Empathy, Emotional Intelligence and Relationship-based practice

NUI Galway
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Rediscovering Empathy
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Doing social life – troubled and troublesome people

Empathy, emotional intelligence, mentalizing mind-mindedness, social cognition, social understanding

Resilience, social competence
Studies which have used complex statistical techniques to investigate whether some therapists consistently perform better than others have shown that they do. It seems that the differences in effectiveness between therapists carrying out the same type of psychotherapy often exceed the differences observed between different psychotherapies.

(R. Bentall, 2009, *Doctoring the Mind*, p 249)
Why this should be the case is not completely understood, but the ability to form a strong therapeutic alliance is undoubtedly a skill that is likely to affect the outcome of any kind of treatment.

(R. Bentall, 2009, *Doctoring the Mind*, p 249)
Evolution – why EI, social cognition, empathy etc?

- Sociable, group-living species
- Prediction
- Co-operation and collaboration
- Division of labour, range of talents
- Individual differences
- Brain size, brain functions
- Sarah Hrdy – Mothers and Others

NB abandonment, rejection, being ostracised
How do we develop empathy, EI, mentalisation, social cognition?


Emotional regulation, management of stress, mind-reading, reflective function, growth of the psychological self.
Emotional regulation
Neocortex

Limbic

Diencephalon

Brainstem

Abstract thought
Concrete Thought
Affiliation
"Attachment"
Sexual Behavior
Emotional Reactivity
Motor Regulation
"Arousal"
Appetite/Satiety
Sleep
Blood Pressure
Heart Rate
Body Temperature

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Houston, Texas 77056
The Emotions
Emotion is an evaluative response (a positive or negative feeling) that typically includes some combination of:

- **Physiological arousal** - increased heart rate, sweaty palms, blushing eg anger = “feeling hot under the collar”  
  
- **Subjective experience**  
  
- **Behavioural or emotional expression** - the overt behavioural sign of emotion, particularly facial expressions but also other bodily language
‘So emotion is not something opposed to reason. Emotions and their potentiality for guiding and managing thought in a general way are more basic. They complement the deficiences of thinking. And perhaps most important of all… emotions provide the infrastructure for social life: the plans they prompt are largely plans that involve others.’

Oatley and Jenkins 1996
‘The readiness that emotions induce provides outline structures for particular modes of relating: emotions of happiness and affection provide for co-operation, sadness allows for withdrawal from social interaction and the seeking of help, anger provides for conflict with others, and anxiety makes for wariness and deference.’

Oatley and Jenkins 1996: 124
EMOTIONS

Positive

Love
Fondness
Infatuation

Joy
Bliss
Contentment
Pride

Negative

Anger
Annoyance
Hostility
Contempt
Jealousy

Sadness
Agony
Grief
Guilt
Loneliness

Fear
Horror
Worry

approach
avoidance
EMOTIONS

- Expressions -
  Autonomic changes
  Self-reported emotions -
  — Moods —
- Emotional disorders -
- Personality traits

Seconds  Minutes  Hours  Days  Weeks  Months  Years  Lifetime
Emotional regulation and wellbeing

Psychoneuroimmunology, health, longevity, epigenetics

Stress, social and economic inequality, mental health and social stability

Control, stress and locus of control
SOCIAL CAPITAL:

Over recent years, social scientists, economists and politicians have recognised that there is something tantalisingly important about happiness, personal relationships and social support. The sum of all these elements they refer to as ‘social capital.’ Social relationships and a sense of emotional connectedness with others appear to bring great social benefits.
SOCIAL CAPITAL:

Communities that are rich in social capital have lower rates of crime and social unrest. Conversely, they enjoy higher levels of physical health and social cohesion.

Social inequality = reduced social capital, increased stress, increased social problems
Emotional intelligence

Four-branch model which proceeds from perception to management:

- The perception and expression of emotion in the self and others.
- The use of emotion to facilitate thought, and the integration of emotion in thought.
- Understanding and analysing emotions in self and others.
- Regulating and managing emotions in self and others depending on one’s needs, goals and plans (the management of relationships).
Intrapersonal intelligence  

Self-awareness  
Self management  
Self regulation  

Interpersonal intelligence  

Other awareness  
Relationship management and regulation
Relationships and outcomes: examples:

Driving
Medicine eg I.C.E. (ideas, concerns and expectations)
Feel secure:

1. Warm and friendly
2. Acknowledge and accept feelings
3. Understand

Then explore:

4. Opportunity to talk
5. Make sense of experience
6. Re-order/re-structure/change thoughts, feelings, behaviour, circumstances.
Emotional intelligence  
empathy

Intellectual knowledge  
technical know-how

Be responsive
Inside
Experience
Understanding
Meaning
Relationship
Feel secure

Be systematic
Outside
Behaviour
Explanation
Cause
Technique
Then explore
The relationship and therapeutic change

For Carl Rogers (1961, 1986), the three essential qualities that must be present in the worker-client relationship in order to bring about therapeutic change are warmth, empathy and genuineness. These became known as the ‘core conditions’ of the helpful relationship. It was felt that not only were they necessary, but they could be sufficient.
Principles of therapeutic change
(Castonguay and Beutler 2006)

Three major variable domains:

Technique

Participant characteristics

Relationship
Good relationships, it seems, are a universal therapeutic good, and yet may turn out to be the single most important ingredient of effective psychiatric care. (R. Bentall 2009: 260).
Relationship-based practices

“Whatever the individual approach or clinical technique employed, the therapeutic relationship is one of the most powerful determinants of positive outcome…”

(Daniel Siegel The Mindful Therapist 2010)
Relationship-based practice

- Containment
- Mentalisation, EI, empathy
- Transitional attachment figure
- Zone of proximal development
Hold the child in mind for the parent as a mentalizing being.

See the child’s behavior as meaningful.

Holding the parent in mind so that the parent can begin to hold the child in mind.

A. Slade (2008)
Being held in mind by the worker is a powerful way of containing the parent’s anxiety, fear, doubts, anger, and sadness. This makes it safer for the parent to think about the child who is therefore not only more likely to be in mind but also in sight, and as a result that bit safer.

Donald Forrester (University of Bedford)

Client Resistance

Social Worker: Empathy and Listening
Tony seeks help
Safe Haven
Attachment
Feeling safe

Secure Base
Explore/Play
Reflect/Think

Compare the therapeutic/working alliance
Feel Secure
Feel safe
Less anxious
and fearful
Less defensive
Less resistant
More co-operative
More collaborative

Then Explore
Think
Work
Change
Feel motivated
Go forward
Therapeutic Alliance

*empathy*

+

Technical know-how

*structure*
Empathy
Emotional intelligence
The relationship
Connection
Understanding
Mentalising

Structure
Problems
Needs
Purpose
Aims
Goals
Methods
Techniques
Collaboration
Empathy and Structure
Good Working Relationships and Working Well
Therapeutic alliance and Technique/purpose
Feel secure then Explore
Connection before Correction
Task-centred
Behaviour modification
Cognitive Behavioural Therapy
Brief Solution Focused
Strengths-Based
Motivational interviewing
Multi-systemic therapies
Critical Best Practice
Mentalising:

Thinking about thinking in self and others
Thinking about feeling in self and others
Thinking about doing (behaviour)
Getting mind to consider mind.

When I work with a client, I am trying to create a context in which he or she can slowly shift from a physical to a reflective or mentalizing stance…

I help people to see other people’s behaviour as behaviour as meaningful.

A. Slade (2008)
Bottom-up, inside to outside
Respond to developmental age and not chronological age
Relationships as the most powerful of therapeutic experiences

- behavioural and cognitive development
- social support and relationships
- peer relationships
- social cognition, understanding, empathy
- mentalising, attunement, affect regulation
- predictability, repetition, routines, structure
- safe and in control
- animal assisted therapies
- play, art, music, movement and dance therapy
- sensory integration treatments
- rocking, touch, massage
Intellectual understanding and making sense

Less anxious

More emotionally available

Containment, safe haven-secure base, emotional intelligence, empathy, transitional attachment figure

Therapeutic alliance

The social work relationship and relationship-based practice

Technique (eg strengths, solutions, MI etc)
“Before you continue your emotional tirade,
let me know if you're picking up on my
nonevaluative and empathetic listening.”
"Cheer up. I hate your job too."
David Howe

The Emotionally Intelligent Social Worker

Palgrave Macmillan

2008
Empathy
what it is
and why it matters

David Howe

Palgrave Macmillan
2012
The Compleat Social Worker
David Howe
Palgrave Macmillan
2014