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AUTHOR Messer, Larry D., Jr.
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ABSTRACT

Emotionally Focused Therapy (EFT) is an approach for working with couples that focuses on the negative interaction cycles perpetuated by deep-seated emotional vulnerabilities. This therapy attempts to alleviate distress by intervening on an emotional level in order to promote more caring interactions that can enhance relationships. Proponents state that this is one of the most effective forms of couples' therapy. In this review, EFT is described and the empirical literature on EFT is evaluated as to whether it supports this claim. The review did support the notion that EFT is a valid and effective form of marital therapy, and also strongly supported the efficacy of this treatment to promote positive change in distressed couples. (Contains 17 references.) (JDM)

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EMOTIONALLY FOCUSED COUPLES THERAPY:
A REVIEW OF THE LITERATURE

A Doctoral Research Paper

Presented to

the Faculty of the Rosemead School of Psychology

Biola University

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In Partial Fulfillment

of the Requirements for the Degree

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by

Larry D. Messer, Jr.

August, 2001

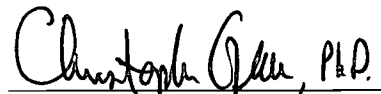
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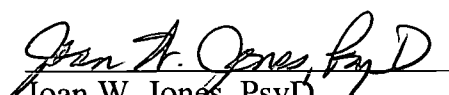
Larry D. Messer, Jr.

APPROVED:



Christopher R. Grace, PhD

Date: 5/25/01



Joan W. Jones, PsyD

Date: 5/25/01

APPROVED:



Patricia L. Pike, PhD, Dean

5/25/01
Date

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ABSTRACT

EMOTIONALLY FOCUSED COUPLES THERAPY:

A REVIEW OF THE LITERATURE

by

Larry D. Messer, Jr.

Emotionally Focused Therapy is an approach to treating couples that focuses on the negative interaction cycles perpetuated by deep-seated emotional vulnerabilities. Emotionally Focused Therapy attempts to alleviate distress in couples by intervening on this emotional level in order to promote more caring interactions that will lead to a more loving and intimate relationship. Proponents of Emotionally Focused Therapy have asserted that this approach is one of the most effective and validated forms of couples therapy. The goal of this doctoral paper is to review the empirical literature on Emotionally Focused Therapy and evaluate whether or not the literature supports this claim. The majority of the studies done in this area seem to support that Emotionally Focused Therapy is an effective and valid form of treatment for distressed couples.

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EMOTIONALLY FOCUSED COUPLES THERAPY: A REVIEW OF THE LITERATURE

Introduction

Over the past 50 years, psychotherapy, and marital therapy in particular, has undergone many changes. In recent years, some clinicians and theorists have shifted their focus from problem solving and communications skills training to a focus on addressing the importance of emotion in effecting therapeutic change. One of the pioneering models of this modern era of marital therapy is Emotionally Focused Therapy (EFT). Susan Johnson, Ed.D., and Leslie Greenberg, Ph.D., developed EFT in an effort to address the lack of attention given in traditional marital therapies to the emotional components involved in marital distress.

Emotionally Focused Therapy is a form of marital therapy that emphasizes the importance of reprocessing emotional responses in order to effect change in distressed relationships (Johnson, 1996). The theory asserts that when emotionally vulnerable material is processed in a safe and supportive relational context, the corrective emotional experience that results will alleviate the marital distress and encourage future healthy interaction patterns (Johnson, 1996). Emotionally focused treatment models are based on the premise that clients form “emotional schemes” that guide their interactions in relationship (Greenberg & Paivio, 1997).

These emotional schemes are core structures that integrate the cognitive, affective, and sensory information and inform how a person emotionally perceives himself in relationship with the world (Greenberg & Paivio, 1997). The foundation of EFT is built around the attempt to target this emotional perception that affects one's sense of safety and vulnerability in relation to one's partner, and which creates the interpersonal stance perpetuating the relational distress. Johnson (1996) explains the approach of EFT as follows:

EFT looks within and between. It integrates an intrapsychic focus on how individuals process their experience, particularly their emotional responses, with an interpersonal focus on how partners organize their interactions into patterns and cycles. The process of experiencing and the process of interacting are touchstones for the therapist, as he or she attempts to guide the distressed couple from negative and rigidly structured internal and external responses toward the sensitive responsiveness that is the basis of a secure bond between intimates. Interactional positions are assumed to be maintained by both the partner's emotional experience and the way the interactions are organized, if the couple are to attain a positive emotional bond. (p. 5)

Greenberg, Hunsley, Johnson, and Schindler (1999) claim EFT to be one of the most effective and empirically validated treatments for helping distressed couples. The focus of this doctoral paper is to review the empirical literature on

Emotionally Focused Therapy in an effort to determine the nature and quality of the research completed on EFT. This paper will include a comprehensive evaluation of the empirical literature on EFT, including the outcome literature, studies comparing EFT to other forms of treatment, as well as outcome research conducted to determine EFT's efficacy in treating couples with specific difficulties.

Emotionally Focused Couples Therapy Outcome Studies

The research done on Emotionally Focused Therapy initially began in 1985 when the originators of the approach, Susan Johnson and Leslie Greenberg, decided to test their modality empirically. Early studies were generally most interested in the overall efficacy of EFT, and whether or not the principles that under-girded the EFT philosophy of change could be empirically tested.

Initial Outcome Study

In one of the early studies to determine the effectiveness of Emotionally Focused Therapy, Greenberg and Johnson (1985) assessed 14 couples using four different outcome measures. The couples were assessed upon their initial contact, again 8 weeks later, again after eight sessions of EFT, and then underwent a final assessment 2 months post-treatment. The researchers hypothesized that the couples would experience lasting positive change as a result of undergoing EFT.

Greenberg and Johnson (1985) selected their sample for the research question from a group of couples who responded to a newspaper article. The researchers screened out any couples who had not been living together for at least 1 year, couples who were actively considering divorce, those who had received psychiatric treatment within the last 2 years, any couple in which one of the partners had an alcohol or drug problem, and those currently utilizing other psychological services. Furthermore, in selecting the sample, one partner had to receive a score reflecting distress on the Dyadic Adjustment Scale. Among the couples selected, the average age was 33; they had on average one child, and averaged 14 years of education. The number of second marriages among the couples was commensurate with the general population. It is noteworthy that the strict selection criteria may limit the ability to generalize the results beyond this specific sample.

The seven therapists who provided the Emotionally Focused Therapy were master's degree students with an average of approximately 2 years of clinical experience. Each of the therapists had only limited clinical experience with couples. To compensate for the limited experience, the researchers provided the therapists with 12 hours of EFT training as well as weekly 3-hour group supervision.

Greenberg and Johnson (1985) utilized appropriate outcome measures to determine the effectiveness of the treatment. The measures used were the Dyadic

Adjustment Scale (DAS), the Target Complaint (TC), the Goal Assessment Scale (GAS), and the Personal Assessment of Intimacy in Relationships (PAIR). The DAS, with a Chronbach's alpha coefficient of .96 and an internal consistency coefficient for the total test at .84, was chosen because of its reputation as the measure of choice to determine marital adjustment. The TC is an instrument that establishes a baseline and measures change in terms of the problem the couple is presenting. The TC has a test-retest reliability of .68. The GAS was chosen to provide operational definitions for client goals and measures the success of the treatment in meeting the goals. The PAIR was selected to assess several aspects of intimacy. The reliabilities for all subscales of the PAIR are in the .70 range.

The scores obtained from the four outcome measures were analyzed using repeated measures ANOVA procedures. As was expected there were no significant differences among the DAS, TC, GAS, and PAIR scores obtained at the initial contact with the couples and those obtained after an 8-week waiting period. However, significant differences were found on the DAS, TC, GAS, and two subscales of the PAIR when comparing the couples' post-wait scores with the post-treatment scores. Analysis of the six subscales of the PAIR revealed two subscales with significant effects, those being the Intellectual subscale and the Recreational Intimacy subscale. Considering the emotional emphasis of EFT, it seems noteworthy that the Emotional subscale scores did not reach significance.

Greenberg and Johnson (1985) suggested that the level of change might have been even greater had the therapists providing the therapy been more experienced. The lack of a significant finding on the Emotional subscale of the PAIR may be explained by the inexperience of the therapists. These therapists may not have been as adept at evoking emotional vulnerability. Overall, Greenberg and Johnson's early research on the efficacy of EFT indicates that this modality does produce positive change in couples.

Outcome Studies on Within Session Change

In another early study addressing the efficacy of EFT, Greenberg and Johnson (1988) conducted research to demonstrate how change occurs as a result of applying EFT. The aim of the researchers in this study was to analyze successful and unsuccessful EFT treatments and elucidate the factors that coincide with successful treatment. This study was retrospective and was analyzed from the theoretical position of EFT.

In order to understand the process of positive change in couples and the therapists' role in facilitating this change, Greenberg and Johnson (1988) selected six couples from a pool of 29 couples who had undergone EFT and conducted in-depth analysis of their sessions. The couples were selected using selection criteria similar to those used in the 1985 study previously discussed. Three of the couples were selected as representative of couples for whom EFT was considered successful, and three couples represented couples for whom EFT was not

particularly helpful. The criteria used for determining the three most and three least successful couples were based on the scores obtained from these couples on the Dyadic Adjustment Scale (DAS), a measurement of marital satisfaction. Of the 29 couples in the pool, these six couples obtained the three most extreme change scores on each end of the continuum.

The primary measures used by Greenberg and Johnson (1988) in this study were the Experiencing Scale (ES) and the Structural Analysis of Social Behavior Scale (SASB). The ES was chosen to determine the couple's level of emotional involvement. The ES is described as a highly reliable measure based on a 7-point scale where lower scores reflect more superficial interactions and higher scores reflect a willingness to explore vulnerable feelings openly within the dyad. The SASB is a measure in which a couple's dialogue is analyzed and categorized. The measure produces scores that are categorized within a quadrant based on affiliation and autonomy dimensions. The couples whose dialogue scores consistently fall within the upper quadrants reflect interactions that are more disclosing, understanding and trusting, whereas scores in lower quadrants reflect interactions that are more rejecting and accusing. The researchers hypothesized that when EFT is successful at accomplishing its goal of facilitating change on an emotional level, the couples' interactions would more consistently fall into the upper quadrant of the SASB scale.

To test their hypothesis in this study, Greenberg and Johnson (1988) chose the “best” session of each of the six couples by looking at post-session questionnaires filled out by the couples after each session. All dialogue in the last half of these sessions was transcribed, and each statement was analyzed using the ES and SASB measures. Two undergraduate raters, who were not apprised of the hypothesis of the study, rated each statement. Based on EFT theory, the raters were trained to identify instances where both partners were open to vulnerable experience. The raters coded these interactions on the ES and SASB. They produced an interrater reliability of 84.4 on the ES and 86.4 on the SASB.

When the successful couples responses were coded on the SASB, 65.5% fell on the upper quadrant, reflecting affirmation within the dyad as well as open self-disclosure. Of the responses of the unsuccessful couples, only 16% fell in the upper quadrant. When successful couples’ responses were coded on the ES, 47.3% fell at a level 4 or above, whereas only 16.1% fell at a 4 or above for the unsuccessful couples.

The researchers identified the “blaming” partner in the dyad of the six couples and analyzed their scores on the ES using the Chi Square statistic. These “blaming” individuals were identified because of EFT’s focus on the need for the blaming partner to reprocess more intense emotional experience. Greenberg and Johnson (1988) found a significant difference between the scores of the blaming partners ($\chi^2[1] = 36.2, p < .001$), with the blaming partner of the successful couple

dyads scoring significantly higher on the ES measure than the blaming partner in the unsuccessful couple dyads. This same hypothesis was tested analyzing scores on the SASB. The results were also significant ($\chi^2[1] = 68.83, p < .001$), reflecting that responses of the blamer in the successful couples fell in the upper quadrant of the SASB.

Greenberg and Johnson (1988) succeeded in demonstrating that when the actual process of change is the focus of research, an emotional focus seems to be a vital component to successful therapy. Greenberg and Johnson utilized appropriate measures and innovative procedures in identifying aspects of the therapeutic process that correlate with positive outcomes. The small sample sized used and the retrospective nature of this research endeavor may have lessened the ability to generalize the results; however, this study should not be overlooked or dismissed. The results serve as further evidence of the efficacy of this modality in promoting positive change.

In an article focusing on in-session change and EFT, Greenberg, Ford, Alden, and Johnson (1993) presented three separate empirical studies demonstrating a strong correlation between the expression of emotionally laden material in therapy and a positive therapeutic outcome as measured by couples' report of marital satisfaction. The first study presented (Vaughan, 1986) examined changes in couples' interaction patterns within sessions. The researchers hypothesized that couples' interaction patterns in the beginning of EFT treatment

would be characterized by more hostile behaviors and at the end of treatment by more affiliative behavior. Twenty-two couples were selected from the same pool as has been discussed in previously reviewed studies. Of the 22 couples selected, 11 were chosen from a pool of couples undergoing EFT, and 11 from a wait listed control group. The DAS and SASB were the primary measures utilized in this study.

The researchers compared interaction patterns of couples in the treatment group by utilizing audio recordings of sessions 2 and 7 in order to analyze the difference in patterns from the beginning to the end of treatment. The session 2 audio tapes were also compared to the session 2 tapes of the control group who first went through an 8 week waiting period with no improvement as reflected on the DAS. This was done to determine equivalence between the control and experimental groups early in treatment. No significant differences were found between the session 2 tapes of the control and experimental groups in terms of the couples' patterns of interaction as measured by the SASB. A t test for uncorrelated means was then used to compare session 2 of the control group with session 7 of the experimental group. The hypothesis was confirmed by this statistic in that interaction patterns as measured by the SASB reflected more affiliative behavior in the later phase sessions than in the earlier phase sessions of the experimental group ($t = 2.03, p < .05$), and more hostile interaction patterns in the couples of the

control group ($t = 1.88, p < .05$). The results of this study suggest that the EFT interventions and overall treatment facilitated more healthy interactions in couples.

The second study (Alden, 1989) hypothesized that in-session conflict events perceived by couples as productive would be characterized by a deeper level of experience and affiliation as measured by the SASB and ES. This hypothesis was based on EFT's assumption that a couple's negative interaction cycles change when underlying emotions are disclosed in a safe relational context. In order to test this hypothesis, selected segments of 16 couples' interactions in "peak" and "poor" sessions, as determined by a post-session questionnaire, were coded using the SASB. Each individual statement was rated using the ES. Specific segments were selected by raters trained to pick out negative couple interactions followed by an affective intervention on the part of the therapist. The 15 to 20 minutes following this interaction constituted the segment used. Three other raters were used to rate each statement in this segment using the ES (the raters yielded a Pearson $r = .69$). Two separate raters coded the interactions on the SASB, with an inter-rater reliability yielding a Cohen's kappa of .69.

The research hypothesis was confirmed by the empirical findings. A chi-square analysis of statements coded on the SASB revealed a significant difference in terms of the distribution of "peak" and "poor" session statements in the four quadrants $\chi^2(3, N = 932) = 44.13, p < .05$. A chi-square analysis of the scored statements on the ES revealed that there was a significantly higher number of

statements reflecting deeper level experiences in the “peak” sessions than the “poor” sessions $\chi^2(15, N = 216) = 47.25, p < .05$.

In the third study Ford (1989) hypothesized that when one partner disclosed in an emotionally intimate way the other partner would respond with affiliative statements. This hypothesis was based on the EFT assumption that intimate self-disclosure will promote a couple’s intimacy and allow for new interaction patterns to emerge and replace less effective interaction patterns. No description of the sample size or population was reported. Again the SASB was used to measure different interaction patterns, with particular emphasis on affiliative responses. Two parameters of the Self-Disclosure Coding System (SDCS) were chosen to measure both the level of intimacy and the level of affect that would be expected to coincide with intimate self-disclosure. No measures of reliability or validity were reported for this instrument.

The sessions examined were chosen based on post-session evaluations by both the therapist and the couple. Of these sessions the second 20 minute segment was subjected to closer analysis using the SDCS and the SASB. An incident of intimate self-disclosure that met criteria for intimacy and affective congruence on the SDCS was facilitated by the therapist in session and then used as a marker for an SASB analysis of the next 5 responses of the partner who heard the disclosure. In order for the researchers to have a control set of responses to compare, an independent rater measured 5 responses of the same partner as was measured in

the experimental situation, but did so using 5 responses to a statement randomly chosen from another 20 minute segment of the same videotape. Results confirmed the hypothesis that when an intimate and affectively laden self-disclosure took place, it promoted more affiliative responses from the other partner. A multivariate analysis of variance (MANOVA) was conducted to analyze the distribution of coded statements on the SASB in terms of affiliative or disaffiliative statements. The MANOVA yielded a significant main effect for the proportion of affiliative statements in the control responses and those given in response to the intimate self disclosure, with .54 and .90 respectively $F(1,13) = 13.72, p = .003$.

Each of the three studies presented by Greenberg et al. (1993) supports a theoretical presupposition of EFT and demonstrates empirically a strong correlation between positive outcome of treatment and these suppositions. The first study seems to affirm the claim that EFT facilitates affiliative interaction patterns in that couples' interactions are characterized by more affiliative interactions and less hostile interactions in later and not earlier sessions of EFT. This seems to support the overall claim that EFT will promote more positive interactions in clients. In the second study, the assertion that depth of experience in session will promote more affiliative interactions seemed to be supported. The third study seems to support the assertion that affiliative statements, characteristic of healthier relationships, would increase as a result of more intimate self-disclosure. Though each of these studies presented by this team of researchers

seems to support various assertions of EFT theory, they are preliminary studies in that they use relatively small and restricted samples and that the studies are correlational in nature.

Recent Outcome Literature

In a more recent study, Johnson and Talitman (1997) attempted to identify the variables that predict a successful outcome in Emotionally Focus Therapy. Although this study was not specifically designed to demonstrate the efficacy of EFT, treatment effects were measured and discussed and seem to be consistent with other EFT outcome literature. In terms of outcome, the only measure utilized in this study was the DAS. The couples ($n = 34$) were self-referred in response to a newspaper article. The researchers screened out any couples who had not been living together for at least 1 year, couples who were actively considering divorce, those who had received psychiatric treatment within the last 2 years, any couple in which one of the partners had an alcohol or drug problem, and those currently utilizing other psychological services. Furthermore, in selecting the sample, one partner had to receive a score reflecting distress (<97) on the Dyadic Adjustment Scale. Among the couples selected, the average age was 42, they had an average of 1.4 children, and averaged 15 years of education. The mean score on the DAS was 88 (range 68-97) which reflects a sample of only moderately distressed couples. The couples underwent 12 sessions of EFT and were given the DAS upon the initial intake, after the third session, after the final session, and at a 3-month

follow-up. Thirteen doctoral student therapists with an average of 13 months of supervision and training experience in EFT provided the 12 sessions of therapy.

The results suggest that EFT was effective in promoting positive change in moderately distressed couples. The researchers found that when standard criteria for recovery using the DAS were used (the midway point between the initial DAS score mean for the group [88] and the norm for satisfaction on the DAS [114]) the results showed EFT to be highly effective. When evaluated at termination, 50% of the couples could be considered recovered, and 70% of the couples met recovery criteria when evaluated at that 3-month follow up assessment. The researchers also noted that according to a reliable change index, 79% of the couples evaluated at termination improved to a clinically significant level, and 82% at the 3-month follow-up.

In order to compare the effectiveness of EFT with couples exhibiting varying levels of distress, couples were placed into three groups, severely, moderately, and mildly distressed. The criterion for separating the couples into groups was based on their initial DAS scores. The severely distressed group was made up of the 7 couples who scored at least one standard deviation below the mean of the entire group, and the mild criteria were calculated the same way in the opposite direction of the mean and included 14 couples. The remaining couples ($n = 13$) comprised the moderate group. In the mild group, 79% recovered and 71% improved; of the moderate group, 85% recovered and 85% improved; and of the

couples in the severe group, 57% recovered and 100% improved. Although these results seem to support the effectiveness of EFT with couples showing varying levels of distress, it is noteworthy that the parameters for severity of distress was calculated using the mean from the initial assessment of this group. The severely distressed couples in this group may have exhibited less distress than severely distressed couples in the general population, since the sample in this study was described as a moderately distressed group of couples. Overall, this study, though not designed as a complex measure of the efficacy of EFT, did suggest that EFT is effective in alleviating marital distress.

Greenberg, Hunsley, Johnson, and Schindler (1999) conducted a meta-analysis of EFT outcome literature across four studies: Goldman and Greenberg, 1992; James, 1991; Greenberg and Johnson, 1985; Walker et al., 1996. These studies addressed the elevations of marital distress and included random clinical trials. Target complaints, dyadic adjustment, and intimacy were the outcome measures. Johnson et al. (1999) calculated the average effect size of each dependant variable in each study, then calculated the average effect size for each study using the individual variables. After weighting each study's effect size by sample size, a mean effect size across studies of 1.28 was found. It was noted by the researchers that this clinically significant effect size ($Z = 6.32, p < .001$) is extremely large for psychotherapy research.

The researchers conducted a second and similar meta-analysis correcting for misinterpretation based on incompatibility of measures used on the different studies. In order to accomplish this the researchers used only the DAS scores obtained in each of these studies. The same steps described above were used in calculating, yielding a weighted mean effect size of 1.31. The researchers noted the relatively small number of studies included in the meta-analysis. In an effort to demonstrate the stability of the results despite the use of only four studies, the researchers used Rosenthal's fail-safe n . This statistic revealed that 49 studies reflecting non-significant results would have to be included in the analysis to bring the effect size down to a level of non-significance. This seems to suggest that this effect size is stable across studies. Overall, this meta-analysis seems to demonstrate that EFT is an effective treatment for promoting positive change in couples experiencing marital distress.

EFT Comparative Literature

Outcome studies seem to support the efficacy and validity of Emotionally Focused Therapy. In order to determine the efficacy of this approach, research has also been conducted comparing EFT to other validated forms of treatment for couples.

EFT vs. Problem Solving Therapy

In order to examine the efficacy of EFT as compared to the well researched Problem-Solving approach to couples therapy, Greenberg and Johnson (1985) divided couples ($N = 45$) into three equal groups and randomly assigned them to receive eight sessions of EFT, eight sessions of Problem-Solving treatment (PS), or to be placed in an 8 week wait-list control group. Six therapists experienced in EFT provided treatment to 15 couples assigned to the EFT experimental group, and six therapist experienced in PS couples therapy provided therapy for the other 15 couples. Raters who were blind to the modality being used evaluated the sessions. The therapeutic approach was evaluated to assure that all the therapists were utilizing their modality appropriately.

Each of the couples was self-referred in response to a newspaper article. The researchers screened out any couples who had not been living together for at least 1 year, couples who were actively considering divorce, those who had received psychiatric treatment within the last 2 years, any couple in which one of the partners had an alcohol or drug problem, and those currently utilizing other psychological services. Furthermore, in selecting the sample, one partner had to receive a score reflecting distress on the Dyadic Adjustment Scale (below 100) and could not receive a score reflecting too much distress (under 70). Couples were assessed using the Experiencing Scale (ES), the Dyadic Adjustment Scale (DAS), Target Complaint (TC), Goal Attainment Scale (GAS), and the Personal

Assessment of Intimacy in Relationship Inventory (PAIR). These are all self-report measures and were given to the couples at intake, at termination, and after an 8-week follow-up. The clients in the experimental groups were also given the Couples Therapy Alliance Scale (AS) after the third session.

Greenberg and Johnson (1985) first conducted a preliminary analysis of the demographic data and the ES to determine whether any notable difference existed between groups in terms of these variables. No significant differences were found between group in these variables or in terms of couples' alliance with their therapist as measured by the AS. The couples' distress levels were also determined to be consistent across each group.

Results on the various measures subjected to ANOVA reflected that all groups were significantly different, $F(2, 42) = 16.79, p < .001$. Post hoc Tukey tests on all significant variables revealed that both experimental groups showed significant improvement as measured by the DAS, TC, GAS, and the PAIR. The total DAS scores of the EFT group were significantly higher than those of the PS group. The mean DAS score for the EFT group was 112.7, whereas for the PS group it was 102.4. At follow-up, both groups maintained the general levels of improvement the couples had shown at termination.

This study suggests that both PS and EFT are effective in promoting positive change in distressed couples. Furthermore, the results of this study suggest that EFT is preferable to PS in couples therapy. The researchers made

appropriate effort to control for confounding variables, such as random assignment of a relatively large sample, testing for differing levels of therapeutic alliance between groups, and assigning raters to determine if therapeutic approaches were being followed. These efforts provide assurance that treatment effects were due to differences in the approaches themselves. This study, like many other EFT studies, was conducted on a moderately distressed group of couples; this fact, along with the relatively strict inclusion criteria, may limit the generalizability of the results to some degree.

EFT vs. Cognitive Marital Therapy

In a similar study conducted by Dandeneau and Johnson (1994), EFT was compared to Cognitive Marital Therapy (CMT) in order to determine the differences in effectiveness of these types of therapy. The research was carried out in a roughly identical manner to Greenberg and Johnson's (1985) comparative study. Dandeneau and Johnson (1994) focused on the differences in couples' levels of intimacy, trust, and marital adjustment. They used the Miller Social Intimacy Scale (MSIS) as a measure of the level of intimacy experienced by couples. The researchers reported a reliability coefficient of .89 for this measure in terms of internal consistency. The Dyadic Trust Scale (DTS) was used to measure the level of trust between couples. The authors reported a reliability coefficient of .93 for this measure. The researchers divided the couples ($N = 36$) equally into two experimental groups and a wait-listed control group. Couples with a DAS score of

less than 95 were excluded from the study, limiting participants to couples who were generally satisfied with their relationships and reflecting only mild levels of distress. Couples were assigned to therapists who were committed to and experienced in utilizing the type of couples therapy they provided, and checks were implemented to assure theoretical fidelity.

Dandeneau and Johnson (1994) hypothesized that both EFT and CMT would be shown to be more effective than the control group in promoting intimacy, trust, and adjustment, and that EFT would be shown to be more effective than CMT on these variables. EFT and CMT were shown to be significantly more effective in increasing intimacy than no therapy ($t[66] = 3.33, p < .001$). The post-test on the means of the DTS failed to produce significant results in comparing the treatment groups to the control group. No significant difference was found between CMT and EFT at post-test on the MSIS or the TC. However, when couples were reassessed at a 6-week follow-up using these tests the EFT couples' scores were significantly higher than those of the CMT couples.

The results of the researchers' analysis support their hypothesis. These results suggest that both CMT and EFT are better than no therapy, and that EFT is more effective than CMT for producing long term change in couples. Only limited generalization could be made from the findings due to the selection criteria that excluded all but mildly distressed couples. Generalization is limited to those couples who are seeking counseling to enhance a generally healthy relationship.

To have wider generalization this study should be conducted using measures such as the DAS with a more diverse sample of couples. The researchers reported that post-hoc analysis of DAS scores at post-test found no significant differences in means between CMT, EFT, or the wait-listed control group. This finding is surprising considering the number of studies that have shown significant post-test results. However, this may be further evidence that the selection criteria of excluding couples with a DAS score below the mildly distressed level was overly strict.

EFT vs. Integrated Systems Therapy

In another comparative study conducted by Goldman and Greenberg (1992), EFT was compared to Integrated Systemic Therapy (IST) and to a wait-listed control. The researchers randomly assigned the couples ($N = 42$) to one of these groups. The sample was selected in a similar fashion to those in the studies previously discussed. The selection criteria were relatively strict although this sample was more diverse in terms of severity of distress than those in similar studies. The average DAS score for couples was in the moderately distressed range, and 57% of the couples fell in the severely distressed classification range. The couples that were assigned to treatment groups received 10 sessions of therapy provided by a therapist experienced in either EFT or IST. Appropriate equivalence measures were used to ensure that therapist variables did not interfere with the treatment effects being studied. Therapists representing each modality

were equally trained, and procedures to ensure the fidelity of each modality were followed. The Couples Therapeutic Alliance Scale was also given to couples after the third session to ensure that the level of therapeutic alliance was commensurate across groups. It is noteworthy that the IST therapy was conducted using a team approach, with three additional therapists behind a one-way mirror and a call-in telephone being used to assist in conceptualization and implementation of therapeutic interventions.

In order to measure the effects of treatment couples were assessed pre-treatment, post-treatment, and at a 4 month follow-up using a standard battery of couples self-report measures (Dyadic Adjustment Scale, Target Complaints, Goal Attainment Scale, Conflict Resolution Scale). The average of the couples' scores on these four measures was used in a repeated measures design with the three groups (EFT, IST, control) and the three assessment occasions (pretest, posttest, and follow-up).

A MANOVA using Wilke's lambda procedure established that there were significant differences between groups $F(8, 72) = 5.80, p < .000$. Univariate ANOVAs were then carried out and reflected clinically significant differences on all four measures. The researchers then conducted Tukey's post hoc t tests and found that EFT and IST groups produced significantly higher scores on the outcome measures than did the wait-listed control group. Results also showed that, at posttest, no significant difference existed on any of the four measures between

EFT and IST. Assessment at the 4-month follow-up revealed that IST couples maintained positive gains to a significantly higher degree than did EFT couples.

The results of this study suggest that both EFT and IST are more effective in promoting positive change in distressed couples than is no therapy.

Furthermore, though the posttest results indicate that these modalities appear to be equally effective to one another at termination, the follow-up results suggest that in the long run, IST may be the preferred modality of treatment when compared to EFT. These findings may be due to the fact that the IST treatment included a team approach which has the distinct advantage of several professional vantage points from which to view the couple. The team approach may have translated into more fruitful interventions on the part of the IST therapists. Another point of consideration in understanding these findings is that the majority of research on the efficacy of EFT is conducted with only moderately distressed couples. Goldman and Greenberg's (1992) results, derived from a sample with over half the couples classified as severely distressed, may suggest that EFT is not the treatment of choice with severely distressed couples. A brief model focused on underlying feelings may be less useful for severely distressed couples than a brief model focused on changing the couples' negative perceptions of their interaction cycles, such as IST. In general, this seems to be a strong empirical study that reflects the effectiveness of both of these modalities in promoting change in distressed

couples. Future research comparing these modalities may be useful, especially research using a larger sample with diverse levels of distress.

EFT vs. EFT + Communications Skills Training

In another comparative outcome study, James (1991) compared the effects of 12 sessions of EFT with 8 sessions of EFT along with 4 additional sessions of communication skills training (EFT + CT). In this study James made an effort to replicate previous studies done that demonstrated the efficacy of EFT, as well as to show that outcomes would be enhanced when a communications component was added to this treatment. In order to accomplish this goal, James randomly assigned couples ($N = 42$) to one of the two treatment groups (EFT, EFT + CT) or to a wait-listed control group. Couples were self-referred in response to a newspaper article and similar selection criteria to previously reviewed studies were used. This study excluded any couples shown to be experiencing severe distress as reflected on the DAS (a score below 70). James (1991) noted that this criterion was added because EFT had been hypothesized to be less effective on severely distressed couples (Goldman & Greenberg, 1992). One other variable that was unique about this study, as compared to other outcome research on EFT, was that James used less experienced therapists to implement therapy. Previous studies have included therapists with at least a Master's degree and who had at least 2 years of experience in the provision of couples therapy. The therapists in this study were Master's prepared students with limited clinical experience.

Couples were assessed at pre-treatment, post-treatment, and follow-up using the Dyadic Adjustment Scale (DAS), the Psychosocial Intimacy Questionnaire (PIQ), the Target Complaints (TC), and the Passionate Love Scale (PLS) and the Communication Scale (CS). The PLS and PIQ were appropriate additions to the standard DAS and TC measures in that the PLS and PIQ measure improvement on affective and intimacy levels, a primary focus of EFT. The PLS and PIQ were reported to have reliability coefficients of .91 and .98 respectively (internal consistency), however the PIQ was normed on a college sample and couples in this study appear to have been much older. The average age was not provided, but other data reflect characteristics of an older sample (average length of partnership 9.64 years, 1.57 children on average, 27% in second marriages). The CS was added in order to assess for levels of improvement in communication to determine the additional benefit of adding the communications skills training to EFT.

Multiple comparisons using Dunn's procedure were run on group means after statistical significance was established using a MANOVA. These comparisons revealed that EFT and EFT + CT groups' means were shown to be significantly higher than those of the control group on the DAS; however, on the CS, only EFT + CT were significantly higher. No significant interactions were shown on the PLS or PIQ. Multiple comparisons also showed that there were no statistically significant differences between the two treatment groups at posttest,

but at follow-up the EFT treatment group yielded significantly higher means than did the EFT + CT.

The results of this study suggest that EFT is as effective or more effective over time than is EFT + CT, except in promoting immediate gains in communications. It was noted by James (1991) that the lack of improvement in levels of intimacy and affection, as reflected by the PLS and PIQ, may be due to difficulty in measuring such complex constructs. Lack of improvement in these areas may also be due to difficulty of brief models of therapy in effecting these types of deep level changes. One valuable contribution of this study was that its results did replicate previous studies that showed EFT to be an effective treatment in promoting change in moderately distressed couples. These significant results were accomplished despite the relative lack of experience on the part of the therapists who provided the treatment. Thus, even when used by therapists who have not had several years of experience using this modality, EFT may be an effective form of treatment. In conclusion, James' 1991 study provides empirical evidence that EFT is an effective form of treatment for alleviating marital distress.

Meta-analytic Review of Comparative Literature

In a meta-analytic review of couples therapy, Dunn and Schwebel (1995) compared results of outcome studies ($N=19$) of Behavioral Marital Therapy (BMT), Cognitive-Behavioral Marital Therapy (CBMT) and Insight-Oriented Marital Therapy (IOMT). The IOMT results were derived primarily from studies

on EFT. The efficacy of the different treatments was assessed in terms of fostering change in relational behavior, affect, cognition, and general assessment of the relationship. Dunn and Schwebel converted effect sizes (weighted by sample size) from each study to standardized scores in order to compare them.

Results of the meta-analysis showed that all therapies, when measured at posttest, yielded significant effects in terms of behavior, cognition, affect, and general assessment of relationship. On the follow-up assessment comparisons, only behavioral changes maintained significance in couples across all therapies reviewed. The researchers reported no significant differences among BMT, CBMT, or IOMT ($Q_b = 1.36, p < .50$); however, IOMT was shown to be significantly more effective in terms of general assessment of relationship than either BMT ($Q_b = 6.69, p < .01$) or CBMT ($Q_b = 4.95, p < .05$).

The results of this study suggest that all the therapies utilized are more effective in promoting positive change in couples than is no therapy. Furthermore, the results indicate that IOMT is preferable to BMT and CBMT in terms of promoting general functioning in relationship. This study reflects well on EFT in light of the fact that the IOMT studies were primarily EFT studies. This meta-analytic review indicates that insight oriented approaches to change, such as EFT, may be preferable to other forms of treatment in promoting change for distressed couples.

EFT Efficacy Studies with Specific Treatment Populations

EFT has been shown to be an effective form of treatment in outcome studies and in studies where the treatment is compared to other forms of treatment. Studies in couples therapy, until recently, have failed to address the efficacy of various treatments with couples who seek treatment for more specific issues. Some recent literature on the efficacy of EFT has focused on its utility with these specific groups.

EFT and Low Sexual Desire

A recent study by McPhee, Johnson, and Van Der Veer (1995) focused on the efficacy of EFT with couples whose primary source of marital distress is inhibited sexual desire (ISD) in the female. In order to accomplish this goal, the researchers randomly assigned couples ($N = 49$) to 10 sessions of EFT or to a wait-list control group. Selection criteria was similar to outcome studies on EFT previously discussed in this paper. In addition, the female partner met DSM-III R criteria for hypoactive sexual desire disorder, couples were seeking treatment for this reason, and the couples were not required to score in the distressed range on the DAS measure as was standard for previously described outcome studies.

Couples were assessed at pre-treatment, post-treatment, and at a three-month follow-up using the Dyadic Adjustment Scale (DAS), the Beck Depression Inventory (BDI), the Sexual History Form (SHF), and the Golombok Rust Inventory of Sexual Satisfaction (GRISS). Each of these measures was reported by

McPhee et al. (1995) to be valid and reliable for the purposes of this study. The couples in the treatment condition were assigned to senior level doctoral therapists who were trained and experienced in the provision of EFT. Appropriate measures were taken to ensure that therapists implemented the treatment in a manner consistent with the EFT modality.

The researchers failed to find significant treatment effects for the more distressed ISD couples on any of the measures used when compared to the wait-listed control group. The results of a MANOVA reflected a significant main effect for the less distressed ISD females on the DAS, GRISS, and BDI, $F(5,28) = 5.49$, $p < .05$. Significance on the GRISS for this group suggested that at post-treatment they had achieved better overall sexual adjustment than the females in the control group. The most salient finding was that the scores of the less distressed females reflected less evidence of depression on the BDI and more sexual desire on the GRISS. Results also indicated that the females were more likely to report improvement in terms of frequency of sexual activity than in any other terms.

McPhee et al. (1995) reported only modest treatment gains as a result of the EFT. Only the couples with less distress benefited in terms of less depression and more sexual desire (as reported by the female partner). Overall group differences in improved sexual adjustment, frequency of sex, and increased desire failed to reach significant levels. This study included only couples seeking treatment for ISD who were not required to be classified as having marital distress on the DAS.

The results of this study suggest that EFT may not be an effective modality for couples seeking treatment for inhibited sexual desire in the female partner.

EFT and Depression

In another study, EFT was compared to psychopharmacological treatment (PT) to determine the efficacy of EFT in treating couples in which the female partner suffered from clinical depression (Dessaulles, 1991). It was hypothesized that female partners receiving EFT would experience less depression after treatment, and that these couples would improve significantly in terms of marital adjustment. It was also hypothesized that females in EFT would show significantly less depression than females who received pharmacological treatment. In order to test these hypotheses, Dessaulles (1991) randomly assigned couples ($N = 18$) to receive either 16 sessions of EFT or pharmacological treatment (PT) for the clinically depressed female partner. Couples volunteered to participate in the study and inclusion/exclusion criteria as well as group characteristics were similar to those described in previously discussed EFT studies. The couples were required to have a maximum DAS score of 95, reflecting at least moderate levels of marital distress. Female partners were required to meet criteria for depression on the Inventory to Diagnose Depression (IDD). Couples were assessed at pretreatment, post-treatment, and at a 6-month follow-up using the DAS and IDD. The IDD was reported by Dessaulles (1991) to be both valid and reliable as a measure of depression and to be the measure of

choice for a study such as this. From pre-treatment to follow-up, four of the nine couples in each treatment group dropped out, making the overall sample studied very small.

Results partially supported the hypotheses in that the female partners showed an improvement in levels of depression between pre-test and post-treatment, $F(1, 32) = 7.82, p < .05$, and between post-test and follow-up, $F(1, 32) = 9.42, p < .05$. The results did not support the marital adjustment hypothesis. Results reflect that females in the EFT group did show significantly higher levels of adjustment between both pre-treatment and post-treatment and between post-treatment and follow-up. However, males in the EFT group did not show significantly higher levels of adjustment at either post-treatment or follow-up. Therefore, in terms of the success of EFT in improving levels of marital adjustment for both partners, the results suggest that it is not an effective treatment for couples where one partner is clinically depressed. These results do suggest however, that EFT is an appropriate and effective modality for improving female partner perceptions of marital adjustment and decreasing depression for the female partner who is clinically depressed. The results indicate that when EFT was compared to PT, both treatments were effective in lowering the levels of depression, but one was not found to be better than the other based on the results of both male and female partners.

Dessaulles' (1991) research did not replicate previous studies in terms of EFT's efficacy. The results indicated that EFT is an effective treatment in reducing depression in female partners of distressed couples and that these females will experience higher levels of marital adjustment. The results also indicated that the male partner in these dyads may not experience the same improvement in marital adjustment as their partners. This study also suggested that EFT was as effective as pharmacological treatment in reducing depression in this sample. These findings may be less conclusive than findings from previously discussed studies due to the high attrition rate in an already small sample size.

EFT with Couples with Chronically Ill Children

Another special population that often experiences heightened marital distress is couples with chronically ill children. In order to demonstrate the efficacy of EFT in treating these couples, Walker et al. (1996) randomly assigned ($N = 32$) couples to 10 sessions of EFT or to a wait-list control group. Participating couples had children who were receiving care at a tertiary pediatric hospital and clinic for one of nine chronic illnesses. Besides being the parent of a chronically ill child, the participants had to meet selection criteria similar to those for other EFT outcome studies with the notable exception that DAS scores were required to be 110 or lower. Walker et al. (1996) reported that this relatively high minimum DAS requirement for marital distress was an appropriate cutoff for reflecting distress in this population. Couples were assessed at pretest, posttest,

and at a 5-month follow-up using the Dyadic Adjustment Scale (DAS) and the Miller Social Intimacy Scale (MSIS). Seven doctoral level therapists who were trained and experienced in EFT provided the therapy.

After a MANOVA demonstrated a significant Group X Time interaction on both the DAS and the MSIS, a univariate analysis, corrected by the Bonferroni procedure confirmed the interaction on the DAS $F(2, 56) = 9.36, p < .001$, and the MSIS $F(2, 56) = 4.39, p < .01$. Overall treatment effects as reflected on the DAS scores were significantly higher than those of the control group at post-treatment $t(28) = 4.64, p < .01$ and at follow-up $t(28) = 4.67, p < .01$. Furthermore, significantly higher levels of intimacy, as measured by the MSIS, were reflected in the treatment group's scores at follow-up as compared to the control group $t(28) = 3.33, p < .01$. Analysis of the DAS scores also produced large effect sizes at post-treatment, (1.27), and at follow-up, (1.28). These effect sizes suggest that the treatment group improved in terms of marital adjustment at post-treatment and maintained the gains as compared to couples that did not receive treatment.

Results of this study support the use of EFT to reduce levels of distress in couples with chronically ill children. The study also indicates that couples will maintain the improvements seen at termination. Walker et al. (1996) noted that the finding of this study, especially the large effect sizes, may be due to a particularly strong fit between the type of interventions provided through EFT and the needs of this population. They suggested that this treatment may facilitate a

couple's ability to support each other in the face of the strong emotions that may arise in dealing with a chronically ill child. In conclusion, EFT seems to be an appropriate and effective intervention for this population.

Conclusions

EFT is a treatment approach that places primary emphasis on the contribution of emotions in perpetuating patterns of discord in distressed couples. EFT attempts to illuminate in session the vulnerable emotions in each partner and facilitate the couples' ability to process these emotions in a safe and caring fashion. It is believed that processing these emotions in a safe context will set up new and more healthy interaction patterns that will alleviate the level of distress and promote a more loving, intimate, and ultimately a more satisfying relationship. Proponents of EFT have made the assertion that this treatment approach is one of the most empirically validated forms of couples therapy (Greenberg et al., 1999; Johnson & Talitman, 1997). The primary goal of this paper has been to review the empirical literature on Emotionally Focused Therapy in order to determine the nature and quality of the research done to support this EFT claim.

The outcome studies reviewed provided strong empirical evidence for EFT as an effective treatment for alleviating distress in couples. The studies reviewed primarily focused on in session change as a result of EFT interventions and on the overall efficacy of EFT in promoting positive changes in the level of marital

distress. Greenberg and Johnson's (1985) study on the efficacy of EFT in promoting changes in distressed couples was a strong study. It provided empirical evidence in support of EFT as an efficacious treatment approach. Greenberg and Johnson's 1988 study, along with others (Greenberg et al. 1993; Johnson & Talitman, 1997), demonstrated successfully that an emotional focus in session, and interventions that are geared to facilitate intimacy by creating a context that is safe for emotional engagement are components of EFT that make an effective treatment for alleviating distress in couples. The outcome literature provides compelling empirical evidence to support the claim that EFT is a well validated and effective form of couples therapy.

The research reviewed that compared EFT to other forms of treatment seems, in general, to further support the efficacy of EFT. These studies were conducted to determine whether or not an emotionally focused approach was as effective or more effective than various other modalities of marital therapy. Two of the studies reviewed suggest that EFT is superior to both Problem Solving Marital Therapy (Greenberg & Johnson, 1985) and to Cognitive Marital Therapy (Dandeneau & Johnson, 1994). When compared to an Integrated Systems (IST) approach to couples therapy, both EFT and IST were effective, but results of this study suggested that EFT was less effective than IST when dealing with the severely distressed couples in the sample (Goldman & Greenberg, 1992). The comparative research conducted using EFT further evidences its efficacy and

indicated that it is more effective than several recognized forms of couples therapy (Dunn & Schwebel, 1995). Comparative studies also indicated that EFT is not the most effective form of treatment for severely distressed couples (Goldman & Greenberg, 1992).

More recently, research conducted using EFT has focused on its efficacy for couples with specific concerns or distress related to specific circumstances. The intention of this type of research seems to have been to determine the nature and scope of the efficacy of EFT. Researchers have turned their attention to which groups are most appropriate for EFT and to the limitations of this treatment with specific populations. The efficacy of EFT with the populations in these studies was less impressive than its efficacy in treating the general population. In treating couples in which the primary complaint was low sexual desire in the female partner, EFT was not found to be effective in reducing marital distress to a significant degree (McPhee et al., 1995). EFT demonstrated mixed results in its efficacy with couples whose primary condition was the female partner's depression (Dessaulles, 1991). In neither of these studies with specific populations did EFT match the levels of success it has demonstrated in studies whose sample was more representative of couples who present as simply distressed. In a study designed to examine the efficacy of EFT in alleviating distress in couples with a chronically ill child, EFT did seem to be an effective form of treatment (Walker et

al., 1996). In sum, these studies suggest that EFT is an effective form of treatment with some populations, but not with others.

Future research should continue to focus on the limits and potentials of EFT. More research is needed to determine which specific types of problems EFT addresses most appropriately, and which types of problems are beyond its scope. Many of the EFT studies reported in this paper are retrospective and correlational in nature. Since the body of literature on EFT seems to support the efficacy of the approach, future studies can include more narrowly defined hypotheses and use statistical analysis, which will address causality. Most of the empirical literature on EFT has been conducted by one of the originators of the approach or by someone closely affiliated or trained by one of the originators. Because researcher bias may exist, future research should be done by researchers with less vested interest in the outcome of the studies.

The claim that EFT is a valid and effective form of marital therapy seems to be largely supported by the empirical literature. Outcome studies and comparative literature on EFT provide strong evidence of the efficacy of this treatment to promote positive change in distressed couples. The recent focus upon the question of who is most appropriate and would most benefit from an emotionally focused approach to treatment is encouraging. Though there are some limitations, it seems clear that Emotionally Focused Therapy is an effective form of treatment for distressed couples.

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VITA

NAME:

Larry D. Messer, Jr.

EDUCATION:

Rosemead School of Psychology Clinical Psychology	Psy.D.	(Cand.)
Rosemead School of Psychology Clinical Psychology	M.A.	1998
Biola University	B.A.	1996

INTERNSHIP:

Texas Tech University Counseling Center Lubbock, Texas	2000	-	2001
---	------	---	------

PRACTICA:

Long Beach Veteran's Administration Hospital Inpatient Placement	1999	-	2000
Biola Counseling Center Outpatient Placement	1998	-	1999
Foothill Community Mental Health Center Child Adolescent Placement	1997	-	1998



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Signature: <i>Larry D. Messer, Jr.</i>	Printed Name/Position/Title: <i>Larry D. Messer, Psy.D. (Aug 2001)</i>
Organization/Address: <i>Biola University</i>	Telephone: <i>(562) 903-6000</i> FAX: _____
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