

# TOUCH, SEX, AND EFT: Helping Couples Re-ignite Sexual Touch in EFT Couples Therapy

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This Therapist's Toolkit article is the third and final in a series on Sex and EFT. In the first article of this series, we explored how to talk openly and effectively about sex with our clients. In the next article, we outlined how to trace a couple's sexual cycle, along with a case study. In this final article, we address how to help a couple who has fallen out of sexual touch, or even physical/affectionate touch of any kind, to begin again in a safe and affirming way, using the EFT technique of enactments.

*A special note: We want to express gratitude to our EFT colleagues Sue Johnson, PhD., Zoya Simakhodskaya, PhD., and Michael Moran, LCSW, CST for their collaboration and generosity in developing and sharing some of the ideas we present in this article. Over the last several years of cross-fertilization of conversations and resource-sharing on sex and EFT, these ideas have become integrated in our conceptualization and vocabulary of working with sex in an EFT framework. It would be hard to pull apart where these ideas originated. In that spirit, this article, while written by Lisa Blum and Silvina Irwin, is really a group project. Thank you, dear colleagues, and cheers to more fruitful collaborations!*

Couples therapists often encounter a dilemma when doing good EFT work with couples who present with a sexual concern: their emotional connection improves, their verbal ability to identify and step out of their disconnection increases, and yet still they do not begin to re-engage in physical touch or sexual contact. This is not a sign that the therapy is failing, nor that the couple is resistant. Rather, it is often evidence that for some couples, physical intimacy does not *immediately* resume when emotional intimacy does. Some couples who wish to re-start their physical relationship can do so seamlessly following the creation of emotional safety and connection, but not all. In our collective clinical experience, the majority of couples working through sexual disconnection need some degree of help and guidance through a process to re-engage physically in a safe and secure frame.

That couples need help with this makes sense; many couples cannot just *talk* their way back into sexual connection – it is not enough. It's easy to forget how much of the world we take in through our physical senses, and how much of our feelings, reactions, perceptions, are processed through a nervous system that is autonomic (meaning involuntary and unconscious),

and so, mostly invisible to us. Communication at this non-verbal, physiological level, is the doorway to sexual connection.

Our bodies are in constant nonverbal communication with each other. The more significant one's attachment to another person, the more tuned in one is to their physiological, sensory state, and the more likely one is to mirror their state. Eye contact, facial expression, mouth position, body gestures, vocal tone, breath rate, heart rate – this is the language of our bodies. For sexual connection, safety, and synchrony, we need to speak this other language -- the language of the body.

Explicitly asking a couple to begin physical touch exercises is the EFT equivalent of asking a couple to do a verbal enactment. It is only in the *experiencing* of something new with their partner, a present moment of experiencing a new kind of contact, vulnerability, and responsiveness, that the couple can *feel* different with each other and experience a change event. We call these choreographed requests for physical contact **behavioral enactments**.

### **When is the right time to introduce touch exercises?**

Here are some markers that the couple is ready to begin touch exercises:

- Stage 1 work is going well
- De-escalation is occurring and they are able to catch their cycle and stop it more of the time
- Safety is increasing; couple can identify feeling a greater sense of trust and openness to the other
- Couple is asking for ways to re-start touch or is open to the therapist's suggestion of exploring ways to re-start touch.

### **Where to start? What kind of touch exercises do they need?**

Assessment, as always, is key. Some couples, like Peter and Katrina, have truly fallen out of the pattern of even non-sexual, affectionate contact over the decade and a half that they have been together. They each keep an invisible physical bubble around them to avoid coming into uncomfortable contact with the other – lest they stir up any desire for sex, which feels so fraught and impossible right now.

Couples need help to identify where the blocks are to making contact. For example, can the couple comfortably look into each other's eyes to share an intimate moment? If not, they can begin with eye gazing. Structured moments of eye gazing allow a couple to make deep and intimate contact with each other without yet needing to touch. Is the couple able to touch *at all*? If not, they can begin with basic affection practices. Establishing routines for waking and bedtime affection, departures and reunions, etc. can help couples "get back into the habit" of touching and showing warmth and affection physically. Can the couple relax together, cuddle on the couch or snuggle in bed? If no, they might begin with body scan and co-breathing

exercises, designed to slow their bodies down, co-regulate, and come into a state of mutually relaxed presence with the other. Does the couple easily engage in affection and physical contact, but they are careful to stay on the side of non-sexual contact? If so, they can begin with sensate focus practice (more on this below).

### **TOUCH EXERCISES ARE BOTH DIAGNOSTIC AND THERAPEUTIC: A BEHAVIORAL ENACTMENT**

We use these touch exercises in the same way that an EFT therapist asks one partner to turn to the other partner and verbally express something intimate and emotionally vulnerable in a new way. Couples who have fallen out of touching feel *very* vulnerable starting to touch again. We can use the same skill set as we do with verbal enactments to help them do behavioral enactments.

*“Katrina, how would it feel to plan a night with Peter where you both agree to take some time for yourselves, close the door, and do a few rounds of the Couples Breath exercise we just practiced here? What comes up for you when you imagine yourself doing that?”* [slicing the enactment thinner; helping Katrina take a risk by having her imagine it first]

*“Peter, what would it be like for you if Katrina made plans with you for that night right now? What do you notice feeling in your body?”* [priming Peter for responsiveness; flushing out his blocks; exploring his primary emotion]

Helping couples get to the point where they *can* make a commitment to do touch exercises with each other is a rich exploration in itself of their sexual cycle. The cues they pay attention to from the other, the appraisals each has, the action tendencies that show up, the body feeling or secondary and primary emotions that come up – all are rich information for understanding, exploring and clarifying, and processing what happens when one reaches for the other in this physically intimate way.

*For Peter and Katrina, there were a slew of feelings and perceptions to work through to help them get to a place where they could agree to do a breath exercise together. Katrina’s resistance had to do with worrying about their now-older children being “aware” that they had closed their bedroom door (a rarity), and her anxieties about what meaning and impact this would have on her children’s feelings about them as parents. Peter’s reaction to his wife’s concerns initially confirmed his negative appraisals – that Katrina worried about the kids’ well-being more than his, because he was just not a priority to her anymore. All of these feelings are there even before the couple closes their door for the first time in years; how could the couple get enough mental, emotional, and literal space for sex until they have carefully worked these feelings through with each other?*

Equally important is for the therapist to explore what happened after the couple has made an agreement to do an exercise together. The discussion of what happened, or what did not happen, is more important (at least initially) than whether the couple actually completed the assignment. Good questions for discussion include:

- Did they do it? Why or why not? What got in the way? Did they discuss doing/not doing it, and what was it like to discuss, or not discuss?
- What was the comfort/discomfort level for each partner?
- Was the plan mutually decided upon? Who initiated? How did that feel?
- If they say they didn't have time, help them process what this is really about – time constraints? Resistance? Fear? Anxiety?
- There are often a lot of layered feelings underneath what success with the exercise would mean to each of them. What would it mean to each partner to do the exercises and discover something new and different? What feelings would it stir?

Throughout these discussions, the therapist is listening for the experience hidden between the lines of the client's words, exploring what was pleasurable, exciting, scary, different and why. As each partner processes their experience in the interaction, we ask the other partner: *"What is it like to hear this? What is coming up for you? Can you turn and tell your partner this?"* We are building their relational communication and bonding capacity about sex throughout the work.

*Katrina bumped into something she had not expected, and had not been at all consciously aware of when she declared herself ready to do the exercise with Peter. She found herself feeling highly uncomfortable with the way he embraced her, because it reminded her of an embrace she had seen in an old picture of him with a former lover. Katrina's insecurity about Peter's attraction to her had intensified after the picture had been found a year or two earlier in an old keepsakes box. Katrina had always suspected that this former lover was Peter's real love, and she was a disappointing second. Until Peter's arms were around Katrina in this way that triggered her memory of the pose in the picture, she had neither thoughts nor words for this deep anxiety. It was only after cutting Peter off in their attempt to the exercise, making an excuse about hearing one of the children call, that this deeply held block came to light.*

Just as in our relational EFT work with a couple, a "failed" enactment offers a great deal of important information about the blocks to intimacy for this couple. We accept these blocks, explore them, and gently slice them thinner until the couple can have the graduated, supported, successful experience of reaching vulnerably, being received, and feeling their partner lovingly respond.

### **How do we know when to progress the touch exercises toward sex?**

The therapist can recognize signs of the couple's progress with touch exercises according to the same progressions one sees with verbal enactments:

- The couple is able to do enactments (aka touch exercises) more regularly and with greater ease;
- Partners are showing decreased anxiety around sensual/sexual encounters;

- Both partners show increased ability to be present and responsive to moments of vulnerability and/or intimacy;
- Partners have an emerging capacity to enjoy sensuality, and to focus on and take in one's own and their partner's pleasure.

As the couple is showing these signs of progress, the touch exercises can also progress along in degree of vulnerability, contact, and frank sexuality.

### **How do I help the couple actually start having sex again?**

Working through the blocks to physical touch is work that proceeds in layers: helping the couple “peel off” what’s in their way, which then allows for the next deeper layer to be revealed and explored together. At some point, *if the couple defines it as a shared goal*, they may want to resume sex, however *they* define sex. To help them along this path, Sensate Focus is a valuable tool for helping the couple regain comfort in resuming sexual activity.

Sensate focus is fundamentally a mindfulness intervention that can teach clients how to manage sexual anxieties, preoccupations, and distractions (including their own emotions and attitudes toward pleasure, enjoyment, and arousal). Sensate Focus is a series of scripted exercises that teaches couples how to manage these distractions by mindfully refocusing on tactile sensations, thereby allowing their bodies to *respond naturally* to touch.

While the scope of this article does not allow us to go into depth on Sensate Focus, there is an excellent guide available: *Sensate Focus in Sex Therapy* by Weiner and Avery-Clark. The exercises are clearly laid out, with instructions to the therapist on how to set up, debrief, and process the assignments. Anecdotally speaking, the reason that so many couples report that they could not do the exercises, or that Sensate Focus did not help them, is not typically not due to any fault of the exercises. Rather, it is the “layers” of blocks impacting the couple’s readiness to resume physical intimacy, which must be explored first. Imagine the “failure” that Katrina and Peter could experience if their therapist started with Sensate Focus when they cannot yet comfortably embrace. A couple who has negative emotional and sexual cycles blocking their physical intimacy needs to name and de-escalate these concerns first. Otherwise, starting Sensate Focus exercises “cold” can be like asking the couple to jump into the deep end of the pool before they feel comfortable standing in the water. Starting these types of exercises prematurely runs the risk that once again, the couple experiences a sense of failure in their ability to connect sexually.

We know that strong emotional connection and safety are necessary ingredients to a thriving sexual relationship, yet sometimes this alone is not enough for couples to revive their sexual connection. EFT is uniquely positioned to address and integrate both the emotional and the sexual elements of a couple’s cycle in effective ways. The EFT therapist is equipped to cultivate the necessary platform of emotional safety to help couples take risks with one another, and to

systematically illuminate and work through blocks that keep couples from reaching for each other sexually. Integrating gazing, breath, touch, and more structured Sensate Focus exercises, the EFT therapist uses our skills as process consultants to choreograph physical/sexual enactments. We use our EFT skills to hold and guide a couple through the sacred realm of a fortifying their emotional and sexual relationship.