

**Into Our Client's Mind:**  
The Mirroring of Intentions and Emotions within the Therapeutic Relationship

**Daniel Jay Sonkin, Ph.D.**  
*Licensed Marriage and Family Therapist*

<http://www.danielsonkin.com>  
[contact@danielsonkin.com](mailto:contact@danielsonkin.com)

1505 Bridgeway, Suite 105  
Sausalito, CA 94965  
(415) 332-6703

---

---

---

---

---

---

---

---

**Mirror Neuron: Overview**

- First described as visual-motor neurons that fire when an action is performed, and when a similar or identical action is observed (Rizzolatti and Craighero, 2004).
- Associated to cognitive functions of imitation and action understanding to social cognition.
- Been associated with a variety of neurological and psychological disorders; including MS, schizophrenia, autism and spectrum disorders and alexithymia.

---

---

---

---

---

---

---

---

**Are they real?**

- Still controversial
- Meta analytic study by Molenburghs, et al (2011)
- 300 published studies and 125 that met their strict inclusion
- A core network of human brain regions do in fact possess mirror properties that not only include action and observation but non-motor activities auditory, somatosensory and affect.

---

---

---

---

---

---

---

---

### Are MN's relevant to our work?

- We are in the business of watching, listening and feeling others.
- Understanding other's intentions in relationships
- Emotion regulation issues.
- Transference – Countertransference
- Understanding behavior and motivation
- Child development - Attachment

---

---

---

---

---

---

---

### Mind and Body

- Mirror neurons are closely linked to motor neurons.
- Our bodies play a crucial role in emotional, cognitive and motivational processes.
- Affective neurosciences have demonstrated that without our bodies, it's difficult to experience emotion (Damasio, Panksepp, Le Deux, etc.)
- Mindfulness and its effect on emotion (Davidson)

---

---

---

---

---

---

---

### Emotion and Motivation

- Emotion is derived from the French word, "emouvoir", which is based on the Latin word "emovere", where "e" means "out" and "movere" means "move."
- Interestingly, the word "motivation" is also derived from "movere."
- So *emotion* and *motivation* are rooted in a term that means to move (toward or away).
- And our bodies rarely act without movement.
- Our bodies don't experience emotion without movement.

---

---

---

---

---

---

---

### Emotion & Neuroscience

- And this is exactly what emotions are from a social neuro-scientific point of view: *an inner state of another individual that comes out through her or his movements and can be perceived by another individual.*
- There are always two aspects to our perception of the emotions of others:
  - The bodily movements and behaviors that signal the emotion and,
  - The inner state of the other individual that can be deduced from these behaviors.

---

---

---

---

---

---

---

---

### The Process of Mirroring

- The research now shows that while we witness such emotions, we activate
  - (1) mirror neurons that would be activated if we would experience similar emotional states and,
  - (2) motor neurons that would be active if we would perform the actions that signaled the emotion (i.e., facial and bodily movements).

---

---

---

---

---

---

---

---

### Why is this important to us?

- As therapists we are trying to get into the minds of our clients.
- If asking our clients about their inner states was all that was necessary to do that, then our jobs would be much easier.
- Unfortunately, many of the people who seek psychotherapy services have had experiences that resulted in difficulty identifying, constructively regulating and understanding their emotions and expressing intentions, which often results in their showing their emotions and intentions rather than talking about them.
- The term acting-out refers to this process - acting rather than telling.
- And although many intentions and expression of emotions are fairly evident (even to the untrained eye) some are not so obvious.

---

---

---

---

---

---

---

---

### Emotion Regulation Problems Presented in Psychotherapy

- Disengagement or unawareness of emotions and intentions - what in the attachment field would be called down-regulating.
- Overwhelmed by anxiety or fear which results in over-reacting or difficulty experiencing more nuanced emotional states and intentions - what in the attachment field would be called up-regulating

---

---

---

---

---

---

---

### Anxiety and Attachment Insecurity

- It's a little misleading to think of individuals who down-regulate as not feeling anxiety; in fact that's not the case. They just have an easier time keeping their anxiety out of consciousness.
- When we look at the terms used to describe insecure attachment of children they both include the word anxious - anxious avoidant and anxious resistant.
- The anxiously avoidant infants seem to have experienced consistently insensitive caregiving consequently they have learned to not behaviorally demonstrate or signal their anxiety to the caregiver.
- Resistant infants are more obvious in demonstrating their fear and anxiety, especially about abandonment, in hopes to get the caregiver to respond.
- Both are anxious, they just attempt regulate it differently.

---

---

---

---

---

---

---

### Emotions & Intentions & Consciousness

- If our clients are unaware of their emotion states and behavioral intentions; and can't really talk about them, how do we know what their mental state?
- Questioning
- Testing
- Observe
- Self reflection

---

---

---

---

---

---

---

### Showing versus Telling

- We show our emotions and intentions most of the time – even therapists.
- A not-conscious process
- There are times when taking stock is important; particularly in interpersonal relationships, and especially during times of stress.
- When you're primed to down-regulate or up-regulate there are going to be times when those strategies don't meet the need of the moment.
- Showing can lead to contagion; which could be problematic with couples/families

---

---

---

---

---

---

---

---

### Top-Down versus Bottom-Up

- We were all taught to pay attention to non-verbal behavior in graduate school. Body language was key to knowing our client's state of mind; or at least asking about it.
- Top-Down:
  - Asking
  - Stepping back and paying attention to body language, facial cues, gesticulation, tone of voice, pauses, language used, etc.
- Therapists need to be good observers of others.

---

---

---

---

---

---

---

---

### Mirroring is Bottom-Up Process

- One that is less analytical and more experiential.
- To develop and hone this ability requires the therapist to be more connected and aware of their own emotions and intentions.
- The therapist needs to be what's called, embodied – that experience is determined by the body (Lakoff, 1999).
- Develop a curiosity about your own experience.
- A willingness to engage the client on this level of relating.
- Language reduces the need for mirroring.

---

---

---

---

---

---

---

---

### Mind and Body

- Over a century of research (starting with Charles Darwin and William James) have documented the connection between the body and emotion.
- Studies have shown that manipulated facial expressions cause self-reported changes in emotion.
- One such famous study (Strack, 1988) showed how holding a pencil between your teeth causes more self-reported positive reactions to positive stimuli.
- Or inhibiting facial muscles with botulinum toxin-a slows the reading of emotional passages.
- Changes in facial muscles affect other physiological processes; such as frowning reduces air intake, causes more mouth breathing than nose breathing, which raises the temperature of the blood entering the brain.

---

---

---

---

---

---

---

---

### Mirroring in Child Development

- The way to connect and understand our children is to connect with and understand ourselves.
- In attachment research, when parents of securely attached infants are asked what they do to imbue security in their children they often refer to just knowing what to do, what the infant needs, psychic connection.
- These are descriptions of a bottom-up process of just knowing.

---

---

---

---

---

---

---

---

### Emotions and Intentions

- Not just emotions, although sensitive caregivers talk about their feeling what their infant is feeling.
- It's also about motivations and other physical needs. Sensitive parents can differentiate a hungry, tired and full diaper cry.
- Although the attachment field is just beginning to make connections with the neurosciences, I would guess what we are finding with caregiver sensitivity is closely related to the mirror neuron system.

---

---

---

---

---

---

---

---

**What's your intention?**

- It's difficult to separate emotion with intention because they are so closely linked. However, even intention can be mirrored between client and therapist.
- What's going on when the therapist's mind begins to wander?
- What about when the therapist starts to talk a lot in the session?
- What about when the therapist starts to feel sleepy?
- Sometimes a cigar is just a cigar, but sometimes it's something else.

---

---

---

---

---

---

---

---

**Intention: An Attachment Perspective**

- How is the client approaching attachment distress?
- Do they seek proximity to a caregiver?
- Do they avoid or dismiss their caregiving needs?
- Are they hyper-vigilant and clingy?
- Sometimes obvious, sometimes not.
- What are they intending?
  - Distancing – self sufficiency
  - Monitoring and clinging -dependency

---

---

---

---

---

---

---

---

**Mindfulness and Mirroring**

- Because mirroring involves emotion, and emotion involves the body (motor neurons), then paying attention to your body is key to honing this process to your advantage.
- Huge body of research on the effect of mindfulness, meditation and other eastern practices on the mind and body.
- Compassion and gratitude (Davidson) – we could always use more of that, especially with our clients.
- Therapists tend to be compassionate, but they also get burned-out which diminishes approach emotions.

---

---

---

---

---

---

---

---

## Mindfulness and Mirroring

- My process:
  - Breathing
  - Noticing: thoughts, body sensations, desires, emotions, etc.
  - Asking: Why am I feeling, thinking or wanting this?
  - Hypothesizing: What does this have to do with the person sitting on my couch?
  - Engage the client directly or indirectly.
  - Try to stay open to new information or something I didn't expect.
  - Have faith in the process

---

---

---

---

---

---

---

---