



Module 2

Written by Sian Hines

Module 2

- What is a healthy relationship actions to consider.
- How emotions impact EFT
 - Wheel of emotions work
 - Blob tree
- Trigger, Meaning, Feeling, Action
- How do you act when...
- Types of couples and relationship styles
- Extensions to relationships
- Different types of couples
- Life cycle handout
- Stages of relationships
- The Neurodivergent Impact
- The Narcissistic Impact



Healthy Relationship

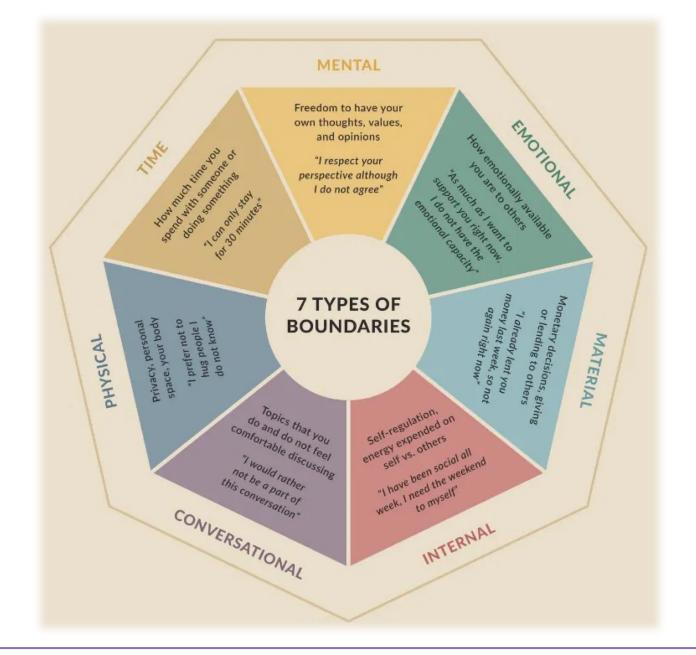


- Trust
- Communication
- Patience
- Empathy
- Affection & Interest
- Flexibility
- Appreciation & Gratitude
- Respect

- Healthy Conflict Resolution
- Individuality
- Boundaries
- Honesty
- Intimacy
- Forgiveness & recovery
- Laughter
- Listening to hear



Healthy Relationship





Beginning Emotionally Focused Therapy

Discussion point

In two groups I would like you to discuss myths surrounding emotions.

- Draw on your experiences when working with feelings and emotions within your single sessions.

Take 15 minutes to do this.



Beginning Emotionally Focused Therapy

Myths surrounding emotions

Men don't do emotions.

- Women are more sensitive than men.
- Emotions are irrational.
- Emotions get in the way of making good decisions.
- Your thoughts oversee your emotions.
- Painful feelings are always bad.
- Experiencing emotion makes things worse.
- Emotions get in the way of business decisions.
- Anger is always bad.
- Happy couples don't argue.



Emotionally focused therapy (EFT) for short, is a form of therapy that uses emotions as a guide for individual and relational change.

EFT can take anything from 12 weeks to 20 weeks.

EFT happens in stages.

These stages are:

De-escalation

Restructuring

Consolidation



Emotionally Focused Therapy & A.R.E.

Sue Johnson (founder of EFT) created a questionnaire that is designed to help couple's counsellors and couples establish where they are with emotional responsiveness. It is represented by the acronym ARE

A = Accessibility

Meaning - can they reach each other in the way that's needed to reach each other? Are they there in person (not virtually).

R = Responsiveness

Meaning - can they interact with each other emotionally in positive and negative situations.

E = Engagement

Meaning - being engaged with each other and having ability to show how/what they mean to each other.



The A.R.E. Questionnaire

(Accessibility, Responsiveness, Engagement)

From your viewpoint, is your partner accessible to you?

1.	I can get my partner's attention easily.	Т	F
2.	My partner is easy to connect with emotionally.	Т	F
3.	My partner shows me that I come first with him/her.	Т	F
4.	I am not feeling lonely or shut out in this relationship.	Т	F
5.	I can share my deepest feelings with my partner. He/she will listen.	Т	F
From y	our viewpoint, is your partner responsive to you?		
1.	If I need connection and comfort, he/she will be there for me.	Т	F
2.	My partner responds to signals that I need him/her to come close.	Т	F
3.	I find I can lean on my partner when I am anxious or unsure.	Т	F
4.	Even when we fight or disagree, I know that I am important to		
	my partner and we will find a way to come together.	Т	F
5.	If I need reassurance about how important I am to my partner,		
	I can get it.	Т	F
Are yo	u positively emotionally engaged with each other?		
1.	I feel very comfortable being close to, trusting my partner.	Т	F
2.	I can confide in my partner about almost anything.	Т	F
3.	I feel confident, even when we are apart, that we are connected to		
	each other.	Т	F
4.	I know that my partner cares about my joys, hurts and fears.	Т	F
5.	I feel safe enough to take emotional risks with my partner.	Т	F



We are now going to watch a short clip by Sue Johnston talking about Emotional Focused Therapy.



EFT is based on attachment theory and experiential therapy.

It aims to improve couple, family and individual relationships by creating a more secure bond and trust.

It is usually a short-term treatment and at the end of the treatment there is:

- Better emotional understanding and reasoning
- Stronger bonds with each other and with the self
- *Improved reactional responses*
 - Empathy instead of defensiveness



The key concepts for successful EFT looks at:

Attachment Theory – relationships instinctively need emotional connection and security. What are the attachments that each couple has to each other and has it changed from childhood to adulthood.

Emotional connection – emotions are happening all the time, and they influence behaviours and reactions. Understanding them, recognising primary and secondary emotions (reactions to primary) are essential in all relationships.

Patterns of behaviours – identifying the negative and restructuring them so that each couple can be vulnerable, safe and supportive.



Emotionally Focused Therapy -Core Techniques

- Reflect emotions To help the couple to articulate and reflect on their emotions:
- 2. Validation To both acknowledge and validate each partner's feelings and experiences.
- 3. Role Reversal To help them both take on each other's perspectives, this helps with empathy and understanding.



A reminder that EFT happens in stages

These stages are:

- Descalation stage
- Restructuring Stage
- Consolidation Stage

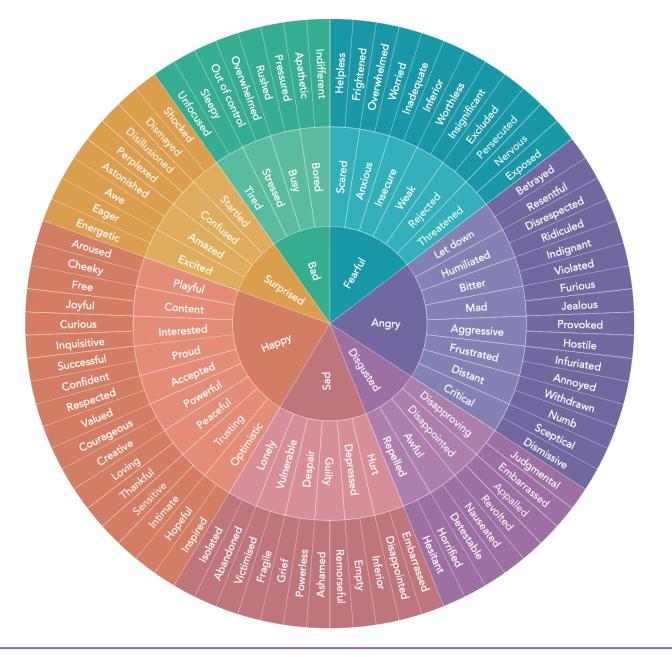


Emotionally Focused Therapy De-escalation Stage

- 1. Identify the negative cycle of interaction.
- 2. Help partners understand their emotional triggers and responses.
- 3. Create awareness of how these patterns affect their relationship.

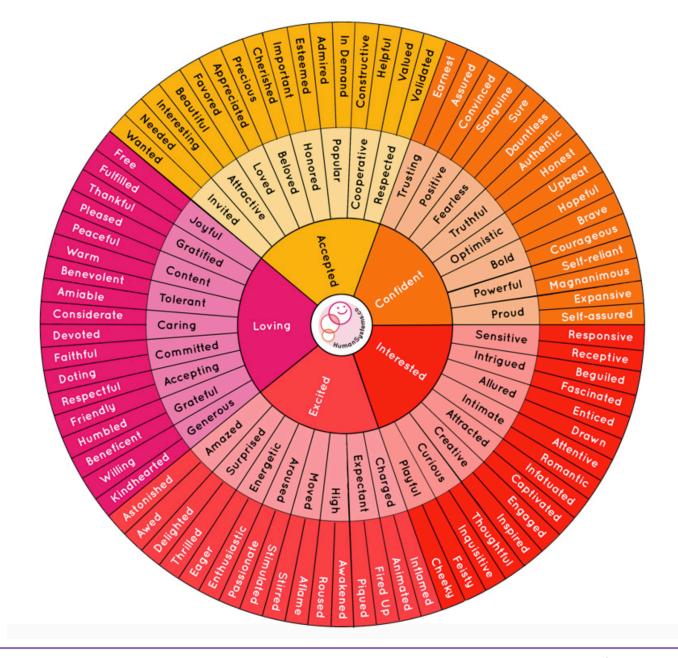


Wheel of Emotions





Wheel of Emotions - Comfortable



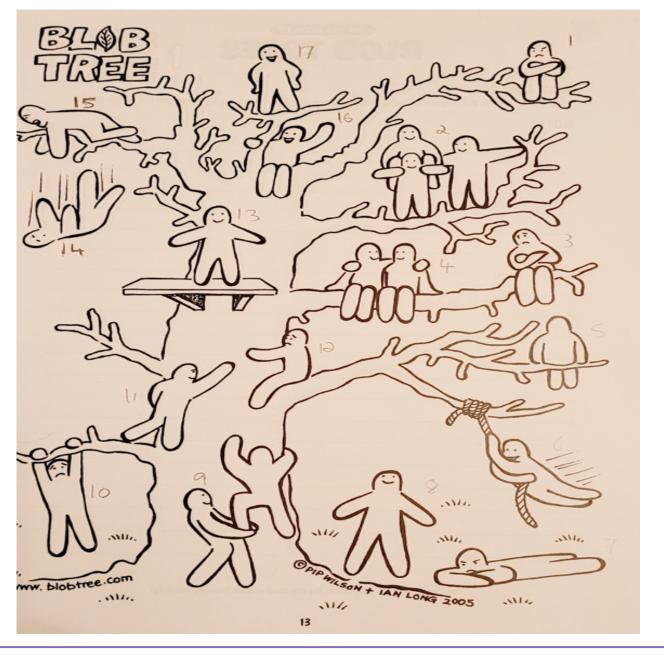


Wheel of Emotions - Uncomfortable





The Blob Tree





Therapist Corner

Reflections of a Blob and Wheel of Emotions for EFT

These are some of the questions you can work with when using the blob tree or wheel of emotion to help the couple to understand emotions and feelings.

What blob/segment do you feel drawn to when thinking about being with:

Friends

Partner

Family

At work

What is your blob or feeling when happy?

What is your blob or feeling when sad?

Which blob would you least likely want to be next to and why? Keep looking and identifying them in order.

Which blob or feeling do you have on your birthday and on other people's birthdays?

Which blob or feeling do you have when you walk into your home, the home of a friend, the home of close relatives, your childhood home?

Which blob or feeling represents a younger you?

Therapists... How well do you know yourself - how you behave when angry, sad, fearful, happy?



Emotionally Focused Therapy De-escalation Stage

We are going to watch a couple of moments within the BBC "Couples Therapy" programme.

I would like you to watch what is happening between these couples and observe the interactions.

Considering everything we have discussed so far.

We will split up into small groups afterwards to discuss what was and wasn't said.



Emotionally Focused Therapy De-escalation Stage

Take 15 minutes to talk about what you observed.

What did you observe from the counsellor?

What emotions did you see from each?

What would your initial thoughts and responses be to plan going forward?

Is there the start of a de-escalation?



- 1. Encourage partners to express their needs and vulnerabilities.
- 2. Foster a new pattern of interaction, where partners respond positively to each other's emotions.
- 3. Reinforce emotional accessibility and responsiveness.



Creating or reintroducing boundaries in relationships

Boundaries is another buzz word in therapy sessions; however, boundaries are essentials.

"Boundaries are the limits we place around ourselves for what we are and aren't willing to give to others, which help us stay comfortable and safe in our relationships." Rachel Orleck, PsyD an EFT (Emotionally-Focused Therapy) therapist for couples.

Approaching boundary talk with couples by asking what is happening in the relationship that is causing discomfort.

Ask the client to start to explain how they feel using "I" statements and facing each other.

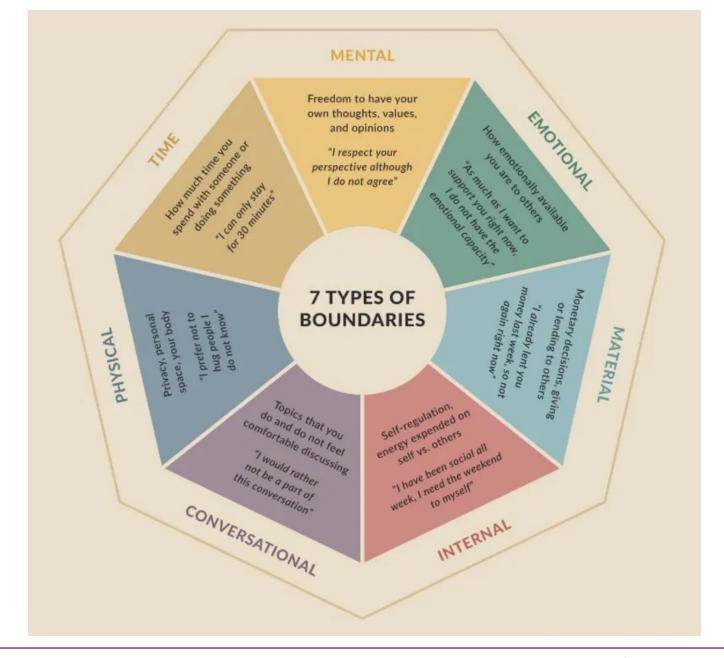
Is this a forgotten boundary or a missing one?

If forgotten why? What has happened to make it slip? Does the boundary need a reshape?

If missing why? What is stopping the discussion about this uncomfortable topic?

The aim of talking boundaries is to get the clients to the point of gently and respectfully talking through or reminding one another of their needs in a calm reflective way.







Checking that A.R.E is happening

Between them is there:

Accessibility

Responsiveness

Engagement

If not try to establish where this has fallen down.

Emotional acceptance

Between them is there understanding and acceptance of the emotions that are showing up?

If not, then what is happening withing their relationship that is stopping emotions from being heard and understood.



We are going to watch a continuation of the couple from the BBC "Couples Therapy" programme.

I would like you to watch what is happening again between this couple and observe the interactions.

Considering what we have discussed so far.

We will split up into the same small groups afterwards to discuss what was and wasn't said.

Take 15 minutes to talk about what you observed.

Is there the beginnings of restructure?



- 1. Help partners solidify new patterns of interaction.
- 2. Encourage ongoing emotional expression and support.
- Develop strategies for maintaining a secure bond outside of therapy.



Trigger feeling meaning action reframe

This is about helping the couple recognise each other's emotional reaction to a situation.

This is a CBT based tool that helps to identify and understand facts surrounding events and core beliefs

Helping the couple to slow down, pause and see what is happening for both - not just for one.



Trigger feeling meaning action reframe - example

Emotional Experience	Partner A	Partner B
Trigger – what happened	Saw Partner B's disappointment	Saw Partner A being guarded
Feeling – that was experienced	Sweaty palms, feeling sick	Tense, rigid body posture
Meaning – what each person is feeling	I'm a failure, fear of rejection	I can't count on them
Action	Shuts down, becomes unsure	Increased intensity, demands attention
Reframe - Change	Use 'I' statement to state what you need	Use 'I' statement to express what you are feeling



We are going to watch a continuation of that couple from the BBC "Couples Therapy" programme.

I would like you to watch what is happening again between this couple and observe the interactions.

- Considering what we have been discussing so far.

We will split up into the same small groups afterwards to discuss what was and wasn't said.

Take 15 minutes to talk about what you observed.

- What is happening?
- How would you move forward with them?
- What would you bring into the sessions going forward based on what you have observed?



Therapist Corner

- Does the couple know and own the trigger that instigated them going into a negative spiral?
- Do they recognise the feeling that comes with it?
- Why has this happened?
- How to respond?

Overcoming Emotional Conflicts

Ask the client to think of the last time they were facing/feeling emotions that overwhelmed them.

Think about what happened – check in with the following for each.

- How did the argument start?
- What was the first sign that told you things weren't going well?
- What were the feelings felt in that moment?

Once you have named the feeling – check in with the following.

- Did you trust the feeling, why or why not?
- Did you listen to the feeling?
- Did you do anything with the feeling?
- How did your partner respond to the feeling?
- Would being aware of this feeling help you in the future?

Discuss steps 1 & 2 with your partner.

Do not focus on the argument, instead focus on the feeling behind the argument.



Bringing Emotions into the Relationship



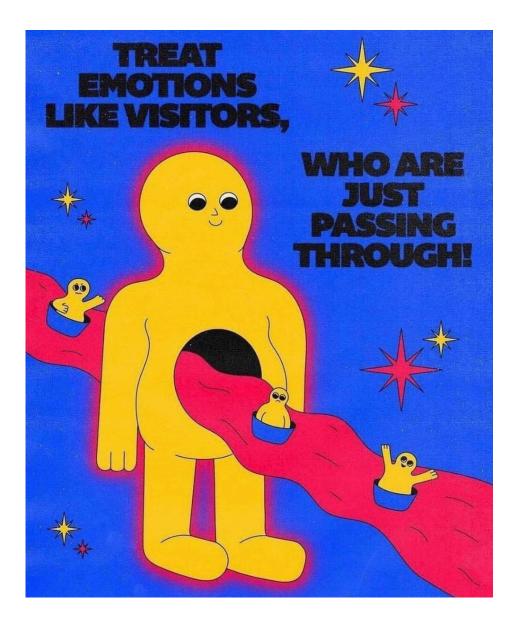
Emotions need to be in every session

Feelings need to be talked about and heard

99% of the time the reason a couple are in the therapy room is because feelings and emotions are misunderstood.



Good Advice





Definition of a Relationship

Dictionary

Data from Oxford Languages

Enter a word

Look it up



noun

relationship (noun) · relationships (plural noun)

- the way in which two or more people or things are connected, or the state of being connected: "the study will assess the relationship between unemployment and political attitudes"
 - the state of being connected by blood or marriage:
 "they can trace their relationship to a common ancestor"
 - the way in which two or more people or groups regard and behave towards each other: "the landlord-tenant relationship" · "she was proud of her good relationship with the staff"
 - an emotional and sexual association between two people: "she has a daughter from a previous relationship"



Platonic

Romantic

Co-Dependant

Open

Toxic

Casual

Open Discussion – what do you understand about these relationships?



Platonic

A close relationship with people that does not involve sex. Friends and Family are the main fit here.

Romantic

In these relationships people have feelings of love and attraction for another person. There is no set formula for romantic love, but it often includes feelings of infatuation, emotional and sexual intimacy, and commitment.



Co Dependency

This is not a healthy form of relationship; it is unbalanced and dysfunctional. It forms when one partner develops an intense and unhealthy physical, mental, and emotional attachment toward the other person in the relationship.

There are two roles, a giver, and a taker. One person gives too much whilst the other takes. They may also switch between these roles.

Open

This is a relationship that has a consensual agreement where both people in the relationship can have sex or relationships with other people outside the relationship.



Toxic

A toxic relationship can be any sort of relationship (romantic, platonic, work based, it can include friends, family, or peers.) Fundamentally it is where your emotional, physical, or psychological well-being is undermined or threatened in some way.

Casual

These sorts of relationships have a broad range to them, they can be sexual but without the expectation of commitment.



Case Study Discussion

Couple: unmarried, newly into the relationship. Already have a base of friendship prior to getting into the relationship.

Coming to therapy so that they can both do things differently in this relationship.

Male dismissive

Female more into it

What line of questioning would you take?

What would you want to know?



Video Learning

Couples therapy

Molly and Josh are another couple that can be looked in the terms of EFT.

Watch their segments in Episode 1, 2 and 3 and jot down what you see happening within the sessions for them and their journey through EFT stages, alongside discovery of emotions.

We can touch base on that next session.



Therapist Corner

The use of the following aids can help:

- Drama Triangle
- Johari's Window
- Drivers
- Parent Adult Child
- Wheel of Life
- Blob Tree

(We cover Drama Triangle, Johari's window, Drivers and Parent Adult Child in future modules)

Questions to ask your clients to help define their relationship if it is not clear:

- Do you have romantic feelings towards each other?
- What does each person want to get out of the relationship?
- How much time do you want to spend together?
- Do you talk about where the relationship is going?
- Are you currently involved with or want to be involved with other people?
- Do you feel uncomfortable if you are unable to please other people in your relationship?
- Do you feel more negative emotions from being in the relationship and do you feel unable to speak out about them?



Relationships directions

Long Distance

This type of relationship covers open, monogamous, or polyamorous. A long-distance relationship has two people that either never or hardly ever have physical contact due to living separate places.

Long Distance relationships come with lots of added complications. High levels of emotions are common with long distance relationships even with strong communication and trust.

Domestic Partnership

A different sort of relationship, it can happen for financial, generational reasons or because of children being in the picture. With this relationship the two people live together but have near separate lives.



Relationships directions

Ethical non-monogamy

A huge area of relationships can come under Ethical Non-Monogamy.

What do you know and understand about ethical non-monogamy? Let's discuss.



Relationships directions





Extensions to Relationships

ENM relationships are becoming increasingly common.

It is in essence a normal relationship but instead of having one partner to consider there are two or more.

Relationship still needs open communication, trust, honest, respect, guidelines and boundaries, a need for space, shared values and goals, quality time together, emotional management.

However, ENM can pose some challenges



Extensions to Relationships

- Time constraints. Having multiple relationships can be difficult because each relationship requires time. A "time squeeze" can be quite stressful.
- Energy constraints. Similarly, each relationship requires energy emotional, mental, and physical. This can be a challenge.
- **Jealousy.** Some polyamorous people don't experience jealousy while others do.
- Discrimination. Many polyamorous people experience difficulty with the stigma attached to non-monogamy. Facing a lack of acceptance from friends, family, and community can be stressful.
- **Infidelity.** Are there different rules surrounding cheating in a polyamorous relationship, the path to it?



Case Study Discussion

Couple: unmarried, male & female, been together 4 years. Early 20s. Working full time.

Had couples therapy to discuss different values.

Long distance relationship, different ends and sides of the country.

Main difference of opinion is type of relationship. He believes that it is impossible to remain faithful to one person, wishes to be open on his side only. Female reluctant and confused.

Emotions are high, both caught in a vicious cycle. Female willing to learn, male unwilling to compromise.

- How will you proceed with this?
- What type of questions would you introduce?
- What do you want each to understand and feel?



Types of Couples

Conflict Avoiders

Volatile

Validating

Hostile

Hostile Detached



Types of Couples

Conflict Avoiders

Avoid expressing what they need from one another, and congratulate their relationship for being generally happy

Volatile Couples

The opposite of conflict avoiders, these couples are intensely emotional. During a conflict discussion, they begin persuasion immediately and they stick to it throughout the discussion.

Validating Couples

These couples show ease and calm. They can be expressive but mostly neutral. In many ways, they seem to be intermediate between avoiders and the volatile couples. They put a lot of emphasis on supporting and understanding each other's point of view and show empathy for their partners feelings.



Types of Couples

Hostile Couples

Hostile couples are like validating couples, except there are high levels of defensiveness on the part of both partners

Hostile Detached Couples

Hostile and argumentative. Continual, frustrating, often ending in a stand-off. There is no victor just stalemate.



Therapist Corner

Can you identify what 'type' your clients are?

Mini Exercise – Ask the couple the following questions to explore their emotions and needs:

What emotions are you experiencing when you are most stressed or likely to avoid a situation (for example, anger, fear, shame, guilt, hurt, or sadness, etc.)?

What are you looking for or need when you are most stressed or likely to avoid a situation (for example, affection, warmth, love, intimacy, etc.)?

What is happening when you are most stressed or likely to avoid a situation (for example, decision-making, losing autonomy, trying to be understood, etc.)?



Neurodivergent is a buzz word - It's everywhere.

The chances of having a couple where one half of the couple has been diagnosed or is undiagnosed but clearly neurodivergent.

The Neurodivergent Impact

The chances of a couple where both are neurodiverse are increasing.

There isn't a DSM 5 criteria for neurodiverse, instead individually listed conditions that come under the umbrella.

The conditions that I have dealt with the most within relationship counselling are ADHD, ASD and Tourette's



The impact can be huge

Often it is undiagnosed and brings a host of problems to the relationship.

- Autism Spectrum Disorder (including what was once known as Asperger's Syndrome)
- Attention Deficit Hyperactivity Disorder (ADHD)
- Down Syndrome
- Dyscalculia (maths)
- Dysgraphia (writing)
- Dyslexia (reading)
- Dyspraxia (coordination)
- Mental health conditions like Bipolar, OCD
- Prader-Willis
- Sensory Processing Disorders
- Social Anxiety
- Tourette's Syndrome Williams Syndrome



One of the lesser talked about impacts of living with someone with neurodivergent conditions is **Cassandra Syndrome**.

Described as a type of relationship trauma that some experts have placed in the same category of complex PTSD.

The symptoms presented aren't the result of a singular traumatic event. Instead, the symptoms come from an ongoing lack of intimacy and social connection, emotional deprivation, and a rollercoaster type relationship.

The partner experiences these feelings whilst being in a relationship with a:

Diagnosed (but in denial of it impacting) or

Undiagnosed neurodivergent partner.



Another impact of neurodivergence and also trauma is living with and alongside **Alexithymia**.

This an inability to express or identify emotions. People with alexithymia feel the usual range of emotions, but they are less aware of their own emotions and the emotions of others.

It is not listed on the DSM5.

It will impact on a relationship as it has a direct impact on communication.

If there is an element of Alexithymia in the relationship the following techniques will help...



Symptoms of Alexithymia - A person might experience the following in social contexts:

- anger
- confusion
- difficulty "reading faces"
- discomfort
- emptiness
- increased heart rate
- lack of affection
- panic

Talk to the couple and identify if there are any of the above present in the relationship - you may need to consider a different course of action.



- Working with emotional wheels in the sessions
- Getting the partner to express/label the feelings that they see. E.g. you look tired, you look proud, you look frustrated.
- Journalling to record physical responses and emotional patterns.
- **Emotionally Focused Therapy** focusing on the impact of the behaviour and how it can be restructured.
- Teaching the non-impacted partner patience and compassion.
 - Identifying how their behaviour further impacts the situation.

Look at TA – PAC/Drivers/Drama Triangle and attachment styles)



The Counsellors Role:

- 1. Listen, introduce Active Listening.
- 2. Change communication toward each other.
- 3. Find acceptance.
- 4. Don't assume that anyone is incapable or unintelligent.
- 5. Identifying negative thought biases.
- 6. Remove defensiveness.



8 Important Reminders If Your Loved One Has ADHD

They have a racing mind with no brakes.

Their intense emotions may be hard to regulate.

They do not mean to be so forgetful.

They are trying harder than you think.

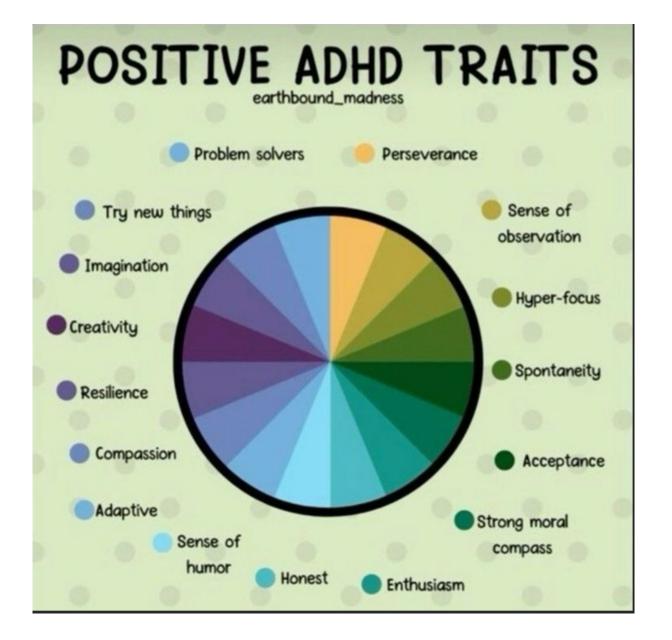
Making simple decisions can be challenging.

Procrastination may stem from perfectionism.

Their brain is literally wired differently.

The sensory sensitivies can truly be painful.











The Neurodivergent Impact – Discussion Point

Take this Scenario

Couple: male and female – Both neurodivergent with ADHD and ASD.

Have been seeing a couple's therapist for 2 years.

Male has significant childhood trauma unresolved and is easily triggered into negative thinking.

Female supportive but exhausted. Treading on eggshells, not sure what to say.

Emotional dysregulation strong on male side.

Male recently diagnosed with BPD

- Do you feel that couples therapy is the right direction for this couple at this time in their life?
- What are your considerations? (Think back to module 1)



The Narcissistic Impact

DSM-5 Diagnostic Criteria for NPD

The DSM-5 specifies certain criteria for diagnosing NPD. At least five out of the following nine traits must be present for a formal diagnosis:

- **Grandiose Sense of Self-Importance:** Individuals with NPD often have an exaggerated sense of their own achievements and talents.
- Preoccupation with Fantasies of Unlimited Success, Power, Brilliance,
 Beauty, or Ideal Love: Persistent fantasies about attaining massive success or admiration are common.
- **Belief in Being Special and Unique:** They believe they are unique and only associate with other high-status individuals.
- Need for Excessive Admiration: A constant quest for admiration and validation from others is a hallmark of NPD.
- **Sense of Entitlement:** There is often an expectation of unreasonably favorable treatment or automatic compliance with one's expectations.
- Interpersonally Exploitative Behavior: Frequently taking advantage of others to achieve their own ends is common.
- Lack of Empathy: A genuine inability to recognize or identify with the feelings and needs of others.
- Envy of Others or Belief that Others are Envious of Them: Displaying notable envy or believing others are envious of them.
- Arrogant and Haughty Behaviors or Attitudes: They often exhibit arrogance and are prone to contemptuous remarks or actions.



The Narcissistic Impact

It is possible to have a relationship with a narcissistic partner.

It takes:

- Clear communication
- Strong boundaries
- Self-care
- Seeking the right kind of support
- Having a sense of independence
- Pointing facts out as they are

All these start within the counselling room.

That said having a relationship with a narcissist can bring a lot of stress and trauma.

It is essential to understand what the couple want and need and revisit the goals frequently.



The Narcissistic Impact

The Counsellor's Role - things to remember:

- Difference between narcissistic personality disorder and elevated narcissistic traits.
- History of both sides will give huge insight into reasons for behaviour.
- Has either partner done their own research?
- Using tools of PAC, ID/EGO/SUPEREGO, Drama Triangle and 4 Horseman
- Know manipulating behaviour common with narcissists, these being deflecting, denying, rewriting what happened (gaslighting), provoke, blame, playing the victim and downplay.
- Transference and supervision
- Showing all the core conditions, unconditional positive regards, empathy and congruence, helps to move from a drama triangle to solution focused therapy.



Gaslighting

Gaslighting Examples of what you might hear in the therapy room:

- You're making that up
- That never happened
- You're being dramatic
- That's been blown out of proportion
- I am sorry you feel this way
- You are being so sensitive

In my experience it can come from both sides.

Important to be mindful.



Gaslighting

The Counsellor's Role

It is essential that as the counsellor that you find positive perspective of the 'gaslighter' in some way.

It is also essential to help the 'gaslighter' to gain perspective on how their actions are impacting the relationship.

Six common ways emotional abusers engage in gaslighting:

- 1. Constant denial and deflection
- 2. Lies and distortion
- 3. Emotional manipulation
- 4. Gradual isolation
- 5. Projection of blame
- 6. Undermining sanity



Gaslighting

Establish if any of the following are relevant:

- Low self-esteem and not sure how to tackle it, have they ever been shown?
- Unable to handle their own emotions
- Fixers not listeners, only way they can help is to minimise their partners feelings
- Feeling out of control in the relationship and tries to gain power in maladaptive ways
- Struggling to be vulnerable in front of partner so deflects and minimises
- Unresolved trauma
- Personality disorders
- Dependency on partner or each other (co-dependency)
- Lack of empathy
- Family history
- Cultural and societal factors, considering different upbringings and cultures in the therapy room and the relationship
- Substance abuse
- Stress and external pressure (finances, environmental)



End of module case study discussion

Couple: Together 3 years.

Female was in a marriage, left for a new partner. Female stuck in her ways. 6 years older than new partner. Doesn't want to tell people about relationship, disinterest in sex. Happy for open relationship but only for partner to be with a male not a female

Male – Trans – partial change (breasts removed, genitals remain) ADHD waiting list, impulse control, RSD active. Uses weed to help with self-defeating behaviour. Struggles with open relationship. Doesn't want to be with a man. Loves partner but needs intimacy.

What would your steps be to move forward for both?

What do you need to know more of?





See you next time

From all of us at ReKindle... bye for now