



# The Effectiveness of Trauma-Informed Couple Therapy on Attachment Security, Emotional Safety, and Intimate Partner Responsiveness among Couples with Childhood Trauma Histories

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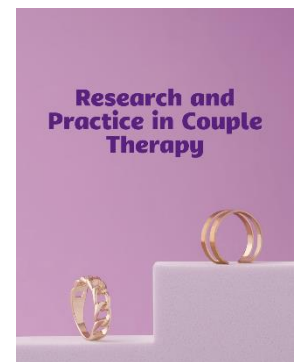
## ABSTRACT

The present study aimed to examine the effectiveness of Trauma-Informed Couple Therapy (TICT) in improving attachment security, emotional safety, and intimate partner responsiveness among couples with childhood trauma histories. This quasi-experimental study employed a pre-test, post-test, and three-month follow-up design with an experimental group and a waitlist control group. The research was conducted in Canada among 52 couples (104 individuals) with documented childhood trauma histories who were recruited from community counseling centers and mental health clinics. Participants were assigned to either an experimental group (26 couples) receiving Trauma-Informed Couple Therapy or a control group (26 couples) receiving no intervention during the study period. Data were collected using the Experiences in Close Relationships-Revised Questionnaire (ECR-R) to assess attachment security, the Emotional Safety Scale for Couples (ESSC), and the Perceived Partner Responsiveness Scale (PPRS). The intervention consisted of twelve weekly 90-minute sessions integrating attachment-based, trauma-informed, emotionally focused, and relational resilience principles. Data were analyzed using repeated-measures analysis of variance and Bonferroni post hoc comparisons in SPSS version 29. The results of repeated-measures analysis of variance revealed significant Time  $\times$  Group interaction effects for attachment security,  $F(2, 204) = 62.47, p < .001, \eta^2 = .380$ ; emotional safety,  $F(2, 204) = 71.66, p < .001, \eta^2 = .413$ ; and intimate partner responsiveness,  $F(2, 204) = 68.19, p < .001, \eta^2 = .401$ . Significant main effects of time and group were also observed across all outcome variables ( $p < .001$ ). Bonferroni pairwise comparisons demonstrated significant improvements from pre-test to post-test and from pre-test to follow-up for attachment security, emotional safety, and intimate partner responsiveness in the experimental group ( $p < .001$ ). No significant differences emerged between post-test and follow-up scores ( $p > .05$ ), indicating maintenance of treatment gains over the three-month follow-up period. The large effect sizes obtained across all dependent variables suggest substantial intervention-related improvements in relational functioning among couples with childhood trauma histories. The findings indicate that Trauma-Informed Couple Therapy is an effective intervention for enhancing attachment security, emotional safety, and intimate partner responsiveness among couples affected by childhood trauma. By addressing trauma-related attachment disruptions, fostering emotionally safe interactions, and strengthening responsive relational processes, the intervention contributed to meaningful and sustained improvements in couple functioning. These results support the integration of trauma-informed and attachment-based approaches within couple therapy and highlight the importance of addressing the interpersonal consequences of childhood trauma in clinical practice.

**Keywords:** Trauma-Informed Couple Therapy, Childhood Trauma, Attachment Security, Emotional Safety, Intimate Partner Responsiveness, Couple Therapy, Attachment Theory, Relationship Functioning, Trauma Recovery, Romantic Relationships.

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## Introduction

Traumatic experiences during childhood have long been recognized as among the most powerful developmental risk factors affecting psychological well-being, interpersonal functioning, and relational adjustment throughout the lifespan. Exposure to emotional abuse, physical abuse, sexual abuse, emotional neglect, or physical neglect during formative years can disrupt fundamental developmental processes and compromise an individual's ability to establish secure, trusting, and emotionally responsive intimate relationships in adulthood. Research consistently demonstrates that childhood trauma exerts enduring effects on emotional regulation, self-concept, interpersonal trust, attachment security, and relational satisfaction, thereby increasing vulnerability to difficulties within romantic partnerships (Paivio & Pascual-Leone, 2023; Rokach & MacFarlane, 2021). Although many trauma survivors demonstrate resilience and adaptive functioning, the relational consequences of early adverse experiences often emerge within intimate relationships where issues of vulnerability, trust, dependency, and emotional closeness become particularly salient (Barker et al., 2021; Southern & Sullivan, 2021).

Theoretical and empirical literature increasingly conceptualizes intimate relationships as critical contexts in which the effects of childhood trauma are expressed, maintained, and potentially healed. Attachment theory provides one of the most influential frameworks for understanding how early adverse experiences shape later relationship functioning. According to attachment theory, interactions with primary caregivers contribute to the development of internal working models that guide expectations regarding safety, trustworthiness, emotional availability, and responsiveness in close relationships. When childhood environments are characterized by abuse, neglect, inconsistency, or emotional unavailability, individuals often develop insecure attachment patterns that persist into adulthood and influence romantic relationship dynamics (Allen, 2023; George & Aikins, 2023). These attachment-related vulnerabilities may manifest as heightened fear of abandonment, emotional withdrawal, distrust, hypervigilance, difficulties with intimacy, or challenges in seeking and receiving support from romantic partners (Tadros, 2024; Xu et al., 2025).

A growing body of evidence has documented significant associations between childhood trauma and impaired romantic relationship outcomes. Individuals with histories of childhood maltreatment frequently report lower levels of relationship satisfaction, increased relational conflict, diminished emotional intimacy, and greater instability in romantic partnerships (Barker et al., 2021; Quan et al., 2025). Recent dyadic research has further demonstrated that childhood trauma not only affects survivors individually but also influences relationship processes involving both partners. For example, cumulative childhood trauma has been linked to reduced relationship satisfaction through its impact on attachment insecurity and diminished perceptions of relational safety within the couple system (Baumann et al., 2024). Similarly, childhood maltreatment has been associated with lower perceptions of partner responsiveness, with posttraumatic symptoms serving as an important mechanism through which early trauma influences current relational experiences (Zamir et al., 2025). These findings suggest that trauma-related relational difficulties cannot be fully understood at the individual level and require examination within the interpersonal context in which they occur.

Attachment security represents one of the most important indicators of healthy romantic functioning and has received considerable attention in contemporary couple research. Secure attachment enables individuals to perceive their partners as reliable sources of support, comfort, and protection during times of distress. Individuals with secure attachment are more likely to engage in adaptive communication, effective conflict resolution, emotional openness, and mutual support within their relationships (Coffman et al., 2023; George & Aikins, 2023). Conversely, attachment insecurity often contributes to maladaptive relational cycles characterized by emotional reactivity, withdrawal, criticism, defensiveness, and unmet emotional needs. Studies examining couples affected by trauma have consistently identified attachment insecurity as a central mechanism

underlying relationship distress and emotional disconnection (Fitzgerald, 2022; Tadros & Ansell, 2022). Furthermore, recent research has demonstrated that attachment experiences significantly predict dyadic adjustment and relationship functioning among couples, highlighting the importance of targeting attachment processes in therapeutic interventions (Xu et al., 2025).

Closely related to attachment security is the concept of emotional safety, which refers to the subjective experience of feeling accepted, understood, respected, and protected within an intimate relationship. Emotional safety provides the foundation upon which vulnerability, intimacy, trust, and mutual support can develop. For individuals with childhood trauma histories, emotional safety is often particularly difficult to establish because past experiences may create expectations of rejection, betrayal, criticism, or emotional harm (Paivio & Pascual-Leone, 2023; Rokach & MacFarlane, 2021). Trauma survivors may remain vigilant to potential threats within relationships, misinterpret neutral interactions as signs of danger, or struggle to trust their partners' intentions. Research examining cumulative childhood trauma has identified attachment-related safe-haven processes as critical protective factors that facilitate relationship satisfaction and emotional well-being among trauma-exposed individuals (Baumann et al., 2024). Consequently, interventions designed to enhance emotional safety may play a crucial role in promoting relational healing among couples affected by childhood trauma.

Another essential dimension of healthy relationship functioning is intimate partner responsiveness. Partner responsiveness refers to the extent to which individuals perceive their romantic partners as understanding, validating, caring, and supportive of their needs and experiences. High levels of perceived responsiveness contribute to relationship satisfaction, emotional intimacy, psychological well-being, and secure attachment development. In contrast, diminished responsiveness can intensify feelings of loneliness, rejection, and relational dissatisfaction (Zamir et al., 2025). Trauma survivors frequently report difficulties perceiving or accepting support from others, which may negatively affect their capacity to experience partners as responsive and emotionally available. Emerging evidence indicates that childhood maltreatment and trauma-related symptoms can significantly undermine perceptions of partner responsiveness, thereby contributing to ongoing relational distress (Quan et al., 2025; Zamir et al., 2025).

The interpersonal consequences of childhood trauma are evident across diverse populations and relational contexts. Research involving adults affected by childhood sexual abuse has demonstrated persistent challenges in relationship satisfaction and emotional closeness (Barker et al., 2021). Studies examining intimate partner violence have similarly identified attachment-related vulnerabilities and emotional insecurity as key contributors to relational dysfunction (Ørke et al., 2021; Sokolova & Bakalova, 2022). Intergenerational models further suggest that unresolved trauma may influence family and couple functioning across generations by shaping communication patterns, emotional regulation strategies, and expectations regarding intimacy and support (Southern & Sullivan, 2021). Additional research involving military families, families affected by deportation, and couples facing significant life stressors has shown that early relational disruptions continue to influence adult intimate relationships through attachment-related pathways (Espinoza et al., 2024; Freeman et al., 2024).

Given the pervasive impact of trauma on romantic relationships, there has been increasing interest in developing and evaluating therapeutic approaches that address both individual trauma symptoms and relational functioning. Traditional trauma-focused interventions have often concentrated primarily on individual symptom reduction, whereas contemporary perspectives emphasize the importance of addressing interpersonal and attachment-related dimensions of trauma recovery. Trauma-informed approaches recognize that healing from trauma frequently occurs within safe and supportive relationships and that therapeutic interventions should foster emotional safety, trust, collaboration, empowerment, and relational connection (Ponting et al., 2023; Yakeley, 2021).

Among contemporary couple-based interventions, attachment-oriented approaches have demonstrated particular promise for addressing trauma-related relational difficulties. Emotionally Focused Couple Therapy (EFCT), for example, has

consistently shown effectiveness in strengthening attachment bonds, reducing relationship distress, and enhancing emotional connection between partners. Research has demonstrated significant improvements in relationship functioning, posttraumatic stress symptoms, and depressive symptoms following attachment-based couple interventions among trauma-affected couples (Ganz et al., 2022). Recent randomized controlled trials have also shown that emotionally focused interventions can reduce shame and increase intimacy among couples experiencing relational difficulties (Mirzazade et al., 2025). Furthermore, EFCT has been successfully adapted for diverse populations, including sexually diverse partnerships, highlighting the flexibility and applicability of attachment-based interventions across different relational contexts (Henry et al., 2025).

The integration of trauma-focused and attachment-based therapeutic approaches has received increasing attention in recent years. Therapists have reported substantial benefits from combining interventions such as Eye Movement Desensitization and Reprocessing (EMDR) with emotionally focused therapy to address both traumatic memories and relational dynamics simultaneously (Linder et al., 2022). Similarly, somatic approaches have been incorporated into couple therapy to facilitate regulation of trauma-related physiological responses and strengthen emotional connection between partners (Gorden, 2025). These developments reflect growing recognition that trauma recovery within intimate relationships requires attention to cognitive, emotional, physiological, and interpersonal processes.

Contemporary attachment research also highlights the capacity for attachment security to develop and strengthen throughout adulthood despite adverse childhood experiences. Relationship education programs have demonstrated success in promoting attachment security and improving relational functioning among couples (Coffman et al., 2025). The Attachment Adaptation Process Model further suggests that secure relational experiences can facilitate corrective emotional experiences that gradually transform insecure attachment patterns and enhance relational resilience (Coffman et al., 2023). Such findings provide support for therapeutic approaches that focus on fostering secure attachment and emotional responsiveness within romantic relationships.

Several relational phenomena associated with trauma further underscore the need for trauma-informed couple interventions. Research examining marital responses to challenging relational experiences, including pornography-related conflict, attachment disruptions, and emotional disconnection, has identified the central role of emotional safety and attachment processes in relationship adjustment (Crawford et al., 2023; Firestone, 2022). Likewise, conceptualizations of romantic attachment emphasize the importance of emotional accessibility, responsiveness, and engagement in promoting healthy couple functioning (Tadros, 2024). These findings align with broader developmental literature indicating that secure relational environments serve as protective factors against psychological distress and facilitate adaptive emotional development throughout the lifespan (Izett et al., 2021).

Despite growing evidence supporting attachment-based and trauma-informed interventions, relatively limited research has specifically examined the effectiveness of trauma-informed couple therapy in improving attachment security, emotional safety, and intimate partner responsiveness among couples with childhood trauma histories. Much of the existing literature has focused on relationship satisfaction, symptom reduction, or general relational functioning, leaving important gaps regarding the mechanisms through which trauma-informed interventions influence key attachment-related relational outcomes. Given the centrality of attachment security, emotional safety, and partner responsiveness in healthy intimate relationships, further investigation of these variables is warranted.

Therefore, the aim of the present study was to examine the effectiveness of Trauma-Informed Couple Therapy on attachment security, emotional safety, and intimate partner responsiveness among Canadian couples with childhood trauma histories.

## Methods and Materials

### Study Design and Participants

This study employed a quasi-experimental design with a pre-test, post-test, and three-month follow-up assessment, including an experimental group and a waitlist control group. The research was conducted in Canada between January and September 2025 in collaboration with community mental health centers and couple counseling clinics located in the provinces of Ontario and British Columbia. The target population consisted of heterosexual and same-sex couples seeking relationship counseling services and reporting a history of childhood trauma in at least one partner. Childhood trauma histories included experiences of emotional abuse, physical abuse, sexual abuse, emotional neglect, or physical neglect occurring before the age of 18 years.

A total of 68 couples were initially screened for eligibility. Following the screening process, 52 couples (104 individuals) met the inclusion criteria and agreed to participate in the study. Participants were selected using purposive sampling and were subsequently assigned to either the experimental group (26 couples; 52 individuals) or the waitlist control group (26 couples; 52 individuals). Inclusion criteria included being in a committed romantic relationship for at least one year, being between 25 and 60 years of age, having sufficient proficiency in English to complete study measures, and reporting clinically significant childhood trauma exposure as determined by a standardized trauma screening instrument. Couples were excluded if either partner presented with active psychosis, severe substance dependence requiring intensive treatment, ongoing intimate partner violence involving physical danger, severe cognitive impairment, or concurrent participation in another structured couple therapy program during the study period.

### Measures

Childhood trauma exposure was assessed using the Childhood Trauma Questionnaire-Short Form (CTQ-SF). The CTQ-SF is a widely used self-report instrument consisting of 28 items that evaluate experiences of emotional abuse, physical abuse, sexual abuse, emotional neglect, and physical neglect during childhood. Participants respond on a five-point Likert scale ranging from 1 (never true) to 5 (very often true). Previous studies have demonstrated strong psychometric properties for the instrument, including satisfactory internal consistency, test-retest reliability, and construct validity across diverse populations.

Attachment security was measured using the Experiences in Close Relationships-Revised Questionnaire (ECR-R). The ECR-R consists of 36 items designed to assess adult attachment anxiety and attachment avoidance within romantic relationships. Responses are recorded on a seven-point Likert scale ranging from strongly disagree to strongly agree. Lower scores on attachment anxiety and avoidance indicate greater attachment security. The ECR-R has consistently demonstrated excellent reliability and validity in both clinical and non-clinical samples and is frequently used in couple and attachment research.

Emotional safety within the relationship was assessed using the Emotional Safety Scale for Couples (ESSC). This instrument evaluates perceptions of emotional security, trust, acceptance, vulnerability, and psychological safety within intimate relationships. Participants rate items on a five-point Likert scale, with higher scores indicating greater emotional safety. The scale has demonstrated strong internal consistency and convergent validity and has been used extensively in studies examining relational functioning among couples experiencing distress and trauma-related difficulties.

Intimate partner responsiveness was measured using the Perceived Partner Responsiveness Scale (PPRS). The PPRS assesses the degree to which individuals perceive their romantic partners as understanding, validating, supportive, caring, and emotionally responsive to their needs. The measure contains multiple items rated on a seven-point Likert scale, with higher

scores reflecting greater perceived responsiveness. Previous research has reported excellent reliability and predictive validity for relationship quality, emotional intimacy, and psychological well-being.

Demographic information was collected using a researcher-developed questionnaire that included age, gender identity, educational attainment, employment status, relationship duration, marital status, household income, and previous counseling experiences. All instruments were administered at baseline, immediately after completion of the intervention, and again at the three-month follow-up assessment.

### Intervention

The experimental group participated in a structured Trauma-Informed Couple Therapy (TICT) program consisting of twelve weekly sessions lasting approximately 90 minutes each. The intervention integrated principles from attachment theory, trauma-informed care, emotionally focused interventions, interpersonal neurobiology, and relational resilience frameworks. Initial sessions focused on psychoeducation regarding the impact of childhood trauma on attachment patterns, emotional regulation, relationship expectations, and interpersonal behaviors. Subsequent sessions emphasized the development of emotional awareness, recognition of trauma triggers, identification of maladaptive relational cycles, and enhancement of self-regulation skills. Couples were guided in practicing trauma-sensitive communication strategies, emotional validation, empathic listening, and co-regulation techniques designed to foster emotional safety and trust. Later sessions focused on repairing attachment injuries, strengthening secure bonding experiences, increasing partner responsiveness, and cultivating adaptive relational narratives that supported healing and resilience. Throughout the intervention, therapists maintained a trauma-informed stance characterized by emotional safety, collaboration, empowerment, transparency, and cultural sensitivity. Couples also completed structured between-session exercises aimed at reinforcing therapeutic skills in everyday relationship interactions. The waitlist control group received no intervention during the study period but was offered the opportunity to participate in the therapy program after completion of all follow-up assessments.

### Data Analysis

Data analysis was conducted using IBM SPSS Statistics version 29. Prior to hypothesis testing, descriptive statistics including means, standard deviations, skewness values, and kurtosis values were calculated for all study variables. Data were screened for missing values, outliers, and violations of statistical assumptions. Normality was evaluated using the Shapiro-Wilk test and examination of distribution indices, while homogeneity of variances was assessed using Levene's test. Baseline equivalence between the experimental and control groups was examined using independent-samples t-tests and chi-square analyses for continuous and categorical variables, respectively.

To evaluate the effectiveness of Trauma-Informed Couple Therapy, repeated-measures analysis of variance (RM-ANOVA) was conducted with time (pre-test, post-test, and follow-up) as the within-subjects factor and group (experimental versus control) as the between-subjects factor. Significant interaction effects were interpreted as evidence of treatment effectiveness. Bonferroni-adjusted pairwise comparisons were performed to identify specific differences across measurement occasions. Effect sizes were calculated using partial eta-squared values to determine the magnitude of observed effects. Statistical significance was established at  $p < .05$  for all analyses. The primary outcomes included attachment security, emotional safety, and intimate partner responsiveness, and all analyses were performed according to the intention-to-treat principle to maximize the validity and reliability of the findings.

## Findings and Results

A total of 52 couples (104 individuals) participated in the study and completed the baseline assessment. The experimental group consisted of 26 couples (52 participants), while the control group included 26 couples (52 participants). The mean age of participants in the experimental group was 38.29 years (SD = 8.64), compared to 39.18 years (SD = 9.21) in the control group. The average relationship duration was 10.12 years (SD = 6.17) for the experimental group and 10.50 years (SD = 6.73) for the control group. In the overall sample, 61% of participants were married, 27% were cohabiting, and 12% were involved in long-term committed relationships. Regarding educational attainment, 24% had completed high school, 46% held undergraduate degrees, and 30% possessed graduate-level qualifications. Independent-samples t-tests and chi-square analyses revealed no statistically significant differences between the experimental and control groups on any demographic characteristic at baseline ( $p > .05$ ), indicating that the groups were comparable prior to implementation of the intervention.

**Table 1. Means and Standard Deviations of Attachment Security, Emotional Safety, and Intimate Partner Responsiveness Across Measurement Occasions**

Variable	Group	Pre-test Mean ± SD	Post-test Mean ± SD	Follow-up Mean ± SD
Attachment Security	Control	78.42 ± 10.83	79.01 ± 10.35	79.28 ± 10.52
Attachment Security	Experimental	77.63 ± 11.12	92.45 ± 9.74	91.88 ± 10.01
Emotional Safety	Control	52.17 ± 8.41	52.88 ± 8.05	53.06 ± 8.22
Emotional Safety	Experimental	51.64 ± 8.76	67.93 ± 7.88	67.31 ± 8.14
Intimate Partner Responsiveness	Control	41.35 ± 6.79	41.88 ± 6.51	42.10 ± 6.67
Intimate Partner Responsiveness	Experimental	40.92 ± 7.04	55.76 ± 6.33	55.28 ± 6.47

As shown in Table 1, both groups demonstrated relatively similar baseline scores across all outcome variables. At pre-test, attachment security, emotional safety, and intimate partner responsiveness scores did not differ substantially between the experimental and control groups, supporting the comparability of the groups before treatment. Following the intervention, marked improvements were observed in the experimental group across all three variables. Attachment security increased from a mean score of 77.63 at pre-test to 92.45 at post-test and remained high at follow-up (91.88). Emotional safety exhibited a similar pattern, increasing from 51.64 before treatment to 67.93 after treatment and remaining stable at follow-up (67.31). Likewise, intimate partner responsiveness increased considerably from 40.92 at baseline to 55.76 at post-test and was largely maintained at follow-up (55.28). In contrast, participants in the control group showed only minimal fluctuations across assessment periods. The stability of gains observed at the three-month follow-up suggests that the positive effects of Trauma-Informed Couple Therapy were maintained beyond the immediate conclusion of treatment. Visual inspection of the descriptive statistics indicates substantial treatment-related improvements in relational functioning among couples with childhood trauma histories, particularly in domains associated with attachment processes, emotional security, and responsive interpersonal interactions.

**Table 2. Results of Repeated-Measures Analysis of Variance for All Variables**

Variable	Source	F	df	p	Partial $\eta^2$
Attachment Security	Time	48.91	2, 204	< .001	.324
	Group	36.54	1, 102	< .001	.264
	Time × Group	62.47	2, 204	< .001	.380
Emotional Safety	Time	57.28	2, 204	< .001	.360
	Group	41.93	1, 102	< .001	.291
	Time × Group	71.66	2, 204	< .001	.413
Intimate Partner Responsiveness	Time	52.84	2, 204	< .001	.341
	Group	39.25	1, 102	< .001	.278
	Time × Group	68.19	2, 204	< .001	.401

The repeated-measures analysis of variance revealed statistically significant effects for all outcome variables. Significant main effects of time were found for attachment security, emotional safety, and intimate partner responsiveness, indicating that scores changed significantly across the three measurement occasions. Significant group effects were also observed, demonstrating overall differences between participants assigned to the experimental and control conditions. Most importantly, significant Time  $\times$  Group interaction effects emerged for attachment security,  $F(2, 204) = 62.47, p < .001, \eta^2 = .380$ ; emotional safety,  $F(2, 204) = 71.66, p < .001, \eta^2 = .413$ ; and intimate partner responsiveness,  $F(2, 204) = 68.19, p < .001, \eta^2 = .401$ . These interaction effects indicate that the pattern of change over time differed significantly between the experimental and control groups. According to conventional effect size interpretations, the obtained partial eta-squared values represent large effects, suggesting that participation in Trauma-Informed Couple Therapy accounted for a substantial proportion of variance in the improvement of attachment security, emotional safety, and partner responsiveness. Collectively, these findings provide strong statistical evidence supporting the effectiveness of the intervention and demonstrate that the observed improvements were not attributable to the passage of time alone.

**Table 3. Bonferroni Pairwise Comparisons for the Experimental Group**

Variable	Comparison	Mean Difference	Standard Error	p
Attachment Security	Pre-test – Post-test	-14.82	1.41	< .001
	Pre-test – Follow-up	-14.25	1.49	< .001
	Post-test – Follow-up	0.57	0.92	.812
Emotional Safety	Pre-test – Post-test	-16.29	1.28	< .001
	Pre-test – Follow-up	-15.67	1.35	< .001
	Post-test – Follow-up	0.62	0.81	.764
Intimate Partner Responsiveness	Pre-test – Post-test	-14.84	1.17	< .001
	Pre-test – Follow-up	-14.36	1.26	< .001
	Post-test – Follow-up	0.48	0.73	.788

To further examine the nature of the significant interaction effects, Bonferroni-adjusted pairwise comparisons were conducted for participants in the experimental group. The results demonstrated significant improvements from pre-test to post-test and from pre-test to follow-up for all study outcomes. For attachment security, participants exhibited a significant increase from baseline to post-intervention ( $MD = -14.82, p < .001$ ), and this improvement remained significant at follow-up ( $MD = -14.25, p < .001$ ). Similarly, emotional safety showed significant enhancement from pre-test to post-test ( $MD = -16.29, p < .001$ ) and from pre-test to follow-up ( $MD = -15.67, p < .001$ ). Intimate partner responsiveness also improved significantly from pre-test to post-test ( $MD = -14.84, p < .001$ ) and remained significantly higher than baseline levels at follow-up ( $MD = -14.36, p < .001$ ). Importantly, no statistically significant differences were found between post-test and follow-up scores for any variable, indicating that treatment gains were maintained over the three-month follow-up period. The absence of significant decline after treatment completion suggests that participants were able to retain and apply the relational skills acquired during therapy. Overall, the pairwise comparisons confirm that Trauma-Informed Couple Therapy produced substantial and enduring improvements in attachment security, emotional safety, and intimate partner responsiveness among couples with childhood trauma histories.

## Discussion and Conclusion

The present study examined the effectiveness of Trauma-Informed Couple Therapy (TICT) on attachment security, emotional safety, and intimate partner responsiveness among couples with childhood trauma histories. The findings demonstrated that participants who received the intervention experienced significant improvements across all three outcome variables compared with couples in the control group. These improvements were evident at post-test and remained stable at the

three-month follow-up assessment, suggesting that the benefits of the intervention were both substantial and enduring. The significant interaction effects observed for attachment security, emotional safety, and intimate partner responsiveness indicate that the positive changes were attributable to participation in the trauma-informed therapeutic program rather than natural fluctuations over time. These findings support the growing recognition that trauma-related relational difficulties can be effectively addressed through interventions that integrate attachment-oriented and trauma-informed principles.

One of the most important findings of the present study was the significant increase in attachment security among couples who participated in Trauma-Informed Couple Therapy. This result is consistent with attachment theory, which proposes that corrective emotional experiences within close relationships can modify insecure internal working models and facilitate the development of greater relational security. Individuals with childhood trauma histories often develop expectations that others will be unavailable, rejecting, unpredictable, or harmful. These expectations frequently contribute to attachment anxiety, attachment avoidance, and chronic relational distress. Trauma-informed therapeutic interventions seek to challenge these maladaptive assumptions by creating experiences of safety, consistency, emotional attunement, and responsiveness within both the therapeutic relationship and the couple relationship itself (Allen, 2023; George & Aikins, 2023). Through repeated experiences of emotional accessibility and supportive interaction, participants may gradually revise negative relational expectations and develop more secure attachment patterns.

The observed improvements in attachment security align with previous studies emphasizing the role of attachment-focused interventions in strengthening relational functioning. Research has shown that attachment experiences are strongly associated with dyadic adjustment and relationship quality among couples (Xu et al., 2025). Similarly, relationship education programs designed to strengthen attachment bonds have demonstrated significant improvements in attachment security and relational functioning (Coffman et al., 2025). The findings are also consistent with the Attachment Adaptation Process Model, which suggests that secure relational experiences can facilitate adaptive transformations in attachment functioning even among individuals who have experienced significant relational adversity earlier in life (Coffman et al., 2023). The present findings extend this literature by demonstrating that a trauma-informed approach specifically designed for couples with childhood trauma histories can effectively enhance attachment security within intimate relationships.

The results further revealed significant improvements in emotional safety among participants in the experimental group. Emotional safety represents a fundamental component of healthy intimate relationships because it allows partners to express vulnerability, communicate openly, seek support, and engage authentically without fear of judgment, rejection, or emotional harm. Childhood trauma frequently disrupts the development of emotional safety by creating enduring beliefs that closeness is dangerous and that others cannot be trusted. Trauma survivors often enter adult relationships with heightened vigilance toward potential threats and may interpret ambiguous interactions as indicators of rejection or betrayal (Paivio & Pascual-Leone, 2023; Rokach & MacFarlane, 2021). Trauma-Informed Couple Therapy directly addresses these concerns by emphasizing emotional regulation, validation, empathy, and collaborative communication, thereby creating conditions that foster psychological and relational safety.

The improvement in emotional safety observed in the current study is consistent with research highlighting the importance of safe-haven attachment processes in relationship functioning. Baumann et al. demonstrated that attachment-related experiences of safety play a critical role in buffering the negative effects of cumulative childhood trauma on relationship satisfaction (Baumann et al., 2024). Likewise, studies focusing on dyadic approaches to trauma treatment have emphasized the necessity of creating emotionally secure relational environments that promote healing and resilience (Ponting et al., 2023). The present findings suggest that trauma-informed interventions may be particularly effective because they address not only symptoms of trauma but also the relational environments in which trauma-related difficulties are maintained. By fostering

emotional safety within the couple relationship, therapy may create opportunities for trauma survivors to experience closeness and vulnerability without activating defensive responses associated with earlier adverse experiences.

Another important finding was the significant increase in intimate partner responsiveness among couples receiving the intervention. Partner responsiveness refers to the perception that one's partner understands, values, and cares for one's emotional experiences and needs. This construct is central to relationship satisfaction and emotional intimacy because it reflects the extent to which individuals feel emotionally supported and understood by their partners. Childhood trauma can undermine perceptions of responsiveness by fostering mistrust, emotional withdrawal, and difficulties recognizing or accepting support from others. Trauma survivors may misinterpret supportive behaviors, anticipate rejection, or struggle to communicate emotional needs effectively, thereby reducing opportunities for responsive interactions within relationships (Zamir et al., 2025).

The significant improvement in partner responsiveness observed in the present study supports previous research indicating that attachment-based interventions enhance emotional accessibility and responsiveness between partners. Zamir et al. found that childhood maltreatment negatively affects perceived partner responsiveness through trauma-related psychological processes (Zamir et al., 2025). Similarly, studies examining the relationship between childhood trauma and romantic relationship satisfaction have identified attachment and social support as key mechanisms linking early adversity to adult relational outcomes (Quan et al., 2025). By helping partners recognize trauma triggers, communicate needs more effectively, and respond with empathy rather than defensiveness, Trauma-Informed Couple Therapy appears to strengthen the responsiveness processes that support intimacy and relational well-being.

The maintenance of treatment gains at the three-month follow-up is particularly noteworthy. No significant differences were observed between post-test and follow-up scores, suggesting that the improvements achieved during therapy remained stable after treatment completion. This finding indicates that participants were able to internalize and continue utilizing the skills acquired during the intervention. Trauma-informed approaches often focus on developing sustainable competencies such as emotional regulation, self-awareness, empathic communication, and co-regulation strategies. These skills can become integrated into daily relationship interactions and continue to promote positive relational outcomes beyond the formal therapeutic setting. The stability of gains observed in this study mirrors findings from attachment-based couple interventions that have demonstrated enduring improvements in relational functioning over time (Ganz et al., 2022; Mirzazade et al., 2025).

The findings can also be understood within broader theoretical perspectives concerning the relational consequences of childhood trauma. Research has consistently shown that childhood maltreatment increases vulnerability to relationship dissatisfaction, attachment insecurity, interpersonal conflict, and emotional disengagement in adulthood (Barker et al., 2021; Fitzgerald, 2022). Intergenerational models further suggest that unresolved trauma influences relational functioning through patterns of emotional dysregulation, maladaptive communication, and insecure attachment that are carried into adult relationships (Southern & Sullivan, 2021). Trauma-Informed Couple Therapy may interrupt these patterns by helping partners understand how past experiences shape present relational dynamics. Increased awareness of trauma-related reactions can reduce blame and criticism while fostering compassion, empathy, and collaborative problem-solving within the relationship.

The present findings are also consistent with research demonstrating the effectiveness of integrating trauma-focused and attachment-based therapeutic approaches. Therapists who combine emotionally focused interventions with trauma-processing techniques have reported improvements in emotional connection, relational satisfaction, and trauma recovery among couples (Linder et al., 2022). Likewise, attachment-based interventions have been shown to reduce symptoms of posttraumatic stress, depression, and relationship distress while strengthening emotional bonds between partners (Ganz et al., 2022). The incorporation of somatic and experiential techniques may further enhance treatment outcomes by addressing the physiological dimensions of trauma that contribute to emotional reactivity and relational disconnection (Gorden, 2025). Collectively, these

findings support the view that trauma recovery is not solely an individual process but also a relational process that occurs within the context of emotionally supportive and responsive relationships.

Several additional studies provide indirect support for the current findings. Research involving couples affected by incarceration, intimate partner violence, and family instability has demonstrated strong associations between childhood experiences, attachment functioning, and adult relationship outcomes (Ørke et al., 2021; Sokolova & Bakalova, 2022; Tadros & Ansell, 2022). Studies examining the impact of parental deportation, military family experiences, and other forms of relational disruption have similarly emphasized the importance of attachment security and emotional support in promoting healthy intimate relationships (Espinoza et al., 2024; Freeman et al., 2024). Furthermore, conceptual analyses of romantic attachment have consistently highlighted emotional responsiveness, trust, and safety as foundational elements of relational well-being (Tadros, 2024). The current study contributes to this growing body of literature by demonstrating that these critical relational dimensions can be significantly improved through targeted trauma-informed interventions.

The findings may also be interpreted in light of resilience research among trauma-exposed couples. Braughton et al. identified several relational strengths that facilitate resilience among couples experiencing trauma, including mutual support, effective communication, emotional validation, and collaborative coping (Braughton et al., 2022). Trauma-Informed Couple Therapy explicitly cultivates many of these strengths, which may explain the observed improvements in attachment security, emotional safety, and responsiveness. By shifting relational interactions from threat-based patterns toward support-based patterns, couples may develop greater confidence in their ability to navigate emotional challenges together.

The results additionally align with contemporary perspectives emphasizing the central role of secure relational bonds in psychological health. Secure attachment relationships provide protection against emotional distress and facilitate adaptive functioning across numerous domains of life (Allen, 2023; George & Aikins, 2023). Research on emotionally focused interventions among diverse populations has repeatedly demonstrated that strengthening attachment bonds contributes to improvements in intimacy, relational satisfaction, and emotional well-being (Borden & Allan, 2024; Henry et al., 2025). The present findings suggest that these benefits extend to couples whose relationships have been affected by childhood trauma and associated attachment-related vulnerabilities.

Several limitations should be considered when interpreting the findings of this study. First, the sample was limited to couples residing in Canada, which may restrict the generalizability of the results to other cultural and social contexts. Second, all outcome measures relied on self-report instruments, raising the possibility of response bias and social desirability effects. Third, the follow-up period was limited to three months, making it difficult to determine whether the observed improvements would remain stable over longer periods. Fourth, although the study included a control group, participants were not randomly selected from the broader population of trauma-exposed couples. Finally, childhood trauma histories varied considerably in type, severity, and duration, which may have influenced treatment responsiveness in ways that were not fully captured by the study design.

Future studies should employ longer follow-up periods to examine the durability of treatment gains over six months, one year, and multiple years after intervention completion. Researchers may also investigate potential mediators and moderators of treatment effectiveness, including trauma severity, attachment style, emotional regulation abilities, and relationship duration. Comparative studies evaluating Trauma-Informed Couple Therapy against other evidence-based couple interventions would further clarify its unique contributions and mechanisms of action. Future research should additionally explore the effectiveness of the intervention among culturally diverse populations, same-sex couples, military families, and couples affected by specific forms of childhood adversity. Incorporating qualitative methodologies may also provide deeper insights into participants' lived experiences of relational healing throughout the therapeutic process.

Mental health professionals working with couples should routinely assess childhood trauma histories and consider the potential influence of unresolved trauma on current relationship dynamics. Couple therapists may benefit from incorporating trauma-informed principles that emphasize emotional safety, collaboration, empowerment, attachment repair, and partner responsiveness. Training programs should provide clinicians with specialized competencies for recognizing trauma-related relational patterns and implementing attachment-based interventions. Community counseling centers and healthcare organizations should consider developing trauma-informed couple therapy services as part of comprehensive relationship support programs. Finally, prevention and early intervention initiatives aimed at strengthening attachment security and emotional safety within intimate relationships may contribute to healthier relational outcomes and reduce the long-term interpersonal consequences of childhood trauma.

### **Declaration of Interest**

The authors of this article declared no conflict of interest.

### **Ethical Considerations**

All ethical principles were adhered in conducting and writing this article.

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### **Authors' Contributions**

All authors equally contributed to this study.

### **Transparency of Data**

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

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