

ATOL: Art Therapy OnLine

The art of connecting: an exploration of art-based attunement in art psychotherapy

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Abstract

This article explores the concept of attunement from its initial experience within the dyadic mother-infant experience to the art-therapeutic relationship. It suggests that the three-way relationship characterizing the art-therapeutic work lends itself to communication within which shared experience and in turn, shared meaning and a sense of self, can be gained. Through a case example and a literature review, the role of the art and the vitality affects inherent in use of art materials as facilitators of this capacity to share, are brought to focus. Drawing mainly on psychological, psychoanalytic and child developmental perspectives, the potential part taken by the therapist and his limitations are examined.

Keywords: attunement, cross-modal communication, primary and secondary subjectivity, dyadic and triadic communication, vitality affects

Introduction

Recent art therapy literature has identified the centrality of a shared experience as the basis for a therapeutic relationship. Isserow (2008; 2013) has explored the importance of the capacity for joint attention in art therapy being predicated on a shared experience of looking at each other between mother¹ and infant. In addition, Rutten-Saris (1990) has identified that shared meanings and interpersonal experiences are core determinants of the effectiveness of art therapy and a central tool for therapeutic change. Shared interpersonal or intersubjective experiences, as this suggests, are positioned at the heart of the art therapeutic relationship.

Following my final year placement as an art psychotherapy trainee in a forensic mental health rehabilitation hospital, I was struck by the immense challenge of having to engage often difficult to reach clients in the art therapeutic relationship. I was presented with the opportunity to return to examining a primary tenant of the discipline, that being the way in which art making processes and products might facilitate engagement with clients who might find interpersonal relating highly challenging. It enabled me to revisit how the art therapist might work therapeutically with this non-verbal medium.

In exploring the concept of intersubjectivity, I am interested in understanding the micro behaviours and experiences of intersubjectivity that are inherent in the notion of 'attunement' (Stern, 1985) between mother and infant, and in using this understanding of attunement to inform the art therapeutic relationship. The aim of this paper is to further the understanding of how attunement functions as bedrock for sharing states of mind, and it draws on art-therapy psychoanalytic theory and child developmental theory to do so. This paper begins by unpacking the notion of attunement. This will be followed by examination of its relationship to art as a communication at the level of both process and product. It then explores how this concept may illuminate a therapeutic relationship with a service user in a forensic setting. Understanding from this exploration will be used to argue for the incorporation of a new term, that being 'art-based attunement' into art psychotherapy, which, I will demonstrate, is unique to the profession.

¹ To aid comprehension the author uses the term 'mother' to refer to primary caregiver. In addition, the masculine pronoun is used to refer to the infant in child development theory.

Attunement revisited

Bruce et al. (2010) draw on the work of Siegal (1999) and Stern (1985) to articulate attunement as a responsive connection between partners, wherein one's sense of being understood and connected is formed by another's attentiveness to the internal world of the first (p.85). Although attunement can be seen as a broad term referring to experiences throughout life, it is commonly discussed and explored in relation to the interchange of affect which characterizes the early dyadic relationship (Gill, 2010; McCluskey et. al, 1997; Reite, & Field, 1985; Wright, 2009).

The capacity for interactive correspondence without words is often described as part of an embedded reactive mechanism, activated spontaneously within healthy caregivers (Winnicott, 1971; Stern, 1985). Nevertheless, this specific form of affective dialogue, namely attunement, can, in fact, only take place under several particular conditions.

Apart from the capacity of the parent to read the underlying feeling state by the infant's overt behaviour, a behaviour which goes beyond imitation must be undertaken by the parent, and it must be understood by the infant as corresponding (Stern, 1985). This form of matching correspondence occurs between three qualities of behaviours that are: intensity, timing and shape (Stern, 1985). Attunement can occur as an interaction 'flow' and this is possible because within all behaviour throughout life we experience constant changes in feeling states. To these states, dynamic qualities of feeling named 'vitality affects' are related. This makes the continuous process of attunement possible, as the vitality affects provide an 'omnipresent subject of attunement' (Stern, 1985, p.157).

The correspondent sharing of intensity, timing or shape in attunement is made by cross-modality matching. This means that the intensity or shape of a child's increasing physical struggle when extending his body to reach a toy, for instance, can be matched through the partner's increasing effort of breath and sound "uuuuuh...uuuuuh!" (Stern, 2000, p.140). In this way, cross-modal correspondence provides proof of the mother's genuine sharing of experience as 'it carries her signature' (Stern, 2010, p.114).

As this paper proceeds, the forms in which attuned communication may become manifest in art therapy will be explored. First, it is useful to begin to address a central

question: Why are attunement experiences considered fundamental in shaping the self and relationships with others, as well as expectations and experiences in the present and in future life?

Attunement and primary intersubjectivity – dyads and beyond

From conception and throughout life, an underlining thread weaves humanity together; it results in the capacity to connect people together, spanning as a bridge across the experience of being separate. From the beginning, as humans, we exist in an intersubjective field where others, and relationships with them, teach us about ourselves and about the world around us. This capacity for intersubjective relating which is central to one's ability to share, hence also to the quality of relationships, begins to develop in the first months of life where it is mainly centered around the dyadic relationship between the infant and his caregiver. It is then that the infant engages in a person-to-person relatedness with one person at a time in a form of interaction named 'primary intersubjectivity' (Trevarthen, 1979).

During this stage, the constant maternal care, which includes the mother's face being relied upon as a conduit through which the infant can reflect himself, is crucial in enabling the infant's 'going on being' (Winnicott, 1960) and his healthy development. Absence of this reflection, as illustrated in the 'still face' experiment, can be devastating for the child (Tronick et al., 1978). Maternal responsiveness and attunement are considered fundamental in several means; boding towards one's sense of self and the capacity for intersubjective relating (Stern, 1985), as well as developing a sense of agency and validation of experiences (Music, 2011).

This correspondence between mother and child begins with the infant's pursue after complete contingency from his partner (Fonagy et al., 2004), and continues to his preference to highly attuned, but not completely synchronized, interactions which form the foundation for 'dances' of communication (Music, 2011 p.8; Stern, 1985). A distinction exists between the two interactions i.e. imitation and attunement:

Imitation of gestures succeeds in informing the infant of the mother's *understanding* of his *actions*, nevertheless, it lacks illustration of the mother as *experiencing* the same *feeling state* that led to their manifest behaviour (Stern, 1985).

This is where attunement can provide a unique and genuine relational experience of affect sharing. The correspondence via different modalities enables a personal quality to be attached by the partner to the same feeling originally expressed. 'Imitation renders form, attunement renders feeling' (Stern, 1985, p. 142).

From a neurobiological perspective, it has been argued that reflective interactions enable the part of the brain linked to socio-emotional functioning to develop (Schore, 1994: 2001), whilst a neglectful environment, or trauma, predisposes the child, and most likely the adult that he will become, to impairment of these neural systems (Perry et al., 1995; Perry, 2001).

Overall, when examining the value of attunement, it does not seem overstressed to concur with Stern's words:

'What is at stake here is nothing less than the shape of and extent of the shareable inner universe' (Stern, 1985, p. 151-152).

At the same time, Schore (1994) reminds us that it is throughout life that we, as humans, are learning, and that improvement of the quality of relationships and future life can be facilitated by the therapeutic relationship. I believe that bearing this in mind becomes, in the very literal sense, a vital, oxygen-like supply within the therapeutic work.

Change, through new experience, and learning, can take a unique form in art therapy, and now this paper will turn to explore how attunement as a facilitator of growth, can be supported by art-making. To begin this journey, the separate phenomena that links art-making and attunement will be examined. This will be followed by a widening of the contextual frame to the art-therapeutic relationship that comes to include client, art work and therapist, also known as 'the triangular relationship' (Case, 1990, 2000; Schaverien, 1990, 2000; Wood, 1990).

Art materials, the art making process and Attunement

When we look at a piece of art, whether as artists or observers, this paper argues that an inevitable marriage between the object of creation and emotion takes place. Jackson Pollock's work is one such illustration of this bond. As well as choosing his materials in accordance to their behaviour, Pollock is also known for using physical creative gestures such as flinging, pouring and dripping paint, to create paintings perceived as 'the direct expressions of his emotions', (Gyetvai, 2008). Described as having 'an alert call-and-response relationship with his work', Pollock's process resonates with the reciprocal affective aspect inherent to attunement (Gyetvai, 2008).

This example within the world of art, however, calls for further elucidation of the underlining presumed resonance between the language of art and internal affect; the resonance which makes art-based attunement possible.

Language may be considered as a double-edged sword. Language enables a way of sharing personal experience, while also generating an externalized quality by forcing 'a space between interpersonal experience as lived and as represented' (Stern, 1985, p.182). In contrast, the mother eliminates this space, enabling the infant to have his own experiences by holding his raw experiences and following his lead, attuning to what is brought by him. This nature of maternal provision, in turn, can be compared to art. Art's medium and process has a unique capacity to express and mirror the experiences of the creator (Wright, 2009).

Langer (1953) explains, similarly, that art reduces the space that estranges one from his own experience by articulating shapes and textures of feelings through a *direct* sensual experience, which is different from agreed conceptions such as language. Looking with a child developmental lens, research has shown that, from the beginning, infants develop a pre-reflective gestural language based on the senses through which communication of shared meaning can be carried out (Stern, 1977; Trevarthen, 1993). This sensual language displayed in early dyadic interaction through sound (intonation),

vision (facial expressions) and touch, resonates with the sensual language that is at the core of the arts (Skaife, 2001).

In both art therapy and attunement, nonverbal communication is central. Different aspects involved in the art-making process enable mediation between the internal affect and its external expression (Edwards, 2004). The choice of the materials by the client, and their use, are a central element in art therapy. Different choices may point out a variety of feelings, states of mind and thoughts in the client. The client in art therapy may use the materials in various ways; working slowly or rapidly, making heavy or light quality of marks, and creating colour, shape and texture (Edwards, 2004). These, which may be indicative of his state, also seem to resonate with the three sharable qualities of vitality affects, namely: intensity, timing and shape. These qualities of vitality affects may be shared through the art making process and product in art therapy, and facilitate the attunement to the maker's internal experience.

Wright (2009) takes this relationship between art (making) and attunement further. Based on the notion of the transitional object, he proposes a hypothesis that sees the function of art as the adaptive mother who offers attunement to its creator. In the case of a 'good enough mother' that allows herself to be molded in accordance to the infant's needs, her breasts, as Wright (2009) suggests, becomes the infant's first creation. This primary experience is the building block towards the production of a transitional object, in which primary feelings are transferred to significant parts of the physical world, such as a piece of blanket. In doing so, the transitional object is created (Winnicott, 1953). Following this, Wright (2009) suggests that the creative process allows the physical world to be imbued with personal meaning and to become transformed into the creator's own world.

Although Wright's hypothesis of the relationship between the art maker and art object is of tremendous value, it cannot be simply superimposed onto Stern's model of attunement as it does not include the sharing of affectional states across two minds. Stern clearly says that 'tracking and attuning with vitality affects, permit one *human* to 'be with' *another* in the sense of sharing likely inner experiences...' (1985, p.157,

author's italics), thereby making inter-relatedness a prerequisite for attunement. The notions of creativity and intersubjective relating are deeply connected. According to Dissyanke (2000; 1992), the capacity to create fosters human intersubjectivity, where objects are often made with the aim of social bonding (Dissyanke, 2000; 1992).

Attunement in the triangular relationship

It is important to hold in mind that in art therapy the engagement with the materials and the creation of art always takes place within a relationship. Although person-to-person interpersonal interactions carry the greatest potential to generate therapeutic change (Stern, 2010), the reality of the work is more challenging as many of the clients in art therapy find it difficult to engage in direct communication. Art making, however, may provide an alternate form of communication. It can facilitate a bridge or connection between intrapsychic process as well as interpersonal relating between the client and therapist. Apart from being the mediator between inner and outer reality within the client, art can be viewed as a mediator between client and therapist. This offers the potential for greater accessibility to communicate between them (Greenwood, 2000; Schaverien, 1997), thereby fostering the experience of attunement.

Another way of understanding this form of communication is through the child developmental concepts of primary and secondary intersubjectivity (Trevarthen 1979). The field of interaction is expanded when art making is introduced, widening dyadic interaction between two minds to include the triadic interaction with a third, that being the art object. The centrality of the art object in the art therapeutic encounter promotes the dynamic shifts between person to person affective relatedness, which is part of 'primary intersubjectivity' (Trevarthen, 1979), to a mutual interest in relation to an object that is included in the notion of 'secondary intersubjectivity' (Trevarthen, 1979). Interestingly, interaction between the infant and the environment expands developmentally from primary to secondary intersubjectivity (Trevarthen 1979; Trevarthen & Hubly, 1978); from dyadic into triadic communication. However this paper argues that it may be necessary to first establish a shared relationship to the art object, prior to the development of the relationship. The three-way interaction and the mutual

focus towards a third object, can provide attunement opportunities that may introduce easier access to, or tolerance of, person-to-person correspondence and relatedness.

In art therapy, the qualities inherent in the art materials (Meyerowitz-katz, 2003) as well the possibility of placing the focus of the relationship on the art materials and processes (Argyle, 1992), can provide opportunities for communication. Moreover, the image as an additional component to the therapeutic couple/dyad, can enable relating since it can function as a neutral and contained place within which investments can be made safely (Schaverien, 1997). Simply, it illustrates the basic paradox well known in art therapy whereby the 'distance' offered by the art object can facilitate closeness and sharing.

Interestingly Stern (2010) has developed links between attunement and the arts in his recent publication. He argues that interpsychic interactions provide the best grounds for change in therapy and views the nonverbal communication as central to sharing experience. Stern suggests that the nonverbal aspect, manifest in the vitality forms, is the focus of therapy as it reveals the real essence of experience and enables attunement within the intersubjective space shared between client and therapist.

Stern uses Wigram's (2004) improvisation music therapy model in which basic therapeutic methods such as matching, dialoguing and empathetic improvisation have a central role, to illustrate the potential found in the nonverbal therapies to promote the sense of mutuality in the therapeutic relationship.

However, within the literature of art therapy, there are different ways of articulated similar phenomena within the art therapeutic triangular relationship that this paper now explores. When the interaction between the client and their artwork stands in the foreground, the role of the therapist can be seen as that of witnessing. The presence of another, however, reaches beyond the sense of one's subjectivity being heard or understood; it moulds experience. It is through the eyes of others that the *understandings* of our experiences are shaped (Learmonth, 1994) and a personal quality to them is gained (Fonagy & Target, 2007). Fonagy and Target (2007, p.921) further highlight that the loss of 'shared consciousness makes the whole world appear flat, meaningless and isolating'.

The experience of being witnessed can facilitate meaning, which may in turn give shape and resonance to experience. In art therapy, the unique three-way relationship lends itself to this process, as therapist and client can form a kind of joint witnessing (Learmonth, 1994). Witnessing involves 'being with' and implies a form of seeing or looking. In his exploration of attunement in dyads, Stern (1985) has shown that reciprocal eye contact relies upon the mother's capability for sensitive attunement. Explored through the art-therapeutic lens, the meeting of eyes which provides the connectedness of minds and an inter-affective experience may be viewed as indicative of the client's capability to share affect (Isserow, 2008), and can provide a means through which affect can be shared by the act of looking towards a third object (Schaverien, 1997).

Other therapists, such as Moon (1999) and Franklin (2010), view the therapist's role as more physically active and suggest that the therapist's involvement in art making during the sessions is a central way to achieve an attuned based connection between client and therapist. Moon (1999), believes that words are incapable of encapsulating what is occurring during the work and that art making is a foundation on which the dialogue in therapeutic relationship can be built. The therapist's art making is understood as an authentic element which can overcome the client's defenses and generate empathy for, and understanding of, the client's experiences. It is an invitation for the client's responsive art-making and a continuous, self-feeding dialogue. Instead of placing a barrier to the powerful emotions evoked in the session, the therapist can protect himself while also projecting his/her own responsive feelings into the art work (Moon, 1999). Moon writes that:

'labeling and psychological interpretation of images, in forms other than the imaginal process, ultimately impedes the establishment of a genuine therapeutic relationship with the maker' (Moon, 1999, p. 82).

It is the client's experience of being nonverbally reflected by the therapist that allows this process to resonate with the notion of attunement. This model also touches upon the important link between attunement and countertransference and introduces the

potential consequence of the therapist's own projective response; that being a shift in focus from the client to the therapist and his feelings, which are communicated back in tangible form.

Franklin also argues for the value of 'Third hand interventions'- the therapist's own art making during the sessions, relying upon theoretical bases within views of resonance and new findings in neuroscience (Franklin, 2010). These suggest the existence of an evolved mirror-neuron mechanism which enables a resonance between observed and observer and an embodied 'as if' understanding to feeling states of others (Galesse, 2008). Aimed at reflecting back to the client what he may be experiencing, these interventions function, he argues, as a facilitator of emotional regulation and relatedness (Franklin, 2010). It may be useful to note that these interventions may be regarded as a kind of interpretation in artistic form. Although it may offer a way of containing and communicating difficult feelings, it seems important to acknowledge that the therapist's own engagement in art may also be experienced as overwhelming or intrusive, and can potentially rob the client of his experience, both physically and metaphorically (Mortier, 1997).

The therapist's ability to wait, remain in the realm of the unknown, and allow processes to unfold at the pace of the client, is key in art therapy and seems in fact crucial in his/her ability to be influenced by the client and share their experience, however difficult it may be. Conversely, the technique of interpretation, in either verbal or visual form, may function as a defence against the anxiety of 'not knowing' (Milner 1969, p.45) and may be fed by the therapist's desire to control (Brown, 2008). This is in contrast to the aim of attunement, which has a greater quality of being with, or sharing, an experience together.

The art therapy environment can also provide a channel through which mother and child can attune with one another. Hosea (2006) suggests that vitality affects can be 'given out' by the use of art materials, and explains that experiences of intimacy through literal physical closeness, as well as metaphorical emotional proximity, can be provided.

Not only has the role of vitality affects and their link to developmental processes been recognised in art therapy, but it has also been used as a foundation for Rutten- Saris's methodological model named 'Emerging Body Language' (1990). Within this paradigm, attunement is described as 'the interaction ... in which the therapist picks up or becomes attuned to a vitality affect' ... His 'intervention is one of *being moved with, or breathing in rhythm with*' (Evans and Rutten-Saris, 1998, p.57).

It is important to add that the therapeutic environment also plays an important role in facilitating attunement. The choice of materials offered in the room can determine the level of stimulation and thus the capacity for, and experience of, attunement (Evans & Dubowski, 2001). The space, and in particular the studio, Brown (2008) argues, can facilitate attunement by providing not only a solid place with materials but also as a holding, non-impinging environment which then becomes a vehicle of relating.

Being attuned involves opportunities for engagement; it also requires opportunities for gaps and moments of withdrawal to self-regulate. Miss-attunement and the mother's inability to see, interpret and respond to the nonverbal cues of the infant may be considered as a primary cause of pathognomonic development (Beebe & Sloate, 1982). Stern argues that attunement is a primary proto-experience, which has the capacity to mould the brain, shaping "what the infant does and how he feels about doing it" (2010, p. 115).

It is also useful to return to Winnicott's (1956b) notion of the 'good enough' mother to inform the understanding of attunement, as the emphasis lies on the provision of 'good enough' attentiveness, adaptation and space, rather than on perfect matching at all times. Music importantly points out that the possibility or requisite for perfect attunement is a misconception (2011). Good dyadic interaction involves both participants heading in the same direction in terms of affective movement and the provision of space (Beebe & Lachmann, 2002). Lowering stimulation, allowing for gaps, and enabling the infant to be in control, is vital if attunement is to be experienced safely since it enables being in sync with the needs and capacities of the other (Evans & Dubowski, 2001; Stern, 1977).

Discussion

Sensitivity to the client's capacity and needs, continuous presence and responsiveness are highlighted as necessary conditions, which make attunement possible. These originate in the relationship between the mother and infant and are transported into the art-therapeutic relationship. It is with this analogy in mind, that I find it vital to keep in mind Brown's (2008) notion of the significant distinctions between mother and therapist, which enables the client and therapist to be with each other. While the biological mechanism intrinsic in the 'good enough' mother enables her to be attuned to her infant's state and activate her 'mirror role' (Winnicott, 1956a), the therapist does not have this intrinsic mechanism in place (Brown, 2008). The therapist's ability to facilitate the psychotherapeutic aim of reflecting back and attuning to the client's experience, may be fostered by the various potential experiences of attunement that the art-therapeutic environment can provide.

In order to illustrate different ideas explored throughout the paper, I will be using a clinical vignette from my placement at a mental health forensic rehabilitation setting, which will follow a short introduction of the client group.

Fonagy (2001) holds that the parent's being with their children's experience of affect, is largely manifest via the reflective function, and its deficiency may create a desperate need "to find alternative ways of containing psychological experiences" (ibid). This may lead to a restricted, instrumental, rather than communicative, use of affect, whereby physical action is used for coping with feeling, which is a core element in the propensity of violent patients (ibid.). Fonagy (2007, p.937) argues in relation to these kinds of patients that: 'Not being able to feel themselves (their self-states) from within, they are forced to experience the self through action (enactments) from without'.

Paul

(The client's name has been changed to maintain client confidentiality and consent to use this material has been obtained).

Paul is a 58-year-old man who I saw individually. Paul has a diagnosis of Paranoid-Schizophrenia and has committed a very serious crime that had led him to spend 27

years in a locked environment. It is believed that Paul suffers from trauma rooted in losing his father when he was young. Paul has grown up in an emotionally reserved family and was referred to art therapy due to his difficulty in relating and expressing emotions, particularly anger. Considered by the team as the 'model patient', Paul is compliant, keeps to himself, and describes himself as 'a calm chap'.

Paul would arrive to the sessions with the same greeting smile and a cup of juice, comment that he is feeling well, and turn immediately to make art, knowing exactly which materials he wanted to use at each session. For the majority of the sessions, Paul would not look or speak to me unless addressed and was absorbed in art making for the whole duration of our time together. His art seemed to be his relational partner, from which I was excluded. Paul at the time seemed highly defended and he seemed particularly cut off from his own aggression and the devastating experience which had led him to admission. Looking at his creation, or at him, (as his nonverbal cues suggested), felt too intense. Perhaps this was the transference material manifest, akin to Paul looking at himself bare of defences, and imbued with emotion, that being an unbearable and possibly dangerous experience.

Paul, like others who had a diagnosis of Schizophrenia, experiences what may be called a relational deficit (Maj, 1998). This can include malfunctions in Theory of Mind (Frith, 1992, Brüne, 2005a, Harrington et. al, 2005a); a reduced capacity for facial and emotional perception (Penn et al., 2008, & others), self-disturbances, (Mishara et al., 2014, Sass & Parnas, 2003), and a sense of inner flooding and outer invasiveness when in social contact with others (Stanghellini & Ballerini, 2011). Thereby, it is clear that for people like Paul, performing a direct person-to-person attunement can seem to be a difficult and threatening experience.

For many sessions, as Paul was making art, I experienced a sense of blankness filling the room; I felt nothing and was unable to think. Unpicking this in supervision enabled me to recognise the countertransference taking place, as these seemed to be Paul's

protective mechanisms, or his lack of coherent mentalizing, which I had come to experience myself.

Perplexed by the sense of fragmentation, I felt that I must find a way for Paul to remain close to his experience without verbal interpretation, and at the same time enable it to expand, to an experience shared between us. Painting alongside each other adhered to my wish to feel and experience Paul's internal movements through the echoing strokes of our brushes.

I was struggling to keep myself awake during the sessions until an unexpected shift occurred.

Session 10: witnessing and an invitation to look together

Paul arrived to our 10th the session, picked up a large piece of paper and chose to use oil pastels. He began to work quite slowly from the top left corner of the paper (figure 1).

'Paul created territories and filled them in. A rhythm started to emerge. The intensity, as well as his hand strokes, grew wider. There was a sequence: intense creation followed by a complete pause, over and over again. His breath intensified. Rarely he would look at me, as I was alternating my looks from his image to the rest of the room. I felt I was now invited to be a witness. I was with him, in his breathing, with his image and affect. I was wide awake.' (Clinical notes, 2013).



Figure 1

The image was finished and the oil pastels were scattered around the table. When asked if the image has a name, Paul looked at the image and then looked back at me. He immediately replied 'anger and sadness' and signed his image. He stood up, shaped both his hands as spectacles and looked carefully at the image. He then left the room and forgot his cup on the table. When I returned it to him he apologised and said he was stunned, and added: 'thanks so much for this'.

Looking at the way Paul engaged and reflected on his experiences, hopefully illustrates the way the image can mediate attunement in the art-psychotherapeutic environment. Paul had difficulty with engaging in direct interaction with me, but seemed very comfortable with the process of art-making. At first his difficulty to relate and defences, led me to *feel* and *be* disconnected and excluded. By being a witness to Paul's experience I became aware of the dialogue taking place within his process of creation, and I felt more present.

I suggest that those 'things which came up' and were given form, were the vitality affects, as in 'bursting', or categorical affects as in 'anger'. Naming the images made it

possible for Paul to 'be' with his affects, to recognise them but still keep a safe distance. Similarly, the triadic communication formed by the image between us, enabled Paul to 'be' with me and for me to 'be' with him, in a way which was tolerable and gradual. Paul could briefly relate in direct face-to-face interaction with me and return his focus to the image once this felt too intense. Looking together at his image was my first step into his experiences.

Session 13: Creating alongside Paul

At our 13th session, Paul created sequences of marks; each invested with energy and followed by a pause and another engagement (figure 2), and I worked alongside him (figure 3). Paul was absorbed in his creation, and I was absorbed in it too. The sound of his mark making guided my own as I tried to work with the vitality affects through rhythms of his breath and mark making in the room. I felt many movements inside me, which I could not name. It was too confusing. They were fragments and now I had felt this myself.

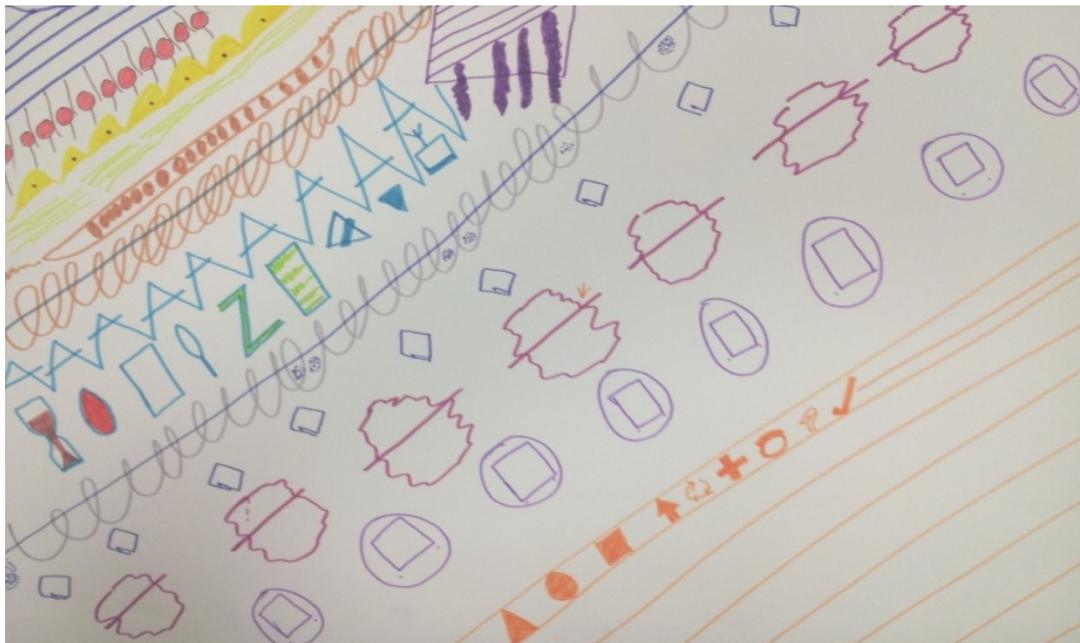


Figure 2



Figure 3

Session 15: Creating alongside each other and an invitation to talk (figure 4)

In the following session Paul decided, unusually, to work with paint, and I worked alongside him as previously. For the first time, Paul began speaking to me while creating his image, and there seemed to be a flowing quality to the interaction between us as well as to his image.

As within Paul's dialogue with his art, pauses and breaks were also needed in our interaction. Eye contact was used as a way to indicate his capacity to engage with me, and it was through looking together at his image that I was let into his world and we

were able to share an experience. As Brown (2008) suggested, the space was an important component to the experience of attunement and while Paul's open access to the materials in the room enabled him to find a material which could adapt to his needs, I felt that my physical proximity to Paul compounded the difficulty he had to engage with me.



Figure 4

Stern explains that in a dyadic attunement interaction, the mother shows him how it felt like to do what he did. She puts it 'into her own words'. (2010:114). I suggest that the turmoil that I sensed but was not able to name, was perhaps what Paul was experiencing in himself. The image that I created enabled me to see how it feels like to do what he did, and perhaps to feel what he felt. Actively creating in the sessions, nevertheless, was followed by many uncertainties regarding the effect this may have on Paul and the therapeutic relationship between us, yet these anxieties eased as neither of us commented on my art work and Paul's (and my own) attention remained focused around him and his creation.

The variability of interventions and understandings through which attunement can be obtained in the art-therapeutic environment can be viewed as a dynamic model of affective dialogue. The journey with Paul began with a modest invitation to be a witness of the dialogue within his art-making process, proceeded with sharing attention to his creation, and grew to the sharing of affect through mutual art making; another client's journey will take on different turns.

The concepts of witnessing and joint attention, in conjunction with the idea of the client-therapist affective dialogue, can reduce the therapist's sense of exclusion and enable him to 'be attuned to' the client and provide him with a facilitating environment despite the client's defences. It has been highlighted that engagement and regulation (or miss-attunement) are vital, interrelated concepts. Holding this in mind may enable the therapist to provide a relaxed environment, and also remain present and trust the process, even when moments of sharing are rare.

Limitations and future research

Attunement is a nonverbal experience based on sharing. It seems that one of the challenges that this area of exploration is faced with, is the difficulty of providing evidence-based practice and a tangible illustration of the client's experience. Stern explains that for attunement to be experienced, the infant must read the mother's behaviour as corresponding to his inner affect. If we are to explore this process in art therapy then we are faced with the complexity of bringing the client's voice to the foreground; raising, in the literature as in the vignette with Paul, the question of subjectivity.

Conclusion

Experiences of attunement have been shown to be vital to mental life, determining the capacity to share and understand experiences and emotions across two minds. This paper attempted to demonstrate the fertile grounds which art therapy can provide for this process to come into being. This includes the unique component of art making that can be considered as a foundation through which affect can be explored and shared. It

can also be considered as an alternative, and perhaps more achievable, channel for the experience of attunement with those who may find this a challenging task.

It has been suggested that the art materials hold different qualities that resonate with those sharable aspects that make attunement possible. They promote nonverbal communication loyal to one's experiences, as well as enabling an attuned dialogue of affect founded upon multi-modal matching to take place. By holding the capacity to be invested with affect and meaning, the creation of art can function as a bridge and provide a safe way of relating between client and therapist.

I believe that the triangular constellation found in art therapy can foster this experience, and this can take various forms. Witnessing, the focus on a third object, and the mutual engagement with the materials in the room, may be part of the attunement experience between client and therapist. The therapist's role, alike the mother who *is* the maternal environment, is understood as one who requires sensitivity towards the client's needs and capacities, considering dyadic and triadic forms of relating, as well as the provision of rich grounds for engagement. It also confronts the therapist with uncertainties, frustrations and limitations of the work, which may also be an inherent component to 'being with' another's experience.

Lastly, I would like to add that the term 'Art-based attunement' is not part of the art-therapeutic terminology. It is derived from the wider arts therapy literature (Kossak, 2009) and my own experience. It is my hope that perhaps, by putting forward this term in the art therapeutic arena, development and further understanding could be gained towards the unique conduits of experience that art therapy has to offer.

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