming style in order to reach my dream island.

The sea looked vast and peaceful. After I enjoyed wondering around for a long time, I grew impatient as I lost my sense of direction.

Suddenly, a huge wave struck me and almost devoured me. I forgot anything about heuristic inquiry and mustered all my strength and wisdom to fight the torrent.

The torrent brought me to the island.

I noticed that I had been swimming in an EFT style, which I have devoted most of my time and effort to learn.

I also called out for help from God in the desperate position.

Therefore, my research methodology was strengthened by EFT and prayer.

Researchers sometimes understand their research method in a clearer way after their research is completed. For instance, Sela-Smith (2002) only knew that she had actually conducted research in her personal crisis using the exact form of Moustakas' heuristic inquiry without a prior knowledge of it. Likewise, I only realized that I have been applying EFT and prayer in my inquiry when I look from hindsight. I will discuss in the next section why such a practice makes sense.

3.3.2 Therapy as research

Humanistic psychotherapy and qualitative research on human experience are strikingly similar in their ideology, philosophy, attitude and manners (Kvale, 1999;

Moustakas, 1990). Freud's (1963) asserts that "It is indeed one of the distinctions of psychoanalysis that research and treatment proceed hand in hand" (as cited in Kvale, 1999, p. 88). Both approaches pay attention to the uniqueness of individuals (clients or research participants), both are working relationally, both are research leading to discovery of truth, meaning and awareness with an open curiosity to progressively unfold an individual's internal world. Moreover, both researchers and therapists are seen as the tools for their work scope either as a researcher (Laurel Richardson & St. Pierre, 2017) or as a therapist (Wosket, 1999).

I argue that therapy approach can be a research method. Firstly, therapy is by nature personal research facilitated by a therapist. O'Hara asserts that PCT itself is a heuristic inquiry into the essence of people's psychological experience (Moustakas, 1990). Stiles claims, 'Psychotherapy is a laboratory as well as a treatment' (1999, p. 1) while Bohart and Greenberg radically proclaim that 'Therapy is primarily discovery rather than the application of treatment' (1997, p. 440).

Secondly, therapy and research share similarities in terms of philosophical attitude, skills required for counsellors or researchers (McLeod, 1996; Hart and Crawford-Wright, 1999). For instance, the PCT core conditions crucial to therapeutic personality change were consistent to qualitative research theories and processes and a valid foundation for heuristic inquiry (Moustakas, 1990).

Hence, Kvale (1999) argues that psychotherapy researchers should consider seriously the potential of applying therapeutic interviews as a research method, including other humanistic or relational approaches such as PCT based on the fact that a therapist has an advantage in learning to conduct qualitative research since they are already holding similar ideologies and skills while therapy has advantages of generating in-depth rich knowledge through long-term therapeutic dialogues.

On the other hand, research process may well be therapeutic for the researcher in making meaning of their personal myths, which is the case of my project.

Firstly, researchers often have therapeutic purposes to make meanings on personal and professional issues (Riessman & Speedy, 2012). In HSSI, Sela-Smith (2002)

shows a 'leap of faith' in proposing self-transformation and self-understanding as the HSSI objective which is normally a therapy objective.

Secondly, the change mechanisms in research are similar to therapy. For example, Sela-Smith (2002) believes feelings are pathways to exposure of hidden patterns and the awareness is essential for transformation. This is similar to EFT's belief that emotions provide information for adaptive living and the therapy work follows the client's pain compass with the objective to transform emotions with emotions (Elliott et al., 2004). EFT's emphasis on working with emotional self-interruption (ibid) is also similar to Sela-Smith's call for a need to overcome researcher's resistance to personal pain (2002).

Another change mechanism lies in the symbolizing and meaning-making effort in research. Researchers discover that writing or narrating are common procedures to draw out hidden memories of the self, enhance the image of self—or even modify one's sense of identity (Etherington, 2000). This mechanism is echoed by EFT theorists that expression of emotional experience in words allows formerly unspoken affective experience in implicit memory to be organized into a coherent story and hence promote change (Greenberg & Pascual-Leone, 2006). The open, curious attitude to individual's experience promotes emotional awareness, acceptance and congruence, which are essential for working with emotion productively (Greenberg and Pascual-Leone, 2006). These attitudes are adopted in heuristic inquiry as a 'way of self-inquiry and dialogue with others aimed at finding the underlying meanings of important human experiences' (Moustakas, 1990, p. 5). Coincidentally, Moustakas developed heuristic inquiry into a therapy approach (1990) and Sela-Smith utilizes HSSI in her clinical work as a deep psychology method (2002).

Not surprisingly, research is observed often to have therapeutic effects for researchers and/or participants (Hart & Crawford-Wright, 1999). In one particular research, participants reported that the research interviews had greater therapeutic impact than the therapy when recorded video sessions were replayed in the research interview session using a method termed as interpersonal process recall (Gale, 1993).

3.3.3 The parallels of heuristic inquiry, therapy (EFT) and faith (prayer, spirituality)

In addition to what I have discussed in the above section on the similarities of research and therapy, heuristic inquiry, therapy and prayer or spirituality have more common factors.

Firstly, they all embrace the person-centred conditions. PCT (EFT belongs to person-centred experiential psychotherapy) and Christian spirituality share common conditions. PCT is a therapy of agape love (Kahn, 1999) and many Christians believe God is the embodiment of such love (Lewis, 2010; Thorne, 2002). Both PCT and Christianity share similar values about personhood and relationships. In my project, I observe and conclude that God can be a good ‘Therapist’ as He embodies therapeutic conditions.

Secondly, they can all be perceived as dialogical organismic ways of knowing while they share a nature of time-less, open-ended and continuous conversational exploration resulting in improved self-understanding and knowing others (Moustakas, 1990) including relationship with God (Willard, 2012). Both heuristic inquiry and therapy work can progress from vague to clear, from general to specific, from surface to deep level, and after those deconstructions, new meanings can be constructed in a macro perspective while spiritual relationships can be developed from distant to intimate.

In this project, it shows parallel progress in heuristic inquiry, trauma work and relationship with God as shown in Table 1. For example, Stage 1 of trauma work coincides roughly with the initial engagement which is mainly recorded in Chapter 4, Stage 2 of trauma work coincides roughly with the immersion phase which is mainly recorded in Chapter 5 and Stage 3 of the trauma work coincides roughly with the incubation, illumination and explication phases of heuristic inquiry which is mainly recorded in Chapter 6. While therapy usually works toward a development of self–self and self–other relationships, a spiritual dimension in terms of a relationship with God (a special self-other relationship) was also developing from being distant to being intimate.

In view of the similarity and intertwined nature of EFT, prayer and heuristic inquiry, it is natural for me to apply therapy approaches I adopt in this project. Just like therapists who bring themselves as a person to a counselling session, I too bring my skills and knowledge as a therapist to the research. As I immersed myself in this mode of research for the past few years, all means relating to my transformation are under my gaze, while all my being, including my knowledge of therapy approaches is utilized. I will list two examples.

3.3.4 Emotion-focused prayer as a research method

As I illustrated in Metaphor 1 and 2, in the beginning stage of my research, I was lost and filled with fear of uncertainty, doubting my ability as a researcher, I needed something certain to hold on. On one hand, heuristic inquiry as an established, robust research methodology, has served such a function. On the other hand, heuristic inquiry is highly experiential, requires strong awareness and ability to indwell in self-experience, and yet provides little structure especially in the immersion phase. Therefore, I have a need to find my own ways to do so.

Additionally, heuristic inquiry or HSSI is intrinsically adaptable to creative research methods, probably because that ‘All science, whether natural or human, begins heuristically...until there are enough answers to shed light on the patterns and characteristics related to the area of research’ (Sela-Smith, 2013, p. n.). Barrineau and Bozarth (1989) claim “that in heuristic inquiry spontaneous creation of new methods or changing method in midstream is not only allowed, but is encouraged” (as cited in Moustakas, 1990, p. 103). Hence, I have applied emotion-focused prayer in this heuristic inquiry.

Prayer 5

This anxiety had been torturing me often, but I do not understand it. It is so horrible, dark, urgent, and unknown. I want to understand it. I want to be healed by the Lord and I cannot hide my curiosity on how He would make it happen. That is my research. That is my life.

(Quote from my personal journal).

Initially, I saw emotion-focused prayer as an innovative therapy method that I have been investigating. Gradually, as reflected in this prayer, it became a way of knowing and lifestyle for me, by searching within in an emotion-focused manner (self-dialogue) and searching above (communication with God).

Essentially, emotion-focused prayer is a method of heuristic inquiry which focuses on the researcher's internal feelings and uses dialogues with God as core parts of the inquiry. The following table shows this relationship, using the six-phases template proposed by Moustakas (1990).

Table 1: A brief comparison of Heuristic Inquiry and Emotion-focused prayer

Moustakas's Six Phases	Heuristic inquiry	Emotion-focused prayer
Initial engagement	To locate the questions that has strong personal meaning through an inner search.	Be open and curious about the emotions and experience which seem alive, poignant, or important to the pray-er (Elliott et al., 2004, p. 131)
Immersion	To live it, engage in self-dialogue and search by intuitively drawing from the mystery and tacit knowledge.	Enter into it, stay with it, live it, experience it. Be facilitated with friendly attitude to emotions, using focusing, and other evocative approaches to access implicit /bodily /mystical knowledge.
Incubation	To retreat from the intense, concentrated focus on the question. To be in a receptive state of mind for insights or new awareness without conscious striving or concentration.	Have an imaginative encounter Wait for God's response. Give space for God's presence.
Illumination	To be open and receptive to insights or new awareness without conscious striving or concentration.	Wait and receive God's response. Feel His presence and give space for Him to speak. Be patient and listen attentively.
Explication	To understand and explain the meaning utilizes focusing, indwelling, self-searching and self-disclosure and rely on the internal frame of reference.	Continue pondering and pray for further understanding and clarity, constantly checking if it resonates with the pray-er's senses when sometimes the response is in an image, with meanings that unfold gradually.
Creative synthesis	To put the components and core themes into a creative synthesis after becoming thoroughly familiar with the main themes and qualities of the data, which is a process reached through tacit and intuitive efforts.	Have a self-searching and communication with God in the writing and re-writing, editing and journey of becoming.

3.3.5 Emotion-focused writing as a process and product

I applaud Richardson's argument that writing is a product and a process and writing itself is an inquiry (Richardson & St. Pierre, 2005). Her suggestions on writing helped me to ponder on internal restrictions, and surprisingly, this led to hidden things popping up on paper. The free writing process reminds me of 'free association', which I believe is an antidote to dissociation. It is one of my ways of learning to be open to experience, a therapy goal Rogers proposes.

Richardson's purpose of inquiry is mainly on speaking for the oppressed, deconstructing current beliefs, challenging the authority, stimulating new interest, producing new knowledge and contributing to a more democratic society (ibid). To others, 'Writing could be what I do instead of therapy' (Tamas & Wyatt, 2013, p. 65). From my perspective, I think writing can be used as a facilitative mode to open up conversations between different inner configurations, experiences, memories and thoughts, especially allowing the oppressed configurations to voice out, so that the person can access to what Polanyi called tacit knowing. The facilitative function of the writing provided by the pen and paper is similar to other performing arts (ibid) or even chair works. Robert Elliott emphasizes the process of chair works is to reveal truth through connecting to bodily memories (EFT training, Glasgow 2019) while Gendlin believes that our body knows even before our mind does (Gendlin, 1981).

An example of emotion-focused writing as a process is as follows:

I have been indwelt in my research, drawing or picturing the colourful, dynamic, fascinating movement in my mind, in dreams, in conversations with friends. However, I have been tortured by an inability to put them on the screen. As soon as I sit in front my computer, I lose them all. My brain goes blank. I feel tired and anxious. Instantly, I want to leave, to drink something, to eat something, or to lie down for a while.

I know tiredness is often related to a harsh inner critic, who often causes feeling of being stuck and depression in a person's life (Elliott et al., 2004). I know I have one. Let me write her out and to understand her.

J-Inner critic: You need to write quickly. Time passes by.

You are overwhelmed. How can you write so many things?

You are lost in your words. No one is interested in your ideas.

You are not up to the standard.

While I am writing down the criticism, I am crying.

J-Inner therapist: How painful it is for you to continue this work when you are attacked.

J-Experiencing self: (There is a shift after I heard the inner therapist, I cried more—empathic crying to myself) It's true. Imagine that I have been trying to work when I am attacked.

I write as I think: 'No wonder it has been so hard for me. It's not because I am stupid.'

And a huge relief come over my body. I felt much lighter. I am able to continue the writing, being less stuck.

(Quote from my personal journal).

While the progress of research and personal therapy have been intertwined and enhancing each other in this journey, it is extremely difficult to write the dynamic, constantly changing, infinitely complex phenomenon because 'there is no self waiting to be discovered – but it is a process of creation and re-invention out of available resources' (Byrne, 2003, p. 31).

Maybe by accepting writing is not only the final product of my research, but also a process, I can continue writing even if it is messy at times, in the hope that each round of writing (telling) and reading will produce something new in a

dialogical/performative manner, uncovering hidden meanings and patterns, while the definition of self/others/world is constantly on the move in a forming, reality test and modification cycle (Riessman, 2008).

3.4 Challenges in research into self

Many of the most significant and exciting life events and extraordinary experiences – moments of clarity, illumination, and healing – have been systematically excluded from conventional research.

(Braud & Anderson, 1998, p. 3)

I owe a lot to researchers, particularly those who introduced research methodologies such as heuristic inquiry or autoethnography in the domain of research into self to me from the University of Edinburgh (e.g., Murray, 2017; Wyatt, 2012). It is important for me to be supported in entering this domain before my own identity and agency as a researcher are strengthened. Nevertheless, I constantly hear doubts that if research into self or telling personal stories are proper research. Or, if self-as-subject research is self-indulgent or biased. Hence, I will discuss those doubts and some challenges relating to self-as-subject research in this section.

3.4.1 Is self-as-subject heuristic inquiry proper research?

‘The heuristic process is autobiographic, yet with virtually every question that matters personally there is also a social – and universal – significance’

(Moustakas, 1990, p. 15).

I argue my research using self as subject is proper research because its purpose is to generate knowledge that is often difficult to obtain otherwise, linking the personal information to the benefit of the larger context (Bondi, 2013; Moustakas, 1990; Throne, 2019). The advantages of generating knowledge that are otherwise difficult to generate could be a reason that more and more counselling doctorate students apply heuristic inquiry and auto-ethnography in research into themselves, forming a

group of vibrant researchers and producing publications tapping to valuable insider's experiences for the development of the professional field (Throne, 2019).

Sela-Smith developed Heuristic Self-Search Inquiry (HSSI) as a form of heuristic inquiry in which the researcher is the sole participant of their internal search. Nicholl applied HSSI to explore her own experience of being diagnosed with 'schizophrenia', illuminating her blind spots and resistance which had previously prevented her from indwelt with her interviewees' stories (Nicholl et al., 2020). Both Sela-Smith (2002) and Ozertugrul (2017) utilize HSSI to study one's healing experience. Their research contributes to better understanding of the client's experience and transformation process to inform practice (Ozertugrul, 2017b; Sela-Smith, 2002). Sela-Smith (2002) studies her dream experience using heuristic inquiry and developed HSSI as an inquiry and therapy method. Ozertugrul (2017) investigates his own experience of obsessive-compulsive disorder (OCD) and the process of self-healing through self-interviews— dialogical/dialectical conversations between his 'I-Researcher' and 'I-participant'.

Sela-Smith (2002) argues that all research starts as a heuristic inquiry when the inquiry is on the cutting edge, which is the case of my research investigating therapeutic change process using an innovative therapy approach. Exploring it on myself is to avoid ethical difficulties if I were to research others, as in the cases of my ancestors and seniors. For example, 'Shen Nong', an ancient Chinese saint tasted hundreds of herbs in order to search for medicine to cure others (Nuget-Head, 2014) and a Nobel Prize winner Tu Youyou who tried the new medicine on her own before it was applied on patients (Zheng et al., 2020). In psychology field, Jung is an example of self-research (Jung, 1997).

By research my own therapy, I have an advantage of access to rich, in-depth personal data which may not be able to obtain through time-limited interviews using myself as a research subject. Apart from the long-term nature of the project, my development of skills and congruence as a counsellor is an advantage to produce personal and authentic data during the course of the research.

In conclusion, the examples listed above support that my project using myself as a subject can be proper research because it is conducted with a purpose of generating knowledge for the professional field to improve practice.

3.4.2 Self-indulgent or self-sacrificial?

Prayer 6

JM: Lord, this is really painful (my hand goes to eyes).

Lord: JM darling, I know it is hard. Maybe you should take a rest. Just appreciate your discoveries.

(Quote from my personal journal).

This prayer reveals the tension between generating knowledge (beneficence) with integrity and ‘non-maleficence (avoiding harm)’ (Bond, 2004, 2006).

Research into self is often criticized as self-indulgent (Ellis, Adams and Bochner, 2011). On the contrary, I argue that it is a sacrificial act, considering the pain and risks might pose to the researcher. It is told that Shen Nong was poisoned 70 times in a particular day when he tried on various herbs and later he ultimately died of a toxic herb (Nuget-Head, 2014). The in-depth research into self will likely draw out painful materials from the researchers and pose risks on them. For example, Jung was at the edge of psychosis breakdown when he conducted deep analysis through active imagination (Jung, 1997). Several of my friends experienced similar painful struggles when they applied heuristic inquiry on themselves.

Since the research process can be painful, switching the positions between the researcher and the researched is one way to achieve the balance of self-care. Sometimes I was the researched, fully immersed, reliving embodied memories of previous trauma (van der Kolk, 2015, p. 135) and experiencing the pain, to the extent that I was exhausted and collapsed in bed. At those times, I lost the ability to write down, record or analyse the experience. I learned from EFT on how to

maintain an optimal level of emotional arousal. Therapy works the best at an optimal level of emotional arousal (Carryer & Greenberg, 2010) while I deduce so does research. Therefore, I formed support networks and carried out self-care activities, such as hiking, dancing and prayer, to support myself.

The balance of self-care and care for other in research can be the other way round. There were times that I was so engrossed in my own puzzles that I forgot about the research project totally. My supervisor has been the one who reminds me to return to the target. Gradually, I learned to adopt a rhythm on being immersed and then pull myself out to keep emotional distance as an observer. The ‘experiencing ego’ and ‘observation ego’ gives another useful illustration on the dynamic between the researcher me and the researched me (Casement, 1985).

3.4.3 Relational consent for self-disclosure

Prayer 7

JM: Would sharing my wounds including fear and shame cause potential harm and judgment for me? (Abraham came to my mind, who was willing to give his son Isaac for the LORD). Am I willing? I am willing, but...(crying)

Lord: Darling, it is okay to pace yourself. No obligations.

(Quote from my personal journal).

Again, this prayer indicates a need to balance the purpose of knowledge production and observation of the ‘no harm’ principle to myself and others (Bond, 2004; Wyatt, 2012) in self-disclosure. On one hand, one of the conditions to enhance credibility or transferability (criteria of a good qualitative research) of a project is to provide rich data in context (Tracy, 2010). However, a good qualitative research which is ‘rich in details so that it comes to life in the eye of the reader’ may breach confidentiality (West, 2002, p. 265). Such tension is greater in self-as-subject research as there is no way for the researcher to hide their identity nor those who might be involved or mentioned in the study.

One common practice to research ethically is to obtain participants' consent. In my research, it is difficult or impossible to receive consent from those I don't have access to (e.g., my late parents), or could not have open communication with (e.g., some ongoing conflictual relationships) (Ellis, 2007). Hence, I emphasize that what I wrote is my subjective truth, on top of my endeavour to be as truthful as possible.

I had thought that one of the advantages of research into self is that I need not acquire consent from myself. This may not be true. As shown in Prayer 7, part of me wanted to share my true stories generously, but part of me was scared of consequences such as public scrutiny. Being given a choice to share or not (from God in this case) gave me a sense of peace which enabled me to explore and write freely. It is a process of applying relational ethics principles (Ellis 2007), 'ongoing consent' (West, 2002) and 'ethics in practice' (Canavan & Prior, 2016) in those challenging ethical decisions while I consulted my research supervisor, my internal supervisor (Casement, 1985), friends and God Himself (in prayer) to safeguard myself and related others in the writing process.

3.4.4 Trustworthy or biased

Prayer 8

JM: How can I convince people of the significance of my experience?

I envy Soren Kierkegaard, who as the father of existentialism at a certain stage of his life had to refrain from exercising the ascribed power people gave him (Rohde et al., 1983). To me, it is a different matter, being a woman, a minority, a non-theology trained Christian, a foreign student, a second language speaker of English. I have experienced being misunderstood or seen as less competent (Georgiadou, 2014; Sue & Sue, 2016). I am not alone. Teresa of Avila (Carrera, 2005), who was in a less powerful position attempted to share with people her mystical experience. She was humble to consult others while trusting her senses. I can do the same by speaking/writing them out honestly and be open to inspection, challenge and correction by myself, others and You.

(Quote from my personal journal).

Another common criticism against research into self is that it is biased and hence not trustworthy (Ellis, Adams and Bochner, 2011).

On the contrary, I assert that a researcher's subjectivity should be valued and trusted with a need to strive for integrity, disciplined commitment and reflexivity (Moustakas, 1990; Rennie, 2012; Van Manen, 2014; West, 2009). West (2009) argues that the personal bias is inevitable and can be utilized as informed subjectivity. Rennie (2012) proposes the researcher use reflexivity to enhance the reliability of the research. Reflexivity means making the influence of the investigator, the participant and their interaction transparent. It was first intended to separate the researcher from the researched in the beginning (Finlay, 2002), but this separation has evolved as an invaluable tool to manifest the researcher's influence on the research process. 'Self-reflexivity about subjective values, biases, and inclinations of the researcher (s)' and 'Transparency about the methods and challenges' are important quality control criteria in a qualitative research (Tracy, 2010, p. 840). Such transparent or congruent practice allow deeper exploration of the phenomenon under investigation, turning the concern of subjectivity into an opportunity (Finlay, 2002, 2008; Jootun et al., 2009; West, 2009).

Additionally, I argue that individuals who venture into researching themselves demonstrate more passion and commitment as they have to face both internal and external obstacles, such as internal defence mechanisms reacting to pain and external scrutiny.

3.4.5 Writing personal stories experientially

Traditionally, knowledge was passed from generation to generation through storytelling, myths and legends and we have returned to valuing local stories and lived experience. (Etherington, 2017, p. 86).

I was introduced to two of Greenberg's articles in the first year of the counselling training. I screened them but they were left in my folder for a long time because I did not really understand what he said.

My interest in EFT was ignited after an EFT introduction talk delivered by a Chinese trainer. She spoke Chinese, talked in a Chinese context, with vivid examples and metaphors. Later, my love in EFT was boosted in EFT training in Glasgow led by Robert Elliott. I did not understand the theories, I experienced them. In the simple settings of chair works, something strange happened: I sensed or saw something I had never seen.

A hole was drilled through the thick wall of a dungeon.

The forgotten, frozen, imprisoned, dissociated part of me was awakened, who started to knock or speak in a persistent and faint way.

(Quote from my personal journal).

Research in social science has long been divided according to different worldviews. On the one end of the pole is positivism that believes in randomized outcome studies, trying to find generalized guidelines eliminating the context. People commonly think personal stories in research are closer to literature so that they are deemed not proper research (Ellis et al., 2011; Nicholl et al., 2020). Under the pressure to look 'scientific', researchers' academic self often alienates with their ordinary self in producing dry, neutral, statistic-prevalent papers that are often under-read (Bochner, 1997). On the other end of the pole, a group of researchers who study human science advocates that research papers should include more personal experience to connect with potential readers (Bochner, 1997), be accessible, engaging, real, evocative, and presented in a story-telling style (e.g. Speedy, 2005). They argue that writings can make a difference in drawing attention to social justice and hence impact on policy-making to achieve a more equal and harmonious community (Bondi & Fewell, 2016a; Richardson & St. Pierre, 2005). For example, a publication on a prisoner's story of disenfranchised grief touched many people, eventually making an impact on improved policy in prison (Masterton, 2014).

Many EFT researchers call their research descriptive qualitative research aiming to explore and understand therapeutic process, which is not positivism (Timulak, 2008a). They usually tackle issues that are more relevant to clinical practice and hence attract attention from the practitioners. The researcher collects data such as clinical recordings, transcription, the client and therapist's reflection in order to study the therapy aspects and process. The purpose of such research is to understand changing mechanisms, subsequently applying the discovery to improve clinical practice. This group of research has made huge contribution to the field in developing and evaluation of new approaches and theories and improving practice as well as gaining recognition from authorities. I find the examples or transcripts in those writings easy to follow but I often feel frustrated and just skip the large chunks of statistics. Despite the fact that many of them are focusing on experiential therapy approaches, I found the writings are usually not experiential enough, which are quite different from the nature of the approach.

Being struck by the power of experiential therapy procedures and supported by literatures call for experiential research, I adopt the stand that telling personal therapy stories experientially is an important part of my research, not only to provide information on the therapeutic process, but also to serve a purpose of reaching out to readers, to share and generate knowledge in a dialectical/dialogical way. I believe all my stories can do the telling themselves with or without elaborated analysis, inviting my readers to enter into my lived experiences, to feel the process, to understand it in the spirit, emotion and thought and to spark their own stories (Kiesinger, 1998).

3.5 Data collection, analysis and presentation

Following the discussion in the above section, I do sense the tension between keeping the essence of personal stories while avoiding slipping into merely literature (Nicholl et al., 2020). Hence, I will discuss how I manage data rigorously in this section.

Since this is a project applying EFT and prayer on myself, therapeutic activities including personal therapy, training, clinical practice, personal development activities, which potentially contribute to my change, are all under investigation. My prayer journal, audio recordings of prayer, personal therapy reflections, reflections working with clients consist of both my raw data and analysis in the process. Most of my journals focused on events that have struck me emotionally and which then later contributed to change.

Since I have accumulated a vast amount of writing over the four years from 2017 onwards, all of which is impossible to bring into focus, I borrowed ideas from events research (Timulak, 2008a, 2010) to select events carefully from the raw data for further investigation. Events research investigates clinically interesting or significant events, focusing on the change processes such as an immediate effect of counsellor interventions. The events are identified as significant by the client and/or the therapist. I use my internal emotion compass to decide what to record during data collection stage. I further choose events according to their therapeutic impacts, including both the immediate and longer-term effects to present in this paper. They are emotionally poignant episodes, being hallmarks in my development and theoretically interesting to me. In order to take advantage of a long-term single case study, I collected significant events regularly through journaling and recording, allowing the investigation of the micro-process as well as tracking changes over the course of therapy. Those events are presented as depictions in heuristic inquiry (Moustakas, 1990).

As I take multiple roles in this research, being a client/researched subject, a therapist/researcher, I understand the challenge of differentiating various roles. When I was a research subject in a client's role, I tried to be as open as possible to myself, for example, in therapy, by trusting and collaborating with my therapist. After each session or any other therapeutic events that happened during this period of time, I would reflect on them and write down my experience of what happened as best as I could recall. I would step back into the experience of those important emotional events, attempting to capture the raw, vivid, poignant aspects of those

moments. Despite my effort of abiding to the original experience and recording them as honestly as possible, I understand my memory is not perfect. At times, the writing process is not only recording what happened, but a continued discovery process and often therapeutic too. Hence, the written data are not pure recording of what happened but are dialogical and dynamic in the process of writing (Laurel Richardson & St. Pierre, 2017).

After collecting the data, I take a break from the painstaking, in-depth/intensive personal reflection. In this phase, I focus on reengaging with literatures and theories. It is also good to rest from reflecting on my experiences, which were often intense, painful and exhausting. Hence, a shift from the researched to researcher gives me space to rest from the painful events. According to Moustakas, this is a change from immersion phase to incubation phase. Van Manen believes 'Activity and passivity are inextricably entwined' (Van Manen, 2014, p. 345) and research is an activity whereby finding cannot be forced. In this sense, I gain insights when I am less concentrated on the question.

In the illumination and explication phases, I read and re-read raw data and analysis, write and re-write them, and keep open dialogues with colleagues, theories and God. This is the phase when themes, nuances and qualities gradually emerge, and clarity ensues. I then choose depictions, excerpts from these data to illustrate my findings. Subsequently, I write the reflections/analysis on the data based on dialogues between my process observations and theories.

The last phase of my research is to apply Moustakas's heuristic phases in a holistic and macro manner, focusing on analysing the raw data to determine the qualities and themes in this research. This consists of the phases of illumination, explication and creative synthesis.

Chapters 4 to 6 are the main data presentation and analysis parts of the thesis. The chapters are divided based on the stages of therapy as shown in Table 2 (next page).

Table 2: Trauma Therapy Stages and God’s Roles

	Trauma Therapy Stages	God’s role	Heuristic Inquiry Phases
Chapter 4	Stage 1: Therapeutic relationship building	Being the enabler and encourager in the exploration	Initial engagement
Chapter 5	Stage 2: Emotion deepening and memory work	Being the secure base in the exploration	Immersion
Chapter 6	Stage 3: Emotion transformation Resolutions Meaning making	Being the healer and meaning of the exploration	Incubation, Illumination, Explication

The second column of Table 2 shows the stages of my trauma therapy referring to EFT framework working with trauma (Chen, 2021) in those chapters. Chapter 4 includes Stage 1 of trauma therapy which focuses on therapeutic relationship building. In Stage 2, the main therapy tasks are emotion deepening and memory work which is recorded in Chapter 5. In Stage 3, therapy aims to achieve emotional transformation and meaning making which is recorded in Chapter 6. In my project, those stages developed naturally. Yet, I had considerable struggles in dividing the chapters, as the events build on each other, and sometimes influence each other in a back-and-forth manner, while other times exhibit recurring patterns.

The third column of Table 2 shows God’s role in different therapy stages. In Chapter 4, I will record that God being the enabler and encourager in the exploration, helped me develop a relationship with Him. It coincides with the initial engagement phase of heuristic inquiry as shown in the fourth column of Table 2. In Chapter 5, I will present the process of jumping into dark waters to explore a dissociative process. It

coincides with the immersion phase of heuristic inquiry, while God functioned as a secure base. In Chapter 6, I will posit the emotion transformation and meaning-making process in my trauma therapy while God turned out to be the ultimate healer and answer of the meaning-making, meeting me in my deepest pain. Chapter 6 happens to coincide with the incubation, illumination and explication phases in heuristic inquiry, though I have not followed the phases rigidly and they often overlap with each other.

I will use three themes which relates to three emotion schemes as shown in Table 3 to organize my data presentations. An emotion scheme, which I have discussed in Chapter 2, is an implicit higher-order pattern of mental organization: a dialogical network that consists of various elements, such as stimuli (e.g. visual image), beliefs (view of self or others), bodily feelings, action tendencies and emotions (Elliott & Greenberg, 2021). These three core emotions or emotion schemes, such as shame, lonely sadness and intense anxiety, are related to three unfinished business with dad, mum and God respectively. I have listed my main defence mechanism, beliefs of self and others and therapeutic intervention in Table 3.

Table 3: Three themes with emotion schemes

	Theme 1	Theme 2	Theme 3
Emotion schemes	Shame	Lonely sadness	Intense anxiety
Main defence	Numb to anger	Dissociation	Tiptoeing
Beliefs	I am bad	Others will reject me	The world is dangerous
God as an enabler and encourager in Stage 1 (Chapter 4)			
God as a secure attachment in Stage 2 (Chapter 5)			
God as a healer and meaning in Stage 3 (Chapter 6)			

I will leave most cells of Table 3 blank here and subsequently fill them up in the following chapters to show the organization of the writing. My raw data (quotes from my personal journal) are presented mostly in italics, followed by my reflections/analysis. However, I will not always analyse the events elaboratively, when they are there to form a bigger story, to track changes or when extra analysis leads to breaking down the text or taking away something holistic. I will arrange data in chronological sequence in most cases following their respective themes with an intention to keep the storyline.

I will add a note at the bottom of the page when there is a need to do so.

3.6 Conclusions

In this Chapter, I have discussed my development of philosophy on ontology, epistemology and methodology relating to research in the domain of psychotherapy and spirituality. I have developed a relational perspective of the reality about God (Jones, 1996) after my counselling training in the UK. Being caught in the tension between 'being and doing', 'deconstruct and (re)construct', 'doctrine and experience' led me to a recognition that I need both structure and flexibility in a disciplined relational stance following Confucian's Golden Mean. I embrace the views that a researcher's subjectivity should be valued and trusted when they strive to provide integrity, disciplined commitment and reflexivity.

Venturing into a 'cutting edge' of a research domain and adopting an unconventional self-as-subject heuristic inquiry, I experience from first hand how lonely, scary it could be and how much more courage and commitment it demands from a researcher. It is part of research for a real heuristic question to emerge which holds the researcher in 'wondering gaze and passionate commitment' (Moustakas, 1990, p. 40) after the researcher could overcome their resistance or defence mechanism (Sela-Smith, 2002). Hence, I uphold the trustworthiness and value of sharing personal experience in self-as-subject heuristic inquiry debating with both external and internal challenges. I conclude that the self-as-subject research is presenting data that are usually hard to obtain otherwise which will potentially benefit the professional field in improving counselling practice.

In view of the similarity and intertwined nature of therapy and research, particularly EFT and heuristic inquiry, I illustrate that I can apply therapy approaches I adopt in this project as research methods. For instance, emotion-focused prayer which is initially an innovative therapy method that I have been investigating became a way of knowing in this project.

Being struck by the power of experiential therapy procedures and supported by the literatures, I decide to present data analysis experientially, for example, using story telling form. Thus, I have an intention to providing rich, in-depth data on the

therapeutic process, while inviting my readers to enter into my experience, to share, generate or enrich knowledge dialectically/dialogically.

Chapter 4: Enabled to feel and encouraged to research

People disconnect from their emotional experience, afraid of being overwhelmed, humiliated, or revealed as inadequate by the force of feelings, only to pay the price later in depression, isolation, and anxiety.

—Diana Fosha

As I mentioned earlier, Chapters 4, 5 and 6 contain the main data analysis of this research on my trauma recovery. The development of my relationship with God and my own emotional processing capacity are two interrelated changing mechanisms in my trauma recovery. As in EFT, the therapeutic relationship and emotion processing of trauma events posit two major therapy factors in trauma treatment (Mlotek & Paivio, 2017).

Chapter 4 includes Stage 1 of my trauma therapy, in which I was helped in the restoration of my feelings and development of a child-parent or client-therapist relationship with God through EFT and prayer. It coincides with the phase of initial engagement in heuristic inquiry, where my interest in the integration of EFT and prayer was ignited. God acted as an enabler and encourager (refer to Table 2, Chapter 3).

Following the structure outlined in Table 3 (see next page) which is first presented in Chapter 3, in Section 4.1, I will present how God saved me from a crisis by answering my prayer to remove an emotional block, which resulted in the restoration of my emotions. My recovered emotions subsequently led me to the discovery of an emotion-focused prayer. In an emotion-focused prayer, I use EFT techniques to deepen my emotions before I experience God's empathic responses. I will recount how I learned to connect with God and my dad through emotion-focused prayers. In Section 4.2, I will record how God contained me when my restored emotions became overwhelming. In Section 4.3, I will illustrate how God responded to a series of emotion-focused prayers of mine and encouraged me to look into my inner desires, leading to a counter-cultural personal decision.

Table 3: Three themes with emotion schemes

	Theme 1	Theme 2	Theme 3
Emotion schemes	Shame	Lonely sadness	Intense anxiety
Main defence	Numb to anger	Dissociation	Tiptoeing
Beliefs	I am bad	Others will reject me	The world is dangerous
God as an enabler and encourager in Stage 1 (Chapter 4)	Section 4.1 Enabled to feel and connect	Section 4.2 Co-regulated overwhelming emotions	Section 4.3 Promised to protect my curiosity
God as a secure attachment in Stage 2 (Chapter 5)			
God as a healer and meaning in Stage 3 (Chapter 6)			

4.1 God enabled me to feel

In this section, I will present four events on how God enabled me to feel and connect.

Event 4a: A crisis—Stuck in the counselling training

In the training programme, my tutor asked me ‘JM, where are you? You showed care to others, but where are your feelings?’ I was confused ‘Why would my feelings be important? I am called to be a counsellor to care for others, right?’

Other people expressed irritation, anger, or feelings of being threatened when they perceived me ‘being angry’ and yet did not show it. I was numb during the training but found myself trembling in bed at night.

Later...

I failed the placement readiness!

The feedback given was 'Match her (my practice partner) anger, volume up!'

What I perceived was 'Change your personality! Be angry!'

(Quote from my personal journal).

My inability to match my practice partner's anger exposed my emotional block to anger, which could be an underlying fear of anger, or fear of expression of it, or dissociation from such an 'unwanted' emotion (Greenberg, 2015).

Counselling training is like a furnace to refine 'gold' or 'silver', when student counsellors are entrusted to encounter each other with 'a workable intensity of feeling' in 'a caring, empathic and accepting climate' (Hutchison, 2015, p. 58). Knowing the safety net laid out for us student counsellors in this programme was a comfort, but I wonder if my pain had exceeded the workable limit for me. I felt as though I was being totally broken. Failing a test was not only a personal failure, but also connected to 'face losing'—losing dignity or honour (St. André, 2013)—an embedded Chinese cultural value which was buried deep under my consciousness. I also lost my identity as a counsellor. I was liked and welcomed among Chinese counsellor peers, being seen as most empathic and therapeutic due to my calm gentle nature. I was at the edge of quitting the programme.

Individuals who went through trauma tend to form rigid beliefs of people or the world (Paivio & Pascual-Leone, 2010) and some of them had been well hidden in my home culture. Gardner indicates that pre-concepts of cultural difference between the client and therapist can be applied as a catalyst for therapeutic change (1971). In this stage, my personal struggles fulfilled one of Rogers' necessary and sufficient conditions for therapy—the client's vulnerability (Rogers, 1990)—which served as a deconstructive function, challenging preconceptions that I took for granted from my

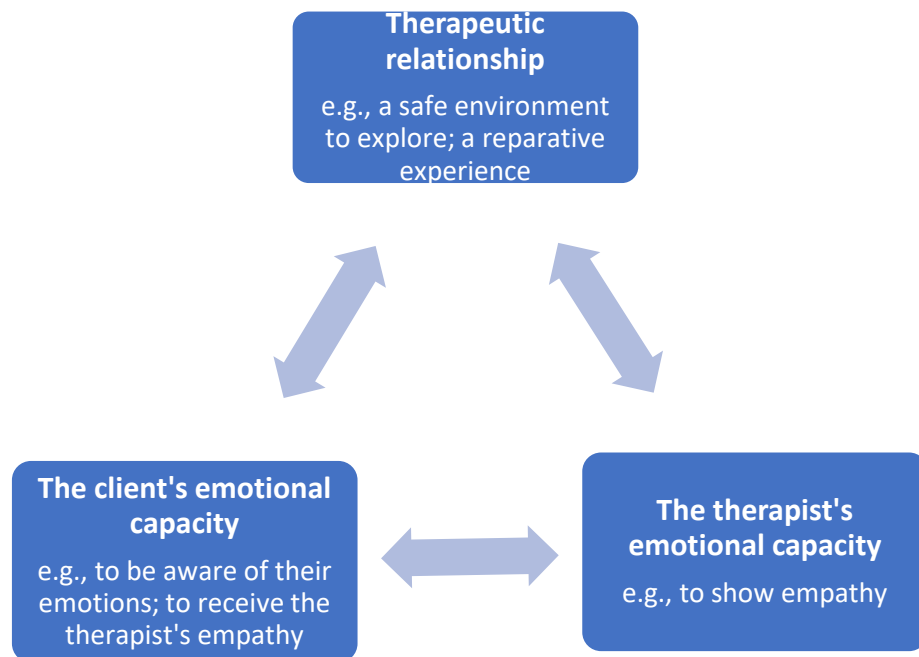
previous education, culture and religious teaching on top of my personal trauma history.

Chinese culture values emotional self-control (Jim & Pistrang, 2007). I had experienced first-hand from others higher expectations for women to be gentle. There is a saying in China: 'Men are not allowed to express any feelings except anger, whereas women are to express any emotion except anger'. When I was young, I was often reprimanded and would be ashamed of myself for being bad-tempered. Subsequently, I was happy to see myself as a mature lady with a good temperament who had been 'slow' (which I now see as suppressed) to anger. My emotional block was well hidden in my home culture. In addition to living in a culture where my feelings were discouraged, I was brought up in an education system that valued conformity, external locus of evaluation and academic success (Cheng, 2011). No one noticed or cared about my emotional inabilities as I was an 'achiever' in school.

Church teachings encouraging the suppression of 'negative feelings', especially presenting anger as a sinful emotion (Noffke & Hall, 2007; Thorne, 1991), and calling for denial of 'body', 'flesh' or 'self' (Walker, 1971) further contributed to my numbness to certain emotions.

Alienation from a person's emotional self is alienation from a true, vibrant and creative self, because emotions are an essential part of the self, 'the primary data of existence' and 'an interior sense of ourselves' (Greenberg, 2015, p. 41). As a person's emotions are necessary tools for one to know the self and others dynamically, blocks to one's emotions often result in problems in self-self and self-other relationships, such as feeling powerless, meaningless, disconnected and empty (p. 145). These were my feelings. I felt disconnected from both people and God.

Figure 4.1 A Simplified Illustration of Factors Contributing to Therapeutic Changes in EFT.



As shown in Figure 4.1, a client has to possess certain capacity to form a therapeutic alliance for the therapy to work (Paivio & Pascual-Leone, 2010). I term the ability to be aware of one's emotions, to be able to symbolize them and express them, as part of one's emotional capacity. One's emotional capacity also includes one's ability to engage, regulate and use one's emotions. Rice noticed that it is usually the healthier client who makes the better use of therapy as they tend to possess certain relational capacities, such as the ability to turn their attention inward and trust the therapist enough to feel safe to explore (1992). The client's emotional ability interrelates to the therapist's ability to show empathy, the client's abilities to receive empathy from the therapist and the building up of the therapeutic alliance; all of these are necessary conditions in therapy (Greenberg & Watson, 2006; Paivio & Pascual-Leone, 2010).

Clients who are blocked emotionally are doubly disadvantaged, lacking the capacity of emotional processing skills and forming a safe relationship for them to process

trauma material (ibid). Interruptions in emotional awareness and regulation are among the key long-term consequences of relational trauma. Such emotional inability disrupts emotional processing of trauma memories and forming relationships, including the therapeutic relationship. Yet these client competencies are necessary conditions for their recovery.

When these clients drop out from therapy prematurely, it poses challenges to counsellors who may struggle with self-doubt of their competency.

For me, it is a double disability as a counsellor and a client. In PCT training a trainee counsellor is required to develop self-awareness and relational abilities in order to connect with the client at a relational depth because a counsellor uses themselves as a therapeutic tool (Mearns & Cooper, 2005). Hence, I was in serious trouble as a trainee counsellor because I was not only limited in my work with clients as a counsellor, but I also have trouble bonding with my own therapist as a client in personal therapy.

Event 4b: A salvation—Jesus removed the emotional block

In my desperation to seek help and answers, I took various opportunities for therapy or healing during the training period.

One of them was the Emotion-focused Therapy (EFT) Level 1 training in Glasgow. I was struck by the powerful effectiveness of EFT in the skills practice and embraced it instantly. The evocative nature of the two-chair work manifested the impact of a possible emotional block which delayed my feelings. My emotions were lagging. While I was in the inner critic's chair, I could feel the emotions of the experiencing self and vice versa.

Another opportunity came when I joined a Christian inner healing session, where a restoration of my feelings occurred.

In a Christian inner healing session, the counsellor (or prayer minister) instructed me to ask Jesus to reveal a vision of the emotional block. In my vision, the block was

a cute little girl (about 3-4 years old) with an apologetic smile. She was trying in vain to restore the fence destroyed by a sudden flood (of emotion). Figure 4.2 is an illustration of the vision of the emotional block.

The counsellor prompted me to submit the emotional block to Jesus. I felt attached to the little girl who had been working very hard for me, but I had the sense that she would have a better life with Jesus. I therefore prayed the prayer of submitting her to the Lord's hand and asking the Lord to help me create a new defence.

In the following week, I was puzzled as I found myself moody over trivial things that I would not notice at all previously. It was a good problem. I was irritated by trivial things, but I was happy that my senses were coming back.

(Quote from my personal journal).

Figure 4.2 The Girl, the Fence and the Flood



This prayer to submit the 'emotional block' happened 5 minutes before the end of the prayer session. I remember the counsellor concluded the prayer with a clap, a

procedure she learned from her trainer. At that moment, I thought she was superstitious. I still could not fully understand what made this prayer work. I can only imagine in answering my prayer, Jesus had an operation to remove this emotional block. Like someone who just received a cochlear operation, I felt I was switched on subsequently.

Finlay describes a person's experience after she had a cochlear implant to restore her hearing (2009). It was an exciting, hopeful, fun and yet scary experience when the person could hear sounds that she could not hear before. Regaining senses was an interesting phenomenon to me too, as if I had had my 'hearing' recovered. I had entered a new world and observed myself being able to feel irritation subsequent to the prayer healing. Those were feelings that I used to be uncomfortable with and would judge as being unkind to have. I did not know then, with my restored senses, I would soon be overwhelmed by emotion flooding as depicted in the image of the Girl, the Fence and the Flood in Figure 4.2 when hidden traumas were uncovered in a later part of the research.

God's interventions seemed to cause my improved emotional ability both psychologically (e.g., being less fearful or judgemental towards my feelings) and biologically (e.g., with restored senses). God's restoration of my feelings fed into my trust in Him.

The significance of this event is that God saved me from the dilemma a trauma client and their counsellors face as I mentioned in the above section: a client needs emotional capacity to make therapy work but often lack the same capacity. More specifically, I suppose God has done a contact work for me as described in Pre-Therapy (Prouty, 2007). Rogers lists psychological contact as one of the necessary and sufficient conditions for therapy (Rogers, 1990). However, researchers found clients with trauma experience and/or psychosis process may have difficulties to be in contact with their internal (with themselves) and external realities (e.g., with the therapist) (Prouty, 2007). Pre-therapy work is an extension of PCT in both theory and practice, in which contact becomes a therapeutic method building up the client's contact with themselves and the therapist.

In the following events, I will present how I started to practise developing a more friendly attitude to my own emotions and trust in God, with restored feelings and repaired contact.

Event 4c: A first connection—Jump, I am here¹

One day, on a bus to my personal therapy, I attended to my stomach churning and asked the felt sense what happened. ‘I am scared,’ my feelings told me, ‘Because of the uncertainty of this research.’ I told God my fears, and tears just streamed down. To hide my tears, I had to turn my face to the side panel of the bus. After I stopped crying and praying, I waited and asked for God’s responses. I was impatient. Did not really expect Him to respond.

To my surprise, an image came to my mind. An adult who reached out his hands is asking his little girl to jump over a big gap. ‘Jump, don’t be scared, I am here. I will protect you and help you’. The adult looked like Jesus while I was the little girl (refer to Figure 3.1). My tears streamed down again. This time, joyful and grateful tears

(Quote from my personal journal).

I term this prayer as an emotion-focused prayer, in which I first use EFT techniques such as focusing to enter into my emotions, express them to God, then finally ask and wait for God’s response in my imagination.

Many people do not expect God to be conversational (Willard, 2012). I understand it might be difficult for my readers to believe what I recorded. In fact, I was surprised or even startled when God responded to me, just like a cochlear implant patient does

¹ This event was written in Chapter 3 as Prayer 3. I wrote it here again for the ease of reading.

after the ‘switch on’. I did not believe nor imagine that He could respond to me in the ways He did if I had not experienced it myself (Willard, 2012).

In this event, God communicated with me in a conversational way and has been doing so consistently ever since then. I deduce that there were a few conditions in this prayer that turned it to be authentic and relational, subsequently contributing to His changed response style in our communication.

The first condition was that I became a better receiver of empathy after God removed the emotional block in the previous event. Feelings are our internal sensors to decipher external signals, just like ears are a receiver for sound signals. I was switched on.

The second condition was an active expression of my emotions after I engaged with them in a deeper way. As I discussed in the previous event, being connected to one’s emotional self is an essential condition to connect with others; here, to connect with God. The genuine expression of my emotions, both verbally and bodily, most likely attracted God’s response according to the functions of emotions. Healthy primary emotions have adaptive functions, such as how sadness attracts comfort, or fear attracts protection (Elliott & Greenberg, 2021). Additionally, I have a sense that the intensity of my vulnerabilities as the result of the deepening process relates to His timely interaction.

The third condition was my waiting, which provided time and space for God to reply to my request and for me to receive His answer.

The fourth condition was the imagination of His presence, a procedure I term as an imaginative encounter similar to imaginal confrontation (Paivio & Pascual-Leone, 2010). Imaginal confrontation is a procedure Paivio & Pascual-Leone proposed, which resembles the gestalt-derived empty-chair work (Greenberg et al., 1993). In empty-chair work or imaginal confrontation, the client imagines a significant other in an empty chair (or without a chair) and speaks elicited thoughts and feelings facing this imagined person. The client is then supported to imagine being the significant other and expresses the other’s reactions to the client’s thoughts and

feelings in a dialogical way when they sit in the chair representing the significant other. Using the structural help of a chair or an imagination, the client is often able to enter into 'his or her own shifting perceptions of self, other, and traumatic events' (Paivio & Pascual-Leone 2010, p. 151). An imaginative encounter is to imagine that God is here, then ask and wait for His response. Similarly, in an imaginative encounter, one's ability to sense His subjectivities is awoken.

An essential step of this prayer is an imaginative encounter. I posit that the following are the functions and significance of imagination.

Firstly, imagination is believed to be essential in human connections. Symington argues that only through imagination could two human beings get into contact with each other (1996). He proposes that the quality of imagination can be cultivated through exercises, which I believe include arts, drama or chair works. Likewise, Elliott et al. (2004) reiterate empathy as imaginatively entering the client's inner world: 'The stories and experiences that clients share activate the therapist's imagination and allow him or her to formulate a sense of each client's landscape' (p. 116).

Secondly, imagination frees the mind from the restriction of terrifying facts (including subjective facts) while keeping connection to reality, contributing to breaking down rigid defences (Wallin, 2007). Imagination or playfulness generally relates to characteristics of 'true self', such as spontaneity, excitement, and satisfaction (Winnicott, 1971). When 'the individual and the therapist enter playfully into the work of discovering the individual's true self'. In visual imagination, the images are believed to be highly related to emotions as 'thought' representations connecting to emotional memories (Damasio, 1994; Greenberg, 2015). Chair works are ways of scaffolding for imagination and subsequent evoking contact with one's experience, when the individual steps into and out of roles imaginatively, resulting in a progressive revelation of the authentic self.

Imagination has been included in contemplative prayer to facilitate building up relationships with God (Carrera, 2005; Nouwen, 1994). Additionally, imagination

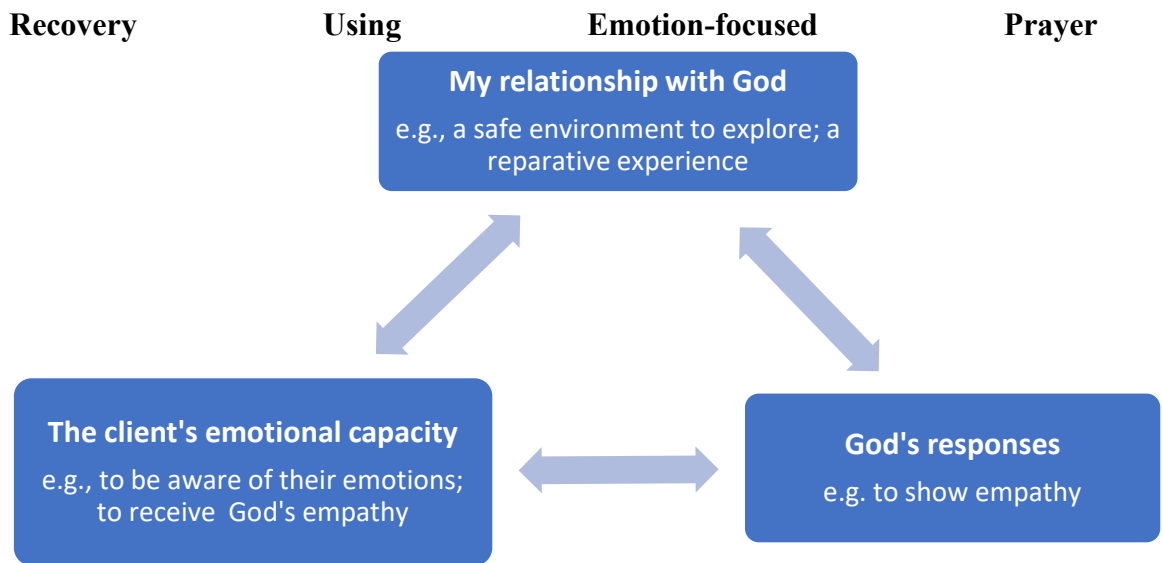
has been widely applied in spiritual healing. Many therapists integrate imagery-based prayer healing exercises with psychotherapy approaches to treat trauma memories (Hall & Hall, 1997). For example, the therapist uses guided imagery to help the client enter into the traumatic scene with Jesus' presence in inner healing prayer (S.-Y. Tan, 2011).

This emotion-focused prayer was therapeutic because God responded to me empathically. Empathy is a fundamental therapeutic condition and basic skill in person-centred therapy and EFT. Because of God's responsiveness, empathy and acceptance of my emotions, I had developed a more friendly attitude to my emotions. The visual image of a little girl and Jesus was God's empathic assurance to my fear and encouragement to my desire to step into adventure.

It also changed my image of God. He met my needs not only by the empathic understanding reflected in the content of His response, but also by His warm presence and responsiveness. He is no longer distant or showing favouritism to others; He is a powerful, protective and available Person for me. I started to feel myself a special little girl to Him.

Figure 4.3 as shown below illustrates how the development of my emotional capacity and my relationship with God feed into each other and enhance each other in a positive cycle.

Figure 4.3 An Illustration of Interrelated Changing Mechanisms in My Trauma Recovery



Event 4d: A second connection—praying with dad

In this event, I showed an example of how I applied emotion-focused prayer to help my father be in touch with his emotions before he was able to connect with me in an intimate way. Though I was not a therapist for my dad, I applied emotion-focused prayer as a scaffold for him to turn to his internal world and access his experience. The structure or techniques help me to be a better listener (counsellor) to help my dad (or a client in clinical settings) in our mutual connection.

Dad was sick, terminal cancer.

D: My condition is still the same. I did not get better.

J: Are you disappointed and frustrated?

D: Yes.

J: Can you tell God how you feel? (Expressing emotions including negative ones to God)

D: (passionately) Lord, I have faith in you. I know you are able to heal me if You are willing.

J: (being deeply touched) How do you think God would respond to you if He were here? (Imaginative encounter)

D: He would answer my prayer.

J: What is His facial expression to you when He is answering your prayer? (Imaginative encounter)

D: He looks at me in a loving and affectionate way.

J: (being deeply touched) If He answers your prayer and looks at you in a loving and affectionate way, what is it like for you? (Focusing on emotions)

D: (affectionately) I am very grateful, very grateful. (Imaginative encounter is very effective in arousing emotions with secure attachment figures for my father here. One of which is God, and the other one is me)

J: (deeply touched)

...

D: How have you been recently? (This is extraordinary, my father started to ask about me. I felt cared for. I had a sense that I lost a large part of my dad and became basically a caregiver to him after my mum's passing away 16 years ago.)

J: I have a few essays and reports to complete. It seems quite difficult.

D: Lord, please help my daughter. May you not lead her into difficulties so that she could complete her studies smoothly, Amen.

My father hardly talked after his stroke 12 years ago. Before his stroke, he did not express his emotions except anger. I was amazed that he could express his feelings with God and pour out his heart to Him when his life was nearing the end on earth.

He was able to express his affection and care to me as well. When I visited home one month before his last day, he told my sister, 'JM is coming back. This is the happiest thing.' He had never been as alive.

(Quote from my personal journal)

It has several layers of significance to me when I was able to connect with my dad through emotion-focused prayer in this event. Firstly, witnessing my dad's emotional expression changed my view of him and enabled an intimate quality in our relationship. Secondly, his care and intention to help me in the end of the prayer had been an internal resource for me. I view myself as a lovable and capable child of his. Lastly, the effectiveness of emotion-focused prayer encouraged me to continue to investigate the process of it. If my dad could change in his eighties, many people can change and benefit too.

4.2 God contained me in emotional flooding

In this section, I will present two events which demonstrate how God contained my intense emotions. Getting into contact with my emotions was such a huge development. However, those emotions were soon to flood out when I needed extra support and containment. Containment is a psychodynamic term which describes how someone is enabled and feel safe to process their experiences (Ogden, 2005). I like the parenting image of the psychodynamic terms such as containment (ibid), holding and mirroring (Winnicott, 1971), while the latter two will be mentioned in next section.

I had been growing in my trust in God and my own emotions. With the help of EFT techniques, I stepped into deeper emotional waters without knowing the risk. EFT techniques are effective in cutting through the client's defence or breaking through their emotional self-interruption. However, the client may swing from over-regulation to under-regulation, a common phenomenon for clients who had trauma history (Paivio & Pascual-Leone, 2010). If the client is flooded with overwhelming

emotions, they are not in a therapeutic working condition and they might be retraumatized. Hence, they need a therapist who is grounded enough to safeguard their journey of exploration when their feelings become too much for them to handle. God functioned as a therapist whose warm presence provided a safe space for my feelings to be experienced.

Event 4e: A temper tantrum towards God

Message from my siblings: Dad passed away! I was shocked and devastated as I could not find a ticket to reach home in time for his funeral.

J-child: (angry towards dad) Why did you not give me a sign earlier so that I could be with you and attend your funeral? I just called and wished you a happy Father's Day last Sunday!

J-rational: How can I be angry at my dad? He did not know when his time was.

J-child: (angry towards God) Lord, certainly you knew, you should have been able to arrange a timely trip for me!

I could envision the little girl version of myself crying, screaming inside, kicking and bumping into Him.

A soft voice within me spoke: 'My child, do you not know that I am sovereign? This is My sovereignty.'

Instantly, my anger dissipated. As I grew in a safer relationship with God, I almost illusioned that I was omnipotent. His compassionate response reminded me of His otherness. I have to accept the fact that He is God, not me.

(Quote from my personal journal)

This event shows my difficulties with regulating emotions, which is a mark of possible early relational trauma.

I must feel safe enough to show my anger to God. Subsequent to this anger expression towards God, I had a few more angry confrontations with Him about healing and suffering; at one of the confrontations, I almost renounced my faith. Often a therapist may reach their limit in holding a client especially when they are the target of intense emotions (Sommerbeck, 2015). God manifested His supreme transcendence (Buber, 2004, p. 7) and otherness (Benjamin, 1990) by surviving my anger at Him and yet not yielding to me. The non-verbal quality of God's speaking soothed me rapidly. His warm presence made me feel deeply accepted and safe. In that moment, I was able to let go of the fear of losing control and was not ashamed of my childish anger reaction.

A child learns emotional skills from a good enough parent in a relational way through right-brain to right-brain learning (Schore & Sieff, 2015). This principle applies to learning other emotional skills such as self-empathy (Greenberg, 2015, p. 24) and unconditional positive self regard (UPSR) (Tickle & Murphy, 2014). When I was a child, I would suppress my distress until I could not hold it and then would throw a temper tantrum at my parents. I remember feeling ashamed of myself after being scolded. It fed into the pattern that I would either suppress my feelings or react explosively, feeding into a negative cycle of being unable to accept my own emotions or maintain genuine close relationships (Paivio & Pascual-Leone, 2010). The secondary reactive anger in a temper tantrum covered up my needs for receiving comfort and help for affect regulation (Goldman & Greenberg, 2013). An EFT therapist validates and contains a secondary reactive emotion rather than evokes it for the sake of exploring primary emotions and needs underneath it. Because of God's containment of my expression of anger, I became more accepting towards my own anger, wondering what prevented me from expressing my needs.

Event 4f: Prayer after rejection

I felt I was being rejected! It was worse because I knew the person did not have any intention to reject me. I was ashamed of myself for such irrational feelings, not

knowing with whom I could share. I soon decided to tell God about my feelings and started to cry.

In the middle of the prayer, I realized how emotionally aroused I was, my sobbing turned into wailing. Someone must facilitate my expression because I was more likely to over-regulate. While I was wondering, I sensed that God spoke in my thought and then spoke out loud through my mouth, 'Bao Bei (treasure) Junmei, I am right here in front of you. It must be hard for you, my treasure'. I was instantly soothed.

He reassured me again through my mouth, 'My treasure Junmei, no one should reject you as a person. Even if they do, I will not reject you.' The reassurance made me smile. I was content and peaceful just like an infant at her mum's breast. The vocal quality of my voice had drastically changed from crying to smiling.

(Quote from my personal journal)

I noticed that it was not easy for me to trust a therapist and yet I could easily go to the other extreme of dependency, which is another type of challenge in trauma work (Webster, 2019). I have developed some trust in the person. My rational brain knew the declination was not about me, but my emotional brain was triggered automatically. It took me back to my earlier child status in a flood of shame, hurt and helplessness. It was in a later stage of therapy that I recalled as a child I was left crying on my own and only stopped crying when I was tired. Lack of empathy from an adult made me ashamed of my own feelings and needs. As a result, those experiences were habitually suppressed or alienated and could be otherwise easily flooded away by judgments from self or others before they reach my consciousness (Wallin, 2007, p. 82). God's non-judgemental presence which I noticed in the middle of the prayer, was essential for me to open up to my experience. In trauma therapy, a therapist's presence manifested in a warm facial expression, rich vocal quality, open gestures, and calm bodily presentations, is believed to be therapeutic itself (Geller & Greenberg, 2002; Geller & Porges, 2014). This consistent warm

presence helps the client feel safe (both physiologically and psychologically), often helps their body to soften and to be open to their experience.

While emotional arousal is necessary for therapy to work and EFT provides techniques that are effective in evoking emotions, therapy becomes unproductive or risky when a client is in an overwhelmed state, feeling like they are losing control or being re-traumatized (Paivio & Pascual-Leone, 2010). The EFT therapist helps the client to regulate their overwhelming emotions. This is what God did for me.

A good therapist resembles a parent to the client (Wallin, 2007). God is a good Parent/Therapist to me. As I dipped deeper into my trauma work later, the trust in God that I have built up at this stage has been my secure base.

4.3 God encouraged me to research

Ask and it will be given to you.

—Matthew 7:7 Holy Bible, NIV

In this section, I will present three short events as examples on how I started to assert my needs—an adaptive process (Greenberg, 2015, p. 138) in front of God in emotion-focused prayers. God responded to those primary requests and guided me to pay attention to my inner world, including my needs, desires and curiosity.

Event 4g: God's smile—answers to my self-doubt

One of my concerns is my writing skill in a second language. How could I convey my ideas clearly without being misunderstood? After receiving two low marks from a marker in the programme, I started to doubt my ability to write—especially in a second language and in a different cultural context.

J: Lord, I want to see your face.

I waited in silence, growing impatient and wondering if He would ever show His face to me.

It was then, all of a sudden, when my mother's face popped up with a bright smile, 'Honey, you are my blessing, you have introduced the best gift to me' (she meant heaven & eternal life; this was a conversation in her final days on this Earth.) I then recalled her comment about my good grasp of the Chinese language demonstrated in my letters to her. Both my parents were Chinese language teachers who introduced me to excellent pieces of reading material since I was young.

(Quoted from my personal journal).

It was a surprise that my mum's face showed up when I asked to see God's face. I thought God was male until then. In fact, the Bible depicts God having both paternal and maternal qualities, and people see God as both King, Judge, Mother, and Healer (Grimes, 2007).

Facial expression is a kind of non-verbal sign or image. Images are a common form of early memories that are stored in the right brain hemisphere. Other forms are usually non-verbal too, such as metaphor, sensations or bodily feelings (Schore & Sieff, 2015, p. 52). As our right brain makes assessments of delicate facial expressions or other non-verbal signs, it quickly causes emotional or bodily responses or reactions without us knowing consciously (ibid). Thus, those emotional events cued by facial expressions could help us to trace memories: in this event a moment when I was affirmed by both God and mum. Since it was likely that I had had a significant rupture(s) with my mother and I had been rejecting her (refer to Chapter 5), this smile reminded me that I probably had a good relationship with her before the ruptures.

God showed motherly warmth, responsiveness and attuning to my needs of validation through my mum's smile, just as an individual's first sense of self develops from seeing their self being mirrored in their mother's response and they can grow emotionally through the mirroring effect of the mother's face (Winnicott, 1971, p. 111).

Event 4h: God’s hugs—response to my fear

I joined a women’s retreat to seek clarification from God in my bewilderment. One of the activities during the retreat was to imagine that Jesus was sitting in the chair in front of me, then focusing on His company and conversing with Him. The instruction of the activity was quite the one-way communication, but I knew I could do it differently, because I believe that God would respond to me from my experiences since I started this research.

I knelt down in front of the chair and prayed, ‘Lord, I just want you to hug me. I am so scared.’ Tears began streaming down my face while I was waiting for His comfort. Suddenly, my face and head were flushed with heat. ‘That must be your hug, oh, Lord.’ I was deeply touched and was filled with peace.

(Quoted from my personal journal).

My bodily memories were awakened in hugs during trainings prior to this event. Van der Kolk asserts that our body keeps the score and hugs evoke something very deep in me profoundly. According to Bowlby (1988), babies need physical touch to survive. The significance of physical touch indicates the caregiver’s availability for both physical protection and psychological safety. Such availability extends to their emotional availability, which is also essential for the child’s development. According to Webster (2019), physical holding is part of the ‘holding and containing therapeutic condition, helping a client ‘feel the pain in safety’ and ‘sooth and calm’ them (p. 274), similar to a mother’s holding a distressed child.

There was a time during the research when I was very sad that I could not recall any of my parents’ hugs to me as a child. I asked for and received more hugs from God.

Event 4i: God’s silence—permission to have desires and pursue curiosity

Shortly after I had settled down in my decision and believed that the Lord had approved it, my fear was once again heightened one day. I prayed and asked for more signs and confirmation.

No more signs. It was a very quiet day. I became more restless and frantic, wondering what this means. Is this doctorate a totally mad idea I created for myself? Had I put myself in trouble? What about His earlier signs and confirmation?

I continued to hope for more signs of confirmation while doubts lingered in my head. As I looked at the blooming flowers in the garden, I smiled and spoke to myself, 'You want to stay and continue the study, don't you?'

Then, I heard the quiet voice inside speaking to me.

L: Darling, you know I have approved of your decision. I want you know that you are allowed to play and venture and your desire to learn matters to me too. It is ok for you to ask for what you want.

J: Lord, You know how hard it is for me to express what I want. I am very thankful that You provided this silence for me so that I could search from within and listen to myself.

(Quoted from my personal journal).

In psychotherapy, silence is often used therapeutically, by providing space for the client. Here, the silence from the Lord served a similar purpose for me to listen to my internal desires and curiosities.

People, like me, who chose psychotherapy as a career are often people who are sensitive, caring and yet have had significant emotional experiences before they made the choice to enter the professional helping career with a desire to be healed, either consciously or unconsciously (Miller, 1997). My mum used to praise me as a very mature and selfless child in front of my neighbours, giving examples such as how I did not spend any of the pocket money she gave me for school outings but rather saved them and gave it back to her. The selfless me was later reinforced by my identity as a traditional submissive wife and sacrificial mother in the Chinese culture. Selflessness is a form of negative treatment of self among a group of trauma clients (Elliott et al., 2004). The turning point came when I received the news that

my dad had passed away, a voice in me was prompting me to look for a father for her. My first instinct was to reject her, 'Who are you? How on earth is it possible for me to look for a father, as I am an adult, and a mother myself, with both my parents passed away?'

Curiosity is one of the healthy primary emotions EFT therapists develop in themselves and support the client to have (Elliott et al., 2004). Human beings are hardwired for meaning-making (Frankl, 2014), while curiosity motivates us to uncover hidden meanings. Curiosity is fostered in young children when they form a sense of security with a secure attachment figure (Wallin, 2010). God showed Himself as a secure attachment, encouraging me to solve my personal myth by venturing into this research, as in the examples of the prayer of 'Jump, I am here' in Section 4.1. Over the path of this project, my desires to get well and my curiosity to make sense have been antidotes to intense pain and anxiety.

Emotion-focused therapy does not mean focusing only on painful emotions. Greenberg and Watson (2006) propose to foster a sense of hope by experiencing desires. For me, to experience desire is frightening and to express it is opening myself up to being rejected (p. 222). I was surprised and relieved, knowing that my desires matter to God and I am permitted to have desires, contrary to what I previously believed: 'I will seek God's will... rather than whether I myself like it or not' (Lu et al., 2011, p. 142).

My way of asking for responses from God in this section was child-like. Something in me (the inner child part of me) alienated from my consciousness is melting in God's warm presence. God used both verbal and non-verbal forms of responses to show His understanding and encouragement in my pursuing the doctorate, which was a counter-cultural decision as a Chinese woman. It was the first time in my life that I felt it was legitimate to allow myself to be taken care of, by myself, others and God. I began to recognize and practise an important principle: self-care or self-empathy is the foundation of caring for others, which is echoed by PCT researchers (e.g., Thorne, 2002).

Coming from a culture that taught me to respect seniors and authorities, God as an authoritative figure and a significant other played an important role in my change from an external focus to paying attention to my internal world. The image of a father encouraging his daughter to jump in Figure 3.1 (Chapter 3) has been playing like a live video in this journey, showing how I have been allowed to be a child in front of God.

4.4 Conclusions

In this chapter, I have shown events that through EFT techniques and prayer, my emotions were restored, accepted and encouraged while the development of my emotional capacity and my relationship with God feed into each other and enhance each other in a positive cycle facilitated by emotion-focused prayers.

Several challenges I was facing as a trauma survivor were tackled through the integration of EFT techniques and prayer which later became a form of prayer which I termed as emotion-focused prayer.

The first challenge is their numbness to certain emotions. EFT provides structural aids which are effective in helping the client to be aware, to access and deepen their emotions. In my case, I often through focusing on my bodily feelings and stimulating contact with others use imagery and psychodrama enactment, such as imaginative encounter with God.

God Himself—a wonderful doctor that the Bible depicts – answered my prayer by removing the ‘emotional block’. I identify this event as a Pre-therapy work, in which one’s psychological contact with one’s emotional reality is restored, which is a prerequisite for one to form psychological contact with a therapist. I felt being switched on like a post- cochlear implanted patient, entering into a new world with renewed feelings.

The second challenge is that a trauma survivor usually has difficulties to trust people, including a therapist, while a therapeutic relationship is necessary for therapy. God acted like a good Parent/Therapist for me in a series of emotion-focused prayer, like coaching a toddler walking, helping me to develop emotional capacities and connections with Him. Moreover, God helped me to develop connection with others (e.g., my dad).

The third challenge of a trauma client is that they may be over-flooded by emotions which are previously blocked, facing the risk of re-traumatization. I have shown in my depictions that God contained my intense feeling in various ways, manifesting His responsiveness, warm presence, unconditional positive regards (UPR) and creativity as a good Parent/Therapist. Being contained by God facilitated my own development of emotion regulation capacities as well as softening the defences in me in a preparation for the next stages of trauma therapy.

Another challenge of a trauma client is their own mistreatment of themselves by ignoring or distrusting their own internal needs, desires and feelings, rather than complying to external locus of evaluation from others, culture, education or religions. God's compassion shown to me fostered self-care and self-compassion in me. Additionally, He had actively attracted me and endorsed my curiosity in continuing this research. As I mentioned in Chapter 3, therapy is research, and research can be therapy. His encouragement of me to listen to my desire and curiosity in continuing the research opened up a space for the further exploration in the following two chapters, contributing to my recovery and development.

Chapter 5: Looking for Mei Mei through Pain Compass

Even though I walk through the valley of the shadow of death, I will fear no evil, for You are with me; Your rod and Your staff, they comfort me.

—Psalm 23:4 Holy Bible, NIV

In the previous chapter, I have recorded how I was helped to have restored emotions and form connections with others especially building up a secure attachment with God. In Chapter 5 and Chapter 6 I will present the trauma exploration journey. While Chapter 5 focuses on tracing mysterious emotions that puzzled me, uncovering deeper emotions and buried memories, and Chapter 6 focuses more on emotional transformation and meaning making.

In this chapter, I will present the Stage 2 of my trauma exploration: deepening emotions and memory work. Evoking and deepening emotions enable the evoking of trauma memories, while the presence of an empathic and safe other enable the client take in new experience which may be integrated into old memories. As a result, new inputs could alter the original memory, which could then be consolidated by incorporating new materials into the old memory (Paivio & Pascual-Leone, 2010). Part of the new experience comes from the client's agency when they reach the core pain through the deepening process. Often this is the moment when the client could express primary adaptive emotions which replace maladaptive or secondary emotions. Examples of primary adaptive emotions are assertive anger towards the abuser and sadness reaching out for comfort. Examples of maladaptive emotions are shame for being abused (Elliott & Greenberg, 2021), fear of a snake when seeing a rope (Sela-Smith, 2002).

In this stage, I have had trial-and-error with various therapeutic activities, including EFT and EFT training, person-centred therapy, and emotion-focused prayer. The exploration coincides with the immersion stage of heuristic inquiry. It has been extremely challenging for me to organize my writing. This probably reflects the nature of trauma work, which is complex and multi-layered, with a narrative that is often fragmented and disintegrated. It was my most lost period of time, as I was

beginning to learn EFT, and knew almost nothing about trauma therapy, a novice researcher who lacked agency and confidence in applying the research method, a lay Christian started to doubt my knowledge about God and writing in a second language. I want my writing to reflect this part of my adventure and bring you—my reader— along, to dip into the dark and turbulent ocean with me, being disoriented and overwhelmed together with me, to taste my pain and excitement at some moments in time when I lost the ability to express in words or to narrate coherently.

Even though I will analyse the events in dialogue with theories most of the time in this chapter, I will leave some of them more open for you as the reader to experience them yourself. Some other events are included to tell the story in a wholesome manner or present it in a chronological order for the sake of tracking changes.

I will continue to use the three themes of Table 3 (see next page) which was first presented in Chapter 3 as an organizer for writing, each of which relates to unfinished business with my parents and God respectively and has their signature emotions. The classification of the events is not meant to be exclusive to each other, as these three threads have been developing concurrently, interwoven, and will converge in the next chapter. It is for the simplicity of writing that I put them into three parts. I will write two of my inner children's experiences: Xiao Tao Qi—a 6–9-year-old girl and Mei Mei—an infant who emerged during my exploration.

Theme 1 unfolds the difficulties for me to feel or express anger especially to male attachment figures and an unfinished business (UFB) with my dad as written in Section 5.1. Underlying my numbness to anger is shame. In Section 5.2, I present theme 2 links to an infant (Mei Mei)'s unknown sadness and unfinished business with my mum. The work is a response to her calling for attention mentioned in Chapter 4. Theme 3 focuses on intense anxiety that puzzled me throughout my research, revealing possible infancy trauma of which I had no explicit memory. I classify it as an unfinished business with God Himself which is recorded in Section 5.3.

Table 3: Three themes with emotion schemes

	Theme 1	Theme 2	Theme 3
Emotion schemes	Shame	Lonely sadness	Intense anxiety
Main defence	Numb to anger	Dissociation	Tiptoeing
Beliefs	I am bad	Others will reject me	The world is dangerous
God as an enabler and encourager in Stage 1 (Chapter 4)	Section 4.1 Enabled to feel and connect	Section 4.2 Co-regulated overwhelming emotions	Section 4.3 Promised to protect my curiosity
God as a secure attachment in Stage 2 (Chapter 5)	Section 5.1 UFB with Dad	Section 5.2 UFB with Mum	Section 5.3 UFB with God
God as a healer and meaning in Stage 3 (Chapter 6)			

5.1 Shame—an unfinished business with dad

In this section, I will present three events related to my inability to show my anger to male attachment figures but rather show the anger to myself or feel ashamed of myself which stemmed from an unfinished business with my dad. The deepening process goes from the emotion self-interruption (numbness to anger), to anger to self (secondary emotion), to shame of self (primary maladaptive emotion) to adaptive anger or self-compassion.

Reflecting further on my apologetic smile in the image of the Girl, the Fence and the Flood (Figure 4.2) revealed that my father used to blame my mother or us children for his bad moods. I believed that it was our fault. I gave this self-blaming girl the

name Xiao Tao Qi¹ which means the little naughty child, a term of endearment I used to call my son. In my mind and old photos, Xiao Tao Qi was a family clown, with her fringe always stuck together, wet from sweating. She was an adventurous energetic boyish girl but was scolded and put down for making mistakes. I was influenced by the emphasis on filial piety and hierarchical relationships in the Chinese culture even as a child (Sue & Sue, 2016). Just like how the little girl who tried to restore the fence destroyed by the flood in the image portrayed in Figure 4.2, Xiao Tao Qi tried very hard to please dad in his flooding anger. Focusing on the unclear feeling of my apologetic smile elicited an episodic memory of an incident.

Event 5a: A kick

Xiao Tao Qi: (trying hard to find a joke, acting like a clown, laughing a little bit uneasily) Hahaha, I almost injured my eyes, ha-ha-ha.

Dad: (who had lost one eye due to an infection during the Second World War and was taunted by peers as a teenager) Other people laughed at me, and you are laughing at me too! (His face was torn with hurt, and he kicked me indignantly).

Xiao Tao Qi: (frightened, speechless, holding her tears back with disbelief)

(Later)

Xiao Tao Qi: (crying and speaking to herself) You've made a mistake. How did you not see that it would cause a misunderstanding? You are not a humorous person. Don't try it again. You will just mess up.

I had never told a joke in front of dad or anybody else since then.

(Quote from my personal journal)

¹ Here is a discrepancy of the age of the little girl. The little girl in the image of the Girl, the Fence and the Flood (Figure 4.2) was first appeared 3-4 years old as I recorded in my journal. When Xiao Tao Qi popped up, she looked more like 6-9 years old according to the actual happening of the incidents. My assumption is that: when a younger part of me was taken care of, a later experience of an older inner child would then unfold. Those inner children are metaphors of our experiences as a child at difference stages of our life (Webster, 2019).

Event 5b: Inner critic work

In this scene, I observed myself speaking from the different configurations of myself—the inner critic split (Elliott et al., 2004)—in a conversation with my supervisor.

J-inner critic: I told a lousy joke. I made a mistake. No wonder he was angry.

Supervisor: But it was not right for him to kick.

J-inner critic turned into Xiao Tao Qi: (sobbing) I have never blamed him for the kick. I thought I had deserved it.

Supervisor: He should not kick you. You were trying to help even if it was a mistake.

Xiao Tao Qi: (feels understood and relieved).

J-inner critic: (softening) I was surprised that I lost my voice. I could have told him, 'Dad, that was not my intention. I was trying to help, not to hurt.'

Supervisor: Of course, you had lost your voice. You were kicked and still under the shock.

Xiao Tao Qi: (tears streaming down silently) And I was a kid. (The inner child's voice was able to come out.)

(In another setting)

Tutor L: Your father was an adult, it was his responsibility to take care of you when you were a kid, not the other way around. You are good. You were a counsellor even when you were a kid.

Xiao Tao Qi: (deeply moved by Tutor L's words, her generous affirmation was a different experience for me. I had less doubt that I am good or that Xiao Tao Qi is good).

(Quote from my personal journal)

This event is an example of two-chair work in which dialogues between conflicting internal voices were facilitated to bring about the integration of those voices, one of which is a harsh inner critic. Self-criticism is associated with childhood wounds which link with shame-proneness (Gilbert & Procter, 2006), while shame originates from a core sense of self that develops through negative attachment experiences (Paivio, 2014). An eight-year longitudinal research reveals that during the transition from childhood to adolescence, parental humiliation and rejection relate to children's sense of shame (Stuewig & McCloskey, 2005). The contempt and anger of self on top of the content of the self-criticism that 'I am bad' impacts the person's mental health (Whelton & Greenberg, 2005).

The inner critic, termed by EFT theorists, prevented me from speaking for myself and made me constantly feeling inadequate. By differentiating the inner critic conflict, the derisive harshness of the inner critic is exposed. The two-chair work revealed self-blame and shame which are maladaptive emotions that originate from past hurt, which I carried with me.

At that time, the inner child Xiao Tao Qi was weak in terms of trusting her own senses, but empathic others were supportive agencies to facilitate her getting in touch with her agency and her voice. Empathy to my sense of hurt (core pain) led to my self-empathy and assertive anger that happened later.

Event 5c: Touch my wound

Physical attacks from an attachment figure that I relied on to survive had an impact on me far exceeding my imagination then. I was subjected to adulthood trauma like many early trauma survivors (Paivio & Pascual-Leone, 2010). Neuropathways that were imprinted in my brain since childhood had been repeated for so many years which require long-term therapy and reparative experience for new neuropathways to form. Maladaptive shame originates from past experiences of being mistreated and forms self-resent and self-criticism internal talk even when the persecutor is no longer there (Chen, 2021). For a long time, I internalized the critical voice in me and

had been apologetic in a close relationship. I was ashamed of myself being physically assaulted. When a friend looked into my eyes and told me ‘You are loved’, I believed that she was sincere, but I couldn’t take in her words; when three other friends gave much of their time for me, praying for me, thinking of me, showing concern for me, I knew their love was sincere, but I could not feel it in my heart.

One afternoon, I was in a moment of deep guilt and shame.

J: It’s hard for me to forgive myself... do I deserve the abuse? I think I do. I deserve death, Lord!!

(Silence...)

Jesus: Everybody deserves death. I died for you. I died for your mistakes.

J: (His words were familiar but it was the first time I heard it personally) I am so touched. I am so touched!

An image came to my mind: A group of religious leaders brought a woman who committed adultery to the court, asking Jesus if the woman should be stoned to death. Jesus said, ‘If anyone of you has no sin, you can stone her first.’ And later Jesus told the lady, ‘I will not condemn you either, but sin no more. Go with peace.’ (Originated from John 8:3-11 Holy Bible, NIV).

J: Lord, it’s still hard for me to believe I can forgive myself. Please come here, I am that woman, judged by the person and I too believe I deserve death ... I still believe that I deserve the consequence, I deserve to be beaten, I deserve death. I want You to look at me, I am here in the court, when everybody has left me, when I am only with You. I am here with my eyes closed, I am waiting for You, Lord, I want to see Your face. I know people love me but I cannot take in their love. Lord, I really want You to be here with me.

(Silence. Sobbing).

J: Lord, are You here?

Jesus: (spoke to me through my voiceless inner thought) Darling, come, touch my scars, I died for you. I paid a price for you. Believe me. Trust me. (The facial expression of the Lord in my imaginative encounter was kind, gentle, accepting.)

J: Lord, I can't believe it, I can't believe it.

(Sobbing harder and struggling with whether I should touch His scars because it felt silly and impossible. After some struggles, I held my tears and reached out my hand to touch His wound (at His side) in the semi-imagination).

J: Lord, let me touch Your wound, let me touch Your scar.

(At the moment when I was about to reach His wound in my imagination, I felt my finger was sucked into the wound while I lost control of my fingers. I was startled by the sense of being sucked in. It's difficult to describe, an electrified sense of oneness and superb intimacy. I cried again, but a different quality of cry²).

(Quote from my personal journal)

Treating trauma is to deal with 'the imprints of the trauma on body, mind and soul...to establish ownership of your body and your mind—of yourself' (ibid, p. 203). In EFT, bodily sensations are often the entry point to engage emotions. They

² This is an event that I sometimes wonder if I could have made a mistake in recording and recalling. I am certain part of it is an imagination because I did not see Jesus physically present in front of me but rather an image in my mind and/or a sense of His presence. However, I did reach out my hand physically while the physical and physiological reactions that I recorded were real to me.

are one of the five elements of a web of an emotion scheme (Elliott & Greenberg, 2021). Physical touch can be transforming and yet controversial in counselling and psychotherapy, thus is to be carried out in great sensitivity and with the client's consent (Clair, 2016; Webster, 2019). Just like a mother touches, hugs and rocks a baby to soothe her baby, Webster (2019) introduces physical touch as part of emotion-focused psychotherapy in providing respect, care, love and nurturing in clinical settings, catering for clients' need especially when they regress to a different younger age status.

The experiences at the trauma period (e.g., Xiao Tao Qi being kicked) were blocked from an opportunity to be integrated. Van der Kolk (2015) says 'losing the body, losing yourself' (p. 87), citing a remarkable case that William James recorded: a woman told him that she had no human sensations (ibid, p.89). I was in a similar situation as the woman William James recorded, being alienated from my body and myself. For a long time, I had been ignoring my bodily senses, not being able to feel my bodily desires nor allowing myself to think about them.

God's touch manifested a soothing and transforming effect on me. I was in a collapsed status (EFT term) (Elliott et al., 2004) when I could not take in other people's kind words including God's. People who are exposed to abuse often manifest shame and guilt for being abused (Barringer, 1992; Etherington, 2000; McConnell, 2019). Shame and guilt had been ingrained in me which took away my wish to protect my own body from someone who should protect me while my inner critic condemned me to death. Jesus manifested a profound love to me when He offered a physical touch, a self-disclosure and brought me to a relational depth. Wiggins et al. argue that entering into relational depth is the holistic combination of Rogers' six necessary and sufficient therapeutic conditions, a manifestation of the therapist's loving presence (Wiggins et al., 2012, p. 140). The 'magical' physiologically real touch pulled me into a deep connection with Jesus when my body was embraced by the warmth of His suffering and humiliated body, in 'a state of profound contact and engagement between two people, in which each person is fully real with the Other, and able to understand and value the Other's experiences at

a high level' (Mearns & Cooper, 2005, p. xii). I finally believed His words of non-judgement, forgiveness and acceptance even though my brain could not make sense of it. My self-image was transformed from a condemned and ashamed one to be a forgiven and beloved one. Further, God's physical holding and touch restored my bodily feelings (e.g., this event and hugs from God in Chapter 4) resulted in the gradual awakening of my bodily memories.

5.2 Unknown sadness—unfinished business with mum

In this section, I will present the interventions dealing with a dissociative process that I had, through various forms of therapeutic activities such as PCT, EFT and EFT skill practices.

Researchers believe that individuals have inner children who could have different ages, with yearnings and fears at all ages (Mitchell, 1988, p. 131), while they have a voice that desires to be heard (Stiles, 1999).

A vague voice started to ask me for attention and find a father for her after my dad passed away (Chapter 4). In the Prayer after rejection (Event 4f, Chapter 4), I noticed my wailing had an infantile quality. The lingering feelings originating from unfinished business with specific persons or specific events and yet becomes generalized and chronic are termed as maladaptive primary emotions (Elliott et al., 2004, p. 259). Because of not being understood and being dismissed repeatedly, they could be flooded away easily (Wallin, 2007) until they receive tender acceptance. The acceptance of this unknown sadness in various therapy activities led me using this emotion as a pain compass to find the lost inner child Mei as I have recorded in the following events.

Event 5d: The dissociation and the tightness in PCT therapy

The dizziness in the form of the dark clouds was gathering quickly and zoomed around in my head. My brain shut down.

I was with my second therapist who is person-centred.

T: How do you feel?

J: I don't know.

T: What happened to your stomach?

J: I don't know. (Then I noticed that I was holding it) I just feel that I need to hold it. It is tight. (Silence). I want mama...

Those tears and wallowing seemed to come from a deep dark ocean. I did not know why I was crying and was surprised that I had so many tears. I had never remembered myself asking for my mother.

I was sliding down on my chair, curled up like a ball in the corner of it like a baby, being exhausted. It was good to be allowed to cry though.

(Quote from my personal journal).

The dizziness in my head and the image of dark clouds gathering is identified as dissociation or 'dissociative process'. Dissociation is a primitive mechanism to protect the child from unbearable physiological and emotional stress induced by a traumatic experience (Schoore, 2003). Early relational trauma might be abuse, neglect, or simply a rupture like a brief separation ('brief' from an adult's perspective); for example, the Still Face Experiment done a few decades ago demonstrates vividly how a brief withdrawal of an empathic presence distresses an infant. A traumatic experience causes tremendous stress on the infant, resulting in a mental status described as a 'dead spot' (Kestenberg, 1985, as cited in Schoore, 2003), 'discontinuity' (Elliott et al., 2004), 'annihilation' (Winnicott, 1965), and 'abyss' (Wilson, 2006). My experience depicted by the image of 'the cliff' (see Event 5h, Section 5.3) echoes all those words with a quality of 'screaming hopelessly' (Schoore, 2003, p.197) in annihilation anxiety, with the threat to one's bodily wholeness and the annihilation of one's core being.

Dissociation resulted in memory gaps, beliefs and patterns that cause both intra- and inter-personal difficulties for survivors. In my case, part of me wanted to be seen and connected while part of me was holding me back or pushing people away.

Event 5e: Finding Mei Mei in EFT therapy

I sweated a lot. My clothes were wet even though I removed my jacket and opened the window. It's winter.

My arms were painful after I pressed my stomach so hard, almost for the whole therapy hour.

I had a sense that Mei Mei—a name I gave to the infant girl of me—was in a dark place. She had no words.

T: What would you like to tell Mei Mei?

J (adult part): (tried to put words to Mei Mei's feelings) You must be so scared and helpless...'

Instantly, two lines of tears came out of my eyes—tears without feelings or words. It must be Mei Mei's tears. It makes sense as the infant had no words yet.

Then I—adult Junmei—could see the little face (not clear, still quite dark) with a curious and yet relaxed expression, as if she was saying 'You are an adult. You will work it out. I can relax and be a child.' I liked her trust in me, like how my children trust me.

(Quote from my personal journal).

I noticed empathy shown to Mei Mei from the adult/therapist me was powerful. There was a real connection and trust between me and Mei Mei when she shed tears. The warm drops of tears symbolized that a frozen part of her was thawing.

Event 5f: Self-interruption work in EFT skill practice

Dissociation is challenging for many therapists when the client is alienated from their feelings or memories. EFT has a task to tackle the challenge of those self-interruptions using two-chair work which often alternates with empty chair work to handle unfinished business with a significant other.

The therapist guided me to conduct a two-chair work on self-interruption which later turned into an empty-chair work with my mum.

Two-chair work

T: Can you see the little girl?

J: I could not feel anything.

T: What does this 'could not feel anything' make you feel?

J: I am puzzled...feel like death...I had been a rigid, cold, flat, lifeless person. I felt lonely consistently even though I have many social friends. (I don't even have social meals with people. I am stingy of spending time on myself too).

(Later)

Empty chair work

J: (I was suddenly speaking from a caregiver's experience—very likely my mum's) I feel exhausted because I need to hold her—I wish she was sleeping, so that I can rest.

J: (Sadness came, which is the little girl's feeling) In all my life, I avoid being a burden to you by not expressing my need and feelings. (Crying, soon stopped crying) I have to be independent. I should let you know that I am self-sufficient.

T: What is it like for you at that time (being separated)?

J: (speaking for Mei Mei) It must be horrible.

T: Tell her it was horrible for you.

Mei Mei: (Shift—My feelings were evoked, I started to speak in Mei Mei's position. I started to cry) You should not leave me to a stranger, you should not avoid seeing me. I could not figure it out—in my mind, I thought that it was because I was not good, I should not cry...

T: What do you need from her?

Mei Mei: I need her to explain that it was not because I was not good. But even if she explained it then, I would not be able to understand it. (I was crying intensively. I haven't been able to cry like this for a long time).

T: Be your mother.

I cried harder, with tears born from my perception of mum's complicated feelings: sadness, guilt, grief and loss.

T: (soft empathetic voice) What do you need to get back to the reality?

J: (I could not imagine how painful it would be for her to know what I had suffered—mum's love was obvious to me) I need to hold on to the fact that she loved me, not only the considerate, mature part of me, but also the little girl of me. Mum could be hurt, tired, but she felt my pain. I have been believing the lie—that I was abandoned because she rejected me. I know she loved me; I need to feel it.

(Quote from my personal journal).

In this event, I have achieved a mission impossible—breaking through the thick wall of dissociation, finding Mei Mei using EFT two-chair work and empty-chair work. Both PCT and EFT promoted the expression of Mei Mei's voice and enabled her to be found through deepening the unknown sadness, a path to meaning making and creating a new narrative.

The emotion deepening process started from staying close with the consistent loneliness which was unclear and generalized maladaptive primary emotion, the

horrible feelings of being left alone in danger fits the descriptions of core pain (which is the most important pain or the bottom of the pain) (Elliott & Greenberg, 2021, p. 45) and was evoked in two-chair work. Subsequently, my assertive anger for not being protected or assured as a baby was evoked. The expression of assertive anger to my mum in the empty chair evoked my experience of her who felt my pain with complicated tears, with sadness, guilt, grief and loss from her and myself. I experienced her sadness to see my hurt and her guilt for not protecting me from the hurt. Perceiving her pain facilitated me to forgive her and see my own responsibility in rejecting her, leading to grief and loss for missing a close relationship for most of our time together. Finally, I achieved a reconciliation with her and then an expression of my needs and self-compassion at the end of the session.

My acceptance of Mei Mei, whom I rejected unconsciously, resulted in a reconciliation with my late mother. I was surprised because I thought the internal faint voice of Mei Mei prompted me to look for a father.

Subsequently, the acceptance of Mei Mei led to an improved self-acceptance and self-compassion. The reconnection and reconciliation also contributed to my better bonding with my female therapists and clients since the relational pattern runs parallel in all those relationships.

Event 5g: Xiao Tao Qi pops up again in EFT therapy

Mei Mei was happy as we tried to put words to her feelings. She must have felt understood, as she is smiling brightly.

T: How does the big J feel right now?

J: Hmm, I have feelings in my gut. This feeling is telling me that I might not be patient enough. I might make mistakes taking care of Mei Mei. (I cried for a while.)

T: How old is this part of you, who is afraid of making mistakes?

J: Maybe bigger but still a little girl, 6-9 years old (the image of Xiao Tao Qi popped up).

T: What would Mei Mei say if you make a mistake?

Mei Mei: It is okay to make mistakes. I will still love you. (Mei Mei smiled at me sincerely—just like how my sons usually respond to me.)

JM (the good mother part of me said to Xiao Tao Qi): I can understand you are a child and learning. It was hard that you had to take care of your dad's emotion as a child. You don't have to do that now. It's okay to make mistakes.

Xiao Tao Qi: (cried) I am touched, feeling understood but also sad because I had been walking on eggshells for so many years. Fear had been the cage preventing me from flying.

(Quote from my personal journal).

This event unveils Xiao Tao Qi's experience as a child-parent whose sense of inadequacy had probably originated from a desire to protect Mei Mei from being in danger of overwhelming emotion, again as reflected in the image of the Girl, the Fence and the Flooding (Figure 4.2). According to Herman, fear of making mistakes has a root from trauma since

‘At the moment of the trauma, the [child] is utterly helpless. Unable to defend herself, she cries for help, but no one comes to her aid.... The memory of this experience pervades all subsequent relationships...she cannot afford to be tolerant, there is no room for human error...’ (Herman, 1992, p. 137)

The ability to feel primary adaptive emotions, particularly sadness here, is part of therapy, allowing mourning for loss and seeking comfort and connection (Greenberg, 2015). Healing according to Jung is the integration of various internal figures (Jung, 1997; Schwartz, 2013; van der Kolk, 2015). In my case, after I found Mei Mei, Xiao Tao Qi was also heard and supported by an internal mother and an accepting baby.

5.3 Intense anxiety—unfinished business with God

In this section, I am going to present three events (the last is an imagined event) that relate to my intense anxiety, which I identified as unfinished business with God for unknown trauma(s).

Event 5h: The cliff

During a Sunday worship, the thought of approaching a deadline made me panic. I prayed and asked inside, 'What is happening?' An image emerged: I was on a carriage pulled by a galloping horse racing toward a cliff and it was approaching the edge. 'Oh no,' I covered my eyes in an extreme horror, trembling and shaking, screaming loudly inside before I hit a total dark, unknown and unimaginable emptiness.

Event 5i: The darkest pit

I had a focusing process on my reaction to a specific kind of facial expression that triggered me. I was puzzled. I showed disgust.

There was a flow of sensation passing from my abdomen via my lower abdomen to my legs. My legs were numb, my hands stuck on them. I broke into crying, really sad and desperate, painful wailing for a long time.

Then my stomach tightened, and I had to hold it very tightly—one hand on my stomach and another hand on my chest. My therapist commented that the baby had a need to be held and I was responding to her needs.

My head was dizzy. My therapist instructed me to slow down and drink some water. Later, she asked me who could accompany me to the scene. I could not think of anyone. Not myself. Not my late parents. None of us could bear the mess, though I did not know what the mess was.

(Quote from my personal journal).

I believe there was probably a traumatic event when I was around 1 year old which could explain the annihilating horror and memories stored in my body (this age was deduced from telephone conversations with those who knew about my infancy childcare).

Event 5j: An imagined rupture

This imagined rupture was written according to the best of my knowledge, using both bodily and explicit memories that I could recollect.

Mei Mei was extremely distressed when mum picked her up. She was wailing non-stop. Mum was apologetic but could not hold Mei Mei anymore. Mei Mei was dropped.

Dad was my hero who picked me up. He held me and accepted me with his dotting smile. He became my saviour. I idealized him. I thought I could be a pampered baby in his presence.

Sometime later:

Dad exploded in his temper tantrum and deserted me as I was 'bad'.

His dotting smile disappeared³. I had been looking for those good feelings—being pampered by a smiling man.

(Quote from my personal journal)

³In my days in Chinese culture, parents tended to be less affectionate when their children grew older. In addition, as an adult, I observed that dad could not hold eye contact with me because of his low self-esteem but he was able to look at my sons with affection when they were babies.

This event helps me to make sense of why I had been angry with mum and yet crying for her in therapy. It makes sense why I had been yearning for connection and yet keeping people from me at an arm's length. The wound of being dropped or rejected was forgotten in the explicit memory but has been relived in me always. The initial fear of rejection turned into secondary reactive anger and pushes away people who approach me. The longing for connection turned into helpless lonely sadness (maladaptive primary emotion).

It also helps me to make sense why I had been idealizing dad and was not able to show anger to him. Shame and sense of inadequacy became my old familiar 'friend' (maladaptive primary emotion). The infant part of me—Mei Mei—had been projecting her needs for her dad later to a romantic partner by idealizing them and developing unhealthy dependence. In a romantic relationship, I regressed to be an infant, trying my best to please the man so as not to be abandoned.

Finally, it makes sense why I had been undergoing tremendous anxiety when I constantly fear making any mistakes which could lead to life and death consequences.

Traumatic memories are found to be fragmented and yet accurate (van der Kolk, 2015). Under the tremendous stress when trauma events occurred, an individual's hippocampus shuts down, with the effect of blocking the formation of explicit memories. Meanwhile, the intense horror prompts the amygdala's release a high level of adrenaline which intensifies the encoding of implicit memory fragments of the original trauma experience—the emotion of terror, the triggering images and bodily sensations or behavioral reactions (van der Kolk, 2015). The anxiety stored in my body and fear of a specific type of facial expression are likely the encoded implicit trauma memories which I was not able to make sense of because there was no explicit memory nor coherent story along with those memory traces. Though I may never find out what actually happened, and I will not hold a rigid belief of such an event to make up false memories, the narrative bridges a 'dead spot' (Kestenberg, 1985, as cited in Schore, 2003), or 'discontinuity' (Elliott et al., 2004), in my life.

This potentially contributes to a new narrative and meaning making in the later part of my therapy.

5.4 Conclusions

In this chapter, I have illustrated the Stage 2 of trauma therapy which consists of memory work and emotion-deepening process. It coincides with the phase of immersion in heuristic inquiry with many unknowns and fragmented memories surfacing. It showed that therapists' empathy and acceptance can undo the primary maladaptive emotions such as internal criticism and shame originating from past trauma. Therapy approaches such as EFT and PCT were useful to access and evoke emotions that linked to trauma memories, leading to the reunion of previously conflictual or dissociated inner configurations.

EFT procedures played a major part in the memory work in my trauma recovery. Clinical research on EFT applications discovered that moderately high emotional arousal is necessary to access implicit trauma memories (Paivio & Greenberg, 1995). However, clients often have emotion self-interruptions in the form of dissociation, numbness or emotion suppression, which prevent emotion processing. EFT techniques are useful in overcoming emotion self-interruptions (Greenberg, 2015) as shown in Event 5f. Subsequently, by following the pain compasses, one can trace back to core pain which might be dissociated previously as shown in Event 5i.

Most of the time in this chapter, God had been in the background as my secure base while I dipped deep into the tormented emotional sea. The profound reunion whereby Mei Mei was finally seen and set free from the rejected dark place was achieved through the PCT and EFT on the condition that I developed openness to and acceptance of my emotions—a condition permitted and enabled by God, as I recorded in Chapter 4.

Chapter 6: God Enabled Transformation and Meaning-Making

Both Chapter 5 and Chapter 6 present the trauma exploration journey. As shown in Table 3, while Chapter 5 unfolds and uncovers hidden emotional experiences and memories in me, Chapter 6 focuses on emotional transformation and meaning making in conversation with God, which consist of the Stage 3 of my trauma therapy.

Table 3: Three themes with emotion schemes

	Theme 1	Theme 2	Theme 3
Emotion schemes	Shame	Lonely sadness	Intense anxiety
Main defence	Numb to anger	Dissociation	Tiptoeing
Beliefs	I am bad	Others will reject me	The world is dangerous
God as an enabler and encourager in Stage 1 (Chapter 4)	Section 4.1 Enabled to feel and connect	Section 4.2 Co-regulated overwhelming emotions	Section 4.3 Promised to protect Encouraged my curiosity
God as a secure attachment in Stage 2 (Chapter 5)	Section 5.1 UFB with Dad	Section 5.2 UFB with Mum	Section 5.3 UFB with God
God as a healer and meaning in Stage 3 (Chapter 6)	Section 6.1.1 God permitted my anger	Section 6.1.2 God's healing and compassion	Section 6.1.3 God's protection
	Section 6.2.1 Meaning making: Idealization, sexuality and spirituality	Section 6.2.2 Meaning making: Pain and suffering	Section 6.2.3 Meaning making: The middle road

In the first part of this chapter—Section 6.1, I will write on how God revealed healing and protection in images when I hit the bottom and reached the core pains. Those therapeutic encounters then promoted emotional transformations from maladaptive emotions to healthy emotions, such as shame to self-compassion and generalized anxiety to a sense of security and trust. Subsequently, I will record resolutions on unfinished business with my parents through an imaginary re-entry to the trauma scene with them.

In the second part of this chapter – Section 6.2, I will discuss the meaning of idealization, sexuality and spirituality, the meaning of suffering and how it is possible for me to walk a middle way as a person and therapist.

6.1 Transformations

In this section, I will present how I experienced emotional transformation from secondary or maladaptive emotions to adaptive emotions in communication with God, for example, from blaming anger to forgiveness, from lonely sadness to self-compassion, from shame to assertiveness anger and from anxiety to sense of security.

6.1.1 Transformation—Forgiveness

Event 6a: Forgive God

I was angry at God: ‘Why did you allow such horrible things happen to me?’

A friend of mine who went through similar painful experiences offered me her explanation.

She was sincere. Yet I was not satisfied with her answer. I needed to tell God my anger and doubts, and to hear from Him directly.

God was silent. I started to be suspicious if He could ever answer my angry confrontations. This does not make sense. How could a loving and powerful God ever allow those cruelties to happen?

He did not answer me for a week.

One week later, on my way to a walk at Arthur's Seat, I recalled horrible mistakes I made (refer to Event 5c: Touch my wound, Chapter 5) and horrible things people did to Jesus.

Oh Lord, you have always been allowing people to do horrible things in this world.

Soon, I came across a damaged tree with a large part of its bark being removed.

The Lord said to me: 'It did not die.

I restored it.

I will restore you too.'

I was struck and deeply touched by His response.

(Quote from my personal journal).

The safety to express my anger to God led to a resolution between me and God, with forgiveness to self, others and even God Himself.

My anger towards God reminds me of my anger towards mum after the imagined rupture (Event 5j, Chapter 5). The difference was that mum, who also endured and forgave my temper tantrum, had never helped me to understand what bothered me.

Research findings commonly believe forgiveness and letting go are significant changing mechanisms recognized by both Christian inner healing prayer practice (e.g., Garzon, 2005) and psychotherapy practice (e.g., Greenberg & Pascual-Leone, 2006). According to Greenberg and Pascual-Leone (2006), 'forgiveness and letting go were preceded by the arousal and expression of anger and sadness' and 'the

expression of core personal or interpersonal needs and a shift in the perception of the other' (pp. 618-619). I came to a resolution with God because I was allowed to express my anger. Likewise, resolutions were made with my parents because I was able to perceive their anger towards the perpetrator and their empathy to me in a following event (refer to Section 6.1.2).

Some Christians show a tendency to suggest forgiveness prematurely. For example, in an inner healing prayer, I was told to forgive instantly after I shared newly discovered painful incidents. Despite their good intention for me, I think the need to quickly forgive is a 'block' to experience—a rigid application of Bible verses without considering the context and the individual's need for processing. This often leads to a superficial forgiveness.

Being able to express my anger to God shows not only my development in accepting my own anger, but also my development in a relationship with God. I do not only see Him as an authority but also as a Friend (Schreurs, 2006). He did not dismiss my question nor provide a cheap answer. I believe it is difficult for God Himself to answer too, which is why it took Him seven days to get back to me, and the answer is in His own suffering and forgiveness, which I experienced in an earlier prayer as shown in the 'Touch my wound' Prayer (refer to Event 5c, Chapter 5).

6.1.2 Transformation—self-compassion

Event 6b: Jesus and the good Samaritan

A colleague listened to my sense of deep sadness.

Following his suggestion that I should stay with the sense of sadness and pay attention to the bodily feelings, I visioned lights and my body sensed warmth in an angelic place.

Later, I sensed a fuzzy figure beside me. It must be Jesus. I could not see what he was doing.

Later, the image continued to unfold:

Jesus looked like a good Samaritan. I was wondering what He was doing as I could not see.

It struck me that the good Samaritan looked after someone's wound. That must be what Jesus was doing.

A few days later:

I visioned the little infant girl of me lying in the huge hand of Jesus, rolling, smiling and giving out joyful noises.

A few weeks later:

I shared the joy of welcoming a newborn baby G. The extent that G was welcomed and loved by her parents and siblings made me recall myself being welcomed by my family. My elder brother visited me in the hospital, exclaiming 'Small eyes, small nose, small mouth...' Holding baby G triggered my deepest love for her and Mei Mei¹. How can I ever blame such an innocent infant for other people's wrongdoing towards her? How can I not have more tenderness and compassion on her for the pain she went through?

(Quote from my personal journal).

This is an example of an emotion-focused prayer when God entered into the scene without me asking for Him.

This event shows how staying with the unknown sadness (core pain) enabled my emotional transformation from lonely sadness to healthy sadness. Healthy sadness seeks comfort, connection and self-compassion. Contrary to my usual tendency to

¹ The name Mei Mei has the same pronunciation of younger sister (妹妹). It also has the meaning of beauty (美) and is part of my name Mei (梅). Mei (梅) stands for resilience as it is a kind of flower that blooms in winter.)

avoid emotional pain, as many people do, EFT theories emphasize the importance of deepening emotions and staying with the core pain so that one's agency takes over, leading to emotion transformation (Elliott & Greenberg, 2021).

In an interview, Greenberg describes that when a client 'go to their most wounded places', they are like a small child who 'is the most beautiful being', while their vulnerability, innocence and openness 'evoke incredible compassion' in him, resulting in an 'intense experience of intimacy' (Welling, 2011, p. 12). Greenberg's quote reminds me of how Jesus welcomes child-like people who show openness and genuineness by saying: 'Let the little children come to me, and do not hinder them, for the kingdom of heaven belongs to such as these' (Matthew 19:14 Holy Bible, NIV). Researchers argue that working with emotion predicts sudden gains during experiential therapy for depression, while the client's experiencing deepens prior to sudden gains (Singh et al., 2021). I did have a sudden gain in a sense of self-compassion as a result of God's incredible compassion to me in my most vulnerable place.

Through staying with the unknown sadness, I was able to receive God's healing image in the angelic place without me even thinking of prayer. The second image of Mei Mei rolling joyfully in Jesus' huge hand brought me the sense of safety, freedom, mutual enjoyment and sense of acceptance. When I am playing this video image in my mind again and again, my beliefs that 'I am good' replaces 'I am worthless or shameful or deserve to be ignored or rejected'.

I want to highlight the importance of introducing EFT self-soothing tasks when the client reaches the core pain. Paivio says that a history of rejection by attachment figures results in a core sense of self as defective (Paivio, 2014). EFT researchers thus developed a self-soothing task which is the antidote to the client's collapse of sense of worth 'in the face of painful dysregulated emotional states or powerful unmet existential needs' (Sutherland et al., 2014, p. 739). They propose that there are four self-other combinations that can be used in self-soothing work, one of the approach is to imagine the presence of an idealized parental figure 'not as they were but as you needed them to be'(Sutherland et al., 2014).

Including God's presence in therapy fits into the self-soothing task which fosters one's self-compassion. In my journey of developing self-compassion, I could gradually detect rich kindnesses surrounding me which I had previously ignored. I could ask for comfort and affirmation from other people, including my late parents. If my parents knew what happened to me, I wonder how much more they would have tried to protect me and shown patience to me.

Pondering on my sadness, I wrote my imagined conversation with my parents as follows.

With mum

J: Mum, I miss you. I still need you. I wish I could tell you earlier.

Mum: (holding me tight) Poor baby, I never knew you went through so much. It pains me that you have kept all the pain on your own for so long. It makes me want to hold you tighter and longer. Poor sweetie. Thank you for letting me know. Thank you for letting me in. I wish you live a happier life than me.

With dad

As usual, dad does not have much to say, yet I could tell from his facial expression that he listened, and he is upset. He writes.

A card from my father:

I wish I was there to protect you.

I miss you. The happiest thing is having you back to be with me.

When you are around, I have better appetite. I walk more.

I like singing with you.

I will always pray for you whenever you need help.

Event 6c: An imagined scene of my parents standing up for me

I am a therapist. I am trained to hold people's pain. I can enter the messy scene when Mei Mei was violated. This procedure is called imaginary re-entry task in EFT (Elliott et al., 2004).

In my imagination, dad was there. He was furious, punching the guy repeatedly on his face. The guy was bleeding in his nose, curling up on the floor and begging my dad to stop. Mum was no longer weak and feeble. Rather, she screamed and dashed to the guy like a tigress, tearing the guy's face with all her might.

(Quote from my personal journal).

Seeing dad's rage and mum's extreme pain for me enabled my tears to come out, those healing tears.

According to Elliott et al. (2004), primary adaptive anger is a response to violation, having an action tendency to set boundaries or protect oneself. On the contrary, secondary anger tends to push people away or hide one's vulnerable feelings. Maladaptive primary anger often links to unfinished business with specific persons or specific events and yet becomes generalized and chronic (p. 259). Dad's anger when he kicked me (Event 5a, Chapter 5) was maladaptive as it was attacking the wrong person, at the wrong time and was overly intense, relating to an old wound. Sometimes his anger was instrumental to gain power over my mum. At other times, it could be secondary which masked his needs for co-regulation. Likewise, my anger at God in Chapter 4 masked a deep sense of loss with a mixture of feelings, such as disappointment that I was not able to attend the funeral, guilt for not being there for dad before and after his passing, and grief for the loss of him. It reminded me of my pattern of throwing a temper tantrum at close ones from whom I wish to receive comfort and help with affect regulation (Goldman & Greenberg, 2013). Expressing anger is tricky and complex, with a need to integrate 'the wisdom of bodily feelings with social and cultural know-how' according to Greenberg (2015, p. 233). It is sad that dad was not able to coach me in healthy ways of anger expression. Nor my mum. I observed her anger against people's tears in her sick bed. How would this

rejection of tears play a part in my relationship with her, especially if I had gone through extreme distress? I also observed that she used to apologise when she was verbally abused. Early maltreatment raises the risk of later victimization through, for instance, adulthood domestic violence (Paivio & Pascual-Leone, 2010); for mum, and later me, this most likely contributed to an inability to use our healthy primary emotions productively.

My parents are no longer with me. These are a tiger and tigress that have been awakened in me, borrowing Levine's metaphor of waking the tiger (Levine, 1997). Mei Mei may still be overwhelmed, yet she has a compassionate internal parent, who is growing in her ability to care and seek help for her. I told Mei Mei as a good internal mother: 'Though I do not fully understand what happened, I know your reaction has a reason. I am here. I will not abandon you.' I never thought I had a protective fatherly part of me. Maybe I have that part too who can express protective anger.

6.1.3 Transformation—sense of security

Event 6d: Jesus' holding hand

(A few months after I ended my personal trauma therapy in 2020)

The person was asking me to make a decision, right at that moment!

Instantly, I sensed a huge tightening in my stomach. I had a severe headache. I stopped thinking. Then I went to my bed, sinking into it for hours. I could not move my body, especially my legs. The collapse reminded me of the fear of reaching the cliff.

I decided to try eye movement desensitization and reprocessing (EMDR) on my own which I learned from van der Kolk (2015). I closed my eyes and started to move my fingers in front of them, imagining myself in the cart approaching the cliff. In the great fear of reaching the cliff I was sweating, my heart pounding rapidly. In the

moment that I was about to fall, a huge figure appeared (I know who He was). His two huge hands pushed and held the horse cart back.

He came to my rescue without me asking Him.

How I was touched and relieved.

(Quote from my personal journal).

This event is another example of an emotion-focused prayer when God came to the rescue without me asking for. It shows that my relationship with God is not mechanical. He steps in spontaneously when a need arises.

Therapists usually use techniques such as breathing exercises, grounding exercises or EMDR and therapists' presence to help the client regulate intense fear (Paivio & Pascual-Leone, 2010; van der Kolk, 2015). In EFT, sometimes the therapist helps the client find one person to be a self-soothing object (Elliott & Greenberg, 2021). Again, God became the soothing object for me in this event as well as in several other events (e.g., Jesus and the good Samaritan in the above section).

I still have panic attacks followed by a bodily collapse. I am not sure where the death horror in this event originated. I may never know what caused such huge reactions. It remains an unresolved mystery in my life, and an ugly scar from unknown traumas. For a long time, it was difficult for me to trust God would be there for me despite the fact that He was by then my most trusted Person because the lonely frightening experience was engraved deeply in my memories. Hence, I was surprised again and again when He intervened while experiencing Him repetitively built up my trust. In this event, encountering Jesus holding back the cart for me greatly relieved the generalized anxiety that was stored in my implicit memory, leading to the modification of neuropathway trauma imprinted in my brain. Remembering the encounter and reflecting on it whenever I felt like I was falling repeated the curative experience and made the new imprint deeper. My anxiety level dropped significantly. If I were to use a 1-10 scale to describe my anxiety level in a similar situation, it was about 9.5 before this event and about 4 after.

6.2 Meaning making

In this section, I will present discussions on meanings that I have been trying to make throughout my trauma therapy.

6.2.1 Idealisation, sexuality and spirituality—Looking for a father with a motherly smile

‘There is none like you

No one else can touch my heart like you do

I can search for all eternity Lord and find there is none like you.’

The lyrics of the song touched my heart in my first visit to a church when I fell in love with God immediately.

(Quote from my personal journal).

One of the most exciting discoveries in this research is: In addition to God’s friendly attitude to my anger, fear and sadness, God never condemned me for having erotic or romantic feelings. Rather, He permitted and protected me in my exploration into this sensitive, tricky and scary territory.

For a long time, I could not allow myself access to my sexual feelings. I know this is likely true for many people especially Christians. Some of my Christian friends could not even allow themselves to feel anger. I can imagine how hard it could be for them to feel sexual feelings without a sense of shame or guilt.

I remember vividly in my last day of counselling qualification training, I had difficulties sit in the group when someone brought up sexual topics. My fear of anger and fear of sexual feelings both have a cultural and religious root, the latter buried deeper for fear of losing control or making mistakes.

Bowlby suggests that early infant-caregiver relationships are the prototype for later ones (Bowlby, 1988). Hazen and Shaver (1987) argue that romantic relationships

share some of the similar relational characteristics as demonstrated in early child-caregiver attachment (as cited in Goldman & Greenberg, 2013). Different from other primates who look for a physical hiding place, a human looks for a stronger and wiser person in dangerous situations (Bowlby, 1988, p. 121). Dad was such a person who provided physical containment or protection for me. Ironically, he was also the one who physically hurt me. For reasons I don't know, I idealized him when I was a child. Most likely, he symbolized security for my survival which I could not afford to break (Fairbairn, 1943). I guess partly due to my trauma and underdeveloped emotional brain, I simply idealized dad and split off the bad characteristics to mum as a child (Greenberg & Mitchell, 1983, p. 169). The black and white gender biased belief affected my sexual attraction after dad fell from the pedestal when I was a late teen. The longing for an idealized parent transformed into a longing for a romantic partner who was an older, smiling and doting masculine man. In my effort to seek 'true love', I continued to idealize men and be disappointed because the idealized object is tantalizing but not approachable (ibid).

To be able to accept erotic and sexual feelings just like any other emotions is another huge insight I gained. I believe it is a precious opportunity for us to explore our attachment history and unmet needs when there are erotic feelings aroused (Little, 2018). My fear showed that I did not distinguish the difference between being informed by our 'here and now' emotions and a life being controlled by our impulses. On the contrary, 'present feelings must be integrated with awareness of future consequences and informed by past learning' (Greenberg, 2015, p. 29) and one 'is helped to make sense of what their emotion is telling them and to identify the goal, need, or concern that it is to organizing them to attain' (Greenberg & Pascual-Leone, 2006, p. 612).

Mei Mei's faint calling to look for a father has both infantile and romantic elements. Unfolding those romantic attraction feelings revealed that I had been looking for a strong protective fatherly figure who possesses motherly qualities of acceptance and responsiveness, and a motherly smile.

This is an exciting insight yet brings in a painful realization that I may not find such a romantic attachment in reality as an adult. Goldman & Greenberg (2013) argue that in contrast to a child-caregiver relationship, in which a child is more powerless and dependent, an adult usually can articulate their feelings or needs or self-soothe, and in a healthy long-term romantic relationship, they can each take a caregiving role when there is a need arises. Actually, they propose that adult romantic relationship needs are beyond attachment and security, with an addition of identity maintenance and attraction. In studying identity maintenance including power and control in a relationship, scholars believe that equality promotes a relationship (ibid). The awareness of my gender biased emotional reactions freed me from withholding anger towards male power figures, rather, to take power to protect myself. It also helped me to be aware of my instinct to push away empathic caring people, who triggered my anger towards my mum. As a result, I can show my sadness and vulnerability to safe caring others, forming close relationships. In my relationship with God, I observe God gives power to me by allowing me to express different views to the extent that I feel safe to challenge Him. My relationship with Him has an element of attraction when He fosters my curiosity and attracts me to search for Him, initially through the ‘dim light’ (see Chapter 3).

I accept the seemingly unquenching need for an idealized parent and lover. Rizzuto (1979) asserts that an integrated self-concept entails a concept of the Absolute to mirror and contain the self. I believe that only God can fulfil such a high standard—being the wise and strong One, the protective father who holds me, an empathic mother who smiles at me and a partner with whom I can play.

Paradoxically, putting God at the throne facilitates an acceptance of human limitations, both of myself and others. It is probably the foundation to develop healthy adult love, including romantic love.

6.2.2 Pain and suffering

Suffering is a huge, profound topic, a question that many people ask. When I read ‘The Creaking on the Stairs’ (McConnell, 2019), I joined the writer’s painful struggles in making sense of the extreme cruelty one human could inflict on another. I am irritated when people give me quick answers.

Nevertheless, I acknowledge that pain and suffering have certain functions. Firstly, pain and suffering are doorways of awakening (Levine, 2010). Pain provides information on something that is wrong and calls our attention to do something about it. The lepers damage their hands, feet and eyes without knowing because they have lost the ability to feel physical pain (Yancey, 1990). Likewise, psychological pain is useful for us to protect ourselves and get our needs met; Rogers indicates that the client’s incongruence (vulnerability or distress) is one of the necessary and sufficient therapeutic conditions (Rogers, 1990). My personal development journey shows that pain motivated me to seek help from therapy and God: events like cultural shock at the beginning of training awakened my numbness to pain (Event 4a, Chapter 4) and the loss of my father awakened the infant part of me to voice her needs (Event 4i, Chapter 4). In EFT, therapists facilitate clients to approach their core pain as it often awakens the client to their organismic instinct to fight back for survival.

Secondly, pain and suffering are useful for growth. ‘True and lasting growth requires suffering and takes time, and the therapist’s task is as delicate as performing major surgery or as executing a masterpiece of art’ (Walker, 1971).

Additionally, trauma or suffering provide opportunities to reconcile with each other. In pain and suffering, I recognise that I am capable of hurting others. Since I am the one who had many sins forgiven and therefore, I can be more appreciative of Him (Luke 7:47, Holy Bible, NIV). His forgiveness made it possible for me to forgive both myself and others, accepting the human nature of myself and others as imperfect as shown in ‘Touch my wound’ (Event 5c, Chapter 5).

Moreover, trauma or suffering connects people (Wilson, 2006). In EFT, the intensity of a client's vulnerability indicates a need to provide an 'empathic affirmation at vulnerability' task in which a strong relational engagement is offered (Wiggins et al., 2012). In my distress in the event of Touch My Wound, Jesus appeared and brought me into a relational depth when I connected with Him in His suffering (Touch my wound, Event 5c, Chapter 5).

Finally, trauma or crisis can be a turning point in people's life for them to seek meaning (Wilson, 2006). Marie-Louise von Franz notes: 'The divine psychic core of the soul, the self, is activated in cases of extreme danger' (Levine, 2010, Chapter 1). Similarly, Christians share that the end of their own wit is the beginning of encountering God (Lu et al., 2011). Echoing Greenberg's quote that 'I see beauty in people's pain' (Chen, 2021, p. 33), I see God in my pain. It is impossible for us to treat trauma, but it is possible for one to be healed in shared humanity and pain. In the agonies of my personal recovery, Jesus role-modelled and affirmed His calling for me to be a wounded healer like Him (e.g., Event 6b: Jesus and the good Samaritan, Chapter 6) and to live a life to its fullness with a full range and richness – 'from agony to ecstasy' (Levine, 2010, p. 57).

6.2.3 Walk in the middle way

Be chosen, be blessed, be broken and be given out.

—Henri Nouven

In an EFT training in Asia, I was welcomed in a skill practice group among Chinese counsellors. My peers liked my humanistic presence—the 'being' of me. I felt the connection. I knew one of them idealised me. I was cautious but could not help feeling elated. It was such a contrast comparing this to my experience -five years ago in the beginning of the skill practice in Edinburgh. Finally, I am home, enjoying counselling training in my own language and culture. My pain and suffering in training in Scotland paid off. I stood out because I was grounded and congruent, while my strength is 'being' not 'doing'.

In a new group, I fell down from the pedestal. I was very off track and wobbly. My competency was affected when I doubted myself even after being trained and qualified for years. Person-centred conditions are such a high standard for a human counsellor. Even Rogers himself was not able to hold the conditions for a particular client (Rogers, 1990).

Meanwhile, I am experiencing a cultural re-entry phenomenon, in which I have to adapt back to my home culture in a reversal struggle between 'being' and 'doing', 'relationship' and 'technique'. In the UK, I worked as a volunteer counsellor for charities, while clients paid a small donation to see me after a long waiting list. Many of them took 20 or more sessions. When I started practice in a private centre in my home country, I was thrown into another turbulent sea. Because counselling is still stigmatized to a certain extent, clients may have already struggled a lot and their issues may have accumulated when they enter into therapy. The cost is higher too. Some of them may have the budget for only one session. Some of them have to spread out their sessions so that they can afford it. At times, I blame myself for not being more proactive in helping them since they have limited sessions. On other occasions, I chastise myself for applying techniques too quickly before a strong working alliance is built. My fear of rejection is triggered whenever a client drops out from therapy. I check my booking schedule constantly, seeing a better booking as an assurance that I am recognized as a good therapist. In other words, I am constantly swinging from self-doubt to pride; both are a manifestation of insecurity with an external locus of evaluation.

I laughed bitterly to myself when I recalled what Confucius said in *The Analects*: 'If one cannot hopefully have a person as companion who can stick to the middle way, one may choose to have dealings with those arrogant or impetuous people' (Li, 2020, p. 4).

I need God as my companion who not only helps me to stick to the middle way but also provides those core conditions for me and my clients while acknowledging the fact that I will never be adequate when dealing with complicated human distresses by myself alone.

The Bible says I am God's adopted child (John 1:12), being saved to grow to be like Christ (Philippians 3:10). Maybe the only thing that I can boast about is my brokenness and God's ongoing parenting in my journey of development as a person, therapist and a good Samaritan like Him.

6.3 Conclusions

It shows that EFT framework has been helpful for me to deepen my experiencing. EFT emphasizes the importance of arriving at the core pain before one can leave it (Pascual-Leone & Greenberg, 2007). 'The thing that hurts the most points to what is most important' (Elliott & Greenberg, 2021, p. 46), as seen when clients often bounce back after they hit the bottom and manifest their growth tendency and agency (Greenberg & Pascual-Leone, 2006). By slowing down and looking inward, I was able to enter the most painful places and my agency took over in transforming maladaptive or secondary emotions to adaptive ones. I connected with God in relational depth in those moments as 'emotion is what connects us to each other' (ibid). In other words, I see God in my pain.

My relationship with others subsequently changes because God helped me to see the meaning of suffering, leading to my forgiveness of self and others by accepting human limitations. Meanwhile, I am developing capacity to contain my own pain which is an important therapist quality in facilitating my clients to access theirs.

I was able to make new narratives and meaning after re-experiencing the trauma events which is an important EFT therapy procedure. In this procedure, God became the answers to my search—the father I could not find previously. Similar to Winnicott's famous saying there is no such thing as a baby, I would say there is no such thing as a me, but a God-me dyad. He was found and so was I. Additionally, God became my companion in walking a balanced middle way, enabling me to be free to feel, a better functioning person according to Rogers (1990), making informed decisions with my newly acquired feelings (Elliott & Greenberg, 2021).

Chapter 7: Creative Synthesis, Contributions and Future Research

In this chapter, I will first present a creative synthesis using a prayer. Then I will have a discussion on contributions and limitations of this research followed by proposals on future research.

7.1 Creative synthesis

Prayer 9

J: Lord, what is my contribution in this research? I have a desire to help others.

Lord: Darling, you are the contribution, you are my most pleased work. ☺

*J: (touched, stunned, and then smiled broadly) You are the contribution. I found You!
(In my imagination, I jump up and cling on His shoulder as shown in Figure 6).*

(Quote from my personal journal)

Figure 6 The Journey: “I found You!”



In the last stage of heuristic inquiry, the researcher produces a creative synthesis, usually expressed in an artistic format that presents the researcher's holistic understanding of the phenomenon (Moustakas, 1990). Here I use Prayer 9, a conversation co-created by me and God as a creative synthesis to manifest the rich essences and themes of this research journey. The conversation reveals themes of dialectical constructivism, personal development and spiritual development which led to 'mystical union with God' (Thorne, 2003, p. 55).

A climax

God is the first reason and encourager of this research. He is an active doer who saved me from many stuck situations. For example, I was lonely but kept distancing myself from people; I was curious but dared not venture out. A loving God, like a good parent/therapist, embodies the PCT conditions to the extent that He brings me to a relational depth in this 'leap of faith' (Wiggins et al., 2012, p.150).

A journey

It is a life-changing story, a depiction of a therapy journey and a *play* in order to understand the process of an integrative therapy approach. I was broken and restored, witnessing my inborn growth tendency when I progressed from numbness to spontaneity, from captivity to freedom, from distance to intimacy, who was once lost but now am found.

A happy ending

The whole research is about an unfinished business: looking for a father who helps me to find the feeling part of me and regulate the subsequent flooding emotions in order to live a life to its fullest. It came to a resolution. I found God while I found myself.

7.2 Reflection on heuristic inquiry and its phases

When I first chose heuristic inquiry, I was blindly attracted to it, and in the process of research, my understanding and love for it gradually increased. In this ancient ‘way of knowing’ (Hiles, 2001), I personally experienced that researchers need to use all their senses to conduct internal and external dialogues to complete the knowing process, often painstakingly like a chrysalis in order to explicate the essence of the phenomenon. What follows is my understanding of the methodology relating to this project.

Heuristic inquiry suits the study of therapeutic domain

Heuristic inquiry and therapy are strikingly similar in their ideology, philosophy, attitude and manners. Because of the affinity of the two, heuristic inquiry is suitable for studying counselling- and psychotherapy-related issues. Since it embraces both rigor and flexibility, it suits the complex, multi-layered therapy phenomenon.

The six phases of heuristic inquiry are non-linear progressive processes

The six phases of heuristic inquiry are used as guidelines to suit this unique project and the unique individual involved in it, in order to cater for the need of studying a multi-layered, complex counselling phenomenon. I experienced difficulty in setting clear boundaries in terms of time and scope, because the course of research is usually not linear, but rather circular, convoluted or progressively developing. I have observed three types of progressive ways of heuristic process, moving back and forth from the specific to general, from feelings to words, from part to whole (Moustakas, 1990). Progressive means that earlier data and analysis become the data of a later heuristic process.

The first type is manifested in the process of locating the research questions as narrated in Section 3.2.3, which is a progressive way of heuristic inquiry from vague/general to more specific/personal questions. It took many loops (or incomplete loops) of heuristic inquiry stages and three to four years for me to locate the research question for this project, which is normally done in the initial engagement phase. The research question came from the deepest part of my, the

researcher's, being which has been a preoccupation of mine for the past few years. When this research comes to an end, new research questions emerge that point to future research.

The second type is manifested in trauma therapy (Chapters 4-6), which is a progressive way of heuristic inquiry where the exploration deepens, similar to onion peeling. Person-centred therapy is a heuristic process, while heuristic research can be therapeutic while the researcher experiences growing self-awareness and self-knowledge (Moustakas, 1990, p. 9). The painful emotions shown in individual events led to the unfolding of the core pain in the therapy process (refer to the emotion deepening process in Section 2.1.1, Chapter 2), during the immersion phase of heuristic inquiry and the second stage of trauma therapy.

The third type is a progressive way of heuristic inquiry from microanalysis to macroanalysis. Initially, a single emotional event may consist of a complete heuristic inquiry in the example of the first emotion-focused prayer (refer to Section 3.2.3 for the description of this event and Section 3.3.3 for an illustration on the six phases of heuristic inquiry in an emotion-focused prayer). Subsequently, after I recorded a series of significant events, the earlier total data and analysis becomes the gaze of a later heuristic inquiry.

Looking with hindsight from a macro-perspective, it is possible to see the process of locating the research question as the initial engagement of this project (Section 3.2.3), though that itself may contain many rounds of heuristic phases. The narratives in Chapter 4 overlap with this phase too. The whole data collection and analysis of this project has the quality of immersion, which is mostly presented in Chapter 5. Towards the end of the data collection (though there was no clear cut between data collection and analysis), I entered the phase of illumination where themes and patterns relating to a more macro level emerge after a rhythm of distancing myself from the gazing (incubation). Following illumination, I entered the explication phase, checking the themes and essences with self through writing

and re-writing, reading and re-reading, while validating via communication with people, literature and God.

Heuristic inquiry and EFT and/or prayer enhance each other

Heuristic inquiry is an approach that welcomes the inclusion of creative methods and tools. Since Moustakas (1990) did not provide specific instructions on how to conduct heuristic inquiry on self-as-subject research, I have employed both EFT and prayer methods in conducting this research. Heuristic inquiry and EFT both place emphasis on a dialogical dialectic process. Hence, they match each other well. One of the examples is using the EFT task to overcome emotion self-interruption to help one enter into one's internal world and experience. Meanwhile, including prayer in the research process enabled me to tap into an extra dimension of resources in the knowing process, while providing holding/containment in the painful exploration. Since heuristic inquiry demands high rigour and thoroughness, it has a high requirement on researchers. Both EFT and prayer are venues for me as the researcher to develop self-awareness and relational capacities, such as engaging with my emotions, that are required for heuristic research.

On the other hand, the painstaking, long-term heuristic process enhances therapeutic work as personal growth becomes 'one of the natural outcomes of intense and sustained self-search' (Ozertugrul, 2017, p. 248). For example, reading data repetitively, sifting and sorting, and writing them again and again, allow the researcher to discover patterns and meanings that will lead to enhanced understanding of self and others, and thus enhance therapy. Relationship with God, which is a type of self and other relationship, is also enhanced.

7.3 Contributions to psychotherapy and counselling practice

Counselling and psychotherapy are the contemporary versions of forms of healing, reconciliation, adjustment and meaning-making that exist in all cultures. Any approach to psychotherapy consists of some combination of the set of healing elements described by Jerome Frank (1974) and Carl Rogers (1961). The task of psychotherapy research is that of determining how best these elements can be configured to meet the needs of different clients, social groups, practitioners and settings.

(McLeod, 2001, Chapter 1)

In this section, I will discuss relevant contributions to psychotherapy and counselling practice this research brought about.

I believe in theoretical and clinical pluralism as expressed in ‘letting a thousand flowers bloom’ (百花齐放, a Chinese idiom). This research has explored the process of the integration of two ‘flowers’ which are EFT and Christian prayer to cater for spiritual clients’ needs for trauma recovery. Since one’s trauma may have imprints in one for years in a deadlock status, the healing is often beyond pure application of EFT or any other counselling approach. When I applied EFT and prayer together, I did witness a chemical reaction that sparked something amazing as I anticipated before I started the exploration (see Chapter 2). It shows that an individual’s increased emotional awareness contributes to more connected relationships with self, others and God, while a more trusting relationship with God strengthens the feeling of safety while experiential techniques and prayer facilitate the client to overcome the defence mechanism.

The study has not only investigated the integration of the two approaches, but also traced my own integration of different parts of me, manifesting the development process of a person, therapist and researcher. It echoes the theme of the therapist’s life-long development to be a more integrated person with a growing ability of integration, while facilitating the client to be such a person.

7.3.1 EFT and prayer are compatible

Perhaps these two approaches are compatible because PCT (EFT belongs to person-centred experiential psychotherapy) is a therapy of agape love (Kahn, 1999) and many Christians believe God is the embodiment of such love (Lewis, 2010; Thorne, 2002). Both PCT and Christianity share similar values about personhood and relationships, which contribute to the compatibility of these two approaches. Particularly, both PCT and Christianity uphold the inborn value of a person. The Bible says human beings are created in God's image and hence valuable while those values are endorsed by Christ's unconditional love to the extent that He died for human beings. Likewise, PCT therapists uphold the client's value, providing conditions such as empathy, prizing and unconditional positive regards for them.

7.3.2 God as the client's resource enhances EFT

Explorative research on the therapeutic process leads to interesting and sometimes unexpected discoveries (Timulak, 2008a). I set out on a research journey into a new territory intending to find the mechanisms of the integration of an experiential counselling approach and Christian prayer, but ended up finding God Himself as a Person, a Parent and a Co-Therapist in my trauma recovery unexpectedly.

One essential element of trauma therapy is re-parenting the client to develop emotional and relational capacities that early trauma deprived them from. A therapist functions as a good-enough mother who empathically attunes to her child/client's need, helping the child/client to develop 'true self' (Winnicott, 1965) and provides a secure base for the child/client to explore the world (Bowlby, 1988, p. 140). Though Rogers does not use a parent-child metaphor as Bowlby or Winnicott, his description of how he accompanies a client portrays a remarkably sensitive, attuning parent to me:

As a therapist, I do not want to lead the client, since she knows, better than I, the pathway to the sources of her pain...I do not wish to fall behind in my understanding, because then the exploration would become too frightening for

her. What I wish is to be at her side, occasionally falling a step behind, occasionally a step ahead when I can see more clearly the path we are on, and taking a leap ahead only when guided by my intuition.

(Rogers, 1990, p. 150)

The Bible depicts God as a good Parent, for example,

If I go up to the heavens, You are there; if I make my bed in the depths, You are there.

If I rise on the wings of the dawn, if I settle on the far side of the sea, even there Your hand will guide me, Your right hand will hold me fast.

—Psalm 139: 8-10 Holy Bible, NIV

My research showed that God can be invited to therapy as a good Parent or Co-Therapist to overcome some challenges that a trauma client faces, like how therapists adopt approaches to include parents in therapy. For example, in emotion-focused family therapy for young children, therapists work mainly with parents, coaching them to provide reparative experience for their own children (Chen, 2021).

Firstly, God can be a client's existing relationship in helping a trauma client form an alliance with a human therapist in the early stage of therapy as shown in my case. Difficulties in forming healthy self-other relationships are among the key long-term consequences of relational trauma. Yet a therapeutic relationship is a necessary condition for their recovery. Some clients might be frustrated and drop out from therapy prematurely if they are not helped promptly. For others, it often takes years for a trauma client to be able to form a workable therapeutic relationship if they do not drop out (Webster, 2019).

Secondly, God's parental/authoritative endorsement of a friendly attitude to emotions including unwelcomed emotions is probably crucial for a client to adopt such an attitude, in cases when clients develop negative attitudes to their emotions which are embedded in their cultural and/or religious teachings. For example, in

traditional Chinese culture and Christian teaching, anger or erotic feelings are not well accepted or easily talked about.

Thirdly, as a divine being, God may bring in both natural and supernatural responses as shown in the examples recorded in the previous chapters, in restoring feelings, co-regulating intense emotions and bridging memory gaps. Susan Vaughan comments that a good therapist is a ‘micro surgeon of the mind’ who assists the client to achieve modifications in neural pathways (Doidge, 2007). God is such a surgeon and artist, as shown in the event that Jesus removed the emotional block (Event 4b, Chapter 4). In other occasions, God reveals images that enhance memory work (e.g., Figure 4.2: The Girl, the Fence and the Flood, Chapter 4), enabling further implicit emotional memories processing when emotions are aroused in the presence of a caring other (e.g., Event 6b: Jesus and the good Samaritan, Chapter 6). These are procedures commonly believed to contribute to long-lasting change through the change of the neuro-pathways when emotions are aroused (LeDoux, 1998; Paivio & Pascual-Leone, 2010).

Additionally, God can be a secure base who provides greater containment in therapy. Techniques like chair works which are evocative in nature and effective in overcoming the client’s defence might result in tearing open clients’ past wounds and cause harm, such as re-traumatizing the client if they are not applied sensitively in a safe relationship. A relationship with God can be a client’s secure base in their painful explorations.

Moreover, God can be the client’s self-soothing and self-compassion object. Trauma clients often have a self-image of ‘lack of worth’ or ‘rotten to the core’ (Goldman & Greenberg, 2013). A client who possesses less self-esteem (e.g., trauma survivors) requires a therapist to be more patient, empathic, have unconditional positive regard and be congruent. Such a therapist is not always easily found or available. Sutherland et al. (2014) indicates how difficult it is for clients to reach and stay with the painful feelings even with EFT-deepening procedures and skills, when clients face despair, shame and unworthiness (p. 747). Thus, they propose using soothing objects such as an idealized parent to help the client be grounded. From a Christian’s

perspective, God is someone who embodies PCT conditions or agape love (Lewis, 2010; Thorne, 2002). Hence, including God in therapy may compensate human limitations in providing therapeutic conditions, as Thorne proposes therapists may embody the core conditions to the extent of bringing in God Himself and pointing to God (Thorne, 2002, p. 55).

Further, therapy that facilitates a development of a client-divine relationship would potentially benefit the client beyond therapy, as shown in the event of Jesus' holding hand (Event 6d, Chapter 6). Those who suffered severe early childhood trauma, usually require long-term reparative relationships for them to recover. It often takes time for a client to learn to build up and maintain supportive relationships with others considering the severity an early trauma impact on one's emotional and relationship skill development. A therapist is probably helpful if they can work together for a longer period of time with the client (Webster, 2019), but such a service can be costly and may not always be available, particularly in Asian context when insurance does not usually cover psychotherapy. Hence a relationship with God is a continuous curative experience for a trauma client, which surpasses time and space limitations a human therapist may be constrained to provide. For some of the survivors, God is probably the only one who could fill the black hole of their unquenchable needs for validation and protection.

Finally, God may provide answers to a client's existential questions and meaning-makings. For example, as I discussed in Chapter 6, experiencing the cruelty and harm from fellow human beings pose serious challenges for a survivor to make sense of the world, people and themselves, while even the most gentle and sincere answers to those questions may sound harsh and judgmental. Only the recovered wounded person could possibly be of help, as in the event of Jesus as a good Samaritan (Event 6b, Chapter 6). God also fits well into one's longing for a perfect parent and lover.

In summary, a relationship with God maybe a pre-existing client resource and a product of therapy which continues to strengthen and consolidate the client's recovery.

7.3.3 EFT deepening-emotions enhance the client's spirituality (relationship with God)

EFT techniques are shown helpful in improving the client's spirituality (relationship with God).

Firstly, EFT procedures facilitate one's connection with one's own emotions resulting in one's connection with God. EFT provides structural aids which are effective in helping one to overcome emotional blocks (or self-interruption) in the form of fear of emotions, numb to emotions or dissociation. As a result, one may be aware, access and express one's emotions, through focusing on one's bodily feelings and stimulating contact with one's experiences using imagery and psychodrama enactment. Since emotion is the foundation for connection (Elliott & Greenberg, 2021), experiential techniques effective in helping an individual reach deeper level of emotions quicker enable them to more quickly form a connection with both human and God (refer to Chapter 4 for examples of emotion-focused prayers with God). Imaginative encounters, a major procedure in an emotion-focused prayer adapted from EFT empty chair work, may facilitate the evoking of one's experience of God's presence.

Secondly, EFT provides an emotion-deepening model aiming to reach the core pain described by Elliott and Greenberg (2021) which contributes to one's therapeutic shift and a development of intimacy with God. EFT emphasizes the importance of arriving at the core pain before one can leave it (Pascual-Leone & Greenberg, 2007) and 'The thing that hurts the most points to what is most important' (Elliott & Greenberg, 2021, p. 46). Clients often bounce back after they hit the bottom and manifest their growth tendency and agency (Greenberg & Pascual-Leone, 2006). From my observation, God is likely to meet an individual in those most painful situations. For example, in the event of Jesus and the good Samaritan (Event 6b, Chapter 6) and the event of Jesus' holding hand (Event 6d, Chapter 6), I sensed God's incredible compassion to me, resulting in relational depth encounters and an intense experience of intimacy, which contributes to subsequent therapeutic shifts (Singh et al., 2021).

7.3.4 Personal development as a contribution

The research process shows that the integrating of EFT and prayer may facilitate one's self-development as a client, therapist and researcher. My transformation, is a contribution of the research project (Ozertugrul, 2017b; Sela-Smith, 2002; Throne, 2019).

Personally, I became able to access to my formerly lost emotions and experiences, which enabled me to form connections both with others and with God. Leslie Greenberg says therapy is not to help people feel better but to help them better to feel (EFT Level 2 training, 2021). In the initial stage of this project, I observed how within my birth culture I had learned to deny my feelings, particularly anger. I learned later that being in touch with one's emotions is an essential condition for connection with others. I have developed emotional sensitivity after overcoming emotional blocks including dissociations. I then discovered a new dimension in my prayer life as a Christian, with the recognition that I could have a relationship with God, a safe, accepting, empathic Other, from whom I could accept challenges and help to regulate my newly experienced feelings. Being able to relate to living persons (including God) as a living person, contributed to my renewed sense of self, meaning and narratives. I acknowledge that though one might make mistakes in the emotion restoration process and encounter more pain, anger and fear, at the same time one might experience more love, courage and intimacy (Rogers, 1990, p. 419).

Personal development for counsellors cannot be overly emphasised. In PCT, the conditions and goals of therapy are remarkably similar to each other. On one hand, the therapist's relational capacities are conditions of therapy (as shown in Figure 1) while the goal of therapy is for the client to build up such capacities. The client may develop relational capacity such as empathy (Barrett-Lennard, 1997) and unconditional positive regard for self and others (Tickle & Murphy, 2014) by experiencing the therapist's communication of such qualities. Ultimately, successful therapy provides a climate so that the client may become a therapist for themselves (Rogers, 1995, p. 150). On the other hand, people who choose counselling as a profession are often caring individuals who had significant emotional experiences,

coming into the profession with a desire to be healed either consciously or unconsciously (Miller, 1997). Training or seeing clients may trigger past wounds. If those personal issues are not addressed, they may hinder the therapist's ability to offer the therapeutic conditions because 'You can only take a client as far as you have gone yourself' (Wilkins, 1997, p. 1). My personal growth translates to my growth as a therapist. I see myself morph from a trainee, keen to grasp skills to help clients motivated subconsciously by a need to be accepted, to someone who accepts my human limitations and growth tendency in the process of becoming a fully functioning person so that I can be a tool to help clients grow in this manner.

Further, the development of a researcher (knower) is a research contribution in addition to knowing (McLeod, 2001). Research opened an extra venue to continue a dialectic between one's concepts of how things ought to be and one's direct experience of how things actually are (Greenberg et al., 1993). Hence, 'The researcher experiences growing self-awareness and self-knowledge' (Moustakas, 1990, p. 9) when I read, reflect, write and pray again and again. Over the years, I have built up some muscles in my struggles in the stormy seas and darkness in the process of research. My development as a knower is shown in the depth that I reached into my own pain and the greater extent that I am willing to express and share them. From a counsellor's perspective, the development of a knower in a counsellor is significant because a counsellor is an individual researcher who constantly integrates their training and theories in order to facilitate clients to mobilize their agencies and resources.

7.3.5 The description of the process as a contribution

According to McLeod (2001), research can play an important role in documenting, stimulating and exploring the interaction between therapy and cultural adaptations. The presentation of the data in this thesis narrates a life-changing story, a depiction of a therapy journey in order to understand the process of an integrative therapy approach. The long-term self-as-subject heuristic inquiry provides rich, in-depth insider's experience which is not likely to obtain through interviewing others in a

short-term basis. This self-as-subject research contributes new knowledge to the discipline, providing a first-hand ‘more fully enlightened view of a phenomenon’ (Throne, 2019, Section 1), not only for personal meaning, but with scholarship-supported contributions to the discipline and a better understanding of the phenomenon in integrating an experiential counselling approach and Christian prayer.

7.3.6 Emotion-focused prayer as a research method

Emotion-focused prayer has been one of the research methods in this self-as-subject heuristic inquiry. It is a dialogical way of knowing, by searching within in an emotion-focused manner (self-dialogue) and searching above (communication with God). Searching within is tapping into one’s internal resources as our body knows more than our head (Gendlin, 1981) whereby searching above is opening up an opportunity to receive insights from God (Carrera, 2005).

While I applaud Sela-Smith’s (2002) calling for taking the ‘leap of faith’ by letting go of fear of underlying feelings in self-search heuristic inquiry, I noticed that she does not show a method on how a researcher can overcome such resistances or address the need to enhance safety.

EFT procedures can facilitate overcoming resistance in order to access feelings (e.g., emotion-self-interruption tasks), while prayer connects me to God, who became a secure attachment during the personal exploration and provided enhanced safety for this painful research journey.

7. 4 Potential applications, limitations of this research and future research

7.4.1 Potential applications

This research intends to shed light on a therapeutic integration of a spiritual dimension with an emotion-focused counselling approach. My emphasis is to argue

that emotion and experience are jointly the valid entry point for such an integration. Most of the existing integration of psychotherapy and spirituality fall in the domain of CBT or psychodynamic as I discussed in literature review in Chapter 2.

Though I understand not everyone is comfortable around the issues of spirituality, counsellors, trainers and supervisors should be prepared when clients bring up the topics in this era of globalization, I intend to lend perspectives to therapists who work with spiritual clients even if the counsellor holds a different belief system. It may also lend perspectives to counselling training, and counsellors' personal development, especially for counsellors who have some form of spirituality in their lives. Though this research focused on Christian spirituality, discussions and discoveries in this research may be relevant to other forms of spirituality.

I also wish my writing to be accessible to the lay population, especially the Chinese Christian community in order to clarify some misunderstandings or limitations people have toward God Himself. I know from personal experience as well as from literature that church people tend to be dismissive or feel guilty about some emotions, to the extent that they stop praying to God when they are overwhelmed by guilt and shame for having those feelings. I hope my experience offers my readers a different perspective of God, who created emotions, who has emotions and who heals emotions. People may also ask why prayer by itself is not sufficient since God is almighty from a Christian's perspective. I would say God often answers our prayers through natural or social emotional laws. Having the channel to pray to God does not mean we can live a life without a need to rely on other people, rather, to enable us to relate and love better, sometimes through therapy. I believe God is One who created emotions and EFT is a good tool for many to be helped. Hence, Christians' prayer and relationship with God may be enhanced through deepening the pray-er's emotion using EFT counselling techniques.

Considering the high demand for treating emotions in the Chinese population (Mu & Hu, 2016), and the relative shortage of reliable professionals (Higgins et al., 2008), it might be relevant to develop emotion-focused prayer to be a peer-support approach among Chinese Christians. A peer-support approach is compatible with the

prayer practice among Chinese Christians when they gather to pray for each other. Such a peer-support approach may also bypass the stigma regarding mental health treatment among the population (Lee, 2002). The peer-support approach may be applicable also to non-Chinese Christians or people having other forms of spirituality.

Likewise, it is also possible to develop emotion-focused prayer as a self-help approach, so that a client can either learn by themselves or collaborate with a therapist, just like ‘focusing’ introduced by Gendlin (Gendlin, 1981) and writing exercises that Etherington’s clients used to help them make meaning of their memories and narratives (Etherington, 2000).

The idea of using therapy method (e.g., emotion-focused prayer) as a research method has potential in promoting counsellor-researcher research. Since it usually takes some time for a novice researcher to learn a research method, using a therapy approach could save time and effort, making research more accessible and less threatening. In view of the intertwined connection between therapy and research, research may be utilized as therapy or part of therapy.

Additionally, just like people learn from creatures in various scientific fields, I argue that in the future practitioners or researchers can learn from the Creator (God) directly through prayer on how to conduct therapy and research if they have a relationship with Him.

7.4.2 Limitations of this research

The limitations of this research are obvious. Firstly, with the limitation of the researcher being a trauma patient, the effects of the therapy and the research working together in contribution to the development of the researcher took a long time in this highly relational knowing journey.

Secondly, being the single researcher, I often was stuck in convoluted positions like many other self-as-subject heuristic inquiry researchers (Throne, 2019). There are times that I felt like I had been turning round and round and was lost in chasing after

my own tail. The sense of loss is most prevalent in the immersion stage of heuristic inquiry.

Thirdly, since it is a single case study, it lacks width in studying this phenomenon.

Moreover, due to my limitation as a novel researcher, a new EFT learner, a not-so-experienced therapist in trauma therapy and a recovering trauma client, the understanding of the phenomenon and data analysis is limited.

I acknowledge my limited knowledge of EFT practice. I tend to use less EFT technical terms partly because I am a novice in EFT practice, and partly because of my concern for readers who are not EFT-trained. I am open to critiques and constructive feedbacks on my application of EFT.

Further, cultural and language differences are barriers in this project despite the fact that they may be opportunities too. Since English is my second language, I had many struggles in describing my emotional experience on top of their hard-to-describe nature. I might use language that cause reactions in a Western context while they might be fine in an Asian culture.

The time and word limitation of a doctorate project prevented me from including more materials into the text. Though I tried using the procedures of emotion-focused prayer with family and friends with surprising and yet exciting discoveries, I have not included other people's experience (with the exception of a prayer experience with my dad) in this project for the purpose of focusing. I have also integrated emotion-focused prayer with other creative approaches, such as dancing and filming to tackle trauma issues which I could not include in this thesis either.

7.4.3 Future research

Firstly, considering the significance of applying one person's lived experience in improving counselling services, I suggest research into others on the integration of EFT and Christian prayer to explore the following aspects:

- 1) Interviews to understand Chinese Christian's attitudes to emotions, experiences and relationships with God.
- 2) Clinical applications of integrating EFT and prayer, to further develop it into a model or EFT task (such as inviting God as a self-soothing object (Goldman & Greenberg, 2013; Sutherland et al., 2014), and further investigating the mechanisms, tips and ethical considerations. For example, one of the procedures—imaginative encounter I applied in an emotion-focused prayer is very helpful in turning one-way prayer into conversational after one is in touch with their emotions (refer to Event 4c: Jump, I am here in Section 4.1). For me, such a procedure was a structural aid in early stages of my conversational prayer with God. Gradually, it evolved into spontaneous, non-linear and ongoing processes as shown in Event 6b: Jesus and the Good Samaritan, Section 6.2. How a therapist guides the client to have an imaginative encounter with God that would be helpful and ethical can be a future research focus.
- 3) Investigations on how emotion-focused prayer as a peer support or self-help technique impact on Christians' spiritual development among a number of volunteers.

Secondly, as trauma therapy (or any therapy) demands multi-dimensional and integrative approaches, future research can explore integrating creative methods with EFT and prayer. During the immersion phase of this heuristic inquiry, I have explored integrating dancing, filming and poem writing in my therapy, but not elaborated here. These arts-based approaches may be extra clients' and/or therapists' resources in evoking the client's bodily memories which may be useful in tackling challenges in trauma work.

Finally, further cultural integration may be included in future research. Personally, I experienced the collision of Eastern and Western ideologies in a Western counselling training programme, which was painful but sparked ideas and innovations. I benefitted tremendously from adopting the deconstruction and critical

stance of post-modern perspectives to my home culture. However, I have developed to a stage that I start to value the latter more intimately especially after I returned to practise in Asia. For example, I believe the holistic wisdom of traditional Chinese medicine could potentially enhance counselling approaches (Zhang, 2007), contributing to the counselling field worldwide and promoting cultural acceptance of emotions among the Chinese and Chinese Christians.

7.5 Conclusions

He has sent me to bind up the broken-hearted, to proclaim freedom for the captives and release from darkness for the prisoners.

—Isaiah 61:1b Holy Bible, NIV

Heuristic inquiry provides an avenue to unexpected discoveries, honouring the essence of the person in experience (Sultan, 2019). I have gained more than I have expected in this project. In addition to my personal interest in searching for therapeutic change mechanisms, I have found God as a Person/Therapist who embodies both PCT core conditions and skills. He is an emotion-friendly Person/Therapist who has been helping me become such a person/therapist, echoing His calling for me to comfort people and set them free (e.g., from emotional blocks). I have also found a dissociated inner child Mei Mei who was the first one being set free.

The inner calling of finding father and finding Mei Mei reveals a theme of gaining a balance or the Golden Mean. While Mei Mei represents the feeling part of me who was freed to feel, God is the companion who encourages me to develop my counsellor/researcher/adult part and guides me to walk in the middle way. The application of EFT and prayer to my personal therapy is an integration journey of the expectations I brought from my Chinese culture of origin to my Western non-directive counselling training course, balancing ‘being or doing’, ‘relationship or technique’ and ‘art or science’. In prayer, I was encouraged to have a ‘leap of faith’

with a sense of safety, while in EFT, I was permitted to be both ‘doing’ and ‘being’. This theme runs parallelly in both research and therapy in this project.

McLeod asserts that ‘Compelling and memorable qualitative research requires a willingness to step into... a “period of darkness”’(2001, Chapter 1), which echoes my experience of being lost. I wish to take this opportunity to acknowledge Mei Mei for allowing me to stay with her unknown sadness without giving up hope or connection. I want to give credit to Xiao Tao Qi as well, who, despite her sense of inadequacy (e.g., in her grasp of English as a second language) and numerous self-doubts and yet pressed on in this project. Both Xiao Tao Qi and Mei Mei were allowed to join the *play*, adding energy, spontaneity and creativity into it. Finding, knowing and integrating these inner children are an important part of my development as a person, therapist and researcher, which is a significant contribution of this research.

In my personal journey of discovery of the significance of emotional awareness and expression in relationships, I conclude that spirituality (in this case, a relationship with God) can be a valuable additional resource for both client and therapist supporting the counselling process, with the ethical requirement for sensitivity to the client’s own spiritual frame of reference. Meanwhile, EFT techniques could facilitate one’s development of emotional skills and further contributes to their development of interpersonal relationships including their spirituality.

In summary, the findings indicate that:

- 1) One’s emotion is an essential tool to know oneself and develop intimate relationships with others (including God).
- 2) The application of experiential techniques in a safe relationship with God facilitates the client’s ability to overcome defence mechanisms to connect with their emotional being.
- 3) The spiritual dimension may be a client’s resource to enhance healing emotions.

- 4) The spiritual dimension may be a therapist's resource especially in personal development.

Despite the multiple limitations in this research, the project has shown the transforming power facilitated by the integration of EFT and prayer in my therapy. I argue that the integration can be applied to others, aiming to develop it into a therapy approach or self/peer-support method. It may be worth investigating further integration of creative methods, such as arts therapy and borrowing ideas from Chinese culture, because trauma therapy demands to be multi-dimensional and integrative.

In providing the rich, in-depth descriptions of a unique way of facilitating trauma recovery, my intention is to 'attract a jade after throwing a stone' (抛砖引玉, a Chinese idiom). In another word, this thesis meant to be an open invitation for you—my reader, to bring in your expertise as a therapist, researcher, client or someone who can relate to painful experiences in dialogue with mine. I hope these dialogues will further generate more ideas, attracting more precious gemstones contributing to the field of counselling and psychotherapy.

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List of Abbreviations

CBT	Cognitive behavioural therapy
COWs	Conditions of worth
EFCT	Emotionally focused couple therapy
EFT	Emotion-focused therapy
EFFT	Emotion-focused family therapy
EFTT	Emotion-focused therapy for complex trauma
EMDR	Eye movement desensitization and reprocessing
HSSI	Heuristic-self-searching inquiry
IWM	Internal working model
PCT	Person-centred therapy
TF CBT	Trauma-focused cognitive behavioural therapy
UFB	Unfinished Business
UPR	Unconditional positive regard
UPSR	Unconditional positive self regard