

# Emotionally Focused Individual Therapy (EFIT) for Anxiety

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# Meet The Presenter



Paul Greenman, PhD, C. Psych., is an EFT therapist, supervisor and trainer. In addition to providing services to clients at the Ottawa Couple and Family Institute (OCFI) and the family medicine unit of the Montfort Hospital in Ottawa, he is also a full-time professor of psychology and former chair of the Department of Psychoeducation and Psychology at the Université du Québec en Outaouais (UQO) in Gatineau, Québec. Throughout his career, Paul has been heavily involved in the teaching and supervision of EFT at the Montfort, at the Psychological Services Clinic of the UQO, and at the Ottawa Couple and Family Institute. Paul has a strong interest in the application of psychological treatments to patients in medical settings; he has overseen and contributed to research projects on the impact of EFT on couples in which one partner suffers from cardiac disease, as well as its effects on the management of other illnesses, including diabetes and post-partum depression. Paul has collaborated most recently with Sue Johnson and colleagues at the University of Ottawa Heart Institute on the development of the “Healing Hearts Together” program, which is an adaptation of “Hold Me Tight” groups for cardiac patients and their spouses. Paul has published numerous peer-reviewed articles and book chapters. He also presents regularly at scientific conferences on the process and efficacy of EFT for couples. Paul conducts therapy and trainings in French, German, Italian, and English.



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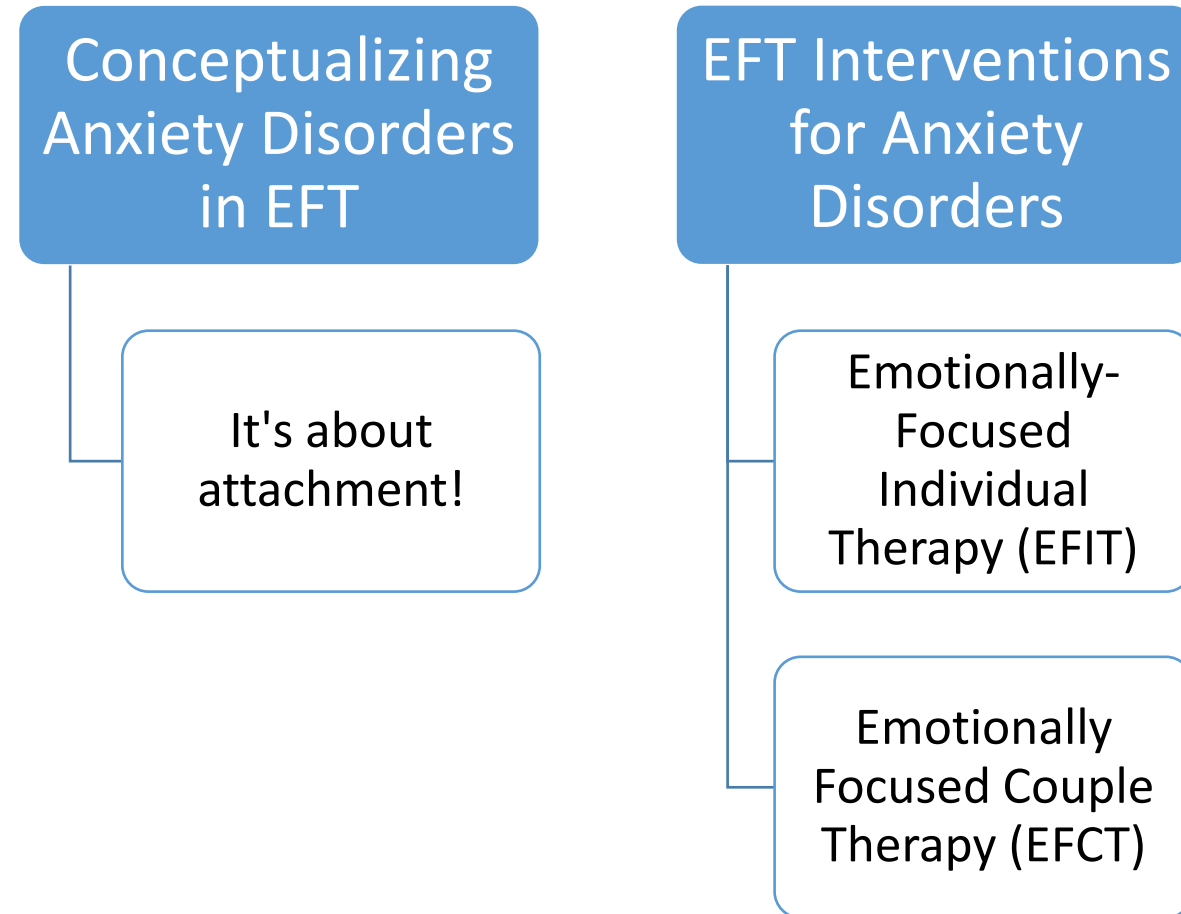
# Disclosures/Conflicts of Interest

- No conflicts of interest to disclose.
- Generative AI was not used for the development or content of this presentation.
- Dr. Paul S. Greenman, C.Psych., Université du Québec en Outaouais, Département de psychoéducation et de psychologie; Ottawa Couple and Family Institute; Institut du Savoir Montfort.

# Learning Objectives

1. Understand how attachment science informs case conceptualization for individuals with anxiety in psychotherapy settings.
2. Become familiar with the macro- and microinterventions of the EFT model as they apply to individuals with anxiety.

# EFIT for Anxiety Disorders



# Conceptualizing Anxiety Disorders in EFT

- Chronic anxiety = attachment anxiety
  - One learns that one is alone in a dangerous world (Johnson, 2019).
  - The excessive worry and panic that characterize anxiety disorders are understood as avoidance mechanisms.
    - Attempts to cope with past (e.g., emotional neglect; physical, sexual, or psychological abuse) and current (e.g., relationship breakdowns) painful interpersonal experiences.
    - Events that make people feel vulnerable and damaged.



# Conceptualizing Anxiety Disorders in EFT

- Worry → STRESS
  - Inherently debilitating
  - Prevent the person from dealing with the original pain and vulnerability
  - Limits access to emotional experiences that lead to more adaptive behaviors
    - e.g. assertiveness in relation to feelings of anger, comfort in relation to sadness



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# Conceptualizing Anxiety Disorders in EFT

- Evidence of the interpersonal origins of anxiety disorders and mood disorders:
  - van der Feltz-Cornelis et al., 2019
  - Allen et al., 2019
  - O'Brien et al., 2019



# Conceptualizing Anxiety Disorders in EFT

- Evidence of the relationship between an anxious attachment orientation and the etiology of anxiety disorders:
  - Nolte et al., 2011
  - Marganska et al., 2013
  - Marques et al., 2018
  - Nielsen, Lønfeldt, et al., 2017
  - Nielsen, Hageman, et al., 2019



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# Emotionally Focused Individual Therapy



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# Principles of Emotionally Focused Individual Therapy

- The primacy of the therapeutic relationship
- Reframing worry as an attempt to cope
- Emphasis on symbolizing and deepening emotional experience
  - *Here and now*
- Accessing emotions and needs through bodily experience
- ***Healing the attachment wounds at the heart of the anxiety problem***
- 3 Phases:
  - Stabilization
  - Restructuring attachment
  - Consolidation
- ***DEPATHOLOGIZATION***



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# Dancing <sup>THE</sup> EFT TANGO



The second figure can be:

- a therapist
- part of self
- an imaginary other in individual therapy
- a partner in couple therapy
- different family members in family therapy



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[courses.iceeft.com](https://courses.iceeft.com)

# Key Therapist Interventions

***Task 1: Reprocessing of emotions***

***Task 2: Create new interactions***



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# RISSSSC

Repeat

Images

Simple words

Slow pace

Soft voice

Specific

Client's words / images



# Microinterventions

- Provoke, access emotions related to needs.
- Help the client change the way they usually process and manage their emotions in their interactions.
  - E.g., accessing fundamental vulnerability and actively seeking social support.
- The use of "soft emotions" related to attachment to restructure interactions.
  - E.g., fear, grief, expression of the need for comfort



# Microinterventions

**RISSSSC**

**REFLECTIONS**

- Content
- Verbal and nonverbal signals
- Attachment needs/fears
- Secondary emotion
- Primary emotion
- Behaviors, reactions and positions





# Microinterventions

- **VALIDATION**
  - Of client experience
  - Of secondary emotion
  - Of primary emotion
  - Of client movement / changes of position:
    - "The way I protect myself prevents me from getting what I need."

# Microinterventions

- EVOCATIVE QUESTIONS AND RESPONDING
- Help clients access their unspoken experiences, put words to them (symbolization)
  - Check in with clients, use their words/images
    - "Worry" vs. "Fear"
    - "Frustration" vs. "Anger"
  - Speculation



# Microinterventions

- HEIGHTENING / INTENSIFICATION
  - Repetition/use of emotionally charged sentences/words/images
  - Lean in
  - Prevent “escapes”
- REFRAMES
  - In terms of attachment and attempts to meet basic needs

# Microinterventions

- Empathetic conjectures
- Restructuring interactions
  - View of self, view of other
  - Enactments (“engaged encounters”)

# Evidence And Case Example

Wiebe et al., 2025

The Case of “Kristina”



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# Q&A



- We will now discuss questions that were submitted via the Q&A feature throughout the presentation.
- Due to time constraints, we will not be able to address every question asked.

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