

Review

Emotionally focused therapy: Attachment, connection, and health

Paul S. Greenman^{1,2,3} and Susan M. Johnson⁴**Abstract**

In this review, we suggest attachment science as a framework for understanding the negative impact of loneliness and social disconnection on mental and physical health and for guiding the interventions of clinicians. We provide an overview of current findings linking loneliness and social isolation to mental health problems such as depression and anxiety, as well as to physical illnesses such as heart disease. We propose emotionally focused therapy for couples, families, and individuals to enhance the quality of people's emotional ties to significant others and their subjective sense of social connectedness. We conclude by suggesting that the strengthening of emotional, interpersonal bonds, which is the primary focus of all forms of emotionally focused therapy, can help restore emotional balance, thereby protecting people from chronic feelings of isolation and the host of health problems that they can cause.

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Introduction

Loneliness is bad for your health. It can even be deadly. These statements are not controversial; ample evidence accumulated since the late 1980s confirms the substantial risks for mental health problems, physical difficulties, and death that chronic feelings of isolation and disconnection

pose [1–6]. Loneliness actually appears to *alter the transcription of DNA* [7] in ways that can compromise the human immune system and a person's ability to combat harmful viruses [8]. The results of research published over the past two years, which notably include information gathered during the COVID-19 pandemic that forced millions of people into lockdown and away from meaningful, in-person interactions with family members, friends, and colleagues, expand this body of literature and shed further light on the psychological and physical perils of a lack of interpersonal connection.

In this review, we draw upon attachment science as a theoretical framework to explain the deleterious effects of loneliness and disconnection on mental and physical health and as a map for clinicians who work to alleviate psychological suffering and bodily illness. Against the backdrop of attachment science, we provide an overview of current findings linking loneliness and social isolation to depression, anxiety, and a number of physical ailments. This leads into a discussion of the evidence of the usefulness of emotionally focused therapy (EFT) [9,10] for couples, families, and individuals to enhance the quality of people's emotional ties to significant others and their subjective sense of social connectedness. We conclude by suggesting that the strengthening of emotional, interpersonal bonds, which is the primary focus of all forms of EFT, can help restore emotional balance and protect from chronic feelings of isolation.

Loneliness, health, and attachment

Human beings are inherently relational. According to attachment theory, all people are hardwired to establish and to maintain meaningful emotional connections to others [11]. These interpersonal connections are the ecological niche that helps ensure the survival of the human race. They protect from physical and emotional harm and in so doing they promote autonomy and psychological equilibrium. Conversely, the lack of significant bonds opens the door to distress and disease. John Bowlby, the founder of attachment theory, believed that the perceived inaccessibility of 'attachment figures' (i.e., people with whom one forms a close emotional bond and who provide comfort in moments of stress and vulnerability) due to separation, loss, or inconsistent responding was a major contributing factor to the genesis of anxiety, depression, and suicidal ideation [12].

More recently, theorists have speculated that attachment processes might play a pivotal role in the etiology of and recovery from physical disease [13,14]. Empirical research conducted over the past three decades has lent credence to these notions. The link between loneliness and mental as well as physical health problems is well established, and dimensions of attachment appear to be key components of this relation.

Mental health

Loneliness has long been associated with a number of mental health problems in people of all ages in the general population, particularly anxiety, depression, and suicidal ideation [15]. Indeed, recent findings in this area indicate that loneliness appears to make a direct contribution to the onset of depression in men over a span of 23.5 years [16]; that social disconnectedness and a subjective sense of isolation are related to depression in men and women aged older than 65 years [17]; that social disconnectedness in school begets loneliness which, in turn, predicts depression, anxiety, eating disorders, suicidal ideation, and nonsuicidal self-injury in high school students [18]; and that the lack of an intimate emotional bond ('emotional loneliness') or social network ('social loneliness') both predict suicidal ideation, with different effects depending on a person's age [19].

The psychological fallout of social isolation has become strikingly apparent since the beginning of the COVID-19 pandemic in March 2020, when governments across the globe had to adopt strict quarantine and lockdown measures to halt the spread of the disease. Not surprisingly, an unfortunate consequence of these public health measures in various countries has been a marked increase in symptoms of depression, anxiety, and general emotional disturbance [20–23]. These findings, along with those from scores of studies that indicate a link between attachment insecurity and mental health problems [24], suggest that when human beings are bereft of the emotional connections they need to survive and to thrive, they become debilitatingly sad, afraid, and stressed, just as Bowlby surmised more than 40 years ago.

Physical health

The emotional suffering created by social isolation and disconnection seems to accompany a number of chronic physical health problems as well. Building upon long-standing evidence of links between loneliness and coronary heart disease, stroke [25], obesity, diabetes, and pulmonary disease [26], research findings published over the past two years highlight loneliness as a risk factor for early-onset dementia [27] and as a potential contributor to sleep disturbances [28].

As research in this field expands, the role of attachment is becoming increasingly clear in explicating the association between loneliness, social isolation, and chronic

illness [29]. For instance, there is evidence that insecure attachment orientations (i.e., the tendency to become anxious about the availability and emotional presence of attachment figures and to actively pursue these ties, known as 'anxious attachment'; the tendency to minimize the importance of close relationships and to refrain from engaging others in moments of vulnerability, known as 'avoidant attachment'; or a combination of the two, known as 'fearful attachment') prime an individual to experience loneliness [24]. In this way, insecure attachment can be construed as a precursor or a contributor to the experience of loneliness, with all of the health risks that it entails.

As with loneliness, there is also evidence of direct influences of attachment orientation on biomarkers of physical health and disease, which further supports the interrelation of attachment, loneliness, and illness. For example, in one investigation, maternal sensitivity at age three predicted low cardiometabolic risk (i.e., high blood pressure, mean arterial pressure) at midlife; this link was mediated by perceptions of caregivers' emotional presence and comfort offered (i.e., a 'secure base script') [30]. On the other hand, insecure attachment in infancy was related to increases in inflammation (as indicated by higher levels of C-reactive protein) and body mass index in middle childhood in a different study [31], and it explained the link between childhood maltreatment and self-reported physical health problems 5 years later in yet another one [32]. In adults, attachment avoidance and anxiety have been linked to the inflammatory marker interleukin-6 [33], and attachment anxiety has been shown to predict anxiety, depression, blood glucose, and glycated hemoglobin in patients enrolled in cardiac rehabilitation [34,35]. Thus, insecure attachment, which often sets the stage for loneliness, can also jeopardize a person's health and well-being.

EFT: a potential solution to the epidemic of loneliness

Given the preponderance of evidence that suggests how dangerous loneliness can be and the important role that the strength of a person's attachment to significant others can play in their mental and physical health, it is imperative for clinicians to use interventions that will help people establish and maintain strong emotional bonds to significant others. EFT [9,10] is just such an intervention. It builds the individual's awareness of key emotional needs and the capacity to reach for and respond to others, shifting models of self and other in a positive direction [36].

EFT and EFT-based programs are currently used to treat couple distress, family dysfunction, and individual problems including depression, anxiety, and post-traumatic stress disorder (PTSD) [11]. In all modalities (couple therapy, family therapy, individual therapy, and

relationship education programs conducted in a group format), the primary focus is on helping clients nurture and sustain secure emotional ties to significant others and in so doing to transform their perceptions and experiences of themselves and the social world around them. From the EFT perspective, the secure bonds that clients learn to create and cultivate help them vanquish chronic loneliness and achieve a sense of autonomy, strength, and emotional balance [9].

The EFT process

EFT practitioners address attachment directly and from the beginning of their work with clients by aiding them in the process of accessing, symbolizing, heightening, processing, and integrating their emotional experiences into their relationships with others and into the internal self-dialogues where they continuously define themselves, their sense of worth, and their competence [9,10,35]. Emotions organize the construction of inner experience and the dance with others; they are also key instruments of change. The experiencing and expression in engaged encounters of feelings related to interpersonal vulnerability (e.g., sadness, fear), coupled with comforting responses from significant others and from the therapist, lead to key change events in the therapeutic work such as ‘pursuer softening’ in couple therapy [9,10]. EFT therapists implement attachment science through a parsimonious macrosequence of specific interventions known as the ‘EFT Tango,’ which involves reflecting present processes, assembling and deepening affect, choreographing engaged encounters, processing these encounters, and integrating the information that emerges into the client’s relationship and sense of self [9].

EFT research

EFT is a well-established, effective treatment for couple distress, with strong empirical support. The most up-to-date meta-analysis of EFT, published in 2019, indicated a very large effect size (Hedge’s $g = 2.09$) across nine randomized, controlled trials of the efficacy of the intervention conducted since the publication of the initial meta-analysis in the late 1990s [37]. Current additions to the body of literature on EFT and EFT-based interventions include preliminary evidence of the effectiveness of EFT in its couple format as a treatment of two major offshoots of social disconnection: major depression (in both men and women) [38,39] and (PTSD) [40], which suggests that improving people’s intimate relationships can indeed improve their mental health. The results of other recent investigations have shown that structured, relationship education programs (known as ‘Hold Me Tight’ groups) based on attachment principles and EFT interventions might be helpful in improving relationship satisfaction [41,42] and sexual intimacy [42] in the general population. The application of EFT interventions in a group format for patients with

heart disease and their partners is another new direction in EFT research; early findings indicate that the program ‘Healing Hearts Together’ can help improve health-related quality of life and help decrease symptoms of depression in people with heart disease and attenuate symptoms of anxiety in their partners [43]. The next step in this area is to examine, in rigorously controlled designs, the effects of these programs on relationship quality, mental health, and biomarkers of physical health over the long term.

Another strength of the EFT model is the availability of research on therapeutic processes at work that contribute to positive therapy outcomes [44,45]. Clinicians have a map for understanding what to do and when, with specific client responses. For example, there is evidence from process research on EFT that changes in attachment avoidance over the course of therapy may contribute to increases in sexual satisfaction [46]. Finally, there is also research to support the effectiveness of EFT trainings [47–49].

Conclusion

In conclusion, loneliness and social disconnection have damaging effects on mental and physical health. Attachment science helps understand this phenomenon and points toward the crucial importance of helping people build their relational capacities and create strong emotional ties to others to maintain their physical and mental health. Available evidence suggests that EFT may be an on-target, effective tool for shaping growth, resilience, and health in individuals and relational systems.

Conflict of interest statement

P.S.G and S.M.J. report receiving financial compensation for the “Healing Hearts Together” relationship education program.

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