AWARENESS, COURAGE AND LOVE: BEHAVIORAL ANALYSIS OF TARGETS FOR FUNCTIONAL ANALYTIC PSYCHOTHERAPY

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ABSTRACT. Functional Analytic Psychotherapy is a clinical approach based on a behavioral functional analysis of the typical therapeutic setting. Its objectives and therapeutic techniques can be described in different terms, privileging or not the language used in the experimental analysis of behavior. In its original formulation, this approach aims to decrease the frequency of problematic clinically relevant behaviors (CRBs) and to increase those of progress and interpretation by the five-rules technique: observe CRBs, evoke CRBs, reinforce CRBs, observe the effects of the intervention, and implement generalization. Under the influence of the Behavioral Contextual Science, these same elements came to be described with the label 'Awareness, Courage and Love Model' (ACL Model). The goal of this study was to identify whether the language of this new proposition was compatible with that used by B. F. Skinner. The method was a review of these terms, or their synonyms, using important books of the work of B. F. Skinner, notably a literature characterized by its derivation of laboratory findings in research on operant behavior. The books consulted were Science and human behavior, About behaviorism, Verbal behavior, Walden II and Recent issues in the analysis of behavior. This review made it possible to conclude that the terms awareness, courage and love had already been explored in the Skinnerian literature, offering functional analyses and showing that their use is compatible with the behavioral system.

Keywords: Psychotherapy; theories; behaviorism.

CONSCIÊNCIA, CORAGEM E AMOR: ANÁLISE BEHAVIORISTA DE OBJETIVOS DA PSICOTERAPIA ANALÍTICA FUNCIONAL

RESUMO. A Psicoterapia Analítica Funcional é uma abordagem clínica baseada em uma análise funcional comportamental do ambiente terapêutico típico. Seus objetivos e técnicas terapêuticas podem ser descritos em diferentes termos, privilegiando ou não a linguagem utilizada na análise experimental do comportamento. Na formulação original, é destinada a diminuir a frequência de comportamentos clinicamente relevantes (CCRs) problemáticos e aumentar a dos de progresso e de interpretação pela técnica das cinco regras: observar CCRs, evocar CCRs, reforçar CCRs, observar os efeitos da intervenção e implementar a generalização. Sob a influência da Ciência Contextual Comportamental, estes mesmos elementos passaram a ser descritos com o rótulo de 'Modelo Consciência, Coragem e Amor' (ACL, do inglês *Awareness, Courage and Love*). O objetivo deste trabalho foi identificar se a linguagem da nova proposição era compatível com a usada por B. F.

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Skinner. O método foi uma revisão destes termos, ou seus sinônimos, em importantes livros da obra de B. F. Skinner, notadamente uma literatura caracterizada por sua derivação dos achados de laboratório em pesquisas sobre o comportamento operante. Os livros consultados foram *Ciência e comportamento humano*, *Sobre o behaviorismo*, *O comportamento verbal*, *Walden II* e *Questões recentes na análise comportamental*. A revisão permitiu concluir que os termos consciência, coragem e amor já haviam sido explorados na literatura skinneriana, oferecendo análises funcionais e mostrando que seu uso é compatível com o sistema comportamental.

Palavras-chave: Psicoterapia; teorias; behaviorismo.

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RESUMEN. La Psicoterapia Analítica Funcional es un enfoque clínico basado en un análisis funcional del comportamiento del ambiente terapéutico típico. Sus objetivos y técnicas terapéuticas pueden ser descritos en diferentes términos, privilegiando o no el lenguaje utilizado en el análisis experimental del comportamiento. En la formulación original, está destinada a disminuir la frecuencia de comportamientos clínicamente relevantes (CCR) problemáticos y aumentar la de los de progreso y de interpretación por la técnica de las cinco reglas: observar CCRs, evocar CCRs, reforzar CCRs, observar los efectos de la intervención e implementar la generalización. Bajo la influencia de la Ciencia Contextual Comportamental, estos mismos elementos pasaron a ser descritos con el rótulo 'Modelo Consciencia, Coraje y Amor' (ACL, del inglés Awareness, Courage and Love). El objetivo de este trabajo fue identificar si el lenguaje de la nueva proposición era compatible con la usada por B. F. Skinner. La metodología fué una revisión de estos términos, o sus sinónimos, en importantes libros de la obra de B. F. Skinner, notable por ser una literatura caracterizada por su derivación de los hallazgos de laboratorio en investigaciones sobre el comportamiento operante. Los libros consultados fueron Ciencia y comportamiento humano, Sobre el conductismo, El comportamiento verbal, Walden II y Cuestiones recientes en el análisis de la conducta. La revisión permitió concluir que los términos conciencia, coraje y amor ya habían sido explorados en la literatura skinneriana, ofreciendo análisis funcionales y demostrando que su uso es compatible con el sistema conductual.

Palabras clave: Psicoterapia; teorías; conductismo.

Introduction

Originally, Functional Analytic Psychotherapy (FAP) was presented with a series of characteristics: it aims at creating an intense and healing relationship between the client and the therapist; it was developed from an attempt at a Skinnerian functional analysis of successful interventions; and it was proposed as more suitable for outpatient clients with complaints involving diffuse relationship problems, as in the case of people with personality disorder (Kohlenberg & Tsai, 2001).

In addition, FAP assumes radical behaviorism (RB) as a fundamental philosophy, which implies understanding interpersonal difficulties in terms of behavioral problems. One

of its central hypotheses is the statement that the client interpersonal problems occur during sessions, as well as that the improvements obtained in therapy extend to their other relationships, which is defined by the authors as generalization (Kohlenberg & Tsai, 2001).

FAP theory and technique specified behavioral goals for the therapist and the client, and the therapist should be able to implement the five rules technique (observe, evoke, reinforce, observe the effects of interventions and promote generalization) contingent on clinically relevant behaviors (CRBs) of clients, generalized from everyday life to the clinical context (Kohlenberg & Tsai, 2001).

Throughout the treatment, frequency of problematic behaviors (CRB1s) should decrease, and related progress behaviors (CRB2s) and interpretation behaviors (CRB3s), should increase. Despite some suggestions of types of CRB1s (e.g., avoidance of intimacy), CRB2s (e.g., trusting the therapist) and the predilection for CRB3s about those behaviors that occur both during the therapeutic relationship and in the client's daily life, in general CRBs should be defined on a case-by-case basis (Kohlenberg & Tsai, 2001).

From the spread of FAP among behavioral therapists and with the interest of reaching new audiences, in addition to the intention to develop research by clinical trials, the objectives of FAP started to be described also in Middle-Level Terms (MLTs), for therapist and client, such as behaviors of awareness, courage and love (called as the ACL Model, Tsai et al., 2009). MLTs are concepts based on a purely pragmatic approach and developed to be self-explanatory in terms of their purpose and context (Hayes, Barnes-Holmes & Wilson, 2012).

MLTs were created to simplify human complexity without excluding or minimizing its most important qualities and characteristics. They are used as a deliberate attempt to demonstrate humility and looseness when referring to complex abstractions such as reinforcement or transformation of stimuli. The purpose of its adoption is to produce better results and facilitate the development of knowledge in Contextual Behavioral Science (CBS), (Hayes et al., 2012).

The psychological flexibility model underlying Acceptance and Commitment Therapy is an example. It covers the main concepts of acceptance, defusion, flexible attention to the present moment, values, self-as-context and committed action. None of these concepts is a technical term; none of them has the same degree of precision, scope and depth as classical behavioral principles, such as reinforcement, nor of technical concepts in the Relational Frame Theory, the transformation of stimulus such as functions (Haves et al., 2012).

An emblematic presentation of FAP from the adoption of these MLTs was carried out by Kuczynski et al. (2020) in an evaluation of the psychometric properties of the Awareness, Courage and Responsiveness Scale (ACRS). The scale contains 24 items describing the skills to be assessed. These must be answered with a Likert scale from 1 (never occurs) to 7 (always occurs) points. Five constructs are evaluated: the scale as a whole (Total), which theoretically refers to the respondent general ability to create and maintain close relationships with good quality; Awareness of the Other, with items such as 'I am aware of the times when it is appropriate to be careful, supportive and loving towards others'; Self Awareness, with statements such as 'I understand how other people affect my feelings'; Courage, containing statements such as 'I do not allow a conflict prevent me from achieving what is valuable to me'; and Responsiveness, which includes statements like 'I act compassionately towards others when they are in need'.

In this study, the authors emphasize that deficits in social functioning, including deficits in intimacy, are strong risk factors for psychological suffering in general, in addition

to physical health problems and several specific psychopathologies. As an illustration, they present the review by Wetterneck and Hart (2012), which concludes that intimacy is a transdiagnostic category.

In the work of Wetterneck and Hart (2012), which aimed to point out the role of intimacy in several psychopathologies and argue that FAP is an interesting addition to Cognitive Behavioral Therapy (CBT) for promoting intimacy, it is presented that, in the case of depression, psychosocial functioning predicts changes in symptoms (and not the other way around), contributing to their reduction. They also articulate research on Obsessive-Compulsive Disorder (OCD) and show that, in the interventions studied, interpersonal and intimacy skills emphasize the decrease in requests for accommodation³ and the reduction of their provision by family members of the person with OCD. Also, the symptoms result in persistent marital distress among couples and adolescents with the disorder, showing a lower level of social skills even after treatment with traditional CBT. Finally, it is pointed out that exposure sessions accompanied by therapists produce a better improvement than self-application, probably due to the therapist feedback on the proper implementation of techniques and interpersonal variables, such as trust in the therapist (Wetterneck & Hart, 2012).

The authors also found research considering that excessive deficits in intimacy are common in the etiology of trichotillomania, and the treatment given soon after the onset of the disorder helps to avoid the problems that will arise in the long term, probably because they are prevented by the improvement of interpersonal behaviors. However, it is common for clients to seek help late, when it is more difficult to commit to trying to engage in intimate behaviors. For example, it is difficult to ask the clients to expose themselves to social environments after they already have flaws in their scalp (Wetterneck & Hart, 2012).

Finally, Wetterneck and Hart (2012) discuss common clinical problems, such as Bulimia Nervosa, which is treated with equal effectiveness, for long-term results, by Interpersonal Therapy and CBT; personality disorders, for which the therapeutic result is affected by the intensity of difficulties with interpersonal functioning, requiring attention in the evaluation process and emphasis on improving intimacy; and conjugal clinical problems, for which it is reported that the creation of a zone of safety, support and compassion among couples results in effective changes.

For Kuczynski et al. (2020), FAP is considered a contextual-behavioral intervention whose objective involves reducing these deficits in interpersonal functioning through the reinforcement, mediated by the therapist in session, of the skills to relate intimately.

Kuczynski et al. (2020) argue that although research on single subject design about the efficacy of FAP's mechanism of action is favorable (Singh & O'Brien, 2018)⁴, it is necessary to analyze its effectiveness and generalization using group designs. Thus, the article by Kuczynski et al. presents the development and psychometric evaluation of ACRS (described briefly above), which used the CBS principles as theoretical background (Hayes et al., 2012) and the Intimacy Process Model (IPM) (Reis & Shaver, 1988).

³ Such requests are defined as requests or indirect actions by the client so that others can accommodate their symptoms, e.g., requiring relatives and friends who visit your home to clean themselves when entering when there is an obsession with cleaning or contamination.

⁴ These authors claim that FAP has been administered as a treatment for almost three decades, but there is a limited amount of research that evaluates its efficacy. Most of the studies were carried out using single-case methodologies, and they systematized data from 20 publications and provided a quantitative estimate of efficacy. In this meta-analysis, which is the most relevant evaluation method on evidence-based practices, the average effect sizes (ESs) of FAP were classified between 'questionably effective' and 'reasonably effective', which is equivalent to the ESs of psychotherapies in general. Finally, research with more methodological rigor is suggested to improve such rates, for example, with a baseline in the waiting queue, treatment established for the clinical complaint or with a psychological placebo (Sing & O'Brien, 2018).

The IPM (Reis & Shaver, 1988) is interpreted in terms of specific and important behavioral goals for the development of intimacy. An example of this possibility is the operationalization of the IPM as therapeutic rules and CRB2s for FAP, in which the evocation of the CRB is categorized as an act of courage by the therapist, the client's self-disclosure, also an act of courage, and the reinforcing response of that self-disclosure, given by the therapist, is an act of love (Maitland, Kanter, Manbeck, & Kuczynski, 2017).

Kuczynski et al. (2020) define their MLTs in terms of the scale's constructs, stating that these are behavioral objectives, subject to psychotherapeutic intervention and in language accessible to clinicians. For the authors, awareness includes the notion of 'interpretive filters' proposed by Reis and Shaver (1988), involving paying attention to the factors that influence an intimate interaction with the intention of increasing one's own voluntary control over subsequent behavior and increasing the likelihood of a successful intimate relationship to be built.

Kuczynski et al. (2020) point out that self-awareness and awareness of the other are both important for interaction. Thus, the first involves mainly the perception of the current emotional experience and is consistent with several discoveries about improving clarity and expression of feelings, as well as relational competence. Awareness of the other, still, involves empathic precision, being a construct related to taking perspective, the ability to respond successfully and relational proximity. They also add a review of the work of Reis and Gable (2015), who observed that the absence of such precision implies that well-intentioned attempts at interaction are perceived as insincere, insensitive or out of sync with the speaker goals and needs.

In the formulation of Kuczynski et al. (2020), courage comprises a wide range of self-disclosure behaviors that occurred during the interaction. Cordova and Scott (2001) are referenced because they emphasize that the revelations are courageous when they occur in a context of greater probability of punishment (e.g., rejection, criticism or embarrassment) and that, without this context, such classification would not apply. They state that this is consistent with the emphasis of the IPM (Reis & Shaver, 1988), whose first theoretical formulations on intimacy highlighted the need to establish trust in the partner for the other to feel safe and to reveal themselves with vulnerability.

Still on courage, Kuczynski et al. (2020) emphasize the importance of authenticity in self-disclosure, as it is the strongest predictor of relationship satisfaction (more than gender, self-esteem or adult attachment), in addition to being an 'intimate risk taking' (Kernis & Goldman, 2006).

In the work of Kuczynski et al. (2020), the construct that had been defined as love in all previous literature (Tsai et al., 2009) is called responsiveness. Consistently with the IPM, responsiveness refers to our ability to respond to the actions of others. Findings have identified several important components of this capacity for intimacy, including reactions experienced such as understanding, validation and care (Maisel, Gable, & Strachman, 2008; Canevello & Crocker, 2010), mirroring emotional needs rather than instrumental needs (Cutrona, Shaffer, Wesner, & Gardner, 2007), recognize and respect the other person's self-efficacy (Bolger & Amarel, 2007; Maisel & Gable, 2009) and affirm the safety of the other in relation to expressions of shared and reciprocal feelings.

Nevertheless, a debate has been established among professionals who use FAP, revolving around the preference for the original description of their objectives, essentially individualized and clearly referring to the concepts of RB, or just more current definitions in MLTs, of character more nomothetic and apparently disconnected from the behaviorist tradition (Kanter, Holman, & Wilson, 2014).

However, it would be possible to assess and intervene on a client's social bond with another person based on the definitions presented by such a theoretical point of view, that is, with MLTs, assuming the metaphorical model on 'interpretive filters' of Reis and Shaver (1988)? Or would it be better to use an operationalization derived from the description of observable behavioral relations, valuable precisely because they preserve the reference to complex abstractions such as reinforcement or transformation of stimuli, that is, to offer a radical behaviorist definition?

This work does not intend to deprive the reader of his/her right to choose which approach to use when addressing the definition of the ACL Model, but its objective is to propose the missing alternative: to define awareness, courage and love in a manner consistent with the language of FAP applicators who identifies themselves with the behavioral approach.

The RB (Skinner, 2011), or the philosophy of science that underlies the behavioral approach, refers to the set of interpretations linked to the various behavioral relations documented by experimental methods. Skinner (2011), in presenting it as an alternative to address the theme of causes of behavior to the methodological, structuralist and positivist models, states that

Radical behaviorism [...] questions the nature of what is felt or observed and, therefore, known. It restores introspection, but not what philosophers and introspective psychologists believed to 'expect', and it raises the problem of how much of our body we can actually observe (Skinner, 2011, p. 18-19, author's emphasis).

It is considered, then, that the behavioral orientated therapist, who favors the observation of behavioral relations consistent with experimental models and basic research data, derived from direct observation by more than one person, can benefit from an operational description derived from RB. For this reason, the following is a review of the literature on the terms awareness, courage and love, and synonyms, in a selection of important books of Skinner's work.

Method

A narrative review and conceptual analysis of texts on the ACL Model were carried out and the following books from B.F. Skinner's work were consulted: *Science and human behavior* (Skinner, 2015), *About behaviorism* (Skinner, 2011), *Verbal behavior* (Skinner, 1978a), *Walden II* (Skinner, 1978b) and *Recent issues in the analysis of behavior* (Skinner, 1991).

Despite the wealth of publications on the ACL Model in FAP (Kohlenberg et al., 2015; Miller, Williams, Wetterneck, Kanter, & Tsai, 2015; Tsai, Fleming, Cruz, Hitch, & Kohlenberg, 2015; Muñoz-Martínez & Follette, 2019), only texts that were considered relevant here were selected to highlight the beginning of its adoption, the expansion of its scope and the most updated and complete definition of its concepts or constructs.

Results and discussion

History of the adoption of the terms awareness, courage and love in the literature on functional analytic psychotherapy

Awareness, courage and love as a technique

The first use of the ACL Model in FAP was in the publication of the second therapeutic manual. In this publication, it started to integrate some definitions of the elements of its therapeutic technique and the personal values of the FAP therapist that can be affirmed for clients in order to help them achieve psychological fulfillment (Tsai et al., 2009).

Then, ACL Model was used to complement the original definitions of the therapeutic technique (Tsai, Callaghan, & Kohlenberg, 2013). Finally, to set the objectives to be achieved by both the therapist and the client through mutual collaboration during the sessions (Holman, Kanter, Tsai, & Kohlenberg, 2017).

Awareness

As an alternative description of the FAP therapeutic technique, it means watching for client behaviors that are relevant for clinical work with interpersonal goals, that is, it is equivalent to rule 1 (Tsai et al., 2009).

As a personal value of the therapist, awareness is presented as a synonym for insight and mindfulness. It means paying attention to what happens in the present rather than engaging in mechanical or compulsive behavior patterns. In addition, it means having an interest in the causes of own behavior and that of others, especially those that can be identified in family history and personal experiences. Finally, evaluating and be willing to work on improving unwanted behaviors (Tsai et al., 2009).

As a way to complement the original description of the therapeutic technique without privileging behavioral terminology, it is described as being fully aware, paying attention or simply noticing how the client affects the therapist, considering both as members of a social community. It also means being clear about the differences between the client reactions to the therapist and to other people who are equally important, such as the spouse (Tsai et al, 2013).

Awareness is also defined as a goal common to the therapist and the client, consisting of three subclasses (Holman et al., 2017).

- 1. **Self-awareness**. Realize one's own current internal state, including the result of the impact of the other's actions during an interaction, in addition to thoughts, memories, images, feelings and emotions. For example, clients may find that a particular intervention by the therapist causes them anxiety.
- 2. **Awareness of own values, goals and identity**. It involves remembering which consequences of one's behaviors are reinforcing and the characteristics that differentiate him/her from other people. Thus, a therapist can affirm his/her trajectory of overcoming poverty to a socially vulnerable client with difficulty in adhering to therapy.
- 3. **Awareness of the other**. Includes the perception of the current state, values, objectives, identity and impact of one's own behavior on others. It refers to the notions of empathy and perspective taking. It is essential for the subsequent successful engagement in courageous and/or loving behaviors.

Courage

The first use of this MLT in FAP was to complement rule 2. It describes several therapeutic interventions to evoke the occurrence of CRBs, as direct requests to express their needs in relation to therapy (Tsai et al., 2009).

As a therapist value to be affirmed to the client, courage is to face and deal with the fears and anxiety of everyday life. It involves making decisions and taking risks according to ones values (Tsai et al., 2009).

As a complementary description of rule 2, it means privileging interventions that are perceived as challenging by the therapist. Examples include opening up to vulnerability, trying new and different interventions, being willing to be authentic, self-disclosing, persevering and remaining in the presence of fear and difficulty. For example, the therapist exposes his/her emotions to a client who is learning to show love (Tsai et al., 2013).

As clinical objectives, it means acting by taking risks in favor of own values for relationships, especially during the occurrence of feelings generally avoided. It consists of three different subclasses (Holman et al., 2017).

- 1. **Experience vulnerability and emotion**. It is defined in opposition to suppressing, denying, diminishing or avoiding own vulnerability and emotion during an interaction. It may be a prerequisite for the courageous verbal acts, described below.
- 2. **Express own experience**. It is the description to the other of the reactions to the interaction, current internal state, values, objectives and identity. It involves the concept of self-disclosure with vulnerability, a critical element for the development of intimacy. It can be referred to as 'speaking own personal truth' or 'speaking from the heart'.
- 3. **Request what is needed**. It includes asking for help from the other to meet any identified and important needs for the relationship, such as closeness, limits, support, opinions, behavior change, appreciation, relief, etc.

Love

Love was used as an MLT to complement the description of rule 3 of FAP. Rule 3 refers to interventions that reinforce the client's progress to improve their interpersonal relationships (Tsai et al., 2009).

As a value of the FAP therapist, it is treated as a synonym for intimacy and means to seek and promote the feeling of love for life, appreciation, safety and trust in other people. It also refers to actions that are qualified as honest, straightforward, committed, realistic and possible to be honored. Finally, it implies understanding the conflicts in a relationship as normal, expected and necessary for maturity (Tsai et al., 2009).

As a complement to rule 3, therapeutic love involves responding to the client's interpersonal problems with compassion, care, respect and with the aim of helping them to develop more effective alternative behaviors. In addition, it is responding to the client's progress and their interpretations of their own interpersonal behaviors with sensitivity to their current skills and repertoires, avoiding demanding more than they are capable of (Tsai et al., 2013).

As a clinical objective for the therapist and for the client in FAP, it is to satisfactorily correspond to the courageous action of the other. Their subclasses are presented below and differ according to the courageous behavior that precedes them (Holman et al., 2017).

- 1. **Offer safety and acceptance**. It involves responding to the experience of the other with the permanence in the interaction or with statements that indicate the availability to mediate or provide the reinforcers implied by such an experience. For example, getting closer, staying relaxed and respecting boundaries.
- 2. **Express understanding, empathy and validation**. They involve empathetic speeches that validate the experience expressed by the other, as in the case of the primary relationship between self-disclosure and correspondence. Affirming support and self-disclosing similar experiences are common ways in this category.
- 3. **Responding to other's requests**. It is the provision of what was specified by the request of the other or the closest possible alternative. It usually involves apologizing, forgiving, promising, giving an opinion on behavior and expressing appreciation.

Awareness, courage and love as goals for the client

As pointed out, ACL was also applied to the description of the client's objectives to be achieved in session (Holman et al., 2017). Examples of client awareness can include experiencing the feeling of fear in session and considering possibly successful ways to request an intervention from the therapist. It may be necessary to remember a previously constructed value, such as thinking 'I must do my best for this interaction to be successful'.

A courageous act that can result is to face their own fear, reveal their perception and ask the therapist to help them relieve that feeling. A loving intervention by the therapist can make the client respond in a similar way. For example, while the therapist guides the client, the client demonstrates acceptance, understanding and follows the suggested intervention. If such acts reinforce the therapist's interventions, they can be considered love. Paying the combined amount can act as a generalized reinforcement provided in the long run.

Radical behaviorist conceptual analysis of the awareness, courage and love model

Awareness

It is noteworthy that, for Skinner (2011), awareness is strongly related to self-knowledge. "In the sense that we say that a person is aware of what surrounds them, they are aware of the states or events of their body; it is under their control as stimuli" (p. 187).

Thus, the term refers to the set of behaviors under the precise control of states or private events in important parts of the body, these functioning in the same way as external stimuli traditionally studied in the experimental analysis of behavior. Since the human being's sensory system is not sufficient for the development of such control, contingencies organized by a verbal community are necessary (Skinner, 2011).

Such contingencies usually involve asking questions whose answers are useful to everyone involved. An example of a resulting form of awareness is the behavior called perspective taking, that is, seeing an object and still perceiving their own engagement in the behavior of seeing (Skinner, 2011).

Awareness can be better understood with the help of Skinner's definition of thinking in his book on verbal behavior (Skinner, 1978a). For the author, verbal thinking differs from the images and sounds evoked or created intentionally for self-stimulation and it is a

functional class characterized by being covert/private and related to the production of subsequent open/public, verbal⁵ or non-verbal behavior. Thus, the final reinforcer of the chain in which thought is the first link is produced by the open response. Consider the following quote.

These additional uses of verbal behavior do not result from an extension of sensory or motor power. They may or may not be based on group coordination. They are most interesting when a group is not involved – when, in short, a person talks to themselves. When a speaker also becomes a listener, the stage opens for the drama in which a single person plays several roles. The initial advantages for the coordination of the group are absent, but there are compensating advantages. This has traditionally been recognized when a speaker's behavior towards themselves, as a listener, particularly when their behavior is not observable by others, is set aside as a special human achievement called 'thinking' (p. 515-516, author's emphasis).

This means that thinking does not require the support of immediate environmental contingencies, as the person speaks to themselves effectively when playing the roles of speaker and listener. It is emphasized that thinking generally occurs covert for reasons of convenience. Then, in the book, Skinner discusses its main functions, which are to facilitate the analysis of contingencies, the manipulation of stimuli and the resolution of problems (Skinner, 1978a).

A conclusion that can be derived here is that the term awareness, when referred to by Skinner as self-knowledge and thinking, is compatible with the Watch CRBs technique (Rule 1; converging with Tsai et al., 2009). Still, other techniques and objectives⁶ (Kohlenberg & Tsai, 2001) can be facilitated by these dynamic processes, operationalized here as the link between thinking and more precise open responses, for the production of good quality bond.

This is because the clinical advantages of private reflection to facilitate later engagement in courageous and loving behavior seem clear. If thoughts for self-awareness help in adjusting to socially established or naturally derived from attachment criteria, its treatment as a clinical objective is consistent with the pragmatic character of RB.

Courage

Courageous behaviors are those that have inconsistent consequences, especially when they can vary between reinforcing and punishing. Skinner (2011, p. 57) stated that "The behavior that is strong despite the punitive consequences is considered as indicative of bravery, courage or even audacity". Next, Skinner states that, in contrast, a person is said to be discouraged when they cease to act by suspending reinforcement.

However, consider the following statement: "A madman throws himself into a desperate situation not because he feels reckless, but because the reinforcing consequences have offset the whole punishment; and we can try to correct his behavior by providing other (possibly verbal) punishments" (Skinner, 2011, p. 57).

⁵ Verbal responses under antecedent control of other verbal responses that do not have point-to-point correspondence are called intraverbal behavior.

⁶ That is, those outlined in the original FAP manual: the CRB3 (because they correspond to the client's interpretations of problems and progress occurring in the therapeutic relationship) and the techniques Observe the Effect of Interventions (Rule 4) and Provide Behavioral Interpretation (one of the possibilities of rule 5).

This quote can be interpreted as an incentive to limit courage as a therapeutic objective, in view of the deleterious effects of reinforcement, such as some types of behavioral excesses. It is recognized that excessive charges or negligence are detrimental to the maintenance of social ties.

In terms of communicative actions, acts of courage can fall into the category of verbal behavior called mand (Skinner, 1978a). Mands are verbal responses that specify their reinforcer, e.g., the therapist's requests for the client to engage in progress or the client's requests for help.

They occur in conditions of deprivation and aversive stimulation and in the presence of an audience willing to reinforce the mander. Despite the psychotherapist's characteristic audience being classified by Skinner as non-punitive (2015), socially mediated reinforcers are generally inconsistent (Skinner, 2011). For example, the therapist's attempts to evoke client improvements can often be punished, which is to be expected when the cause of a client's demand for therapy is the need for help in solving relationship problems.

Specific consequences act as reinforcers for mands (Skinner, 1978a). In the case of FAP, acts of courage are reinforced by acts of love, that is, experiencing vulnerability and emotion is reinforced by the offer of safety and acceptance; expressing own experience, by the expression of understanding, empathy and validation, often with similar expressions on the part of the other; and asking for what is needed by attending requests (Holman et al., 2017).

The following quote establishes the social function associated with mands, which is generally coherent with the definitions of Kuczynski et al. (2020) for courage. "When we consider other types of verbal operants, we will find that the behavior works mainly for the benefit of the listener [...] The mand, however, works mainly for the benefit of the speaker" (Skinner, 1978a, p. 56).

Thus, this concept can be useful in offering a functional approach to the classification of evocative interventions (Tsai et al., 2009), considering that the client's own acts of love must function as reinforcing stimuli for the therapist's courage. Likewise, as discussed above, when we classify the client's behavior as a CRB2 of courage, we consider that they demand the reinforcers specified by the ACL Model (acts of love from the therapist as rule 3). In both cases, courageous actions take place in favor of the speaker.

Love (Responsiveness)

The reference to love made in the utopian novel Walden Two (Skinner, 1978b) is widely known and can be verified with a simple search on any appropriate tool available on the internet. In this work, a Skinnerian definition can be found in a small dialogue between two characters. "— What is love? He said with a shrug. – Except another name for the use of positive reinforcement? — Or vice versa, I said" (p. 296).

Still, acts of love can have the function of keeping two people close or a cohesive social/cultural group, as in the types of love designated respectively by the Greek words philia and agape (Skinner, 1991). Check out the following quote.

Philia refers to a different type of reinforcing consequence and, therefore, a different state to be felt and called love. The root phil appears in words like philosophy (love of wisdom) [...] People say they 'love Brahms' when they are inclined to listen to their works – maybe play them, go to shows where they are performed or play recordings [...] we say the same about [...] friends in whom we have no erotic interests. Agape represents a third selection process – cultural evolution. Agape comes from a

word that means to receive or, as the dictionary says, 'to receive with hospitality'. By showing that we are satisfied when someone else joins us, we reinforce their adherence. The direction of the reinforcement is reversed. It is not our behavior, but the behavior of those we love that is reinforced. The main effect is on the group. By showing that we are satisfied with what other people do, we reinforce doing and thus strengthen the group (p. 5-6, author's emphasis).

The category of verbal behavior called tact may be relevant to understanding FAP's acts of love. It is characterized as a descriptive verbal response, which occurs in front of an audience and specific discriminative stimuli and produces generalized/nonspecific reinforcers, such as the simple attention of the listener (Skinner, 1978a). The courageous behaviors of the other person in the interaction can be seen as discriminating stimuli for acts of love.

When the other person engages in a courageous emotional experience, a loving tact can be evoked, for example, an expression of care like 'I think if we keep talking about this you will end up suffering'. Tacts for which a courageous statement can give occasion include 'I understand why you feel this way' and a description of a similar experience. Finally, a courageous request from the client can be answered with a tact of a pre-existing solution in the therapist's repertoire.

The reinforce for the tact is generalized, being associated with various conditions of deprivation. In the case of love, it is expected that the social linkage derived from several repetitions between courageous mands and loving tacts, will maintain it (Haworth et al., 2015). Moreover, the payment received by the therapist and the attention received by the client are common consequences for several operants and can function as generalized reinforcers intrinsic to the therapeutic context.

Finally, as in the case of the mand, a generic function for the tact category is specified and corresponds to the general understanding of the love/responsiveness construct. "In very general terms, we can say that the behavior in the form of tact works for the benefit of the listener, expanding their contact with the environment and that is the reason why this behavior is built in the verbal community" (Skinner, 1978a, p. 112).

It is interesting for the FAP therapist to understand their own acts of love as tacts to be evoked by the client's courageous mands, as this could help them select, from their own clinical repertoire, the appropriate guidelines to be described. Still, it directs to the report of the immediate observed events, such as the own current state or what can be observed in the client. Also, describing the long-term effects of behaviors of courage can be facilitated by understanding love as a tact (e.g., 'when you tell me how you feel I think your therapy is working and you will soon be better').

Finally, as previously reported in Tsai et al. (2009), love as equivalent to the technique of Reinforcing the Client's Progress (rule 3) is defined in a convergent way with the concept of tact, in the sense that its function is to favor the listener.

Final considerations

Perhaps one of the most important arguments for the definition of nomothetic objectives for FAP is the facilitation of its evaluation and analysis in group research design, such as randomized clinical trials. In Kuczynski et al. (2020), for example, a scale is developed in which different target behaviors are described according to the categories and subcategories of awareness, courage and love presented here. This scale can be applied

both to the client, to check for changes, and to the therapist, to assess the integrity of the treatment.

If this heuristic value of the ACL Model is proven, interested psychotherapists and researchers will be able, from now on, to have a radical behavioral analysis of these terms, without major conflicts with their preferred language.

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