Using the Imago Dialogue to Deepen Couples Therapy

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Abstract
The Imago dialogue used in Imago Relationship Therapy is a skill that promotes connection, empathy, and horizontal relationships between couples. Adler discussed the need for equality but did not provide a means[AU: “framework” perhaps?] for this to occur in therapeutic relationships. This paper describes the Imago Dialogue as a means to promote equality and empathy between members of a couple that will be beneficial to Adlerian therapists. The three-part process of mirroring, validating the other, and empathizing are discussed, as well as how to introduce the skill to couples. The neuroscience behind the process is also discussed.

Keywords: Individual Psychology, couples therapy, Imago Relationship Therapy

Alfred Adler is credited with turning the psychotherapy chairs to face one another so that the client and the therapist to be on equal footing. There is also reason to believe that Adler influenced Carl Rogers’s thinking on the core conditions of the helping relationship (Watts, 1996). Adler stressed the importance of creating horizontal rather than vertical relationships between people, and his ideas of equality seem to be the basis for creating the treatment alliance necessary for effective therapy (Wampold, 2010). Although Adler discussed the need for equality to occur on a macro level, he never really provided the detail or guidelines necessary to apply these ideas in therapeutic work generally and in and couples therapy specifically. This article describes the necessary specifics in the form of the Imago Dialogue (Hendrix, 1988) and shows how these ideas are effectively used with couples.

Imago Relationship Therapy (IRT) was developed by Harville Hendrix and Helen LaKelly Hunt (Hendrix, 1988; Hendrix, 2005) and is described in the Getting the Love You Want: A Guide for Couples (Hendrix, 1988). Based on a synthesis of attachment
theory, object relations, developmental psychology, behavioral change techniques, and neuroscience, IRT teaches the primary skill of Imago dialogue to help couples regulate anxiety and fully hear each other in an authentic, intentional dialogue. As couples are able to listen to each other with curiosity and a sense of safety, they are able to develop an empathic connection that allows them to understand the needs of their partner, as well as their own. The partners are then able to act on requested behavior changes, create a vision for their relationship, and act in more caring ways toward each other.

The process used in IRT is similar to that used in Adlerian therapy (Carlson, Watts, & Maniaci, 2005). The therapist proactively works with the couple, establishing a positive relationship while assessing the couple as well as the individual partners. Through these processes insight is created and activities to facilitate positive change are suggested. The use of the Imago Dialogue positively affects all four stages of Adlerian treatment: relationship, assessment, insight, and reorientation.

Horizontal communication occurs between people holding the same hierarchical position. Both written and oral methods are used to make horizontal communication effective.[AU: this seems to belong after the next sentence, not here] Horizontal communication is essentially free of errors or distortion, while vertical communicators often experience communication problems. The distinction between the two kinds of communication is especially important when working with couples. Communication such as face-to-face talking between spouses at the same level is horizontal, whereas communication between superior and inferiors or bosses and their employees vertical, or up-and-down, communication.

Conversations can be difficult and fraught with the possibility of conflict. What might start off with what one person thinks is “constructive criticism” can quickly turn into an all-out verbal battle as the two people go into protection mode and the fight-or-flight dance begins. As humans, we have no choice—we are programed to defend ourselves because of our tripartite brain (McLean, 1964). The reptilian brain, located in the brain stem, protects us from dangers, whether real or perceived. It is always on guard and looks for danger. Vertical conversations are often perceived as dangerous when couples dialogue with one another (Allred & Graff, 1979; Carlson & Dinkmeyer, 2000).

Historically, when couples have dysfunctional conversations they tend to be
vertical and monological—that is, one person presumes to know what the other should learn and engages in a monologue that renders the listener in an inferior position. The listener’s power, status, knowledge, motives, or thoughts are questioned and conflict arises. On a societal level, this conversational style has led to wars, conflicts, feuds, coups, and even “spite fences” between neighbors. Macrolevel behavior is often reflected at the microlevel, and these same monological, vertical conversations are evident on the dyadic level that includes clients and therapist as well as couples in intimate relationships. Though invisible to most of us because it is part of the culture, people tend to lecture and manipulate rather than listen, learn, and connect on a deep level in a horizontal relationship that is open to change and to being changed by another.

Martin Buber (1966[AU: should this be 1958, for I and Thou? (it is not cited elsewhere)]) used the idea of dialogue to describe how humans relate to each other as either “I-It” or, less frequently, as “I-Thou.” I-It relationships are mostly everyday occurrences. When ordering coffee at the coffee shop, and no interaction other than the transaction occurs, for example, it is an I-It encounter, or a “technical dialogue” (Buber, 1966, p. 19). Genuine dialogue takes place when the speaker and the listener put aside their desire to change or control the other and listen in an attempt to understand the otherness of the other. “‘The inmost growth of the self does not take place, as people like to suppose today, through our relationship to ourselves, but through being made present by the other and knowing that we are made present by him” (Buber, 1951/1988, p. 61).

In these very deep conversations, where judgment drops away and a genuine attempt to understand the intersubjective views of the other, both speaker and listener are made human and differentiated. When we can affirm others, they become released from our attempt to control their thoughts and actions and are able to meet our needs; they become separate but remain connected because of our authentic concern. When the action is reciprocal, and one can see our point of view without losing one’s own, the meeting becomes a healing experience, or what Buber called “healing through meeting” (Buber, 1951). This is also what Adler[AU: not a verb; you may want to restate this more fully, however] intended with the concept of equality.

This type of healing dialogue is difficult to achieve. Because of our defensive structures and desire to be right, conversations between two people often start with one or
both wanting to make a point or win an argument. Such conversations become vertical conversations, in which one or both members of the dyad is trying to take control of the dialogue and manipulate it to reach their desired goal. A true dialogue takes place between what Arnett (1986) calls conscious-oriented thinkers, as opposed to strategists. The conscious-oriented thinker thinks in terms of a good ethical outcome, whereas a strategist thinks in terms of achieving individual goals without regard to others or the ethics of the outcome. True dialogues are horizontal conversations—both speaker and listener put aside their desires and attempt to understand the other. In highly emotional or conflictual dialogues, the sender and receiver stand on what Buber (1966) calls “the narrow ridge” and hold on to their sense of self while trying to understand the point of view of the other. The narrow ridge is a place where one has to be both confident in the self and vulnerable to the other while listening for the possibility that one’s position can be changed from additional information or through empathy toward the other.

Although Buber and Adler spoke of the necessity of remaining in dialogue with others, they were aware that our complex world, which often requires us to treat others as objects in our everyday lives, makes this difficult. Unfortunately, they did not provide any real techniques to achieve dialogue. Indeed, even their translators and followers had a difficult time clearly explaining how to achieve dialogue with another. Both demonstrated dialogue by example, through speeches and conversations, and by their theoretical and challenging essays and books.

**Imago Dialogue**

As noted by dialogical and humanist therapists, creating or forcing a true dialogue is difficult. In most cases, these dialogues emerge from everyday conversations that take a turn toward being curious about the other. They are fulfilling when they happen, but they are also fleeting as the dyad returns to the more typical I-It relationship as the default. Consistent, reliable, genuine dialogues can be elusive. We know what prevents them from happening—refuting what the other says, judgment, contempt, defensiveness, and shame—and conversely, we know how to create the setting in which dialogue can emerge.

One important aspect in true dialogue is total presence. We live in a modern
culture in which our attention is pulled in many directions: by TV, the Internet, phones, texting, and other everyday divergences. Many of these so-called social media have kept us from being anything but social, especially with our partners. Look around at many restaurants these days, and you will see people looking at their phones rather than each other. It is difficult to be fully present when we are distracted or simply not paying attention to the people we are sitting with. Presence is more than listening. It is being fully “there.”

If maintaining awareness, connection, and presence sounds familiar, it may be because meditators have been practicing these skills for thousands of years. Meditation requires one to be fully present to the moment, to pay attention to the breath, to be fully aware of what is going on in the self without distraction. Dialogue with another can be considered a form of meditative practice with another. The main difference is that in a dyadic form of mediation, each person pays attention to the other’s thoughts and experiences (Crapuchettes & Beauvoir, 2011). This is a connection on a different plane that allows both a merging and a differentiation, as will be discussed later. When one person can connect at this level of dialogue, what feels like a cosmological connection, or what is referred to as “flow” (Csikszentmihalyi, 2008), can occur. In flow, time and egos fall away: full immersion and involvement in the moment and an energized focus remain. There is a sense that the only thing that matters at that moment is the other, and yet one remains fully aware of one’s own experience of that moment. We maintain our self while being fully connected with the other. We become fully aware of the space in between.

The remainder of this article will discuss how to create the setting so that this authentic equal connection can occur with Imago dialogue. We are confident that couples meeting through dialogue will create changes in the brain that can transform their primary relationship from adversarial to a cooperative and healing partnership.

**Setting the Stage for Imago Dialogue**

Imago dialogue requires a space to emerge, a setting. When couples are reacting to each other and their defenses are protecting their positions in a discussion, no dialogue occurs because the conversation is adversarial: someone is trying to win. Reactive conversations are interpreted as unsafe and the reptilian brain is in full swing, trying to protect each partner through the fight-or-flight response. No relational contact can occur
when people are experiencing a fight-or-flight response. In a truly dangerous situation—a robbery, assault, or animal attack—this reaction is important and necessary; it was built in to protect us from threats, real or perceived. Neuroscience has revealed that humans have a built in “negativity bias” and weigh negative information more heavily than positive information (Ito, Larsen, Smith, Kyle, & Cacioppo, 1998). Because of the negativity bias, those who were more cautious lived longer and were able to reproduce; thus, nature selected for the negativity bias. Couples must therefore struggle against negativity to be relational. Couples must become intentional in their dialogues and, to do that, they have to create a safe space. There are several ways to create a safe space for the dialogue to emerge. We will look at making an appointment, eye contact, and visualization.

Making an appointment to dialogue is the start of the process of emotional regulation central to the movement of information and energy between two people in conversation (Siegel, 1999) and creates the space necessary for a true dialogue. The request for an appointment signals the couple to begin to slow down, breathe, and prepare the body for a dialogue. Neuroscientists have used the terms “attunement” or “alignment” to describe the process of aligning emotional states as a way of calming neural systems (Schore, 1994; Siegel, 1999). Learning affect regulation through mindful calming is essential in couple’s’ relationships and prevents negative flooding (Goleman, 2012; Gottman, 2002). Having each partner take three deep breaths helps begin this process.

A second way of facilitating dialogue is to teach couples the value of eye contact. Oftentimes couples in distress will look away or glare at one another. Glares are a way of expressing superiority or disdain for the other and are interpreted by the brain as a threat. Studies of couples in a strong love relationship show that their eye contact occurs in a gaze as opposed to a glare. Couples with a strong love bond gaze at each other longer than couples who have a weak love bond (Goldstein, Kilroy, & Van de Voort, 1976; Rubin, 1970). These gazes are loving and curious about the other. A true gaze is tender and nonthreatening.

When taking a moment to gaze into each other’s eyes, threats begin to diminish. The telltale sign of connection versus fear is the pupil size. Pupils react to threats by becoming smaller and then dilate to a wider size when there is little or no threat (Hess,
Changes in pupil size can happen within seconds, and we are programmed to react to these changes in defensive or nurturing ways. Viewers who see tiny pupils experience fear and a desire to push away or become immobile, while dilated pupils elicit compassion. Gazing into each other’s eyes while creating this space of safety gives the couple time to attune to each other. Dilated pupils are a sure sign that the couple is creating safe space and beginning the attunement process.

A third factor in facilitating dialogue is calming anxiety; a simple way to do this is with visualization. When couples are experiencing distress, they are in a defensive posture, and the reptilian fight-or-flight mechanism is in full effect. The amygdala is in fear mode and is pumping the stress hormone cortisol into the bloodstream. The calmer the mind, the less the amygdala is working to protect the body, and cortisol become lower (Veer, Oei, Spinhoven, van Buchem, Elzinga, & Rombouts, 2012). A proven method of calming the mind is using meditative techniques, including deep breathing and visualizing a safe place. To make this process a regular way of communicating, each of these methods of calming and preparing for dialogue can be enacted in the session as a way of showing the couple the work they will do on their own at home.

In their initial session, couples therapists have an opportunity to set the stage for dialogue. Acting as a facilitator or coach, the therapist helps the couple learn about emotional regulation and how negative flooding can overwhelm them and keep them from making the connection necessary for dialogue. Any therapist working with couples would do well to learn simple meditative techniques, including visualizations and breathing methods that can be taught to the couple so that centering becomes the start of their dialogues. Such centering can prepare the body and mind for their conversation. Educating the couple about making an appointment, the importance of eye contact, and calming through visualization becomes an important task for the therapist working to facilitate dialogue; this sets the stage for the three-part Imago dialogue process of mirroring, validating, and empathizing.

**Mirroring**

Mirroring and paraphrasing has been part of couples counseling for decades, dating back to early couples education workshops in the 1960s (Mace, 1975); these skills are used to determine whether the sending partner has been heard accurately. Mirroring a
partner’s words creates an initial connection and assures that the listening partner—the receiver—is fully engaged and hearing what is being said. When couples are in a reactive conversation, they are not fully hearing the other; rather, they are thinking about how to defend themselves. They enter into diatribe mode, listening with the intent of refuting what was said. In a dialogue, however, the partners listen, mirror back, and hold their own anxiety and comments until it is their turn to talk. Couples find that if they listen longer, they feel comfortable, their partner begins to make sense. Refuting, interrupting, and defending cut off the process of fully hearing the other and prevent the sending partners from fully telling their truths.

Mirroring is difficult for couples on several levels. Couples initially will say that it feels forced or mechanical: “real people do not talk this way.” In many ways, they are right. The Imago dialogue process is not natural, but it is effective—and it will become natural with use. In fact, most people naturally mirror children. When a child comes to them and complains of a stomachache, most adults will bend down and empathically say, “Oh my, sweetie, your stomach hurts? I’m so sorry. Let’s see what we can do about that.” Very few adults would tell the child “that’s not true,” “get over it,” or “yeah, mine hurts too,” as couples often do in their frustrations with each other.

Mirroring takes longer. Couples have to find the time to fully listen rather than take the shortcut of refuting and cutting the other off. Although it may take longer to have these conversations, they are ultimately more efficient. The topic may come to a close, and they may achieve understanding with a good dialogue without having to repeat themselves as often. Most couples have the experience of discussing the same thing over and over again; this happens because there was no understanding of the other’s point of view or any action taken on the issue. The Imago dialogue begins with mirroring and allows couples to fully express both sides of a situation. It offers the opportunity to make a change rather than walk away empty and put the issue on a shelf to be discussed again and again.

Couples will also report that they feel as if they are parroting or even making fun of their partner by mirroring them. This should be reframed as a connection and understanding process rather than a mocking process. Mirroring is important and assures that the sender is fully heard. [AU: implicit in being “fully heard”]. Having this
experience with an empathic and skilled therapist helps couples learn the process and gets them through the awkward initial dialogues.

In the office setting, the couple decides who will be the sender and who will be the receiver in the dialogue. Once this is determined, the therapist guides the couple in calming down, breathing, and gazing into each other’s eyes. “I’m ready to hear you now” means the receiver is ready to listen. At this point, the couple is guided through the mirroring process.

The emphasis is on “flat” mirroring—saying back only what the sending partner says, without interpretation or changing meaning. Because a concave or a convex mirror would change or distort what it reflects, the listener must act like a flat mirror to provide accurate reflections in the process. When mirroring, the listener is instructed to start by saying, “If I heard you correctly, you said . . .” or “If I am getting this right, you said . . .” [AU: redundant—sentence begins with "When mirroring"]. The sending partner is instructed to use “I” statements (such as “I feel . . .” and “I think . . .”) and to avoid “You” statements (“You always . . .” and “You never . . .”)

At the end of the mirror, the receiving partner is instructed to ask two questions: “Did I get that right?” and “Is there more about that?” The first question is to check for accuracy of the mirroring. If what was said was distorted or not heard correctly, the sender has the opportunity to say, “What I wanted you to get about that is . . .” and have another opportunity to receive an accurate mirroring. The second question indicates curiosity by the receiver. Curiosity invites the sender to talk freely and openly with the knowledge that the receiver will be able to hear if they are able to maintain their sense of safety and calm. Curiosity also gives the sender the sense that they are worth the time and effort of the receiver to be in the conversation. It invites expansion of what was said, which can open up a deeper understanding for the receiver.

A short interaction might sound like this:

Sender: I feel very scared and frustrated when you come home late for dinner.[AU: no quotation marks needed with dialogue format]

Receiver: So if I’m hearing you correctly, you feel scared and frustrated when I come home late for dinner. Did I get that?

Sender: Yes, you did.
Receiver: Is there more about that?

Sender: Yes, I feel scared that something might have happened to you.

Receiver: So you feel scared that something might have happened to me. Did I get that?

Sender: Yes.

Receiver: Is there more?

The couple would do this for a couple of rounds until some understanding begins to take shape about the issue before moving into validation, which is the second part of the Imago dialogue. Before moving on, the receiver should do a global mirroring, or a summary of all they have heard, to be sure the sending partner has been heard accurately. A global mirroring would look something like this:

Receiver: So let me see if I got all of this. You get very scared and frustrated when I come home late. You said you get worried that something might have happened to me and you are thinking that that fear may stem from an incident that happened when you were a young girl playing at your friend’s house when her dad did not come home for dinner and it turned out he was in a terrible accident. You remember how scared you felt and how sad you felt for your friend. Did I get all of that?

Sender: Yes, you did.

Validation

What sets the Imago dialogue apart from active listening techniques is its use of validation of the other. Buber (1966) referred to this process as confirmation. His idea of confirmation is not a flat out agreement with the other but rather a way of saying: “You make sense to me. Your way of seeing things may not be the way I see things, but I can see how you see it that way.” It is important that couples engaged in this work understand that validation between partners in dialogue is not agreeing. It is the understanding that the thought and feeling process of the other makes sense to them. Although some may worry that validating the other may bring about enmeshment or sameness, quite the opposite is true. Validation allows partners to see things differently from each other, while at the same time they can see how the other sees things. Because the relational paradigm emphasizes healing at the place of meeting, validation is often that place where
couples see the validity of the other’s point of view by momentarily stepping into their world. Validation happens when our being is confirmed and affirmed because another sees us accurately. As Gergen, McNamee, and Barnett (2001) state:

It is one thing to relate one’s feelings or life experiences; however it is quite another to gain a sense of the others affirmation. Because meaning is born in relationship, an individual’s expression doesn’t acquire full significance until supplemented. If you fail to appreciate what I am saying, or I think you are distorting my story, then I have not truly expressed anything. To affirm is to locate something within the others expression to which we can lend our agreement and support. Such affirmation is important in part for reasons deriving from the individualist tradition and the presumption that thoughts and feelings are individual possessions. As we say, "I experience the world in these ways," or "These are my beliefs." If you challenge or threaten these expressions you place my being into question; in contrast, to affirm is to grant worth, to honor the validity of my subjectivity. Second, as one’s realities are discounted or discredited so are the relationships from which they derive. (p. 704)

Neurologically, validation of the other is not an easy task because it requires our brains to be in both an analytic and emotional state simultaneously. Recent research indicates that our brains have little capacity to be in both places at once. Social and mechanical reasoning operate on two separate neural networks, and one inhibits the other when in use (Jack, Dawson, Begany, Leckie, Barry, Ciccia, & Snyder, 2013) Although analytic scientists may spend most of their time in a logical or cognitive mode, they may be able to switch to an affective mode when presented with a distressing or sad situation—but they probably cannot hold both at the same time. The opposite is true with those who are mainly feeling oriented. When in conflict, couples tend to go to the network they know best and practice the most. In other words, the analytic person becomes cognitive, while the feeling-oriented person becomes emotional. The brain itself is of little help for couples as they try to validate the other as it automatically inhibits the use of the other neural system (Anthony, Dawson, Begany, Leckie, Barry, Ciccia, & Snyder, 2013). Such a response makes it very difficult but not impossible to be both cognitively aware of the self and emotionally open to one’s own or the other’s feelings—
but that is exactly what one is being asked to do during validation in the dialogue.

Imago dialogue requires one to cycle through the both neural networks—the analytical and the feelings-based—to fully understand the other person. Being too entrenched in the cognitive network precludes connection; cognitive networks are selfish. Being too vulnerable to the affective network can create a symbiosis, causing the person to lose their sense of self; affective networks are selfless. The structure of the Imago dialogue intentionally guides the couple from the cognitive structure of mirroring to the dual cognitive and affective stance of validation, to the affective connection of empathy (the third step of the dialogue, discussed later). Partners willing to explore and challenge their neural networks will open up the possibility of a true dialogue.

Validation in the Imago dialogue occurs after the sending partner has been mirrored several times and the receiving partner has enough information to understand that there may be an alternative way of looking at the situation. After the global mirror, and when the sending partner feels heard, the receiving partner can be taught to validate. It should be made clear to the receiving partner that validation is not agreeing. It is saying: “You make sense to me. If I were sitting in your chair looking at the world through your eyes, I might feel the way you do.” Partners often struggle with the validation part because of the inability for the neural system to be in both places at once: “I have my view and it’s OK for you to have your view.” Helping couples learn to see the validity of the other’s point of view not only shows partners that they are two separate beings with two separate opinions but also helps them stretch their abilities to be in [AU: “experience” perhaps?] both their cognitive and affective neural systems. A validation might sound like this:

Receiver: Hearing about how my being late makes you feel scared and worried makes sense to me. What makes sense to me is that when you were young, you had an experience with this when your friend’s father was hurt in an accident. I can see how something like that would make you scared that it could happen to me. Did I get that?

Sender: Yes, thank you.

Keep in mind that this important act can be very difficult for receivers. In their cognitive system, they may be thinking, “What are the chances something is going to
happen to me? This is an overreaction.” Yet in their affective system they need to see the importance for the other of this fear. As Buber stresses, they must confirm the other to appreciate their partner’s otherness. In what may seem like a paradox, validating their partner’s way of seeing things differently actually brings couples closer together. The couple feels connected in knowing that they are understood by each other, and this is usually when an emotional connection emerges between them. Now the couple can be directed into the third part of the dialogue process, referred to as empathy.

**Empathy**

Empathy as a human ability was not discussed in the literature until the late 1800s, when German artists and philosophers began experimenting with what they called Einfühlung, or “feeling into” (Vischer, 1873). Initially a way of looking at art aesthetically, philosopher Theodor Lipps insisted that Einfühlung could also apply to mutual human understanding (Lipps, 1903). He used the term “inner imitation” to describe how we might feel when we watch someone do something dangerous, such as a trapeze performer in a circus. Our own bodies react as if they were precariously hanging from the ceiling. In other words, we had an Einfühlung, or empathic resonance, with the other in the dangerous situation. Lipps’s work was eclipsed by the emerging behaviorism, but he did give us the basis for understanding that humans can grasp viscerally what another may be feeling.

As mentioned previously, humanist and dialogical psychotherapists began using empathy in their work. Feminist psychologists in the 1980s began to understand the importance of empathy, especially in understanding women’s development (Gilligan, 1973). Empathy began to be understood as both an emotional and an intellectual endeavor that can best be understood as a two-part process consisting of “affective surrender” and “cognitive structure” (Jordan, 1991; Jordan & Carlson, 2013). In other words, empathy is the ability to feel how another might be feeling by letting go of one’s defenses, yet fully understanding that the feelings being expressed by the other are not yours. In true empathy there seems to be a heartfelt connection between the speaker and the listener, through which the listener, in the end, can say “that must be tough for you”; “I imagine you feel sad about that”; or “that must make you happy.” They truly feel for
the other, yet they know that the feelings belong “over there.”

Empathy can be seen, felt, taught, and also assessed with paper-and-pencil psychological measures. We did not, however, see any direct scientific evidence of empathy until the mid-1990s, when researchers serendipitously discovered mirror neurons (Rizzolatti, Fadiga, Fogassi, & Gallese, 1996). When a scientist was observing the firing of a neuron in a small monkey eating peanuts, he noticed that the same neuron also fired when the monkey watched him eat a peanut; the neuron fired as if the monkey were eating the peanut himself. The monkey was having a mirror response—that is, a connection with the scientist, or maybe, in Theodor Lipp’s words, an “inner imitation.” Discovery of mirror neurons led to a flood of research on how they help us do things such as imitate behavior, understand others’ intentions, and empathize. The empathy process, analyzed in humans through EEG and fMRI studies, seems to work as follows.[AU:paragraphs merged] In a complicated neurobiological process, when someone is exposed to another’s pleasure or pain, stimuli come into the body through the five senses and up the spinal cord to the brain stem. The mirror neuron system is stimulated, which causes the body to react similarly to the observed person. The mirror neurons stimulate the insula, located in the middle prefrontal cortex. The insula is an interpreter that stimulates the body and limbic system to feel similar feelings in the observer, who begins to resonate with the observed. The two become attuned to each other, and the observed “feels felt” by the observer (Siegel, 2012).

Through the prefrontal cortex, observers begin to become aware of what they are feeling in their own body through “interoception,” or the sensing of one’s body from within. The prefrontal cortex, responsible for self-awareness, then shifts into the second part of the process, termed “interpretation.” The prefrontal cortex interprets the felt physical and emotional experiences as not actually centered within the observer. Then, in a third step, the prefrontal cortex quickly realizes that the feelings can be attributed to the observed. In short, when people encounter others in pain, their body experiences the felt aspect and resonates and attunes with the observed. The prefrontal cortex quickly steps in to become aware of the situation, makes sense of the information, recognizes that the feelings are not localized, and then cognitively understands that the feelings belong to someone else: this is the circuit from interoception to interpretation to attribution (Carr,
Jacoboni, Dubeau, Maziotta, & Lenzi, 2003; Siegel, 2012).

[AU: following changes to provide transition into quotation and to avoid Siegel’s “discussed above.”] Siegel (2012) explains that the mirror neurons “are part of a larger resonance circuit that enables us to feel another’s feelings and not get lost in their internal states,” allowing us to “resonate and not become fused with another person. This resonance allows us to “feel felt” by the other person and that person can feel felt by us. This is quite different from becoming the other person—of excessive linkage without differentiation. Integration requires that we maintain both linkage and differentiation” (Siegel, 2012, ch. 19, p. 6).

Most psychotherapists were taught about empathy in their graduate programs when they learned listening skills and practiced them with clients. Most therapists know that listening and being empathic, combined with an active treatment plan that includes new skills, yields the best outcomes in treatment. But even though we can be great models of empathy ourselves, most of our treatment models seldom encourage our teaching empathy skills to our clients, and very few models encourage us to teach these skills to couples who may need the empathic connection most of all. The third part of the Imago dialogue is teaching couples empathy skills.

Empathy is not something that can be forced on a person. Those who are more cognitive in their relationships often have a difficult time being empathic because they are trying to figure out how to fix a situation. Those who are more affective in their relationships sometimes have a difficult time being empathic without fusing with the other. The Imago dialogue is structured to assist the partners to experience empathy that is both connected and differentiated.

At this point in the dialogue, the receiver has listened through mirroring and has understood the sender’s point of view through validation. This has probably evoked an emotional response in the receiver, however faint or intense it may be. Receivers can then take inventory of their bodily responses and understand that the emotion they may be feeling in their body most likely can be attributed to the sender. They are having an empathic response. Receivers are instructed to respond to the sender with what they think the sender might be feeling or experiencing at the moment or when the issue being
discussed occurs[AU: “arises”?]. Feelings are typically described in one word, and the receiver needs to be aware of when what they think is a feeling actually crosses over to a thought or action: for example, “I imagine that might make you sad” in contrast to “I imagine that makes you want to go tell him something.” Too often the action would be what the receiver would do in a situation, and the sender feels that they have not been fully heard or understood. Empathy in the Imago dialogue would look like this:

Receiver: “Given your experiences, I can see how you would worry when I come home late. And I imagine that might make you feel sad, scared, and lonely. Did I get that?”

Sender: “You did. Thank you.”

The Steps of Dialogue

To put all this into a structured context[AU: vaguely stated; meaning something like “a practical structure”?], the following section is a step-by-step guide to the Imago dialogue. Although the ideal is for couples to always feel connected and present to one another, it would be virtually impossible to do so [AU: add “constantly” or “routinely”?]. When one or both of them feel the need to establish connection, or when the connection is ruptured through a frustration, the Imago dialogue process should be initiated. The steps are listed below.

1. Request an appointment for a dialogue.
The purpose of the request is to alert the receiver that the sender needs to be heard and that the receiver should begin the calming process so as to listen.

   Sender: Is now a good time to dialogue about . . . ?
   Receiver: Yes [or offers another time].

2. Calm and center the body and mind, especially the receiver.
Both sender and receiver take three deep breaths and the receiver thinks about a safe place, if one is available. The couple enters into a curious and meditative space with each other.

3. Make eye contact and look deeply into the other’s eyes.
The couple looks deeply into each other’s eyes, compassionately. This relieves some fear and the pupils will expand to signal safety to the ever-alert brain.

4. The sender expresses the concern to say several sentences at a time using “I”
statements as much as possible.

Sender: I feel . . . when . . .

5. The receiver mirrors what has been heard and checks it out.

Receiver: If I got that, you said . . . [mirrors what was said], then says, “Did I get that?”

Sender: Yes [if not, coach until sender feels heard; if yes, repeat as above].

6. After a few rounds of mirroring, the receiver checks out what they have heard in a global mirror.

Receiver: Let me see if I got all of that. What I heard you say is . . . [mirrors what was heard]. Did I get that?

Sender: You did.

7. If they have heard accurately, the receiver validates what they have heard.

Receiver: That makes sense to me. [Or, if sender requests] And what makes sense to me is . . .

8. Receiver checks out again if the sender feels validated.

Receiver: Did I get that?

Sender: You got it.

9. Receiver offers empathy.

Receiver: And given that . . . I can imagine you might be feeling . . . . Is that the feeling?

Sender: Yes. [Or “no” or “partly”; coach partner until it’s right]

10. A polite closing.

It is always good to end on a polite note. This will encourage future dialogues as the brain interprets these encounters as safe.

Sender: Thank you for listening.

Receiver: Thank you for sharing.

If appropriate, the sender and receiver switch roles and repeat so that both are
Client Handout

What follows is a one-page client handout that lists the steps for the dialogue. It is recommended that each partner is given a copy and it is suggested that they keep this sheet out during their dialogues until they learn the process. A new behavior is seldom easy to incorporate, so the sheet may serve to keep them grounded in the process.

The Steps of Dialogue

[AU: roman to distinguish from level-1 headings in the article proper]

The following is a step-by-step guide for Imago dialogue. It is suggested that you keep this guide out during your dialogues until you learn the process.

1. Request an appointment for a dialogue
    
    Sender: Is now a good time to dialogue about . . . ?
    
    Receiver: Yes [or offers another time].

2. Calm and center the body and mind, especially the receiver.

Both sender and receiver take three deep breaths and look deeply into each others eyes.

3. The sender say what they would like to say several sentences at a time using “I” statements as much as possible.

    Sender: I feel . . . when . . .

4. The receiver mirrors what they have heard and checks it out.

    Receiver: If I got that, you said . . . [mirrors what was said, then says] Did I get that?
    
    Sender: Yes [if not, coach until sender feels heard. If yes, repeat as above].

5. After a few rounds of mirroring, the receiver checks out what they have heard in a global mirror.

    Receiver: Let me see if I got all of that. What I heard you say is . . . [mirrors what they heard]. Did I get that?
    
    Sender: You did.

6. If they have heard accurately, the receiver validates what they have heard.

    Receiver: That makes sense to me. [Or, if sender requests] And what makes sense to me is . . .”
7. Receiver checks out again if the sender feels validated.
   Receiver: Did I get that?
   Sender: You got it.
8. Receiver offers empathy.
   Receiver: And given that . . . I can imagine you might be feeling . . . Is that the feeling?
   Sender: Yes. [Or “no” or “partly”; coach until the listener gets it right].
   Sender: Thank you for listening.
   Receiver: Thank you for sharing.

If appropriate, the sender and receiver switch roles and repeat so that both are heard.

**Does Imago Dialogue Create Change?**

As couples begin to connect using Imago dialogue, their trust will increase as their fear subsides. Their new skill of telling their story and being fully heard by the other has even more healing attributes related to neuroplasticity and changes that can occur in memory as stories are told. We have long known that memories are solidified in the brain through a process called consolidation. Each day, individuals take in immeasurable amounts of information through their nervous systems, yet only a portion becomes a memory. Memory formation occurs during sleep, when the information, stored daily in the hippocampus and the amygdala, is distributed through the memory system for later recall. These memories, which often have action or emotion attached to them, are stored in a nightly consolidation process. It was once thought that these memories and the emotions that went with them were permanent, unchangeable, and that the person had to learn to live with them by being conscious of them. Recent research, however, has indicated otherwise. In a process called reconsolidation, retrieved memories have a short window within which the story told, heard, and understood can be altered when a new emotion attaches to the memory. During sleep, the new story is reconsolidated and takes the place of the old story. While the old memory remains, the strong emotion dissolves, thus rendering the memory emotionally less harmful (Schiller, Monfils, Raio, Johnson, LeDoux, & Phelps, 2010).

Although this research is in the early stages of discovery, it has tremendous
clinical potential as future evidence-based therapy practices learn how to weaken\textsuperscript{[AU: “diminish” perhaps?] intense emotional memory from an event—and advance that will be especially beneficial for those suffering from traumatic experiences. This is an area of research that will need to be pursued by dialogical therapies such as Imago Relationship Therapy whose emphasis is on\textsuperscript{[AU: referent not clear: “dialogical therapies . . . that emphasize” or “IRT, with its emphasis on”]} creating safety for old memories to emerge and providing a different experience for the person recalling the memory. Perhaps the Imago dialogue’s most important element is allowing old emotional stories to be retold, heard in an empathic connection, and reconsolidate as stories with less emotion.

\textbf{Conclusion}

We do not see the Imago dialogue\textsuperscript{[AU: add “merely”?]} as a communication technique; rather, our hope is that dialogue becomes a lived experience. It is the structure, or the bones, of connection between two or more people. In a place of safety, where all thoughts and opinions are held as important and valid, people fully hear and validate the other. Brains connect on a very deep level through the relationship. The other’s story or point of view enters our neural system and touches us in some way. Through the process of attribution, we understand that the emotions we are experiencing are most likely those of the other. In the final act of empathy, we are able to acknowledge those emotions in the other. The other feels valid and connected, yet differentiated. We confirm the other, and the relationship is maintained. For those experiencing an emotional memory, dialogue provides a different and safer experience than previous times the memory was brought forward. When memories are fully heard and the person has a different experience, it is quite possible that during the wee hours of the night, the memories lose their emotional punch. And upon waking, there is a possibility of a deep connection with the other—as was intended all along.\textsuperscript{[AU: this appears to be an abrupt shift of emphasis from that of the article as a whole; “memory” and the process of change comes up only in the last section. This may leave the readers wondering whether they may have missed something. (I thought I was reading about couples therapy, how did we get here?) Perhaps this portion belongs with the preceding section, so that the conclusion rounds off the entire discussion rather than giving this one aspect what appears to be disproportionate emphasis.]}


References


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please advise] and has been a therapist, educator, clinical trainer, author, and lecturer for more than 40 years. Hendrix and Hunt cofounded Imago Relationships International, which supports more than 2,400 therapists practicing in 37 countries. They have coauthored ten books on intimate relationships and parenting, including the New York Times bestseller Getting the love you want: A guide for couples. Hendrix has been featured on the Oprah show 18 times, winning Oprah her first Emmy for “most socially redemptive” daytime talk show.

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