

Attunement

loc: 58	Integrative psychotherapy, the method of therapy upon which this book is based, focuses on relationship.
loc: 59	psychologically healthy—
loc: 59	is to be in relationship
loc: 64	Contact is the touchstone of relationship; it is what makes relationship possible.
loc: 69	In a psychologically healthy individual, internal and external contact interact; each depends upon the other, and neither can exist in isolation.
loc: 78	three therapeutic elements
loc: 78	can further this process: inquiry, attunement, and involvement.
loc: 83	help the client to integrate his or her self:
Page: 16	the therapist must be attuned to the client's here-and-now experience (actually, the past and the present flow together and are often indistinguishable in the moment of experiencing)
Page: 17	With careful inquiry, sensitive attunement, and authentic involvement, the therapist will be experienced as dependable, consistent, and trustworthy.
Page: 18	It has been our observation that good therapists, regardless of theoretical orientation, engage in inquiry, value attunement, and are concerned that their involvement be genuine and appropriate.
Page: 46	Attunement
Page: 46	Feeling understood and in contact involves more than someone knowing the logical, rational meaning of our words. It involves having them know how we feel about those words and sensing that they share or reverberate with how we feel. It involves their being attuned to us,
Page: 46	it goes beyond empathy,
Page: 46	it involves the deeply personal response of the hearer as well as the intent of the speaker (Stern, 1985).
Page: 47	Functions of Attunement
Page: 47	Respect

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Page: 47	To the degree that the therapist is attuned to the client and conveys that attunement, the client feels respected.
Page: 49	Safety The importance of providing the client with a sense of safety can hardly be overemphasized. Fritz Perls talked about the “safe emergency” in which the client can take the risk
Page: 49	The prospect of working with a therapist is inherently frightening for many (most?) people.
Page: 49	Sensing the therapist’s attunement, the client feels protected:
Page: 49	Reclaiming Old Experiences One of the basic assertions that characterize a relationship-based therapy is that present discomfort and dysfunction arise out of the ways in which people have learned to cope with relationship failures in the past (Spotnitz, 1969). In such past experiences, the person’s needs and feelings may not have been acknowledged or attended to.
Page: 49	Through attunement to the client’s reexperienced emotional memories, the therapist validates the significance of those memories while at the same time providing a contrasting relational experience
Page: 50	Dealing with Therapeutic Misses
Page: 50	No matter how sensitive and skillful they are, therapists do make mistakes. Attunement can never be perfect; clients get missed sometimes. And they notice, and the therapist’s failure is added to the long list of “proofs” that reinforce their script beliefs: “My needs won’t be met,” “People can’t be trusted,” “Life is hard.” The therapist who is committed to maintaining attunement with the client, in spite of occasional misses, will be aware of the shift that occurs in the ongoing relationship when such a miss occurs.
Page: 53	Kinds of Attunement
Page: 54	Cognitive Attunement
Page: 57	Affective Attunement
Page: 57	the therapist’s sense of the client’s affect and responding with a reciprocal affect.
Page: 57	Characteristics of Affective Attunement
Page: 57	Affect involves both type and intensity;
Page: 57	clients who have been victims of trauma,
Page: 57	getting very close to old emotional memories,
Page: 57	therapeutic involvement heightens the intensity of their affect even more.

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Page: 58	Affect is
Page: 58	a form of communication, a way for a client to tell the therapist about things that cannot be formulated in words.
Page: 58	absence of words may reflect an emotional regression to a preverbal experience
Page: 58	All of the facets of affect are important:
Page: 58	feelings
Page: 58	the meanings
Page: 58	the message
Page: 59	Affective attunement,
Page: 59	also signals us when it is better to move slowly and to pause and give the client time to regroup and attend to his or her current emotional needs.
Page: 59	Attunement to shame reactions is important because shame is both complex and commonplace
Page: 59	Rhythmic Attunement
Page: 59	An infant's earliest awareness is accompanied by the constant rhythm of the mother's heartbeat.
Page: 60	Rhythmic attunement means that we tune ourselves to the client, rather than expecting the client to match us.
Page: 60	there is one rhythmic "rule" that holds for all of us: we tend to process affect slower than cognition.
Page: 60	So, while the experience of affect can be lightning fast, talking and thinking about it occurs much more slowly.
Page: 60	the pace will generally need to be slower than when the client is working at a more cognitive level (Janov, 1971).
Page: 60	Problem solving is unlikely to lead to lasting changes if it does not take into account the affect that is stimulated by the problem; deep affective work will be no more than temporary catharsis unless there is time to process that work cognitively.
Page: 62	Developmental Attunement
Page: 62	As people begin to reclaim lost aspects of themselves,

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Page: 62	they inevitably recover thoughts, feelings, behaviors, and memories that are associated with previous developmental stages.
Page: 62	These patterns of experience—
Page: 62	manifest themselves as client regression:
Page: 63	Through therapeutic regression, a client can reexamine relationships, access and change old decisions, and heal the cumulative trauma of childhood through enacting and experiencing in fantasy what was not available in reality.
Page: 63	A client who is (for the moment) experiencing the world like a 5-year-old may not feel understood or supported by a therapist who uses adult language and concepts.
Page: 63	Finding words that are appropriate for both the adult client and the client at a previous developmental age requires not only sensitivity, but also a thorough knowledge of the developmental process.
Page: 63	Responding to regressed clients requires a kind of therapeutic “double vision,” the ability to maintain contact with both the regressed-to-childhood person and the self-observing adult (Federn, 1977; Berne, 1961).
Page: 66	Assessing the Developmental Level of the Regression
Page: 66	the current developmental stage of the client is based on four kinds of information.
Page: 66	sometimes the client will report directly what his or her phenomenological age is.
Page: 66	useful cues is the information the client may previously have given about his or her personal history.
Page: 66	the therapist’s general understanding of developmental psychology,
Page: 66	patterns of behavior typical of different stages of development,
Page: 66	The therapist draws on his or her knowledge of normal child development,
Page: 66	as well as from personal experience with children,
Page: 66	the therapist’s internal response to the client provides an important guidepost. Does the client feel young
Page: 67	Is there a countertransferential pull to respond to this client as if he or she were a younger person?
Page: 67	Our affective response to a client is not just a random occurrence; it contains information

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Page: 67	four areas of knowledge—phenomenological, historical, developmental, and social/transferential—
Page: 68	Conveying Attunement
Page: 68	conveying attunement is in many ways an art form,
Page: 68	there are nevertheless some specific guidelines that can help us to stay on track.
Page: 68	Attend to the Client’s Nonverbal Communication
Page: 68	inconsistency—when the words say one thing but the tone or the face or the gestures say something else—this is usually a signal that there is something more important than the content that we need to be attuned to (Smith, 1985).
Page: 68	the client who is regressed or deeply involved in an emotional memory often cannot find words to express what is going on inside.
Page: 69	being attuned to the nonverbal signals, the therapist can find the words to move the client more deeply into his or her process.
Page: 69	Decenter
Page: 69	Although attuned therapists are aware of their own experience and use that experience as a kind of amplifier for what the client is presenting, it is nevertheless the client’s process that must be at the center of the therapist’s awareness
Page: 69	No matter what the client directs toward the therapist, from anger to adulation, the therapist attends to and experiences his or her own response and then decenters from that response, putting the client’s experience, meanings, and needs into the foreground.
Page: 70	Be Sensitive to, and Respectful of, Defensive Maneuvers
Page: 71	even the defense itself is respected: it is a “wonderful distraction,” a skilled way of protecting
Page: 71	It is as if the therapist is saying, “You need to help make this process work. Here is what I think has been happening; what do you, my colleague, think we should do about it?”
Page: 72	Timing
Page: 72	The therapist’s timing and pace let the client know whether that therapist is indeed in tune with affect, with cognition, and with developmental age.
Page: 72	the therapeutic pace may need to be slower for affective work than for cognitive work.

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Page: 72	Usually, the younger the developmental level, the slower the pace.
Page: 72	A regressed client also may need explicit permission to create quiet spaces or to accept them when they are offered by the therapist: “Go inside to that quiet place,” or “It’s okay to take time to think,”
Page: 73	Attunement Through Scheduling
Page: 73	Some clients, for instance, have retreated deep inside themselves and have shut their most tender and vulnerable selves off from the world.
Page: 73	Such clients may not be able to finish a piece of work in the traditional 50-minute hour. They need more time—
Page: 73	Other clients, particularly young children or adults who have a limited attention span, may not be able to tolerate even a full hour of therapeutic intensity. For them, shorter sessions work better;
Page: 73	Language
Page: 74	use language to reflect and describe the feelings, cognitions, and beliefs that underlie the stories that clients tell them.
Page: 74	tense is particularly important for developmental attunement. For an adult describing an incident of childhood, a past tense response is appropriate: “You were scared” or “You didn’t want to.”
Page: 74	the therapist uses present tense verbs to express attunement to a regression experience: “You’re scared ...” or “You don’t want to ...”
Page: 74	Use of the client’s own language enhances attunement.
Page: 75	Attunement and Other Therapist Tasks
Page: 75	Giving Information
Page: 75	Sometimes a bit of client behavior, in or out of the therapeutic session, is a clear statement of lack of information.
Page: 75	If we decide that it would be helpful and appropriate to provide information, the next challenge is to do so while still remaining attuned. Switching focus back and forth, from self (what I have decided to tell this client) to other (how the client is responding to my message), the therapist moves with the flow of the interaction.
Page: 76	client.
Page: 76	he is trying to develop a cognitive perspective for what he experienced.
Page: 76	The therapist, aware of his need for this sort of structure, offers an explanation.

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Page: 77	Confrontation
Page: 77	used by the therapist to bring a discrepancy into the client's awareness
Page: 77	Discrepancies
Page: 77	when unnoticed, support the splitting off and disavowal of parts of oneself.
Page: 77	done without sensitive
Page: 77	attunement, is likely to produce a reaction of shame and drive the client even further into defensive maneuvering
Page: 81	A relationship-oriented therapy, in contrast, concerns itself with the whole person and with recovering fragmented aspects of oneself and bringing them together—the basis of change (Hycner & Jacobs, 1995).