

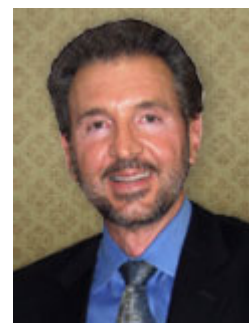
The Power of Therapeutic Attunement

By Joseph Nicolosi, Ph.D.

"Our minds are not created alone; they are co-created. Our nervous system is ready to be taught by other peoples' nervous systems, which transforms us."¹

The central healing process of psychotherapy is the experience of attunement. This experience allows the client to link the emotional and cognitive aspects of his inner life. A highly attuned relationship with another person actually lays down new neurological connections in the brain.

When the client opens up his emotional life to the therapist, he has engaged in an act of trust which links him to the therapist in an elegant, intimate dance. They begin to develop a subtle synchronicity where each person intuitively senses what the other is trying to express.



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During the session, the therapist assesses of the client's receptivity with questions such as "What's actually happening between us right now?" He is particularly interested in bringing about "now" moments," when the entire frame of the therapeutic picture suddenly alters, zooming in to pull them together into an intense focus on their emotional connection in the present. Both client and therapist feel some heightened anxiety and sense that their relationship could suddenly change in some way, for good or for ill, in that moment.

Exposure and vulnerability are a basic part of these interactions. There is an excitement--a mutual recognition of each other on a deeper level, and perhaps a slight, embarrassed smile marking this awkward intimate exposure.

Misunderstandings, hurt feelings and hidden resentments are also inevitable in the therapeutic relationship. They offer the client an opportunity to learn how to reengage emotionally after a relational breach. Negotiating his way through such an experience shows him that relationships can survive the critical process of *attunement--misattunement--reattunement*, and that trust, when lost, can be regained. He sees how this process works between two people, as he learns how to regulate the rhythm and intensity of the back-and-forth as the breach is gradually repaired.

Reattunement moments link the client back to the therapist, and also back to himself. Through this process, he gradually increases his capacity to tolerate emotional distress.

After the breach has been repaired, the client receives the therapist's expression of respect and esteem, allowing himself to savor the experience of having been able to honestly express his hurt or anger yet once again, feel understood. At its best, this intersubjective moment is reminiscent of the earliest attunement between mother and child. Through subtle, highly

nuanced communication, client and therapist share many such moments of sublime attunement --that non-verbal, pre-explicit experience that occurs between two people as the recognition that "I know that *you* know that *I* know."

Reconnection with One's Affective Life

Another important lesson the client learns in psychotherapy is the vital art of simultaneous *feeling-describing*. Because he has disowned aspects of his affective (emotional) life, making that connection between *feeling-describing* in the presence of another person is almost always distressing to him. When parents have failed to accurately mirror the small child's internal experience, and to model the lesson that feeling and expressing his feelings is safe, he will be affectively disorganized and emotionally isolated. The child grows up learning to distrust his interior perceptions, and becomes prone to shame-infused shutdowns of emotional relations. His defenses will cause him to shift his attention back and forth from content to feelings, and then back again to content, but avoiding the link between the two.

At critical moments of strong emotion, I often need to encourage the client, "Try to stay in contact with me and with your feelings at the same time."

Establishing this neural link between *thinking and feeling* initiates the vital process of unification between left-brain and right brain-hemispheres, between cognitive and affective, between conscious and unconscious, through the medium of human interaction.

Somatic Shift Leads to New Meaning

We understand the unconscious mind to hold buried "body memories" that operate without cognitive awareness. The conscious mind may deceive us, but the body does not do so. Freud summarized the goal of psychoanalysis as, "*Where 'id' was, there ego shall be.*" He meant that unconscious, irrational impulses must be replaced with self-awareness (insight) and rationality. We may revise this dictum to propose that "*Where the somatic (bodily) shift is, there new meaning shall be.*" The mind can then bestow new understanding on our embodied experiences.

For example, the gay-identified man says, "My inherent gayness determines my sexual arousal to an attractive male. Such attractions are normal and natural for me." For him, an attractive male is associated with sexual gratification, and he comes to believe that such feelings authentically define him.

However, the non-gay homosexual has the same somatic reaction to the same attractive man, but his internal narrative is quite different. He says: "I'm attracted to that man because he possesses qualities of masculinity that I feel are lacking right now within myself. This attraction does not define who I am." He then asks, "How am I feeling about myself right now, that makes me susceptible to this sexual response? And what can I do to change that?"

Learning to Recognize the Double Bind

Our client has often been confused by Double Bind communication. He will learn to recognize this type of communication by the feeling of an immediate, fearful, uneasy sensation. Something is suddenly wrong; some sort of injustice has happened, but he is confused about what it is. He not only feels confused, but also, angry. Yet he does not express his anger because of the fear and self-doubt which paralyze him.

One man said, "During those moments of Double Bind communication, I feel angry and uncertain about what's happening, and I don't know what to say. I'm not really sure if the problem is with me, or if it's something the other guy did to me." But even though his mind is confused, his body, which feels anger, "knows" the true message of the communication. He senses that "there is something happening that makes me feel...[sad, angry, disappointed, hurt, diminished, left out, etc.], but I cannot identify exactly why I feel that way."

Clues to indicate that one is in a Double Bind situations are as follows:

- When you're feeling "bad" about an interaction, but do not know why.
- When you feel some sort of injustice but can't articulate it.
- When you feel frustrated but can't actually see the contradiction that is causing the frustration.

A Habitual Expectation About Human Relations

An insidious feature of the Double Bind, which is often relevant to our clients' childhood experiences, is that when this is repeated over long periods of time, the person develops a hypersensitivity to re-stimulation of the same inhibition. They have learned to ignore their bodily ("gut") response to any implicit (process) message. They have learned to be suspicious of anything they sense through the other person's tone, timing, posture, and facial expression, (i.e., "what really is going on") and instead they respond to, and comply with, only the explicit (content) message.

There is an unspoken rule in Double Bind communication: the recipient cannot disengage from the communication. His role is to participate in the game. There is a hidden taboo against exposing the contradiction. Healthy reintegration of the self requires that the client learn to refuse to participate in such communication. His conscious mind is now taught to attune to his bodily response so he can accurately assess what is actually going on, at the moment it is happening.

It is critical to teach the client how he can survive this affective-destabilizing communication style without compromising his internal truth, for if he compromises his actual perception of such incidents, he may be propelled from a healthy assertion state, into destabilizing shame, and then unwanted homosexual enactment.

Reparative therapy focuses on shifting the client from the inhibitory, "shut-down" state of shame and into the vitality state of assertion. For our clients, we typically see an anticipation of shame

for their gender assertion. Anticipatory shame represents a somatic "flashback" which switches the body into a defensive, shut-down mode. A return to the state of assertion becomes possible when the client overcomes the shame posture and his shutdown state.

This contrast between vitality and inhibitory affects is illustrated by what behavioral psychologists call the Pike Phenomenon. In an experiment, a pike fish is placed in a tank with live minnows. The pike immediately begins eating all the minnows it sees. Then an invisible glass cylinder is placed over the pike, separating it from the minnows. Any further attempts to eat the minnows result in the pike hitting its nose on the glass cylinder, causing it pain. The cylinder is then removed, but the pike, anticipating pain, makes no more attempt to eat the minnows. The vitality response has been lost and the inhibitory response is substituted.

Memory is a psycho-physiological phenomenon. That is, it is not only cognitive, but also somatic--a trauma that is stored in the body. A powerful therapeutic experience actually re-encodes the synaptic connections of the memory system (Schoore, 2003).

We can never actually undo the trauma of the past, of course; yet the therapeutic relationship with a highly attuned therapist can lay down new, positive neurological pathways on top of the old, traumatic neurological memories.