Background-Mood and Emotional Creativity:

A Microanalysis

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When Wordsworth wrote that poetry is “spontaneous overflow of powerful feelings . . . recollected in tranquility” (1952, p. 84), he has evinced a double vision, so characteristic of artistic creativity, that sees beyond the “powerful” focal emotions, whatever they might be, a penumbra of background-affect, such as tranquility, an ambient mood less intense but more encompassing than the focal emotions. This background mood can be foregrounded in art.

Consider the following lines by a fourth century Chinese poet T'ao Ch'ien (365-427):

Picking chrysanthemums beneath the eastern hedge, Leisurley, [I] chance upon the Southern Mountain. (“Drinking Wine”) What does the word "leisurely" refer to? Does it pertain to picking the mums or perceiving the distant mountain? I believe that this relaxed mood pertains to nothing in particular--it is a background affect, a pre-requisite for the chance encounter with the Southern Mountain. What we have here is a figure-ground reversion: the emotions associated with seeing the Southern Mountain as if for the first time are not spelled out.

The poet's focus is instead on the background affect, the leisurely mood, that makes this poetic perception possible. Consider another example. Cezanne was said to have “painted in deepest loneliness the simplest things (a mountain, for example) in such a way that along with the things, the expanse from which they come and into which they withdraw is also there . . . .” (Pöggeler, 1987, p. 283). The putative “loneliness” of Cezanne may be considered a background mood, or “endocept” (see Lubart, and Getz, 1997), which consists of a cluster of nuanced feeling
tones of solitude/serenity/mental freedom, feeling tones that manifest themselves here as the Heideggerian “region,” the “vast spaciousness,” which as Brock points out, “gives every single thing the warrant to be” (1949, p. 243).

What do psychologists say about background mood? Not much, with the exception of a few scattered suggestive observations concerning “endocept,” which refers to an amorphous cognitive-affective structure that looms large in creativity (See Arieti, 1976, and Averill, and Nunley, 1992). A more developed and cogently argued formulation is the “bodily felt sense” as conceptualized by the philosopher Eugene Gendlin (1981), who has also developed a therapeutic technique called Focusing, in which the background mood is both foregrounded and cultivated, an approach so congenial to the spirit of artistic creativity. In what follows, I first draw the distinction between “background mood” and “emotions,” then I analyze a transcript of a Focusing session to show how the “bodily felt sense” with its characteristic double vision is cultivated and maintained. My analysis will be cast in the theoretical framework of perceptogenesis (Kragh and Smith, 1970), so as to bring into sharp relief the process aspect of background mood–its genesis and development, as well as its impact on the focal emotions (see Gendlin, 1991).

Attributes of “Background Mood”

To begin with, a definition of “mood” is in order. “Moods,” according to Damasio, “are made up of modulated and sustained background feelings as well as modulated and sustained feelings of primary emotions–sadness, in the case of depression” (1999, p. 286). Background mood is a sub-category of “moods,” consisting of what Damasio refers to interchangeably as “background feelings” or “background emotions.” The major difference between background
mood and “primary emotions” lies in the fact that the former is lower in arousal, wider in scope, and higher in degrees of self reflexivity than the latter. The attributes of background mood will be examined in the following paragraphs on three registers: physiology, cognitive appraisal, and “recursive consciousness.”

Low in Physical Arousal

On the physiological-biochemical register, background mood may be understood in terms of what Damasio refers to as “background emotions:”

When we sense that a person is “tense” or “edgy,” “discouraged” or “enthusiastic,” “down” or “cheerful,” . . . we are detecting background emotions. . . . Those emotions allow us to have, among others, the background feelings of tension or relaxation, of fatigue or energy, of well-being or malaise, of anticipation or dread. (1999, p. 52)

“Background emotions” are seismic registers of the ongoing physiological-biochemical processes of the body, or “internal state.” “In short,” says Damasio, “certain conditions of internal state engendered by ongoing physiological processes or by the organism’s interactions with the environment or both cause responses which constitute background emotions” (1999, p. 52).

Background emotions seem to be associated with low state of arousal. According to Gudmund Smith, of the two perceptual systems postulated by Beloff, subliminal perception, and we might add background emotions, involve the one “associated with a relatively low state of arousal and mainly mediated by the limbic and midbrain structures. . . . This kind of perception allows access to a wide range of information, which otherwise is often excluded by the inhibitory mechanisms of the other perceptual system, associated with a relatively high state of arousal” (Smith, 1991, p. 204). This is consistent with the claim of Damasio that a background feeling
does not originate in emotional states, but “corresponds instead to the body state prevailing between emotions. When we feel happiness, anger, or another emotion, the background feeling has been superseded by an emotional feeling. The background feeling is our image of the body landscape when it is not shaken by emotion” (1994, pp. 150-151). Likewise Gendlin avers that “a felt sense is not an emotion like anger, fear, hate, joy, or anxiety. It is a sense of your total emotional situation, a feeling of many things together, in which an emotion can be embedded or from which an emotion is produced ” (1981, P. 101). Due to their low intensity of arousal, background feelings are “minimalist in tone and beat,” they “are neither too positive nor too negative, although they can be perceived as mostly pleasant or unpleasant,” says Damasio (1994, p. 150). Gendlin makes a similar point about the “bodily felt sense”: “...a felt sense is always easier on the body than emotions. ...The felt sense of the whole thing feels lighter than what you are feeling already” (1981, P. 100).

The low arousal state of background mood is associated with another attribute, cognitive expansion. Arieti (1976) has noted this dual feature–low intensity and cognitive expansion–in the “endocept,” which he points out “involves considerable cognitive expansion, but this expansion occurs at the expense of subjective awareness, which is decreased in intensity” (p. 55). Gendlin says more or less the same thing about the “felt sense:” “The felt sense is wider, less intense, easier to have, and much more broadly inclusive [than emotions]”(1981, P. 69). Let us look more closely at the cognitive dimension of background mood.

**Broader in Cognitive Scope**

Bodily as it is, the felt sense is not to be confused with bodily sensations. Rather, as Gendlin points out, a felt sense “feels meaningful, but not known. It is a body-sense of meaning”
(1981, P. 10). And it concerns not meaning in this or that matter, but meaning in an all inclusive sense, “the feeling of life itself, the sense of being,” as Damasio puts it (1994, p. 150). Damasio goes on to say:

The background body sense is continuous, although one may hardly notice it, since it represents not a specific part of anything in the body but rather an overall state of most everything in it. Yet such an ongoing, unstoppable representation of the body state is what allows you to reply promptly to the specific question “How do you feel?” with an answer that does relate to whether you feel fine or do not feel that well. (1994, p. 152) This is consistent with our understanding of “mood.”

“Moods are generalized emotions,” writes Solomon, “An emotion focuses its attention on more-or-less particular objects and situations, whereas a mood enlarges its grasp to attend to the world as a whole, typically without focusing on any particular object or situation” (1976, p. 133). “The difference between an emotion and a mood,” Solomon goes on to say, “is the difference in what they are about. Emotions are about particulars, or particulars generalized; moods are about nothing in particular, or sometimes they are about our world as a whole” (1976, p. 173). This formulation of mood is also consistent with Mandler’s observation: “In general, the term mood seems to refer to fairly persisting evaluative states that affect the character (evaluation) of all other ongoing evaluations–and emotions” (1984, p. 132).

The shift from bodily sensation to felt sense, from the physical to the mental, is a transition generally considered important for emotional development (see Taylor, Bagby, and Parker, 1997). What is less well known is that this transition also signifies the capacity for self reflexivity, or “recursive consciousness.” To this topic we now turn.
Higher in Degrees of Self Reflexivity

Damasio posits three distinct though closely related phenomena--“an emotion, the feeling of that emotion, and knowing that we have a feeling of that emotion” (1999, p. 8)--and claims that there is a unidirectional sequence “from inducer, to automated emotion, to representation of emotional changes, to feeling” (1999, p. 291). The transition from emotion to conscious feeling, he claims, involves “second-order structures” (p. 283), which makes possible our capacity for self reflexivity. The “second-order structures” involved in self reflexivity is also known as “recursive consciousness,” which is defined by Zelazo as “an experience plus an additional experience of that experience” (1996, p. 73). In other words, recursion refers to the mental process “whereby the contents of consciousness are fed back into consciousness so that they can become available to consciousness at a higher level” (Zelazo, 2000, p. 158). Zelazo gives the example of naming:

When a 12-month-old looks at his or her father and says, “Daddy,” he or she says (effectively), “[Daddy] is Daddy.” A perceptual experience is associated with a description from memory, and this description is brought to bear on the perceptual experience. . . . there must be two things, the perception and the label, in order for one of them, the perception interpreted in terms of the label, to become an object of conscious experience (note the non-trivial redundancy of this expression). (1999, p.100)

Substituting visual perception with introspective perception of one’s “internal state,” and we can see how finding a word (label) for one’s emotions entails recursive consciousness.

One advantage of self-reflexive consciousness lies in the “psychological distance” it makes possible, due to “cognitive decoupling,” a process explained by Zelazo and Zelazo as
follows: “The recursion permits the decoupling of a description from the thing described and
events behavior to be controlled by the description (stored in working memory) rather than by the
writes Philip Zelazo, “recursion moves consciousness further away from the exigencies of
environmental stimulation in what might be called psychological distance . . .” (2000, P. 159).
There are of course degrees of recursion. As Damasio points out that “‘having a feeling’ is not
the same as ‘knowing a feeling,’ that reflection on feeling is yet another step up [the hierarchy of
the second-order structure]” (1999, p. 284). At its best, reflection on feelings can become a
contemplative mode of perception, in which the poet sees, to paraphrase Hartman’s (1954)
comments on Wordsworth, not “with” his/her sense perceptions, but “through” them, his/her own
mode of being as emotionality. Consistent with research findings on the “meta-experience” of
mood (Mayer and Gaschke, 1988; Mayer and Stevens,1994), one consequence that flows out of
reflections on feelings is awareness and acceptance of one’s own emotional states, a capacity
generally known as “affect tolerance” (see Krystal, 1988), which is best described by Hartman,
again in the context of Wordsworth’s poetry, as a consciousness that “expresses the freedom of a
mind aware of itself, aware and not afraid of its moods or potentialities” (1964, p. 12).

The two consequences of self reflexivity, psychological distance and affect tolerance,
loom large in Focusing. Psychological distance is essential to a wider perspective of things, as
Gendlin points out: “Focusing involves letting a felt sense form something wider than and
different from your old familiar bad feeling, stay out of the old familiar sink-hole, stand back,
and take in a wider sense of the whole problem area that the bad feeling is part of”(1981, P. 99).
Thus he claims that “Whatever comes in focusing will never overwhelm you, if . . . . you stay a
little distance from it. You are not in it, but next to it” (Gendlin, 1981, p. 61). A Focusing practitioner explains: “When you have a relationship with something, you can sense it as a whole. When you are in the middle of it, it’s harder to know it–just as it’s hard for a fish to know water” (Cornell, 1996, p. 17, emphasis added). Techniques abound in Focusing to create the psychological distance. Take “dis-identification” for example. “This is the difference between ‘I am sad’ and ‘a part of me is sad.’” (Cornell, 1996, p. 97). The former shows a lack of psychological distance–the client is identified with his/her emotion of sadness, whereas in the latter scenario, the client becomes an observer of his/her emotion–a decoupling or dis-identification has taken place. A question frequently posed by Focusing therapists goes something like this: “where in your body do you feel that sadness?” Cornell explains, “Inviting a client to notice where in the body she is feeling some emotion is actually a dis-identification technique, because her awareness [of that emotion] becomes more localized” (1996, p. 97).

“Decoupling” in Focusing does not imply disconnection, however. Probably the term “loosely coupled” would be more appropriate in describing “the Focusing attitude of being separate from, but in caring relationship to” one’s own emotions (Marder, 1997, p. 80). This caring relationship to one’s own emotions is nicely summed up by Cornell as follows: “Focusing is like being a friend to your own inner experience. The qualities of true friendship include acknowledging, allowing, patience, curiosity, respect, warmth, welcome, empathy, compassion, and love” (1996, p. 18). A better definition of “affect tolerance” cannot be found. The importance of affect tolerance (see Taylor, et al., 1997, and Krystal, 1988) is very well recognized in Focusing: “The inner climate of letting it inwardly be is necessary for inner change” (Cornell, 1996, p. 16). Again techniques abound to cultivate this “inner climate:” “We
are not in a hurry. We create an inner atmosphere of no pressure, just being with what’s there. We ask gentle questions as a way of inviting the feeling to tell us more” (Cornell, 1996, P. 13). The comportment of affect tolerance is also referred to as “receiving” (Gendlin, 1981, p. 61), or “a welcoming presence:” “A welcoming presence means you are interested in everything you become aware of inside. ... A welcoming presence gives it [each feeling] the space to be and breathe, evolve and transform” (Cornell, 1996, p. 18). Thus the therapist’s response, as a way of modeling “affect tolerance,” to the client who complained of “Still all I feel is tense” (Appendix, 6R) was “OK, so let’s welcome that” (Appendix, 7S).

Methodology

For the study of background mood, the percept-genesis (hereafter PG) paradigm is more suitable than the conventional mood induction approach. “The term percept-genesis was coined in Lund, Sweden, by Kragh and Smith (1970) to emphasize the specific aim to study the microdevelopment of percepts” (Smith, 1991, p. 201). For our purposes, the PG paradigm has the following advantages over the mood-induction approach: a. Gendlin shares with PG the assumption that meaning is constructed, as he puts it, “A felt sense is usually not just there, it must form” (1981, P. 10). b. Background mood is, in terms of the figure-ground distinction, “a marginal zone as compared with the focal and distinct figure, but a zone influencing the appearance of the focus in very decisive ways” (Kragh and Smith, 1970, p. 14). Since it lies beyond focal awareness, background mood, not unlike subliminal perception, can best be approached by methodologies developed for the “study of marginal, nonstimulus-dominated influences” in behavior (Cegalis, 1991, p. 122), an approach that contrasts sharply with the mood-induction paradigm, which is better suited for the analysis of focal, stimulus-dominated
influences in behavior. c. With stimulus chosen on the basis of its proven strength to induce predictable, relatively fixed responses, the mood-induction approach has rendered invisible mental processes such as subjective awareness and active meaning construction, processes which are able to resume central stage in the non-stimulus dominated condition of PG. Otherwise put, the questions of development, transformation, and subjective construction of meaning are a black box, assumed but not explored by the mood-induction paradigm. In contrast, the PG paradigm has the advantage of foregrounding mental processes central to our inquiry (see Averill, 1999, August). d. An additional incentive for the utilization of PG for emotion research comes from the claim of Solms (1997) that emotion is perception. Based on the insight of Solms, which he attributes to Freud, that “our conscious awareness of the natural processes occurring within us” is comparable to “our perception of the external world by means of our sense organs” (p. 686), a parallelism may be drawn between PG of visual perception and that of bodily felt sense: to paraphrase Solms, bodily felt sense is an introspective percept proper to introspective awareness, just as visual percept of an object is proper to visual awareness.

In the following paragraphs, I apply the theoretical framework of PG to the analysis of a transcript of a Focusing session. In a typical PG experiment:

The viewer is confronted with a series of stimulations, to begin with very brief or very weak, just below the threshold of recognition. When these stimulations are either systematically prolonged or intensifies, and the viewer is instructed to report what he/she has detected after each presentation, the ensuing result will be a series of descriptions. This series is assumed to reflect a PG, or a process of reality construction. (Smith, 1999, p. 14)
Cast in the framework of PG, verbalizations of the Focusing therapist will be coded as verbal stimulations (S), which are—as counterpart of visual presentation of an image—verbal cues of a “bodily felt sense;” the verbalizations of the client will be coded as responses (R), which constitute—as counterpart of visual perception of the image—introspective percept of a felt sense.

Transcript of a Focusing Session

Transcript of a therapy session used for teaching purposes in the Focusing Workshop conducted by Mary Hendricks, Ph.D., September, 1999, New York City (reprinted with permission)

(Therapist’s statements are in bold)

Beginning statements of the client:

Ever since all this stuff with the bleeding and surgery, the tension level has been even more than usual and it’s unbearable even the way it usually is. There’s a racing in my chest. Nothing we are doing is touching this. Nothing touches it. I’m taking something like twenty pills a day right now and nothing is any different than it’s ever been. I don’t know what to do.

1S. Can you sense right now what all that tenseness is? What is some of what all that tenseness is about?

1R. I don’t know. It’s racing in my chest. It’s horrible... (Long silence)

2S. Is it like you can sense the tenseness is about something or does it feel just like a body state?

2R. It’s just a body state. It isn’t about anything. Do you think it is?

3S. Yes. Let’s see if we can get it out of just a body sensation onto the feeling level so we can work with it. You already said it’s gotten worse since the operation stuff came up, so can we see if it’s about that? You can ask inside, “Is all this tenseness about the operation
and all that?”

3R. I don’t know. You’re asking me to do something I don’t know how to do. (Long silence)

4S. Can we tell your body that the operation and all that is over now, that it’s OK, so your body can ease?

4R. You can say that. I can say that, but it doesn’t do anything. (Long silence)

5S. Can you feel your body from inside it? Bring your attention down in and feel your breath in your stomach and abdomen. Can you do that?

5R. Yeah. I feel cramping in my abdomen.

6S. OK, but stay with your attention on your breathing in your stomach and abdomen. Then from there let’s gently ask, “How am I? What is all this tension about? What’s in this feeling of tension?”

6R. (She is quiet, trying this.) Still all I feel is tense. It’s all tight. Everything is clamped down.

7S. OK, so let’s welcome that. What comes is a feeling sense of being all tight. Everything’s clamped down. Like your feelings are all clamped down.

7R. I didn’t think of it that way.

8S. OK, but there is a sense you have of everything being all tight and clamped down.

8R. Like I’m bracing myself.

9S. OK, so a sense of bracing yourself. So we can gently ask, “what’s in this feeling quality of bracing yourself?

9R. (She is quiet and tries to see.) I don’t know.

10S. Well, is it like bracing yourself to not get hurt? Or trying to keep something out that’s
about to happen? I’m making those up, but you see what it seems like.

10R. I don’t know. I can’t open anything up. I’m working six days a week and I have to be able to function.

11S. OK, so you have some sense you can’t let it open because you have to function. Well, we don’t need any dramatic, big opening up. We just want some gentle easing here. Just so your body can ease and you can feel OK. Just something gentle.

11R. I feel like I’m shaking inside.

12S. Yeah. So, again, why don’t you put your attention down in your stomach and abdomen on your breath . . . . Keeping your attention there, let’s see if we can get a sense, MAYBE an image of what would help. Let’s ask inside, “What does it need now for all this whole thing to gently ease, so you can feel OK?”

12R. (Long silence) I get two things... One is if I didn’t have to leave until I wasn’t worried anymore about leaving. If I didn’t have to be aware of the clock ticking.

. . . .And maybe you could hug me.

13S. Yeah. That’s right. That feels like it would help.

13R. And I got another thing... A dog--a Collie. ( She begins to cry!) I don’t know if I’ve told you but when I was a kid and so scared all the time, so terrified, I used to ask my parents for a dog, a Collie, like Lassie. Lassie sat on Timmie’s bed and would have protected him from anyone coming in the window, so none could hurt him. And Lassie was his friend and kept him company too. I used to feel a Collie could make me less scared and be my
friend. Every single Christmas, every Birthday, anytime I would ever get anything, I would ask
them for just that one thing, a dog. They always said if I did something a certain way or for long
enough or whatever, they would give me one. But they never did. They always gave me clothes
or underwear or something. They always said I didn’t do whatever it was good enough or some
other excuse. (She is still crying.)

14S. So you knew even then, as that little person, something that would help, but they
wouldn’t do it.

14R. Dan (her husband) says they were really mean not to give it to me.

15S. Yeah, I was just feeling the same thing. I feel mad at them. But, that whole thing is
what comes now. A feeling that if you had your own Lassie that would help, that would let
the tension ease inside.

15R. I asked Dan could we get a Collie. He said yes. But I’m the one always nixes it. Our old
place was too small: Now I say it would pee on our carpet and I have trouble sleeping, and it
would wake me to go out. It would bother the cat. I’m not here much. It would be another living
thing to deal with.

16S. But, maybe it would be right, now, and would let this inside place ease. You have a
feeling sense that getting a dog would let it ease. Having a dog would make you feel more
safe in the inside place and like there was company.

16R. Yeah. Last week Dan and I were in the bookstore. He found me reading a book on training
Collies. He said, “I’ll buy it for you.” I said, “Naw. That’s OK.”

17S. So, maybe you could start with getting the book?

17R. Yeah, maybe.
Dan said he was scared if I got a dog I would stop trying to get pregnant.

18S. No, it isn’t like that. Having a warm living creature to love and take care of would help your body relax into getting pregnant... maybe it would be right to let yourself have that now, to get a Collie. You could get that for yourself now.

18R. Maybe I could get that small kind of Collie that only grows to two feet.

19S. Well, how about not compromising that place but really doing what it needs?

19R. (She is quiet for awhile.) A laugh wells up in her body. Hey! For Christmas! I could get my Lassie for Christmas.

20S. Oh yes! That’s just right. (Christmas is about eight weeks away.)

So, Jean I want you to notice now. Your body feels a little bit better right now for these few minutes. We did get there. We did touch it and it has eased a little bit right now. I want you to notice, to pay attention to what that feels like.

20R. Yeah. OK.

A Percept-Genetic Analysis

The first presentation (1S) gives in a highly condensed form all the essential cues of a “bodily felt sense”:

“Can you sense right now what all that tenseness is? What is some of what all that tenseness is about?” (Emphasis added)

The key words are “sense,” “about,” and “all that.” “Sense” prompts the shift from physical sensation to the construction of meaning. The word “about” further grounds meaning in the affective domain, as Solomon points out, “All emotions are about something”(1976, p. 173).
These points are further reiterated and clarified in 3S:

   Let’s see if we can get it out of just a body sensation onto the feeling level so we can
   work with it. You already said it’s gotten worse since the operation stuff came up, so can
   we see if it’s about that?

Lastly “all that” suggests a global perspective made possible by the reflexive consciousness that creates a psychological distance from bodily sensations and dominant emotions. The reflexive consciousness is further capitalized by questions concerning what “feels like” in 2S:

   Is it like you can sense the tenseness is about something or does it feel just like a body
   state? (Emphasis added)

As Nagel (1974) points out, subjective feel of experience always entails “being like something.” Aside from prompting an introspective, self-reflexive gaze, questions of what it “feels like” also facilitate psychological distance, for the statement “A is like B” constitutes “a second-order contrastive relation (as opposed to an identity relation [A is A])” (Zelazo, 1999, p. 104).

The initial presentation of all these verbal cues in condensed form and their subsequent elaborations in the series is comparable to the gradually increased exposure time of the microgenetic stimuli. In the PG framework, stimulus does not cause so much as constrain the formation of the response, which gradually changes from the “stimulus-distal” to the “stimulus proximal phase” (Kragh and Smith, 1970, p. 19). Thus the development of the “bodily felt sense” in the Focusing session may be delineated in three phases.

**Phase I: Stimulus-Distal Responses**

   Exchanges 1S to 4R constitute the first phase, in which the discrepancy between the therapist’s and the client’s perspectives was at its greatest. Compare the therapist’s question in
2S: “Is it like . . . or does it feel just like a body state?” with the client’s response in 2R, “It’s just a body state. It isn’t about anything. . . .” The difference between “does it feel like” and “it’s just . . .” is instructive. “Feel like” entails comparison, made possible by looking at the bodily tension from somewhere outside it—a psychological space that the client could not inhabit as she was identified with the tension ("it is"). Throughout this first phase, the client failed time and again to exit the intra subjective space, and ended up reiterating the bodily sensation she had at the beginning of the session: “It’s racing in my chest. It’s horrible. . . .” (1R). The marked discrepancy in perspective between the therapist and the client generated a search for meaning on the part of the client in 2R: “It’s just a body state. It isn’t about anything. Do you think it is?” (Emphasis added). It is this search for meaning that carried the client to the next phase of percept genesis.

Phases 2: Perceptual Transformation

The second phase, consisting of exchanges from 5S to 10R, may be analyzed in terms of the three perceptual transformations—elimination, cumulation, and emergence—proposed by Kragh and Smith. According to Kragh and Smith, “Elimination denotes disappearance without observable effects, cumulation successive determination, and emergence the case where continuity with the preceding organization, the meaning(s), or/and the structure seems negligible” (1970, p. 28). The first emergence of the “bodily felt sense” is evident in 6R, according to the therapist (personal communication):

“Still all I feel is tense. It’s all tight. Everything is clamped down.”

Compare “everything is clamped down” in 6R with the preceding response in 5R, “I feel cramping in my abdomen.” Whereas 5R concerns bodily sensation, 6R refers to meaning
(sense) of this sensation. This transition from bodily sensation to (bodily felt) sense is referred to in Focusing as “shift.” With this shift or “phase transition,” to borrow a term from chaos theory, the client has exited the intra subjective space of the body and entered the intersubjective space of shared meaning.

The next milestone is the emergence of “psychological space” in 8R, according to the therapist (personal communication): “Like I’m bracing myself.” The use of “like,” for the first time by the client, is indicative of the emergence of a recursive consciousness capable of conceiving “a second-order contrastive relation (as opposed to an identity relation [I am bracing myself])” (Zelazo, 1999, p. 104). Progress from 6R to 8R was broken several times, however, resulting in a zigzag, discontinuous trajectory. The therapist’s elaboration of the client’s felt sense “Like your feelings are all clamped down” (7S) was rejected by the client in 7R: “I didn’t think of it that way.” Likewise, the therapist’s attempts to further develop the felt sense of “bracing myself” were unsuccessful from 9S to 10R: “what’s in this feeling quality of bracing yourself?” asked the therapist (9S), and the response was, “I don’t know” (9R). Amidst these faltering steps and sultatory leaps, some motifs disappeared (elimination) and others survived (cumulation).

No longer was the panic and the despair that loomed large in the beginning of the session:

Ever since all this stuff with the bleeding and surgery, the tension level has been even more than usual and it’s unbearable even the way it usually is. There’s a racing in my chest. Nothing we are doing is touching this. Nothing touches it. I’m taking something like twenty pills a day right now and nothing is any different than it’s ever been. I don’t
know what to do.

The disappearance of this motif corresponds to the eliminative transformation in microgenesis.

Cumulative transformation, on the other hand, is evident in the net gain of phase II, the sustained psychological space that continued into later stages.

Phase III: Automatization

Phase III, 11S to 20R, is characterized by stimulus-proximal responses, hence is also referred to as the (correct) C-phase or the “concluding-phase” (Smith, 1991, p. 202). The exchanges are more or less in synch—the therapist’s input is quickly followed by near correct responses of the client. This is known as “automatization.” According to Smith, “Repeated confrontations with the same stimulus lead to automatization or habituation, i.e., abbreviation of the sequence until near-immediate emergence of a (correct) C-phrase” (1999, p. 13). However, since therapy is an ongoing process, some of the client’s responses remained stimulus-distal, as we shall see. My analysis of this phase focuses primarily on the interaction between background mood and focal emotions.

Mood-Emotion Interaction

In 12S, the therapist presented two verbal cues toward the construction/perception of a felt sense: one was imagery, “MAYBE an image ...would help,” the other was a suggestion of comfort and ease, “for all this whole thing to gently ease.” The client was able to give stimulus-proximal responses right away: “I get two things . . .” (12R). Consistent with Wordsworth’s claim that the ambient mood of tranquility has facilitative impact on emotional recollections, the client’s fantasies of ease and comfort released an avalanche of emotions and memories (“I don’t know if I’ve told you but when I was a kid and so scared all the time ...”13R). There were
sadness:

“And I got another thing... A dog--a Collie. (She begins to cry!)” (13R)

And anger:

“Every single Christmas, every Birthday, anytime I would ever get anything, I would ask them for just that one thing, a dog. They always said if I did something a certain way or for long enough or whatever, they would give me one. But they never did.” (13R)

And probably resentment:

“They always said I didn’t do whatever it was good enough or some other excuse. (She is still crying.)” (13R)

Once mobilized, these emotions and memories soon took center stage and developed a story line: “I asked Dan could we get a Collie. He said yes. But I’m the one always nixes it” (15R). And “Dan said he was scared if I got a dog I would stop trying to get pregnant” (17R). To help the client to resolve her dilemmas, the therapist, not unlike “god in the machine,” had to intervene: “No, it isn’t like that. Having a warm living creature to love and take care of would help your body relax into getting pregnant... maybe it would be right to let yourself have that now, to get a Collie...” (18S). This emotional narrative came to a melodramatic denouement, when the client reached a solution to her problems: “A laugh wells up in her body. Hey! For Christmas! I could get my Lassie for Christmas” (19R).

To recapitulate, the dominant emotions at the beginning of the session were anxiety, hopelessness and despair. With the emergence of a felt sense of “the whole thing,” there was a concomitant shift from intense focal emotions to a more relaxed background mood. Over against the backdrop of this ambient mood of ease and comfort, we have witnessed a parade of emotions
in quick transmutation from tears to laughter, from anger to joy. To sum up the facilitative impact of the background mood on focal emotions, let me invoke once again the Heideggerian “region,” which as a spatial imagery of the emotional stance called “letting be” or “releasement” (Heidegger, 1962) is best described by Brock as the “vast spaciousness” that “gives every single thing the warrant to be” (1949, p. 243).

While psychotherapy facilitates creative transformation of emotions (see Averill and Nunley, 1992), Focusing does more. It directs our gaze beyond the focal emotions, by foregrounding the background mood. A case in point is the therapist’s “but” in the following exchanges:

Client: Dan (her husband) says they [her parents] were really mean not to give it [a dog] to me (14R).

Therapist: Yeah, I was just feeling the same thing. I feel mad at them. But, that whole thing is what comes now. A feeling that if you had your own Lassie that would help . . . . (15S, emphasis added).

While supporting the client in her expression of anger toward her parents, the therapist tried at the same time to redirect her attention to “that whole thing . . .” As we recall, this phraseology is just a reminder to step outside the vortex of focal emotions. This reminder fell on deaf ears, however. The client continued to be engrossed in her emotional memories, which pressed for a resolution (15R to 19R). The therapist, while helping the client to solve her problems, and supporting her in her expression of emotions, tried valiantly at the same time to remind her of the bodily felt sense of ease: “So, Jean I want you to notice now. Your body feels a little bit better right now for these few minutes. . . I want you to notice, to pay attention to what that feels like
” (20S, emphasis in the original text). Hence the “but” in the following statements: “Yeah, I was just feeling the same thing. I feel mad at them. **But**, that whole thing is what comes now . . .” (15S).

The therapist’s “but” is a strong word, especially given the supportive, non-confrontational stance of the Rogerian tradition, with which Focusing has a close affinity. Thus in the therapist’s “but” we may rightly sense the tension between the focal emotions and the ambient background mood. This tension stems from the need, felt by the therapist, to maintain a double vision, a skilled perception that takes note of the focal emotions without losing sight of the penumbra of background mood. This double vision, according to Gianni Vattimo (1988), is essential to artistic creativity, and we might add, to emotional creativity (Averill and Nunley, 1992) as well. This double vision, referred to by Vattimo as “the occurrence of authentic space,” consists of “the interplay between locality and region” (p. 83). Extrapolating from Vattimo, we may conclude that thanks to this double vision with its felicitous interplay of figure and ground, or “locality” and “region,” the art work, or in the present context the focal emotion, “is foregrounded both as the agent of a (new) spatial ordering [in our emotional landscape], and as a point of escape toward the free vastness of the region” (p. 83).

**References**


(Original work published 1805)


