

Dr. Keith Sutton ([00:22](#)):

Welcome to therapy on the cutting edge podcast for therapists who want to be up-to-date on the latest advancements in the field of psychotherapy. I'm your host, Dr. Keith Sutton, a psychologist in the San Francisco bay area and the director of the Institute for the advancement of psychotherapy. Today, I'll be speaking with Silvina Irwin PhD and Lisa bloom Psy.D, who both licensed clinical psychologists in the Los Angeles area. They're both certified emotionally focused couples therapy therapists, certified supervisors, and Silvina is also a certified EFT trainer. They co-founded the EFT resource center in Pasadena, which is a group private practice. Lisa's work includes individual couple and family therapy. And Silvina specializes in working with survivors of trauma and relationship distress. Lisa works with both gay, lesbian, queer, and straight individuals and couples and with adults forming families and novel and creative ways, Savina and Lisa developed and facilitate workshops for couples who want to deepen and enrich their sexual connection. And they both lead consultation groups for mental health professionals all over the country who are refining their skills in integrating sexuality, into their couples therapy work. Silvina also offers masterclasses on working with trauma and couples therapy and workshops on vicarious trauma of therapists, first responders and the legal and medical community. And since the beginning of her career, Lisa has been involved in teaching, research and practice in the field of sexuality. Let's listen to the interview. Hi, welcome Lisa. And Silvina. Thank you so much for joining today.

Lisa Blum, PsyD ([01:55](#)):

Pleasure. Wonderful to be here with you Keith.

Dr. Keith Sutton ([01:59](#)):

So I took a training recently on emotion focused couples therapy and sex therapy that you put on through the, I think it was the EFT center of Atlanta and it was a three-day training and it was really interesting and I really enjoyed it. So I reached out to learn more about your work and about your work with couples and also particularly your integration of sex therapy and couples therapy, because I think it is something that is oftentimes disjointed. But before we even kind of get into that, I always love to hear people's story and how they got into doing what they're doing or the evolution of their thinking or so on. So maybe you could start out with that for whoever wants to go first or however you want to do it together.

Lisa Blum, PsyD ([02:47](#)):

Okay. I'll start us off. Thank you so much for having us Keith. I think that a lot of our story is similar for both me and Silvina, in that we both had really good graduate school training in a lot of different family therapy approaches, but not specifically couples therapy. And I think we've bonded over the fact that both of us in our earlier years of practice when we were working with families, because both of us started out predominantly as adolescent therapists. And of course, when you're working with adolescents, you also work with the family, we would often find that a lot of the issues in the family that were affecting the children really had roots and origins in the couple. And so starting to work with the couple, we were both using all the best family therapy approaches we had, but finding that it was a little Helter Skelter, a little here and there and try this and try that.

Lisa Blum, PsyD ([03:46](#)):

And so around the same point in our evolution as a family therapist, we both started feeling like, huh, we really need something a little more structured, a little more targeted than these approaches that

we've had so far when we're working specifically with the couple. And I think both of us had heard a couple of various videotapes and podcasts that Susan Johnson had done. She's the founder of emotionally focused therapy EFT. And we took the big plunge together and decided to go down to San Diego and get trained by Sue in the four day initial training. That is the sort of entry point for emotionally focused therapy. And so maybe I'll let you sort of pick up the story from there.

Silvina Irwin PhD ([04:36](#)):

Yeah, well, you know, it just right away just really transformed the way we thought about couples and families and the bonds between them. EFT is an attachment based model and it's an integration it's humanistic, it's experiential, it's systemic. And it just brought all of these themes together in one cohesive coherent model with a map. So quite immediately actually we realized that we had found our model and we did the deep dive, took our advanced training and we began running then workshops for couples, not only seeing couples in our private practices, but also running workshops called hold me tight for couples. And that's more of an educational model where couples do exercises based on emotionally focused therapy and on the book based on the book, hold me tight. And in there, I'm just going to fast forward a little bit, in that workshop, there's also a section, if you will, on couple addressing their sexual relationship.

Silvina Irwin PhD ([05:47](#)):

And we came to find repeatedly that there just simply was not enough time in these workshops to address sex and you couldn't address sex without addressing all of the other emotional elements that would grab couples and really throw them into alert. So we ended up in a place where we said, okay, we really have to figure this piece out and dedicate more time for a couple to be able to work on their sexual relationship. And we then expanded our study to immerse ourselves in understanding sex and sexuality and that whole body of practice, which then we ended up being able to integrate them and saying, okay, well, sex and attachment. They go hand in hand and EFT. And this model of psychotherapy is actually the perfect model to be able to help a couple address their sexual relationship. So that's a bit how we started to merge into the world of sex and sexuality. And historically these two fields have been quite disparate. You know, you are either a couples therapist or you are a sex therapist. There's very little out there that integrates them both. So Lisa and I started to merge them in meaningful ways and developed another workshop that was all about the integration of a couples, emotional world and relational world with their sexual world. So that's a little bit about the arc.

Dr. Keith Sutton ([07:28](#)):

Yeah, definitely. That's great. Well, very simpatico actually. That's how I also got into couples therapy as my focus on majors and families. And then oftentimes the couples who are really struggling and particularly in the Cohen's research, they found that after the birth of the first child, the couples relationship satisfaction significantly decreases over time and also the Gottman study. So oftentimes as we're seeing the families, when they have teenagers, their relationship has significantly deteriorated. And so that aspect, like you were saying that kind of natural progression to realizing that you need skills in this area to work with couples is so important. And that's great too, as you're kind of saying about that evolution of doing the work with couples, which I think that for many clinicians who are trained in couples therapy, sex is kind of talked about a little bit here and there, but it's oftentimes kind of like an ancillary or once they're getting along better or so on, then the sex life will get better and such, but like you're saying, there is kind of the significant disconnect between couples therapy and sex therapy and it is an important integration and so on.

Dr. Keith Sutton ([08:34](#)):

And I'm also so interested too, particularly with EFT because EFT is so process oriented that, oftentimes we're not kind of focusing on, let's talk about this content today, dealing with the money or the kids or the sex or so on, but really kind of working with the couples process and really the, what we call an EFT is a cycle, that idea of that cycle, whether they're talking about sex money kids, or where to go grocery shopping, or who put the dishes away, it's the same cycle. And so kind of working with that. So I thought it was really interesting to take the training and looking at how really kind of integrating working with sex and couples is so important. And just like you're saying it's really all about attachment. Tell me more about kinda your, we can talk a little bit more about EFT for folks that don't know EFT and kind of a little bit of a grounding in that, and then kind of get into the work with sex or anything else you want to add.

Lisa Blum, PsyD ([09:41](#)):

Yeah. Maybe it would be helpful to just give a short description as we can of EFT, so that folks have some sense of it. And then we can talk more specifically about how we do the sexuality work in the EFT frame. So EFT is intended as a short-term approach to working with couples in distress. And it is an attachment based approach that is also systemic and humanistic. It has its origins in gestalt therapy and Rogerian counseling as well as some of the family therapy system. And it really understanding let's get a pattern of stress or what we saw when they are having experiences that are triggering for them, a sense of not being as safely connected to their partner. And in that feeling of loss of connection, loss of contact, loss of safety with their partner often happening sort of below the surface, although sometimes consciously partners have just defensive responses.

Lisa Blum, PsyD ([10:50](#)):

They have ways of coping with that distress. And so I may really be missing you, but I it's kind of vulnerable to come and say that I'm missing you. So instead I might criticize you that you're never home anymore. And so that's a, that's an example of a way that we sometimes respond out of our self-protective responses. It's easier to be angry than it is to be vulnerable and sad and lonely. So we sometimes respond out of these protective responses that then trigger our partners to have their own protective responses. What do you mean I'm never home don't, you know, how much I'm working to provide for this family. So these protective responses kind of do battle with each other and before the couple knows it they're stuck in a negative spiral and they've lost at least temporarily the ability to really speak to each other from the more vulnerable place that lets their needs really be known.

Lisa Blum, PsyD ([11:48](#)):

And so a big part of what we do in couples therapy is really try to get a handle on what the cycle that's happening, exactly. How is each person responding and what are they thinking when they're responding that way? And what are they feeling underneath when they're responding that way and help them see sort of the tennis match that's happening between them, you know, where the ball just gets batted back and forth, but there's not really a lot of coming together to address what's happening. We help them see that cycle. We help them stop it. We help them really understand the deeper emotions and be able to speak from a more soft, vulnerable place to their partner and ask for more of what they need. And we help choreograph those interactions in a way that then the couple is better able to really connect and communicate with each other and then practice, practice, practice doing that at home. That's not all of EFT, but that's sort of a quick overview. So I want to invite you to add any important elements that I missed there.

Silvina Irwin PhD ([12:45](#)):

Oh, sure. I mean, I think you did a really lovely sort of overview. I think just to kind of distill it then to its essence, you know, that in EFT we are helping couples shape a more secure bond, right? That in distress, as Lisa was saying, attachment strategies, get mobilized, you know, again, anger, criticism or shutting down and retreating. And what we're helping couples do is in these moments of distress, when they really need some connection, actually, we are helping them send clearer signals to their partners in those moments of disconnect to bring their partners alongside them and get care and comfort when they need it the most. So we don't problem solve with couples. We're not helping them develop negotiation skills or communication skills. We're helping them send clear emotional signals when they're in distress so that they can be more responsive and engaged and accessible to one another. And when couples can do that, when they, when we can help them shape a more secure connection, they're actually much more flexible in their problems. They can be more resourced, really to navigate the complexities of life. So we're focusing on the bond as opposed to the content problem that brings couples in that I think would be in a nutshell.

Dr. Keith Sutton ([14:15](#)):

And one way I think about it too, is that the person is engaging in the behavior that makes most sense to them. Like you're saying, the person might be critical and say, oh, you're always working or so on. And there's a hope that the other person's going to say, oh gosh, I'm sorry. I won't work as much anymore. You know, because it's a thing that they're doing to either gain closeness or prevent distance, or the person says, what do you mean I'm working all of this, you know, for our family. And so on that their partner might say, oh, they don't, it makes sense why you're gone so much, you know, I understand now, but it, it ends up being the opposite of what the other person needs. And rather than moving them closer, it moves them farther apart. But like you're saying those turning to the other vulnerably and saying, I really miss you.

Dr. Keith Sutton ([14:56](#)):

I feel alone. That feels too vulnerable. But what we do is help as couples are able to turn more vulnerably, they engage their partners, empathy, and their partner says, oh gosh, I don't want you to be alone and is able to really shift that cycle or that kind of dance so that they can have that more secure bonding. And the way I think about it too, is to the extent that the other is responsive to talk about our bad day and talk about that thing that they said that upset us or whatever it might be, and the other person will respond and we'll come out closer from that conversation. And also to the extent that we feel loved accepted and respect in the relationship when those two pieces are there, then we have that kind of secure connection. But when we don't, we get into those cycles or patterns.

Lisa Blum, PsyD ([15:39](#)):

That's a great, great description. And just to add for any listeners who may not be familiar with EFT and are hearing that we don't help couples solve their problems. I want to just clarify that for a moment. We don't focus on that in the initial stages of EFT, because what we're really focused on is what both of you have so beautifully described about really securing and strengthening the bond between them in the later stage of EFT. When the couple is able to communicate with each other, from this different place, from this more vulnerable place, the ability to send clear signals and ask for what they're needing from their partner. That's the time in which we support the couple then in dealing with, you know, the in-laws, the kids, the house chores, the money, all of that, because from that much more secure and connected place, they become much better at problem solving. And often don't need so much

intervention from the therapy or the therapist because they are now really good at talking to each other and distilling down what they both most need from the other two to solve whatever problem they need to solve. So that does happen in EFT therapy. I don't want to leave people with the impression that it doesn't, but it happens in a later stage when they're just well situated to do it.

Dr. Keith Sutton ([16:57](#)):

Yeah. The big joke, sometimes the stage three goes so quick because once they've got that secure bomb, they come in like financial stuff or like kids, or, you know, like, oh, the sex life is going better somewhat. But I think, you know, again, onto this next point, that there's a lot more to the sex life. That's a little bit more harder to kind of just do on your own than maybe dealing with the finances of kids or so on.

Silvina Irwin PhD ([17:22](#)):

Right, right. Yeah. We often find that in EFT couples therapy, many times couples sexual relationship will improve. But many times it doesn't right. And we've kind of come to this recognition and to make this explicit, you know, that we can't necessarily talk your way into a better sexual relationship, right. Sex is embodied. Right. So that's, that's where there is more of an integration with sex therapy, right. And the work of sexuality, sex, and sexuality with EFT couples therapy. And it begins by even just being able to talk about it with our couples. I mean, I feel like we can even just start right there. That's so many couples therapists because of lack of training because of these two very disparate fields of sex therapy and couples therapy because of our internalized messages of, can we even talk about sex? We often don't even ask clients about their sexual relationships so we can just even start right there right up. Can we begin to ask our couples, tell us about your sexual relationship. Is it something that you find you're satisfied with, right. And that in and of itself can be a difficult bridge to cross for some therapists. And for some clients

Lisa Blum, PsyD ([18:45](#)):

I'd like to share, we've done some just really informal surveying, nothing official. But when we do trainings for therapists who are wanting to learn more about how to integrate sex and sexuality into their couples work, we've surveyed these therapists before the seminar and we've asked them like, what feelings come up for you? What are your worries about talking about sex with couples and both Silvina and I have have been in this place. So we have great empathy and compassion for these feelings but terror is often struck in the therapist about bringing up sex. And I wanna acknowledge this isn't true for everyone. There's a small percentage of therapists who have always reported I had great training in grad school, or I took sex therapy classes after grad school, and I've done a lot of work and I'm really ready to do this.

Lisa Blum, PsyD ([19:36](#)):

So this isn't true for everybody, but for about 70% of the therapists that we've informally surveyed, people say, this strikes terror in my heart. And it's about what if I don't know enough to help them? You know, what if they're really embedded, the couple is really embarrassed. What if I get really embarrassed, then they can see it. You know, what if I get turned on from what they're talking about, what if they get turned on from what they're talking about? You know, what if it's something that can't be helped. Aren't I just opening a Pandora's box then, and there's no solution for it. Like there are so many understandable fears that we therapists have around bringing this topic up and like any difficult emotional, psychological area. The more we can open it up to light and air and talk about it and process

through some of the stuff, the more those feelings can dissipate. But we do understand that it feels like a huge leap for a lot of therapists to say to a couple on the first or second session how is your sex life going? And is that something you'd like to be able to talk about here that feels like a high bridge to jump off of sometimes.

Dr. Keith Sutton ([20:50](#)):

Definitely in sex itself is an uncomfortable topic for many people, it's often times there's, you know, many taboo aspects around it and so on. And it's something that especially even as therapists, right? It's not like, oftentimes we're talking about our own sex life with others outside of our own partnership or so on. And I know that that's a big aspect of when folks get certified by the American association of sexuality educators, counselors and therapists is a process of actually kind of talking about sex and learning about sex and having those conversations and looking at one's own sexual values and assumptions and so on. But you have to really kind of go out of your way to get that training, do that work, do that individual kind of process work, beyond just say reading various books and so on and learning more about sex therapy in itself. So definitely there's, there's kind of effort and kind of intentionality that needs to be put towards getting more comfortable talking about sex and going into that realm, particularly with couples.

Lisa Blum, PsyD ([21:56](#)):

Right. And I think Silvina mentioned this already, but a lot of folks in graduate school, you know, may have had like a single class on some quote sex therapy techniques, how do you deal with erectile dysfunction or how do you deal with vaginal pain. But we often have not had training on how to really talk with people about the emotions and the fears and the sensitivity and the worries that come up for folks around their sexual relationship. And that is where EFT is really, really given us a very deep foundation to start from because we've gone into these very tender and raw emotional places with couples, just in our training of working with couples around their emotional relational cycles. And so in the end, it wasn't such a big leap to also bring the same process talking to them about their sexual cycles, because we do conceptualize it that way, that they're just like there is a negative cycle that can happen between a couple emotionally.

Lisa Blum, PsyD ([23:13](#)):

There can also be negative cycles that happen between couples sexually where they're self-protection self-protective actions have the unintended consequence of pushing away their partner or sending their partner a negative message about coming close or getting sexual with me. And so helping couples understand that they may be stuck in that kind of cycle. Also really takes a lot of burden off the couple. I think it takes a lot of shame off the couple, if they can understand that this isn't, that they're broken in a sexual way, but that they've just gotten caught in a bad net and they need to be able to unhook from it and step out. I don't know, Sil, if you want to talk a little bit more about that particular aspect of it, like understanding a couples sexual cycle.

Silvina Irwin PhD ([24:12](#)):

Sure, absolutely. And maybe I can back up just even a little bit more for a moment and just talk about when we talk about the behavioral systems and our relationship, and I'll get to the sexual cycle in just a moment. But when we talk about the behavioral systems in a relationship, now we have the attachment system, we have the caregiving system, and then we have the sexual system and all of them are separate and distinct, but they inform one another. Right. And one of the things that we are set up with

an EFT that sets us up beautifully is to recognize that attachment is the primary need first and foremost, right? And that those attachment realities shaped the other aspects of a love relationship. So we look at sexual functioning within the context of the relational issues, and this is a bit what Lisa was speaking to.

Silvina Irwin PhD ([25:06](#)):

And so the quality of our attachments and our emotional connections with our partner begins to shape how we show up sexually with one another. So if we are securely attached to our partner we are more able to relax into our bodies, right? We're not always looking kind of for danger, and we're not always finding the litmus test for our safety and acceptance in the relationship. So we can relax into our bodies. We can tune into our bodies, it frees up our resources to tune into our partners and we can be more expressive sexually. When we feel safe, we can take more risks, we can be more playful, and we can be more connected then. So that's where in a securely attached relationship sex can be really pleasurable and powerful way to bond. And the more securely attached we feel, the more likely we are to have fulfilling sexual encounters and the more fulfilling sexual encounters we have with our partner, the more bonded we feel.

Silvina Irwin PhD ([26:11](#)):

So it starts to go hand in hand and to these beautiful bonding spirals that are very positive and strengthening. However, as we were just saying that if we are uncertain with our partners, if we're suddenly questioning, are we wanted, are we desired? am I loved? Am I attractive? If I reach for you for sexual contact and play, and you're not interested, what does that we start to make meaning of partner's responses to us, right? We are meaning making machines, and this is how the relational cycle and the emotional cycle goes right up into the bedroom. So an example then of how we would start to track and make sense of a couple sexual cycle is by asking a little bit. So let's talk a little bit about what it looks like when you tried the last time, one of you really tried to be sexual with the other person.

Silvina Irwin PhD ([27:12](#)):

And I'll give an example. I had a couple where they said, well, actually we haven't had a sex in a, in a very, very long time and we want to be more engaged sexually, but we just don't know how to bridge the gap. Like, okay. Well, tell me a little bit, what does it look like between the two of you and one of you has a sexual inclination when you want to be with your partner. And I'll give an example of a heterosexual couple that I've worked with. I'm just going to make up some names. I'll call them John and Mary, where John said, yes, well, you know, I saw Mary and she began to undress for bed. And I just had to look away. I had to look away and I started to watch TV and I asked, okay, well, tell me a little bit more about that.

Silvina Irwin PhD ([28:06](#)):

And he started to say, I can't let myself look at her. I don't want to look at her because she's so beautiful. And if I find myself really letting myself want her, I know she's just going to reject me. She's not going to be interested in me. So I want to avoid that. And I'm just going to turn on the TV and watch the game. And I'm not even going to look at her. Mary on the other hand, sees John turning away as she's getting undressed. And what does she start to tell herself? He must think I'm hideous. My body has changed so much since we had children. I don't think he wants me anymore. He doesn't even look at me. So, you know what, I'm actually just going to go into the bathroom and change over there, because this is too painful to feel like my husband doesn't even want me anymore. He can't even stay on to look at me. Right? And so she's pulling away, he's pulling away and they're ascribing a certain narrative that has

taken hold of the relationship. And that narrative is saying on his side of the street, she doesn't want me anymore. She's just going to reject me better, shut this down. Don't even try, look away, look away. And her narrative is I better pull away. I am just hideous. He doesn't want me. And now this chasm starts to develop over time.

Dr. Keith Sutton ([29:29](#)):

Yeah. And both partners are wanting to be connected. They're longing for each other, but they're both fearful of being hurt. And so they end up getting into that cycle and totally missing each other.

Silvina Irwin PhD ([29:41](#)):

Absolutely. And that's the tragedy of it. Right? So we make that explicit and we begin to have couples begin to acknowledge what's happening underneath the surface with what looks like rejection, right. It's actually a self protective strategy of not wanting to be hurt. Right?

Dr. Keith Sutton ([30:00](#)):

We wanted to kind of mention something that connected to what you were saying about when we have that secure attachment, we can be playful. We can be open, we can feel safe and we can have better sex. And I think that part that, I think there's a bit of confusion. And also I love Esther Perel has got some great work, but there's also some aspects that I think a little bit differently about it, right. In the beginning of a relationship when we don't have that secure attachment, we've got all that kind of oxytocin and so on, kind of in there in the beginning and the passion. So even though we don't have that secure attachment, we might have some passionate sex and so on. But later on in the relationship as a couples feel more secure, sometimes they also become a bit more avoidance.

Dr. Keith Sutton ([30:42](#)):

And just like this couple, right there, they may get along well, they might parent well, they might like be a quote unquote, happy couple, but they might be avoiding talking about this cause they don't want to feel hurt or so on. So there's that distance, which then leads to not having a very good sex life. So it's not necessarily because they're, they have a secure, close relationship that they're not having good sex, It's more that they get along well, but they're not necessarily actually connected, in the way that we would think in EFT.

Lisa Blum, PsyD ([31:17](#)):

Yeah. And, and that's actually one of the reasons why sometimes doing a course, a good course of couples therapy and the couple is feeling better and more connected emotionally. Doesn't always translate into feeling more connected sexually that there are often more considerations and concerns that have to be unearthed and brought to light to understand what has shut down the sexual system. Because as you're saying, there's a lot, you know, the sexual relationship in a couples life cycle can really change a number of times, you know, from courtship to after commitment, to after children, to after injuries or illnesses to after menopause. You know, there are many, many transition points and a couple of sexual relationship. And part of what really is sort of calls upon couples to be able to deal with each one of these changing developmental places is to really have this ability to feel safe and connected with each other in the sexual realm, to even be able to talk about these changes and to talk about the different things that they need in this different parts.

Lisa Blum, PsyD ([32:33](#)):

So for example, it's a very common experience that a lot of young moms after childbirth, after nursing babies, having toddlers crawling all over them all day need a different kind of sexual experience than they maybe did before kids. Because now they're, you know, as there's kind of a common parlance term that moms can get very touched out when they have little kids on them all day, literally hanging on their body all day. And so sometimes for example, a mom might need a different kind of way of relaxing into sexuality where she's not feeling like somebody else's just demanding more of me physically. And so to be able to talk about that, which requires such sensitivity and trust and openness and vulnerability and lack of shame to talk about how one's needs are changing and what one might need differently.

Lisa Blum, PsyD ([33:35](#)):

And for the partner to be able to hear all this and really understand it and not take it in as some rejection of the partner, but to just understand this as a change, we're going through a shift here, like all of that kind of renegotiation can be so hard to do. And that's where sometimes EFT can come in and really help the couple access, more vulnerably to be able to talk about what they need and dispel the narratives that are getting formed kind of in the way that Silvina was describing. You know, each person is always making sense of what they see their partner doing. But sometimes the narrative they're creating is not the right one. It's not the accurate one. So dispelling those narratives and giving them a chance to really say, oh, so you know what you're saying? You need honey. Now that the kids are all over you all day is like, first you need a bath. And then maybe you need a little bit of massage just to relax and to feel like you can receive something first. I can do that for you. Okay. You know, you're saying that makes you feel more open and receptive. That's wonderful. I can do that for you. You know, so this requires a lot of negotiation now.

Dr. Keith Sutton ([34:48](#)):

And this is kind of even part to one thing that I've walked away from your training. I got the book come as you are by the Nagoski. And she talks about that. There's like gas or the things that are kind of turning up the desire or libido or so on, but oftentimes what's neglected is the break and that are a sympathetic nervous system is going to shut down our sexual responses. So like this parent that you're talking about maybe needing some of that downtime to kind of shift out of that, into more of a relaxed state and again, being able to do that through their couple relationship just being so important.

Lisa Blum, PsyD ([35:29](#)):

Yes, very much so.

Silvina Irwin PhD ([35:37](#)):

Absolutely. I was just going to piggyback on what you were saying that when we do look at desire, we are very much have been influenced by Nagoski's work, detailed more in the book come as you are. And when we look at, you know, there's, there are accelerators, the turn ons, right. And then the brakes, the turnoffs, and it's this balance of having the right ons with less offs. And I to go fully in depth of that would be kind of beyond the scope of our conversation today, but kind of bringing it back to the relational, if a couple is in emotional distress that will slam on the brakes for the most part that will slam on the brakes or activate some attachment strategies that show up in the bedroom, right? So attachment strategies being shut down, shut down, wanting sex, shut down the sexual system, which is what was going on.

Silvina Irwin Phd ([36:36](#)):

In some of the couple, the couple example that I gave you a few moments ago or hyperactivity the sexual system, right? Seek out a lot of sexual contact for some reassurance, right? So that's another way that attachment strategies show up in the bedroom through hypo activation or hyperactivation of sexual seeking or sexual shutting down that informs the sexual cycle, the negative sexual cycle that we try to make explicit for couples. So now they can recognize that and start to shift that one of the sort of historical pitfalls in a more kind of traditional, straight up sex therapy without the relational component is couples will begin to do some behavioral exercises and jump in to start touching one another with total neglect of the emotional realities that have actually caused them to become so distant or fraud sexually. And so they end up quote, unquote, failing the exercises. And so we have so many couples coming to us saying, yeah, we tried sensate focus, or we tried seeing a sex therapist, but it didn't work. It's like, well, of course, of course it didn't work because your emotional realities will hijack you every time. So I just wanted to put that in the mix as well.

Lisa Blum, PsyD ([37:56](#)):

There's a good example that comes to mind for just what you're saying right now, if I can share that there was a middle-aged couple, I was working with heterosexual couple and they had a history of a very good sexual relationship. They came in to therapy because there had been some really, really challenging issues around parenting that they were working through. And we had done a good work and they were feeling much more connected emotionally. And it was at that point that they felt safer to bring in some of the sexual issues that they were dealing with more recently. And then the man in the couple had had a few instances of losing his erection and this, they did not have a history of being able to talk with each other much about sex and sexuality. So when this happened, it was kind of a full shutdown experience for both of them.

Lisa Blum, PsyD ([38:51](#)):

And they weren't able at the time to talk about it, but each sure made a lot of meaning of it. So the wife believed kind of like in the example, Silvina shared before that this must be that my husband is no longer attracted to me. I'm middle aged, I've put on a few pounds, I look so different. Maybe this is not, you know, maybe we've been together a long time. Maybe there's just not a lot of attraction left. So she took very, very personally, if you will, that he was having these erectile issues. And as a result, she really, really withdrew and did not want to initiate anything with him or be receptive to anything with him. He was filled with shame and anxiety around the fact that he was having trouble keeping his erection. And when he would send small little trial balloons over to his wife to see if she might be interested, if he was willing to risk trying again, he would just get that shut down wall that she was having to protect herself from this terrible shame that she felt.

Lisa Blum, PsyD ([39:57](#)):

And they couldn't talk about this. And one of the things that we were able to open up and discuss in the therapy was what would happen if having a strong erection wasn't a prerequisite for being able to stay connected sexually, you know, that the experience of some loss of erection was really normal in an age related way for this man and for many men. And what if it didn't have to be the, be all and end all of sex. There was a strong erection or not, and they had not been able to talk kind for both of them like, oh, what are all many varied possibilities of things we could be doing? Even if it doesn't depend on there being this perfect erection and that alone, their ability to talk about it and an ability to redefine what does sex mean?

Lisa Blum, PsyD ([40:59](#)):

What does it have to be really, really open things up for them? And they were able to sort of start the flow again with that, because there was still the question of the man wanted to work on his erectile issues and that's absolutely valid and we could continue to work on it, but it did not mean that they had to absolutely shut down sex. And the wife was able to hear that this had nothing to do with her desirability to her partner. And they both were able to sort of turn on the faucets again, turn on the flow again.

Dr. Keith Sutton ([41:33](#)):

there was a model that you had talked about your training about kind of enjoyment at different kind of levels of sex rather than only sex is only enjoyable if we orgasm. And I forget exactly what the model was called. Do you recall at all?

Lisa Blum, PsyD ([41:48](#)):

Yeah. I think what you're referring to comes out of some work that has been done in the last couple of decades on models that further extend and expand what masters and Johnson originally created in the sixties, which was kind of a four-step model that predicted that this is exactly how excitement goes and then peaks. And then there's this relaxation response afterward. And there have been some female researchers who have brought in some other approaches to sexuality, much less orgasm focused and have, uh, so like best sawn is one of them. And I'm at the moment blanking on the other one, but they have added in other elements of sexual response, like a willingness to be receptive to some stimulation and to see if desire comes like desire does not have to precede any sexual activity. Like I have to be turned on in order to start something.

Dr. Keith Sutton ([42:53](#)):

Receptive desire, I think it was called.

Lisa Blum, PsyD ([42:55](#)):

Yes. Responsive desire, right. That it's kind of like a little bit like your shower, that when you first turn the shower on the water might be running cold, but if you can wait a few minutes, it gets hot, right? So it's kind of a similar idea that particularly for a lot of women, but I also want to say for a number of men and particularly for men in their maybe middle age on later years, the sexual response isn't as immediate anymore, you know, in a millisecond and sometimes takes a little playfulness, a little seduction, a little fooling around for the desire to fully show up. And so that was one of the revolutionary concepts of these new models of sexuality. And the other one that I think you're referring to Keith is that sex does not have to be solely for the purpose of orgasm that it can be for pleasure. It can be for connection. It can be for closeness, it could be for sensuality that there are lots of reasons to engage sexually and whether there's orgasm or not is not the defining feature of sex. And so that is one of the things like in our workshops that we do with couples, because we have workshops for professionals and workshops for couples, we help couples write their own definition for what is successful sex. And it does not just have to be intercourse and orgasm. There there's a much broader range that it could be.

Dr. Keith Sutton ([44:25](#)):

Yeah, absolutely. Yeah. And I think I was just pulling up your PowerPoint. I think it was called a Lou Lynn's, uh, Lou LAN lumen females on cycle

Silvina Irwin PhD ([44:37](#)):

Yes, thank you for helping my memory.

Dr. Keith Sutton ([44:39](#)):

Actually, if we go back to that couple that you were talking about and how oftentimes after the birth of the first child, that the female's experience kind of changes around needs and so on. It also makes me think about, particularly in heterosexual kind of gender normative couples that oftentimes many men are getting that validation that my partner likes me is attracted to me and so on through their sexual relationship, they may not necessarily do that as a verbally through talking, to the other about do you still care about me or do you still love me or so on, sometimes they might initiate sex and then oftentimes for their partner, they may feel like, oh, this isn't about me. They just want to get off. It's not about being connected to me or desiring me.

Dr. Keith Sutton ([45:30](#)):

I'm just a means to an end. And so oftentimes that can kind of be part of the cycle for couples and particularly, I mean, again, this transition to parenthood is such a significant period of time. There's some research that said 81% of couples go into a crisis after the birth of the first child or the Gottman research found that 68% of couples decrease in their relationship satisfaction. But I think that that aspect sometimes is so missed, because again, like you're saying, it's about attachment it's about communication. And oftentimes particularly for men, they have a harder time kind of talking about that vulnerable kind of need for connection or that longing. And oftentimes the men are more typically the withdrawer and the EFT cycle that we oftentimes find. And so helping engage them and talk about kind of some of those more vulnerable emotions is kind of a pathway too.

Silvina Irwin PhD ([46:23](#)):

Absolutely. I really appreciate what you're bringing up here, Keith, and oftentimes particularly with men but again, I will expand that to not just men, is that oftentimes that's the only sort of socially sanctioned way to get connection closeness and comfort that, to be able to say, Hey, I'm really missing you, or I just want to be close to you has not necessarily been supported for men in particular. But again, I really do want to extend that because it's a vulnerable thing to say, I need you for men and for women, or however you identify, I don't want to just be so binary in that. It is an important, the physical is an important channel where we seek reassurance, where we seek connection, where we seek comfort. And in our work with couples, we help put some words to what's underneath that seeking, right. And to open that up and to see also what gets in the way of talking about it. So I appreciate what you're putting words to here.

Lisa Blum, PsyD ([47:32](#)):

And just to expand on that a tiny bit. Keith, I work with a lot of gay and lesbian couples, so in a same gender relationship, it's still that dynamic can exist. That one person, regardless of their gender is more used to seeking that closeness and contact through the physical realm. And the other one might be more through an emotional verbal realm. And that it can be so incredibly vulnerable to say, I want to be held. And it may be that sex is the only way that that's been understood as acceptable as Silvina was saying. So it really, it spans all couples.

Dr. Keith Sutton ([48:17](#)):

Yeah, definitely. Same sex couples also kind of experienced that withdrawl or pursuer dynamic.

Silvina Irwin PhD ([48:22](#)):

I'm aware that in our examples, we gave two heterosexual normative examples, but it transcends gender identity and pairings.

Dr. Keith Sutton ([48:36](#)):

Definitely. And I think one last aspect, I think that's always important to have that some couples are also coming for sex therapy to kind of enhance their sexual life and so on. And I think that particularly as for me I heard a talk by Dossie Easton who teaches a workshop on cultural competency with BDSM couples, bondage, domination, sadomasochism, and so on. And one of the things I was really struck from that training is that you must again have a high level of communication with your partner to really talk about these kind of non-vanilla kind of type of sexual encounters and so on. And so again, it kind of goes back to that. Can you feel secure? Can you feel that playfulness, that freedom, that safety, to be able to ask for what you want and talk about something that might be embarrassing or bring up shame or taboo or all these kinds of aspects in couples, because oftentimes when couples avoid talking about that, they end up having a very narrow sex life rather than kind of opening it up to talk about things that turn them on or that interests them or so on, and be able to have that connection around that and have a fulfilling sex life.

Silvina Irwin PhD ([49:45](#)):

Absolutely

Lisa Blum, PsyD ([49:47](#)):

The importance of communication that you're highlighting right now is actually why we start our workshop for couples with an exercise that's just on, what is it feeling like to be sitting here right now, talking about sex, because so much comes up around that. I mean, you're referencing it, Keith, but there are so many very, very ingrained societal attitudes about what it means to be talking about sex, what it means to even be a sexual man or sexual woman. There's a ton of myths that surround it. We start with some myth-busting in our workshop. There's so much that just has to be sort of gotten out of the way before we can even get to now let's really communicate with each other. So that is a really big and important aspect of it. And that's why we start there.

Silvina Irwin PhD ([50:41](#)):

Absolutely. When couples can communicate clearly express what their needs are and feel a degree of safety, they can take all kinds of risks with one another, because now they don't have to worry about so much their safety and then sex can look, take all different kinds of shapes and flavors. And there's not just one way, right? So it opens it up to much more playful, risky risk-taking however it fits for the couple to be able to explore, but it starts with that communication and that safe foundation.

Dr. Keith Sutton ([51:21](#)):

Definitely that's a care attachment.

Silvina Irwin PhD ([51:23](#)):

That's right.

Dr. Keith Sutton ([51:25](#)):

So can you tell me a little bit about how you integrate touch exercises from sex therapy into the EFT work?

Lisa Blum, PsyD ([51:33](#)):

Well in EFT we do all this work around the relationship and communication and being able to get really vulnerable and ask for what you need, but when it comes down to a very embodied experience of sex, we also need the couple to be able to really have a physical experience of touch with their partner. And so we have a whole range of exercises that we do with couples when they're ready for them. And that is a significant sort of caveat when they are ready, but when they are ready we have things that start with something as sort of light as just a holding exercise where the couple is just laying face to face, and they're just simply holding each other as an experience of full body contact. And they can do that closed unclothed. There can be different ways, but sometimes couples have gotten so out of practice of just relaxing in the presence of each other's bodies, that sometimes we just start with something that basic like holding, and we have a whole bunch of exercises in between that go all the way up to full on sexual contact, but sort of in a graduated exposure, if you will often through sensate ex focus exercises.

Lisa Blum, PsyD ([52:53](#)):

But the main point being that the couple takes it slow that they work at the pace that feels right for them and that as they go home and try out these exercises, they have the opportunity to come back and to really process in the therapy with us, but also obviously any time with each other, really what were all the feelings and perceptions and meanings that came up for them. And by leaving that space and taking it slow, that's what really helps couples be able to work through and work out things that get in their way and kind of put them to rest and be able then to move forward into full and unrestricted pleasure.

Dr. Keith Sutton ([53:35](#)):

So using the EFT to process the experience of those exercises and kind of looking at the cycle or the meaning, or kind of the vulnerable feelings that came up to kind of help deepen that exercise and kind of facilitate it. Well, thank you so much for your time today. This is great. And I'm glad we were able to have a chance to talk about this and this kind of integration and really kind of put that out to other folks. And I'll also link on the website your information and information about your trainings for therapists, as well as workshops for couples and so on. Thank you so much for taking time today. I really appreciate it.

Lisa Blum, PsyD ([54:19](#)):

Thank you Keith. We'd love to talk about sex, so it was lots of fun. Thank you.

Dr. Keith Sutton ([54:26](#)):

Take care. Bye bye.

Dr. Keith Sutton ([54:30](#)):

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