



EMOTIONALLY FOCUSED THERAPY: AN ATTACHMENT THEORY PERSPECTIVE TO COUPLE THERAPY

by **Gail Palmer**

Relationship counsellors respond to and strengthen one of our world's most precious resources: that of our intimate adult relationships. In order to effectively treat relationships in jeopardy, therapists need a model that gives meaning to the couple's distress and provides effective interventions that not only modify and shift the couple's destructive dynamics but also help create a sustainable and resourceful love connection. Secure, loving and lasting marriages that provide a safe haven and secure base for all family members is a realistic and

achievable goal when relationship counsellors have a therapy map. Emotionally Focused Therapy integrates attachment theory and its conceptualization of adult love into a structured therapeutic framework that combines experiential and systemic interventions that specifically target the emotional bond between adult lovers.

Adult attachment is defined as the bond that exists between individuals who are emotionally connected to one another and who have primary significance in each other's lives. John Bowlby

developed a theory that postulated that human beings, both as children and as adults, are biologically wired to seek and maintain a few intimate relationships and reach out to these significant others when upset, and miss them when they are gone. A secure attachment is created through emotional responsiveness and accessibility from the attachment figure. This security provides the individual with both a safe haven to come home to and a secure base from which to explore and provides a source of comfort, support, nurturance and love.

Bowlby postulated that when an attachment bond is threatened there is a predictable response to the separation distress including angry protest, clinging, depression and despair and if the attachment figure remains inaccessible, eventually detachment. How each individual responds to unresponsiveness of an attachment figure over time can be defined along two basic dimensions – anxiety and avoidance. One strategy is to either over activate proximity-seeking behaviours when the bond is threatened by anxious clinging, and pursue or react in anger in an attempt to have the important other respond. This insecure attachment style is referred to as either preoccupied or anxious in the literature.

An alternative strategy, especially if the hope for responsiveness is diminished, is to deactivate attachment behaviours and either avoid or limit emotional contact and suppress one's attachment needs. This insecure attachment style is labelled as dismissive or avoidant.

A third way of responding is a combination of both anxiety and avoidance and involves seeking contact but then rejecting the contact when it is offered. This style is referred to in the literature as disorganised or fearful-avoidant.

These strategies for coping with unresponsiveness can develop into habitual styles of relating to others and becomes a way to approach relationships, influencing how one experiences oneself and the other in relationships. Bowlby labelled these styles as being comprised of internal working models of self and other. Securely attached people believe that others are trustworthy and

dependable and that they can expect that they will be loved and valued. Insecurely attached individuals have had repeated experiences that have taught them others cannot be trusted, that they will be hurt and that either others do not want to be as close as they would like (anxious attachment style) or they are uncomfortable being close (avoidant attachment style).

One can imagine that insecure internal working models of self and other could be seen as a major factor in troubled relationships and that a distressed adult relationship would continue to reinforce and maintain these learnt strategies. What is important for relationship counsellors to be aware of is that these models can be modified through effective attachment based intervention.

Treatment Options

Couples who rely on insecure attachment strategies may generally experience decreased marital satisfaction and therefore will likely be the couples that look for therapy to help alleviate the distress. In session, partners will enact and evoke their attachment dance as conflict activates internal working models and individuals will respond to relationship challenges differently depending upon their preferred attachment strategy. Bowlby believed however that people are capable of changing their models of self and other. Relationship counsellors possess the unique opportunity to provide a therapeutic experience that impacts attachment security.

Attachment theory is the ideal guide for treatment as it is systemic, linking the self with the system and the system with the self. Therapy involves the

connecting of the interactional patterns between partners and their internal models of self and other. The therapist must be able to focus on the interaction between the spouses, which generally is an enactment of the internal script and on the emotional underpinnings of the couple's interaction. In session, the therapist creates a safe haven and intervenes with the couple to help them create emotionally supportive and accessible responses to one another. Change for couples comes from the creation of new dialogues that arise as a result of a reprocessing of the inner emotional experience, which is imbedded in each partner's internal working models.

Emotionally focused therapy links all the critical elements integral to adult attachment and provides a powerful experientially based therapy designed to strengthen the attachment bond. Outcome research has found that EFT produces positive results for the majority of couples (see icceft.com for further details). Interventions are made on both the interpersonal and intrapsychic levels with the goals of:

- 1) de-escalation of negative cycles, such as attack/withdraw that tend to reinforce and maintain attachment insecurity
- 2) creation of responsive and accessible interactions through specific change events - withdrawer re-engagement and blamer softening- that promote attachment security
- 3) consolidation of attachment rituals that continue to redefine the relationship as a safe haven.

EFT utilises attachment emotions as they arise in the interactional dance to begin to shape and prime soft and responsive interactions. Insecure

strategies are ways for partners to protect themselves emotionally and to help regulate their emotions in an intimate relationship. Therefore, an individual with an avoidant attachment style might take a rational, cool stance with their partner, dismissing, ignoring or deflecting their lover's bids for connection. For the partner who demonstrates a preoccupied attachment style, there are usually difficulties around differentiating and regulating their emotions. An anxious partner may take a critical, blaming stance towards their partner as a protective measure and as a means to ignite a response, using anger as a shield to more vulnerable attachment needs.

EFT Case Example

Rod and Alice are a middle-aged couple who sought therapy when their youngest child left home for university. This couple had focused their emotional energy on raising their children, and although Alice had suffered periodic episodes of depression, they had never sought help for their relationship. The couple had fallen into a pattern of Rod as caretaker and provider and Alice as the complaining, fragile partner. It was, however, Alice's personal growth and insistence for a different kind of relationship that brought this couple to therapy. Rod had learnt very early in life to take care of others as his father deserted the family when he was ten, and being the only child he looked after his mother, who became alcoholic, until he met Alice when he was 19 years old. Alice also had a very lonely childhood and parents who fought violently and were physically abusive and harsh with the children.

The couple began therapy describing a fairly typical negative cycle of pursue/withdraw; however the primary difference with this couple is that Alice was a very soft pursuer and although she would complain and criticise, she would do this in a very soft way and would retreat if met with a lack of response from her husband. A typical session would begin with Alice, with a strained voice and a tight face, saying "You are just not around - you go to your computer and you just stay there. I really can't count on you for anything more than paying the bills. As long as I leave you alone, you are happy. But I am not - this marriage is a emotional desert".

As the EFT therapist helps validate and normalise Alice's frustration as a protest to disconnection, utilising slow and reflective interventions, there begins an uncovering of softer, more vulnerable emotions. Alice is able to state, "I am just so tired and lonely. I feel all alone." Rod, in response to his wife's emerging sadness around her need for affection and attention, states that he really doesn't need "any of that stuff" and that really all he is looking for from his wife is space to "do his own thing". As his wife dissolves in tears, the therapist explores with Rod the look of frustration on his face. Rod is able to acknowledge his frustration and is helped by the therapist to stay in touch with his own emotion rather than rely on his defence of telling Alice how to take care of herself or attempting to cheer her up through humour. Through validating Rod's secondary emotion, and evoking the stimulus of Alice's tears, the therapist intervenes further, "Of course, this is really

frustrating when you see her tears, and you know she's hurt, and she is looking to you...what happens then, what happens inside when you see her tears?" The EFT therapist is working to help Rod engage and stay in contact with his attachment emotions, and to deepen and expand his emotional experience in session.

This is a difficult and slow process for Rod and while he can describe in detail all the different facets of his frustration: annoyance, irritation, grumpiness, he struggles with accessing and labelling any softer emotions. Through the therapist helping Rod listen more to his internal cues and specifically his bodily reactions, he comes to name first disappointment and then finally feeling lost and alone. Once Rod has opened the door to his own vulnerability, he can talk more readily about his own anxiety around failing his wife and his secret fear that in the end, if he really appeared weak or "sissy", Alice would reject him.

Eventually Rod is helped to express his attachment needs to his partner and become a more fully emotionally engaged, responsive and accessible partner. Looking at his wife, Rod slowly states; "I have such a hard time with this. I know you need me to show you more how I feel and I want to try. I just might get it wrong and I need you to understand and be patient". These softer, more accessible responses allowed Alice to see a different side of her husband and de-escalate her negative emotional reactions.

This more open stance is a segue into the shaping of a change event in EFT where a previously blaming, critical spouse is able to ask for their attachment needs to

be met from an emotionally vulnerable position. It is at this juncture in therapy that the fears relating to models of self and other are more directly experienced. As the therapist notes Alice's reluctance to hear her partner's reach for her, she gently explores what is blocking the engagement, and Alice moves further and further into her emotional experience, the therapist helping her articulate what she "knows how" but does not "know what". (Wallin, 2007)

The therapist helps reframe Alice's shut-down and numbness as a shield for her fear that no one will be there for her, a fear she learnt a long time ago, when she needed to grow up quickly and look after herself. Alice then accesses her sadness and grief around no one being there for her in her life and her fear around trusting her partner's present response. "I don't know how - how could he be there - no one has ever been there". As the therapist gently encourages Alice to depend on her husband, she also touches her fear that if she really lets him in he will find her unlovable and unworthy. The EFT therapist then helps Alice communicate her attachment needs in a direct yet soft manner, "I need you to take care of me", which allows for an affiliative response from her husband. "Sure I can do that - it's been so long since you let me really be close - I want to be there for you."

This case example shows a shift in attachment strategies, particularly for Rod who had developed an avoidant or dismissive attachment style. The EFT therapist worked with Rod to help expand his internal world and access his attachment fears and longings. In EFT,

reengaging the spouse who has been emotionally withdrawn and softening the more critical partner, constitute change events that are critical to the treatment success. These events begin to redefine the relationship as secure, where partners can turn towards each other and be comforted, nurtured, supported and loved.

Partners can then be intimate and interdependent with each other and the creation of attachment rituals helps to reinforce and maintain attachment security. Having a secure base and safe haven in life makes possible positive, loving interactions which in turn help build and broaden individual growth and potentially provide the foundation to a cohesive and secure family from which children can grow and flourish. ☺



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