Emotionally Focused Couples Therapy (EFT) and Infidelity

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According to Whisman, Dixon and Johnason (1997) affairs/infidelity are the second most damaging problem that couples face and the third most difficult problem to treat. Glass & Wright (1988) argues that 30% of couples seek couple therapy because of infidelity during the course of treatment. Humphrey (1983) submits that additional 30% reveal infidelity during therapy. Zola (2007) mentions that historically infidelity has been described as extramarital or extracouple sexual relation that has been perceived as betrayal by a partner. For instance, financial betrayal, emotional or intimate connection with others, cyber sex, pornography might be examples of infidelity.

In this paper I use infidelity in the sense that one of the couple has sexually or emotionally violated couple boundaries and bonds. I will utilize a “fictional” couple Mark and Martha to explorer some couple issues around infidelity. First, I will present the rationale for the chosen subject and theory and Mark and Martha’s story. Second I will focus on infidelity in the light of EFT. To conclude the paper I will present my reflections.

Rationale and A Couple

Infidelity seems to be a major issue for many couples and it is also challenging to treat. Thus, I want to address this issue in this paper and be more prepared for practicum. I am also curious how EFT works with infidelity in couples, because Johnson, Hunsley, Greenberg, & Schindler (1999) suggests that EFT has a high success rate, i.e. 70-73% of couples are no longer distressed at the end of therapy.

Let’s assume that Mark and Martha are one of the couples that have heard of EFT’s effectiveness and want to deal with infidelity. They have been cohabiting for 4 years. Mark discovers that Martha has had extra relational involvement with her boss, Kevin. Mark is disappointed, hurt and feels betrayed. Martha tells Mark that it is just about sex and she still loves Mark. Both would like to remain as each other’s attachment figure i.e. “a person we
love or are emotionally attached to whom we see as a potential safe haven and source of comfort.” (Johnson, 2008, p.272).

**EFT Framework and Infidelity**

I believe that summarizing key elements of EFT will be helpful in understanding infidelity in the light of EFT, which is based on attachment. Ainsworth et al., (1978) find out three styles of child behavior that became ground for secure, anxious, and avoidant attachment. EFT therapists see couples relationships as the client and they take the position of consultant who offers the couple a secure base so that they can explore their relationship and emotional needs in a safe therapeutic environment. Furthermore, couples express their emotional needs through their attachment styles/patterns that shape their internal working models. Bartholomew and Horowitz (1991) suggest that internal working models consist of two parts. One part deals with thoughts about the self and the other part deals with thoughts about others. Emotional and attachment behaviors organize these thoughts about self and the others. Furthermore, emotions seen as the agent of change and help us to interpret the world around us. Therapists use emotions to evoke new emotions. For instance, couples negative emotional cycles can be altered by those new emotions in order to help them satisfy their “attachment needs” (Johnson, 2004, p.52).

According to Johnson (2002) attachment bonds might be defined as close bonds in relationships with an attachment figure. Those bonds give us a sense of comfort, reliability, trust, validation, acceptance, safety and security. Once our attachment needs are met then we know that our attachment figure provides safe haven that we can return in times of discomfort and insecurity that also creates interdependency in adult relationship (Greenberg & Johnson, 1988, pp.3-4). Interdependency is seen as the ultimate goal of attachment and healthy relationships (Greenberg & Johnson, 1988, p.18). I assume that interdependency creates positive interactional cycles and “secure attachment” (Nichols, 2010, p.96).
A couple’s secure attachment bonds are a dynamic, loving, reciprocal relationship in which partners mutually provide closeness, comfort, security and a "profound psychological and physiological interdependence" (Hazan & Zeifman, 1999, p. 351). Securely attached couples have a history of warm and responsive interactions with their adult attachment figure/partner. Their internal working model would be “It is relatively easy for me to become emotionally close to others. I am comfortable depending on others and having others depend on me” (V. Enns, personal communication, January 11, 2011). They approach the world as a safe and accessible place and others are viewed as dependable and supportive.

Couples’ unmet attachment needs create negative interactional cycles and increase their sense of “disconnection” (Johnson & Whiffen, 2003, p.105) and abandonment. Their relationship turns to an unsafe relationship. Both suffer from a deep sense of insecurity, stress and the attachment injuries due to unmet needs. “Attachment injury is a sense of betrayal and/or abandonment at a key moment of need that, if not addressed and healed, undermines trust and connection and triggers distress and partner insecurity” (Johnson, 2008, p.272).

Naaman et al (2005) mention that different forms of attachment injuries that are experienced by couples need to be considered. Some may appear to be trivial or they may be more obvious betrayals of trust, such as infidelity. Johnson (2002) claims that attachment injuries, such as, infidelity might cause trauma in couples relations. Feelings of abandonment and betrayal may emerge at any time when one partner fails to respond or is unavailable. “If the partner fails to respond with expected reassurance and comfort the relationship becomes defined as unsafe.” (Naaman et al., 2005, pp.59-60)

Johnson & Whiffen (1999) submit that an attachment injury is a specific type of betrayal that is experienced in couple relationships. Furthermore, they describe attachment injury as abandonment or a violation of trust and attachment bonds because it has to do with trust and a specific behavior/incident in which one partner is inaccessible and unresponsive in
the face of the other partner’s attachment needs for the kind of support and dependability.

EFT treats attachment injuries i.e. infidelity in 14 sessions and offers couple reconciliation opportunity within the framework of secure attachment. Attachment injuries are labeled as “violation of human connection” (Johnson, 2004, p.274) and can be dealt with in seven steps that constitute 3 stages i.e. “Cycle De-escalation, Changing Interactional Positions, Consolidation and Integration” (Johnson & Denton, 2002, p.230).

EFT interventions might be useful during the process to address infidelity i.e. “the trauma of the relationship” (Johnson, 2002, p. 186), positive negative interactional cycles and factors that creates the cycles. Interventions might help couples to understand each other and be more responsive and available. Johnson argues that “Evocative Responding” (Johnson, 2004, p.80-81) captures the current quality and core elements of the relationship. It invites couples to take another step in formulating their experiences and reshape them. That helps them understand how their partner perceives and processes emotions. Finally, they become more engaged in interpersonal experience and more responsive to each other’s needs. Martha might be able to see Marks attachment injury/trauma. “Heightening” (Johnson, 2004, p.82-83) can be useful in crystallizing the experience that plays a crucial role in Mark and Martha’s interaction.

Seven steps can be used in treating attachment injuries/trauma i.e. infidelity to “stabilize the trauma and restructure the attachment bonds” (Johnson, 2002, pp.120-123). In step one, Mark might describe his experience and address feeling of abandonment and violation that damaged relationship as a safe haven and a secure bond. However, Martha might minimize or deny the incident. In step two, Mark will continue to express his emotion and remains connected with the pain. His anger and disappointment might turn into expression of helplessness, hurt, disconnection. The couple faces attachment fears that are associated with injuries. In step three, Martha acknowledges the impact of her behavior and
notices Mark’s emotional pain. She starts to understand her sexual behavior in the context of attachment. He is hurt because he loves her. In step four, Mark might tell about grief and loss involved with the injury and fears (not being loved, seen and validated, future betrayal, ruptures of trust.) Mark might say, “I will never again let you hurt me like that.” Evocative responding might be used in order to focus on Mark’s experience. Therapists might say “It is so painful for you and you are afraid of being hurt in the future.” In step five, Martha might express remorse, regret and become more emotionally available for Mark. She becomes empathically engaged in the healing process and takes responsibility for changing the course of the relationship towards a secure one. The therapist might Heighten Martha’s experience and make it vivid for Mark so that he can access his emotions. In step six, Mark might express his attachment needs. Mark says, “I need to feel safe and loved. I need reassurance and I deserve to be respected.” The therapist might reflect on needs and validate them. The therapist might use “Reframing in order to address vulnerability” (Johnson, 2004, p.180) and asks Mark; “Mark, can you tell Martha that you want to be loved and feel safe with her.” In response Martha says, “I want to be there for you I will not hurt you.” Therapist might use Heightening, “Martha, you have decided to be there for him and you want him to count on you and trust you.” In the final step, Martha might clearly show that she would like to meet Marks emotional needs and support him. She might ask him what she can do in order to help Mark feel loved and safe. They reconstruct the narrative of extra relational involvement and the ways that they can cope with the trauma and make relationship a safe heaven. Couples create a shared positive interactional cycles, reconciliation and secure attachment bonds.

**Reflections**

To sum up, I would say infidelity is an attachment injury that might lead to trauma in couples secure adult attachment. It threatens the attachment bonds and creates insecure attachment patterns. EFT interventions are helpful because they may repair attachment
injuries and help the couple to deal with negative emotional cycles that created infidelity and trauma. It also restructures the bonds and empowers couple’s positive interaction cycles.

I believe that this experience will help me to ask better questions in the therapy room and keep in mind that each individual experience infidelity differently and it has cultural, emotional, spiritual and gender dimension. I will give couples enough space to tell me about their part of the story and what they want to change. Furthermore, I need to be aware of my own values about extra relational involvements. In my opinion, couples that communicate honestly about their needs can satisfy them outside of the relationship. I need to be aware of my values when I meet clients, and I should not impose my own values and expectation on them. I need to meet couples where they are in their perception of infidelity and that they need to feel safe and respected in the therapy room and in their couple dynamics.
References


