

*CPA '07*

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## A Change of Heart Blamer Softening in EFT with Couples

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## Objectives

**Focus of the session**


- Identify key interventions used in successful blamer softening events.
- Identify the six distinct therapist themes common in successful softening events.
- Understand the influence of attachment theory to softening a partner's more blaming position.


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## Overview

**Greenberg & Johnson (1988) Johnson (1996; 2004)**

 **Les Greenberg: Psychologist, York University, Toronto.**  
Mainly EFT w/individuals.  
Leading process researcher.  
EFT w/ind. empirically validated.

 **Sue Johnson: Psychologist, University of Ottawa.**  
Student of Les in early 1980's.  
Interested in couples therapy and attachment theory.

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## Overview

**Emotionally Focused Couples Therapy**

Empirically supported treatment

- One of two models meeting formal EST criteria
- Supported by process research (Task Analysis)

Robust clinical approach

- 70 – 73% rate of improvement
- Clinically relevant: Depression, Post-partum Depression, Chronic Illness, Eating Disorders, Infidelity / Attachment Injuries, Trauma Exposure.

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## Overview

**Predictors of Success**

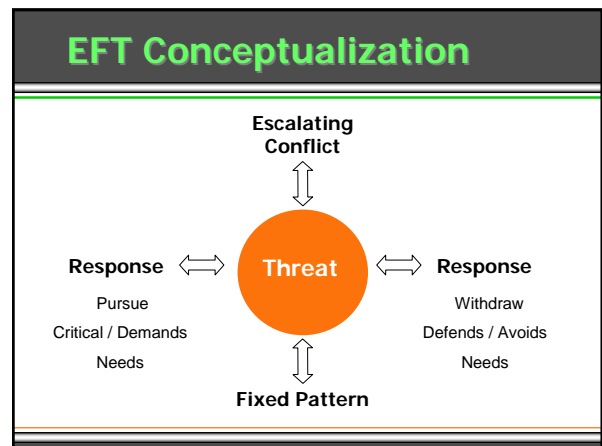
- Quality of Therapeutic Alliance (Bond with therapist; Shared alliance with goals = safety, trust, closeness)
- Female partners initial level of trust in her partner (Belief that her partner still cares for her.)

**Contraindications**

- Domestic violence
- No commitment to improve the relationship.

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## Overview

### Stage I: Cycle – De-escalation

Identify negative cycle - problem pattern.

Assess underlying attachment issues / themes.

Access underlying attachment related emotions.

Frame problem in terms of a cycle and underlying attachment needs/fears.

## Overview

### Stage II: Changing Positions

Access emotional experience underlying positions.

Elicit partners attachment related affect (fears, longings).

Promote acceptance of other – expand the dance.

Structure emotional engagement – facilitated the express of attachment related needs and longings.

New positions: Engaged withdrawer, Softened Blamer.

## Overview

### Stage III: Consolidation

Reinforce new positions and pattern.

Help process reoccurrence of negative cycles.

Heighten new stories: Tracking positive patterns.

Reinforce new solutions to old issues: Strengthen steps made to maintain a more secure relationship.

## Blamer Softening

### Definition:

A previously hostile/critical partner asks, from a position of vulnerability and within a *high level of emotional experiencing*, for reassurance, comfort, or for an attachment need to be met.  
(Bradley & Furrow, 2004; Johnson & Greenberg, 1988; 1995).

Partner's response: S/he accepts the new and emerging relationship position of the softened blamer.

The softening event typically leads to more secure bonding interactions, and is described as an "antidote" to a couple's negative interactional cycle.

## A Common Challenge

### No Softening = Poor Outcome

(Johnson & Greenberg, 1988)

Crucial elements of EFT are embedded

Theory:

- Secure attachment unfolds
- Emotional restructuring crystallizes

Practice:

- Focused heightening attachment-related affect
- Intrapsychic and Interpsychic powerfully merge

## Softening Process

### Most intense step for couple and therapist

Ex. More attacking partner in Step 5 summarized as:

"I am afraid that if I let you in more you might end up leaving. And if I really let you in, and you somehow leave, it would kill me. I don't know if I could handle that kind of pain. No one has ever really cared enough about me to stay – I mean really cared, really listened, really 'enjoyed' me.

## Softening Process

### Crystallizes in Step 7:

"I am so afraid that you might get enough of me and decide to leave... I just want to feel special to you. (cries) I need you to hold me and reassure me that I can count on you, and that you will stay in this when the going gets rough. I realize I am battling demons from my past, but I'd like for you to help me with this. And I really want to let you all the way in. Please be patient with me."

## Task Analysis

(Greenberg, 1984; Bradley & Johnson, 2005)

### Blamer Softening Mini-theory (JMFT 2004)

Based on a Task Analysis  
Collected tapes from OCFI  
10 therapist-reported softenings  
Only five met defined softening criteria.  
Four deemed successful - all were from Sue

## Discovery Oriented

(Mahrer & Boulet, 1999)

### What did you see?

"What are the impressive, significant valued changes or events that occur in psychotherapy?"

"Do these impressive...events occur in sequence or sequences?"

"How can these impressive...events be brought about?"

"How can the therapist use these...events when they occur?"

## Key Interventions

### Common Interventions

Evocative Responding  
Heightening  
Reflecting Underlying Emotions  
Empathic Conjecture / Interpretation  
Reframing in the context of attachment needs and wants  
Restructuring interactional positions / patterns

## Key Interventions

### Evocative Responding

Focus on tentative, unclear, or emerging experience

Focus on "felt sense"

"What's it like for you when Sarah goes cold and quiet Tim? It's like she goes away, yeah? You can't reach her. What's it like for you not to be able to reach your wife?"

## Key Interventions

### Heightening

Therapist intensifies specific responses, experiences, interactions – "front and center"

"RISSSC"

Repeat – Image – Simple – Soft – Slow - Client's words

Block exits - attempts to lessen or detract from experience.

## Key Interventions

### Empathic Conjecture

Moves client to leading edge of emotional experience  
Focus on attachment frame  
Based on conjecture = tentative hypothesis

Example:

*"So Tim, when the conflict hits a certain point, you check out. It's too much. But I wonder if there's another part of you in there, one you rarely show. I wonder if there is a part of you that hurts so much when you find, once again, that you cannot please her."*

## Task Analysis: A Closer Look

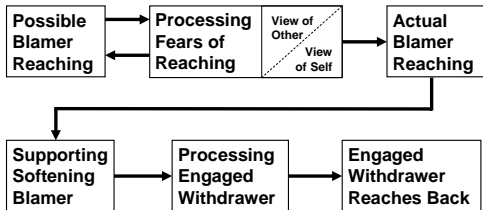
### Thematic Analysis: Key Questions

What are Sue's content themes throughout softenings?

What does she focus on?  
Where does she start?  
What does she say?  
What does she do? (i.e. interventions)  
What does all of this look like?  
How long does it take her?

## Softening Mini-Theory (Bradley & Furrow, 2004)

### Six Expert Themes: Mini-Theory



## Possible Blamer Reaching

Frame is set: Therapist frames how the more-blaming spouse has gotten angry, sullen, or sad, shutting down hopes of mutual accessibility and responsiveness.

Therapist "choreographs" entrance into softening with:

*"Have you ever gone to Mike when you are feeling down like this? Have you ever gone to him and shared, 'Hun, I am feeling so lonely right now. So...unsure.' What would that be like, to let him in then, to share with him then?"*

Therapist uses "first person" stance.

## Possible Blamer Reaching

### Example:

Marcus states that he never really considers sharing or letting Fresca in when times get intense. "It's not safe enough for me to let her in during those situations," he reports, shaking

*"When I am that overwhelmed and low, she could REALLY hurt me if I let her in on how I am actually feeling. <pause> I can't see doing that. The stakes are just too high."*

This signals the therapist to move into processing *fears of reaching* - fears that serve to block and shut down attachment longings for support, comfort, and reassurance

## Adult Attachment

### Key Assumptions for Intimate Relationships

Prime motivation is seeking maintaining contact  
- isolation is traumatizing.

Secure relationship offers both a safe haven and a secure base. (Need: comfort, connecting, caring).

Accessibility and responsiveness are basis for emotional bonds.

Emotion is primary signaling system. (Music)

## Bonds and Couple Therapy

Kobak, Rucdeschel, and Hazan (1994)

Couple symptoms often = responses to attachment related fears and expectations.

Couple distress symptoms are seen as distorted expressions of normal attachment emotions.

Implications for couple treatment

1. Relate symptoms to these attachment needs.
2. Help couple to openly express these needs regarding availability and commitment.

## Internal Working Models

### Ainsworth et al, (1978) Strange Situation

Securely Attached:

Respond positively to caregiver's return.

Insecure Avoidant:

Avoids caregiver at reunion.

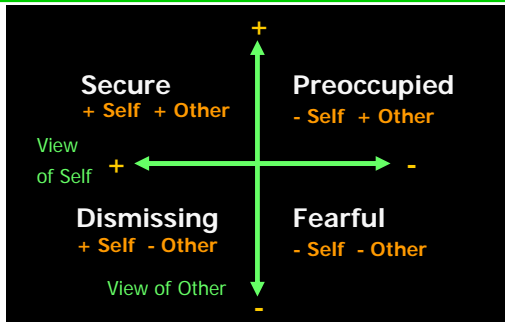
Insecure Resistant:

Ambivalent – preoccupied with parent absence with stranger, but resistant, anger and distress present at parental reunion.



## Working Models

Bartholomew (1990)



## Attachment Styles

Can I count on this person to be there for me if I need them? Are others trustworthy and responsive? Am I lovable and able to elicit caring?

If Yes = Secure Style (Safe Haven, Secure Base)

If No...

Anxious / Preoccupied: "He will let me down. He always does."

Avoidant / Dismissing: "I am an island. Nothing touches me."

Avoidant / Fearful: "I want him close but no touching."

## Working Models



## Processing Fears of Reaching

Fears are often embedded in internal views of *self* and *other*.

- Negative views of other
  - Fear of partner showing contempt, criticizing, shaming, or abandoning them.
- Negative views of self
  - Inherent sense of deficiency, worthlessness, feeling unlovable, and self-shame.

## Processing Fears of Reaching

### Possible EFT Response:

“So when you feel this shame about yourself, like you’re just not cutting it, feeling worthless (*Heightening*), rather than reaching to her and sharing with her that you’re hurting and doubting, you show her your anger (*Reflecting secondary and primary emotion within cycle*). Help me out here, but it’s like, it’s just too scary to show her that side of you that hurts so much. A part of you says, “she will see you as worthless, weak, a big baby.” (*Heightening*) So you hide that from her, it’s safer that way. You stay alone in your pain?” (*Evocative Responding*)

## Processing Fears of Reaching

Heightening Views of Self and Other

### Typical client statements:

“Why would he be there for me if I opened up this much to him? How can I trust you? No one has ever really been there for me.” (*view of other*)

“I know he’s there. He’s always there. It’s just... It’s just how could someone really love *me*? I mean, just look at me?” (*view of self*)

## Processing Fears of Reaching

Heightening Views of Self and Other

### Example: Which is which – self or other?

“You see him standing there, arms open. He’s saying, ‘Risk it honey. I’ll be here for you. You can count on me.’ But a part of you is saying, ‘No, you can’t risk it. He won’t be there. No one has ever truly been there. It’s too scary, too risky, it could hurt too much.’ Is that close?”

## Processing Fears of Reaching

Heightening Views of Self and Other

### Example: Which is which – self or other?

“It’s so hard for you to risk turning to her. The stakes are so high. If you let her in and show her the real you, with all of your deficits and shortcomings... A part of you is afraid that if she sees the real you, she will probably run away... She could really hurt you. And this part is saying, ‘Don’t! Don’t! Don’t!’”

## Processing Fears of Reaching

Heightening Views of Self and Other

### Therapist then briefly summarizes fears of reaching to set up a possible “softening reach” enactment.

“So, to even consider turning to Fresca and saying, ‘Honey, I am just so scared right now. I am overwhelmed, I need a hug, a little reassurance. I am really doubting myself.’ That is really scary for you. This fear sort of paralyzes you, it keeps you alone in your doubts and fears, yeah?”

## Processing Fears of Reaching

Heightening Views of Self and Other

“You never show him this part of you, this part that says, ‘Don’t you dare open up to him again. You’ll get stabbed in the heart. It just hurts too much too risk.’ You never let him in when this part raises its head. You never say, ‘I am really scared right now that you can’t be trusted. Could you please reassure me now?’ You never say that, right? Because that is just too scary, too...precise...too...on the money?”



### Processing Fears of Reaching

Heightening Views of Self and Other

**Insights on the process:** (Bradley & Furrow, 2004)

- Most time spent in this theme
- Has to reach a "boiling point"
- With insufficient heightening, softening can take an overly cognitive emphasis.
- To this point softening spouse has mainly only spoken directly to the therapist - not sufficient in EFT.
- This only clarifies what needs to be shared and asked for from the other, now-engaged partner.

### Actual Blamer Reaching

The therapist gently directs the now softening blamer to reach directly to her partner for comfort and assurance.

One of the simplest directives the EFT therapist makes, but one of the most intense. Short, direct, and to the point.

**Example:**  
"Marcus, would you please turn now, and share this with Fresca, in your own words," or "Marcus, could you begin now to tell Fresca how scary it is to even think of turning to her during these times, would you share this with her now please, in your own words."

### Supporting Softening Blamer

**Marcus' "Softening Reach"**

Marcus gathered himself, turned directly to Fresca and slowly shared really :

"This is hard for me. I really doubt myself and I doubt that you will even want me if I show this weak and scared part of me to you. If there's any way....

I'd just love for you to grab my hand, or hug me sometimes when I am afraid or acting stupid because of all of this junk. I'd love your reassurance. But it's so scary to ask you for it, to even do this right now is all new territory for me.

### Supporting Softening Blamer

**Process Points:**  
The therapist supports new stance of more-blaming spouse, and the risk just taken

Therapist: (softly) "I think that was great Marcus. You really risked. You opened up and shared with Fresca what you need and how scary that is. Borrowing your own words, that was 'huge.'" (Validation)

Help softened blamer process / organize emerging meaning.

Therapist: "What was it like for you Marcus, to turn and say that to Fresca? What's happening inside now?" (Evocative Responding)

### Processing with E/W

**Process Points:**

- Specific focus is the immediate affective response of the engaged partner *to the softening partner's reach*.
- The softening reach *pulls* for comforting responses.
- Therapist helps shape a direct response of accessibility, responsiveness, and safety.
- Therapist "sets the table" by slowly repeating the attachment themes of softening reach.

## Processing with the E/W

### Example:

"Fresca," the therapist slowly says. "Marcus just shared how afraid he gets, scared that you will see him as weak, or somehow lacking. And how he desperately longs for you to accept and comfort him...to be there for him regardless (Therapist "resets the table" by replaying attachment-related affect).

He really risked sharing this with you just now. What happened inside you as he let you in like this? (Therapist taps hand just above her own heart as she says this. Evocative Responding)

## Processing with E/W

Fresca: "It was great" Fresca replies. "I don't see him as weak. In fact, when he shows me his heart like this, I want to be with him. I want to comfort him."

The therapist then reflects Fresca's response, often with a sense of intrigue.

Therapist: *Let me see if I get this. When he opens up and shows, when he says, 'I need your acceptance and you these parts of him that are afraid and uncertain comfort,' this actually pulls you toward him?"*

## E/W Reaches Back with Support

Fresca: "Yes! It makes me feel close to him. Like I can come be with him. I have something special to offer him."

Therapist: "Would you please tell him this in your own words right now? How when he risks like this and lets you in, that this makes you want to be with him even more? Would you please turn and directly share that with him now in your own words?"

(Restructuring Interactions)

Note: Still setting that table!

Focus: Attachment related themes.

## Final Thoughts

The number of softening events varies by couple.

Softening events start the bonding event process. At completion of Step 7, both partners are accessible and responsive, able to share and let the other in.

They ask for comfort, reassurance, for fears to be soothed, and attachment needs to be met – in their own particular words.

Key Interventions: Heightening, Evocative Responding, and Restructuring Interactions.

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## For More Information



[www.theEFTzone.com](http://www.theEFTzone.com)