

Creating relationships that foster resilience in Emotionally Focused Therapy

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Emotionally Focused Therapy for Couples (EFT) is an evidence-based couple therapy based in attachment theory. Research has amassed over the past three decades pointing to the role of relationships in health and well-being. Affective neuroscience suggests that secure relationships appear to foster adaptive stress co-regulation. The effectiveness of EFT has been demonstrated in couples facing high levels of stress, and has been shown to reduce depressive and post-traumatic stress symptoms. Furthermore, EFT has been shown to help couples regulate their neurophysiological stress response. In this paper we review the literature in attachment, affective neuroscience and EFT and propose that creating secure attachment bonds for couples can help foster resilience.

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Emotionally Focused Therapy for Couples (EFT) is an evidence-based couple therapy [1,2] that aims to help couples foster a more secure attachment bond in their relationship, with the goal of improving relationship functioning [3,4]. According to EFT, the rigid, negative interaction patterns and absorbing negative affect characteristic of relationship distress [5] are the result of chronic emotional disconnection and an insecure attachment bond [4]. EFT therapists guide partners to expand and deepen their emotional responses in a way that reorganizes interactions between partners [6]. The emotional responses that are expanded and deepened in EFT are those that arise from attachment needs and fears in the relationship. Partners' responses then become more congruent with core affect, and their deeper experiencing and more affiliative

expressions pull for a non-defensive, emotionally attuned response from their partner [6,7]. In this way, the relationship becomes a safe haven and secure base, making it possible for partners to use the relationship as a source of resilience in their lives [4,6]. The process of EFT has been outlined in three stages, *cycle de-escalation*, *restructuring attachment*, and *consolidation* (see Table 1), which involve helping couples identify patterns of disconnection and explore and share their attachment emotions and needs with one another in the relationship [4]. In this paper we will outline the evidence for how EFT can help couples foster resilience in their lives by creating a more secure attachment bond in their relationship. We will show that EFT can help couples in dealing with mental and physical health concerns and present evidence that the creation of a secure attachment bond as fostered in EFT helps couples co-regulate stress through neurophysiological pathways linking distress with psychological outcomes.

Attachment theory and EFT

According to attachment theory, the relative security of our attachment in relationships depends on our perception of the responsiveness of relationship partners [9,10]. When an attachment relationship is secure, it serves as both a safe haven in times of stress and a secure base [11]. Attachment insecurity, however, inhibits these functions and impedes the ability of the relationship to serve as a source of emotional balance and positive affect regulation [12,13]. The role of the attachment bond in affect regulation is a key focus of the EFT model [4,6]. On an individual level, attachment anxiety is associated with hyper-activation of attachment emotions and signals, whereas attachment avoidance is associated with de-activating affect regulation [9,13]. From an EFT perspective, the negative interaction cycles of demand/withdraw and associated absorbing states of negative affect that are characteristic of relationship distress and predictive of divorce [5,14] are viewed as attachment phenomena. Specifically, partners attempt to minimize the distress of emotional disconnection in the relationship by utilizing insecure attachment strategies such as heightened proximity seeking and hyper-activation of attachment-related affect, or withdrawal and the down-regulation of attachment-related affect [15]. Change in EFT is thought to occur as couples are encouraged to express the implicit attachment fears and needs underlying criticism/blame or distant withdrawn behaviours in the relationship [15].

Researchers have demonstrated session-by-session decreases in attachment avoidance over the course of

Table 1

Stages and steps in Emotionally Focused Therapy for couples

Stage 1, <i>cycle de-escalation</i>	<ol style="list-style-type: none"> 1. Assessment of couple cycle of negative interactions. 2. Identify attachment needs underlying each partner's position in the negative cycle. 3. Access primary emotions underlying each partner's position in the cycle. 4. Help the couple to understand their distress as the result of their negative cycle including unmet attachment needs, primary emotions and the secondary emotions and reactions that keep them stuck.
Stage 2, <i>restructuring attachment interactions</i>	<ol style="list-style-type: none"> 5. Explore attachment needs and fears underlying secondary emotions and behaviours in the relationship and help couples express these to one another. 6. Foster responsiveness and engagement with one another's attachment bids for connection. 7. Restructure interactions of responsiveness and emotional engagement in structured enactments to promote key therapeutic events: <i>Withdrawer Re-engagement</i> and <i>Blamer Softening</i>.
Stage 3, <i>consolidation</i>	<ol style="list-style-type: none"> 8. Foster new cycles of interaction based on sharing of attachment needs and primary emotions. 9. Help the couple to approach pragmatic issues by sharing and responding to attachment needs and fears.

EFT, and have also shown that those couples who successfully engage in the key therapeutic event, blamer softening, demonstrate session-by-session decreases in attachment anxiety over the course of EFT sessions [3^{••}]. They also found that decreases in attachment anxiety are tied specifically to the blamer softening event in which the blaming partner in the blame/withdraw pattern is able to show emotional vulnerability in the session and clearly express their attachment needs in a soft way that then evokes empathy and responsive caring from their partner [16].

Attachment security and stress resiliency

There is a large body of evidence linking secure attachment relationships with health, well-being and resiliency to stress [9,17[•],18,19[•]]. The lack of a secure attachment bond can result in a pervasive sense of loneliness [20–22], which is a risk factor for mental and physical illness and mortality [21]. Partners with an insecure attachment are more likely to report feeling emotionally lonely in their marriage, and have lower relationship quality [23].

Attachment insecurity appears to impact the cardiovascular, immune functioning and neuroendocrine systems involved in chronic stress [24,25]. The neurochemicals oxytocin, vasopressin and dopamine have been implicated in bonding in mammals, including humans, and feelings of emotional well-being [26,28,29]. Oxytocin appears to be involved in experiences of trust and empathy [30,31] reducing fear by modulating amygdala activity in the brain [32], suppressing HPA axis activity and facilitating wound healing [33]. Vasopressin is closely related to oxytocin as a facilitator of pair bonding, sex, and the formation of close social ties [28,29]. Dopamine plays a role in the feelings of reward and pleasure-seeking aspects of close attachment bonds [27,34]. Studies have shown that dopamine-rich structures in the brain are active when participants are shown pictures of loved ones [35] or hear the names of romantic partners [36].

Attachment, EFT and depression

Insecure attachment is associated with a higher risk of depression [37,38] which likely occurs due to the affect regulation difficulties characteristic of attachment insecurity, specifically lack of emotional awareness and emotional disclosure in attachment avoidance [39,40] and perceived inability to regulate intense emotions in attachment anxiety [41]. In contrast, Marganska *et al.* [41] found a significant relationship between secure attachment and greater confidence in emotional regulation, the ability to stay focused on goals, control impulsive behaviours, and acknowledge, distinguish, and accept emotional experiences during times of stress, which in turn predicted lower levels of depression and anxiety. This is consistent with the attachment theory concept of a secure base; the experience of attachment security promotes confidence in one's own ability to explore the world and cope with adversity [8,9]. It is this safe haven and secure base that EFT aims to promote in the attachment relationship between partners [6,15].

EFT has been found to be effective for couples in which one partner is depressed. Dessaulles *et al.* [42] randomly assigned couples to receive either 16 weekly EFT sessions with their partner, or pharmacotherapy for depression. They found that the women who received EFT fared as well as those who received medication only. Women in both groups demonstrated significant decreases in depressive symptoms after the 16 weeks of treatment. In a second study, Denton *et al.* [43] randomly assigned distressed couples in which one partner had depression to receive either medication only or EFT in combination with medication. They found that both groups reported a significant reduction in depressive symptoms, and that only those who received EFT demonstrated significant relationship improvement as well.

Attachment, EFT and post-traumatic stress

The attachment literature has also found that attachment impacts coping in response to post-traumatic stress

[44–46]. Johnson [47] outlines the ways in which EFT may be helpful for partners with Post-Traumatic Stress Disorder (PTSD). Specifically, EFT aims to help couples turn to one another for secure connection in a way that calms and soothes. A foundational tenet of attachment theory is that seeking closeness serves an adaptive, protective function against danger, and that the perceived unavailability of a close other is inherently threatening [8]. EFT has been found to be effective for couples in which one partner has a history of childhood abuse [48,49]. MacIntosh and Johnson [48] recruited a sample of 10 couples in which one partner had reported past childhood sexual abuse and was diagnosed with Post Traumatic Distress Disorder (PTSD). They received an average of 19 sessions (ranging from 11 to 26). At post-therapy, 50% of the partners with trauma demonstrated a clinically significant improvement in relationship satisfaction and reductions in symptoms of PTSD. Dalton *et al.* [49] examined EFT outcomes for partners with PTSD related to childhood abuse in a randomized controlled trial with 32 couples. Half of the couples were randomly assigned to receive 22 sessions of EFT, and the other half were assigned to the waitlist control group. They found that the couples who received EFT showed significant improvements in relationship satisfaction. The partners with PTSD in this study did not show a statistically significant reduction in PTSD symptoms, but did demonstrate small to large effect sizes, indicating improvement in PTSD symptoms that did not reach statistical significance. Weissman *et al.* [50] tested the outcomes of EFT for veterans with PTSD and relationship distress in a pilot study. Seven veterans and their partners were given between 26 and 36 sessions of EFT. They found that the veterans demonstrated significant reductions in PTSD symptoms from pre to post-therapy, as well as improvements in mood and increased relationship satisfaction [50].

Restoring social baseline in EFT

It has become increasingly clear that optimal resilience in the face of stress and adversity involves affect co-regulation [51,52]. Coan *et al.* [53] coined the term social baseline theory, which posits that humans are social by nature and are neurophysiologically designed to form attachment bonds, and further, that the absence of these bonds is inherently stressful. That is, it is not that secure attachment bonds are a superfluous bonus when it comes to regulating stress, but that, rather, secure bonds are central to our ability to regulate affect and cope adaptively. A recent EFT study examined whether distressed couples could improve in their ability to co-regulate stress on a neurological level after receiving EFT [54••]. Activity in stress centres of the brain was observed in female partners in an fMRI scan before and after receiving EFT [54••]. The researchers created a stressful situation by priming female partners while in the fMRI scanner with the threat of receiving an electric shock. They were

grouped in three conditions: (1) alone in the scanner (2) holding a stranger's hand or (3) holding their partner's hand. At pre-therapy, there were high levels of activity in areas of the brain that are involved in processing fear, regardless of whether they were alone in the fMRI scanner, holding the hand of a stranger, or holding their partner's hand. After receiving EFT, the female partners demonstrated a significantly lower neurological stress response and reported less pain due to the shock when their partner was holding their hand. They did not show a reduction in neurological stress when they were alone or holding a stranger's hand. This study corroborates the attachment research suggesting that secure connection can foster resilience, and goes a step further to suggest that creating a more secure connection in EFT can help partners shape resilience against stress together.

Summary and conclusions

Emotionally Focused Therapy (EFT) is an evidence-based couple therapy [1,2,55•] designed to help couples increase attachment security in their relationship [3••] that serves as a safe haven and secure base and fosters resilience in the face of stress and adversity. The attachment literature has provided strong evidence that a secure attachment fosters resilience in a multiplicity of ways from better physical health to adaptive coping and reduced risk of depression and PTSD [17•] through affect co-regulation, a process that has been observed and supported by neuroscience [56]. Moreover, it is possible to help partners create a more secure connection and bring effective affect co-regulation into their own lives through EFT [54••]. They can then access the resiliency that is the natural consequence of knowing that a valued other will be consistently available and responsive. As Mozart noted, in the end it is our sense of being loved that “keeps the heart from the abyss.”

Conflict of interest statement

Sue Johnson is the director of the International Centre for Excellence in EFT and one of the originators of the Emotionally Focused Therapy model of couples therapy. There are no other potential conflicts of interest to declare.

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This study sought to examine the theoretical assumption that couples improve attachment security in EFT. The authors examined attachment anxiety and avoidance in 32 couples session-by-session across an average of 21 sessions (range from 8 to 35). They found that attachment avoidance reduced across EFT sessions, and attachment anxiety reduced across sessions only for those who reached a blamer softening event in therapy, a key therapeutic event in EFT in which the blaming partner expresses core attachment needs in a soft way. Furthermore, the results demonstrated increases in secure attachment behaviours from pre to post-therapy. Overall, this study provided evidence to support the theoretical assumption that couples create more secure attachment bonds in EFT.

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