

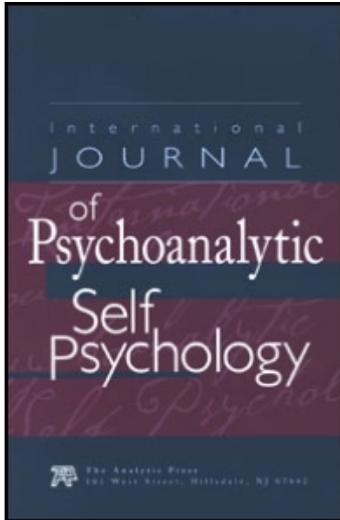
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A DYNAMIC SYSTEMS VIEW OF THE TRANSFORMATIONAL PROCESS OF MIRRORING

NANCY VANDERHEIDE, PSY.D.

Dynamic systems theories, such as complexity and nonlinear dynamic systems theories, provide increased flexibility in approaching psychological phenomena with a less rigid, more fluid sensibility. They provide us with process language that moves away from linear directionality in construing psychoanalytic action in favor of a sensibility of emergence. This paper situates the concept of mirroring within the realms of systems thinking in an effort both to illustrate systems theory concepts and to elucidate more fully the mirroring process.

Keywords: mirroring; complexity; nonlinear dynamic systems; emergence; process language

This paper situates the concept of mirroring in the related realms of nonlinear dynamic systems theory and complexity theory. Until relatively recently, theories of psychoanalytic process and the functioning of the mind embraced an isolated one person–one mind perspective. The ensuing contextualist emphasis on the essential embeddedness of psychological experience in interpenetrating subjective worlds (Stolorow, Atwood, and Brandshaft, 1994) challenged the notion of a simple two-person–two-mind psychology. Recent advances in the application of systems thinking to psychoanalysis provide us with process language that eliminates

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linear directionality in construing psychoanalytic action in favor of a sensibility of emergence.

The metaphor of the mirror is ubiquitous in psychoanalytic thought (Haglund, 1996). The developing baby gazes deeply into Winnicott's (1956) good-enough mother's eyes and sees himself reflected back: "When I look, I am seen, so I exist" (Winnicott, 1956, p. 114). Not only does the infant derive a sense of who he is but, additionally, his experience of himself is actually made real through the transaction. For Kohut (1984), mirroring is a developmental, selfobject activity that confirms one's positive qualities of originality, vitality and ambition; it involves a delighted parent's approval that conveys to the child a sense of goodness and wholeness, thereby evoking and sustaining a more expansive, cohesive and vigorous sense of self (Wolf, 1988). Socarides and Stolorow (1984–1985) explicated the necessity for attunement to all affect states, citing the importance of their central function as organizers of self experience. The developing ability to tolerate and integrate affect states enhances self-soothing, concomitantly consolidating self-confidence and self-esteem.

MIRRORING AS A RELATIONAL EVENT

Whereas Kohut (1978) conceptualized mirroring as a developmental selfobject function provided by an empathically attuned other, from my perspective, mirroring is a relational event and comprises both reciprocal forms of responsiveness and mutual experiences of being recognized and appreciated. At a phenomenological level, mirroring is the mirrored individual's experience of being seen, gotten, or understood by the caregiver (parent or analyst) in a compassionate manner that promotes an alteration in the individual's sense of self. In addition, the caregiver is responding on both conscious and unconscious levels to multiple levels of communication from the patient that promote both accurately attuned responsiveness and a concomitant sense of being recognized, as well as a heightened sense of efficacy. These experiences feed back into the system, becoming part of the history of the system, which influences subsequent interactions.

Kohut (1977) believed that developmental growth and therapeutic change was accounted for by the process of accretion of psychic structure he termed transmuting internalization, which results from the caregiver's optimal failures in responsiveness. Since that time, many have posited that, although the child or patient may indeed rise to the occasion and draw on nascent resources to provide for him- or herself the necessary functions

transiently and non-traumatically lacking in the selfobject transaction, it is just as likely, if not more so, that optimally responsive interventions by caregiver or analyst provide the catalyst for psychological growth (Bacal, 1998). Mirroring, then, as an optimal response emergent in the dyad, is itself a source of “therapeutic action” leading to “therapeutic change” (Coburn, 2002, p. 668).

MIRRORING AS A FUNCTION OF THE SYSTEM

In this light, the process of mirroring is systemically derived (Atwood and Stolorow, 1984), emerging in a nonlinear fashion from the interaction of various of the components comprising the complex system that is the therapeutic dyad. Nonlinear dynamic systems theories, especially that of Thelen and Smith (1994), provide ways of thinking about this. In addition, the complex systems concepts of Cilliers (1998) have been elegantly adapted and applied to psychoanalysis to provide a fundamentally process-oriented, fully intersubjective understanding of therapeutic action (Coburn, 2002). The phenomenon known as mirroring can be usefully construed through this lens as well.

The analytic couple is an open, nonlinear, dynamic (complex) system comprising the interpenetrating mix-up of the subjectivities that each individual, as a complex system in his or her own right, brings to the relationship. Each participant is thus a subsystem of the larger system that is the dyad, which is itself a subsystem of the environment in which it is embedded. The dyadic system itself is open to input from the environment, giving it, by definition, the potential to develop in more ways than can possibly be realized. The many characteristics of complex systems apply equally to the psychoanalytic encounter in general and to the phenomenon of mirroring in particular. Many of these characteristics are highlighted in the clinical material to follow.

MIRRORING AS A PERTURBATION TO THE SYSTEM

According to infant research, the pattern of ongoing regulation within the parent–child dyad, as well as their rupture and repair dynamics, lead the infant, and later the adult patient, to develop expectancies regarding themselves and the fate of interpersonal interactions (Beebe, Lachmann, and Jaffe, 1997). For a person whose unempathic caregiver habitually missed

the mark and, instead of mirroring their child, invalidated that child's sense of itself as acceptable, good, enjoyable, competent, and loveable, the experience of being accurately mirrored contradicts deeply entrenched feelings and beliefs about him- or herself. In this case, mirroring disrupts the individual's habitual patterning of information or, in nonlinear dynamic systems theory terms, it functions as a perturbation to the system. Due to the individual's capacity for ongoing self-organization, this perturbation eventually results in a reorganization of self experience. In dynamic systems language, this newly organized state of self-in-relation-to-other is known as a new "attractor state."

In a very recent session, Molly, a patient of many years, spontaneously spoke of her experience of being understood. For decades her sense of self was organized around her experience of being almost continually rejected, abandoned, disliked, patronized, and pathologized. She likened herself to "an empty bucket with holes in it"; no matter how much she despised her need for attention, she still craved it but felt that, no matter how much she got (and as an extremely brilliant and creative professional, she actually got quite a lot), it was never enough because she could never retain the positive affirmation she was receiving.

Describing a recent series of undeniably affirming events and awards in her world that showcased her many creative talents in ways that she could register and assimilate, her eyes filled with tears as she exclaimed, "I can't tell you how unbelievably good it is to feel seen as who I really am, without the projections of what other people might think I am. It is such a *relief* to be able to say to myself, yes, that's me!! To not have to fight against the walls." I replied, "It feels like getting out of some kind of prison." "Exactly," she said, "I was imprisoned by people's views of me that wouldn't let me be me." In systems language, a new attractor state, or preferred configuration of self and self-in-relation-to-other, which includes a sense of self newly organized around specific affects of competence and acceptability, has, over time, become established and may ultimately take precedence over the previous experience of existing—inadequate, bad, and unlovable—within a misunderstanding and hostile environment.

EMERGENCE

I turn now from this discussion of mirroring to a moment in Molly's treatment that took place 8 years ago in an effort to illustrate the important systems theory concept of emergence. A new behavior or experience is said to

be emergent when “it evolves from the interaction of a number of elements, none of which have a central role” (Kauffmann, 1993; Sucharov, 2002). In other words, that which is emergent was not predictable by examining any one of the numerous individual components of the system that comprise the interchange.

After a rocky beginning in which Molly warily decided to entrust her deeply depressed, frightened, and angry self to my care, we increased the session frequency to two increasingly miserable sessions per week. Her history of severe neglect and sexual abuse understandably contributed to Molly’s distrust of those who would attempt to care for her, and she was hypervigilant to any sign of misattunement or misunderstanding. As Molly is extremely gifted intellectually, and prone to using complicated examples from physics and chemistry to metaphorically describe her experience, the treatment at that time was rife with both misattunements and misunderstanding. Attempts to explore or clear up misunderstandings were nearly as traumatic as the misunderstandings themselves. Molly explained her decision to remain in a treatment that was generating so much pain in this way: “You have stripped me of all the defenses I built up as a child to allow me to function in the world. You are not helping me, you blame everything on me, and I can’t function at work the day after therapy, but if I leave I will be giving up on myself and I can’t do that or I might as well die.”

For Molly, my every move was, at best, inept; and, at worst, aimed at destroying her. Regardless of how I framed my thoughts, she experienced me as relentlessly seeking out and exposing her flaws. My admiration for her many remarkable accomplishments was felt by her to be “patronizing” and any attempt to highlight positive strivings toward healthy growth was an indication that I was shirking my duty as her therapist. My attempts to understand the ways she experienced her world, and organized those experiences, were felt to be critical and full of blame. Obviously, this was an excruciating experience for both of us and I would be hard pressed to say who dreaded the sessions more. Countless hours in supervision groups and private consultation gave me the support and encouragement I needed to keep trying, but provided nothing in the way of interventions that would transform the relationship into something resembling “therapeutic.”

So, it was with more than the usual amount of trepidation that I agreed to see Molly for a session during the (much needed) break between Christmas and New Years. A relative toward whom Molly had a great deal of resentment had died over the holiday, and the funeral was to be on Friday. She needed to talk to me before then, so we agreed to meet Wednesday

evening. Tuesday night, my own grandmother died and I would be flying out of state on Thursday for her funeral, which was to take place on Friday, as well. Knowing Molly's eagle eye for any sign of my own preoccupations diverting attention from her, and aware that I had the perfect excuse to cancel the session, I nonetheless met her for the session.

Molly was appalled at herself for secretly being glad that her relative was dead and knew that she was going to feel terrible about herself at the funeral where the rest of the family would be truly grief-stricken and she would be merely pretending to care. As I was reasonably certain that I knew how Molly would respond to attempts to normalize her reactions, or explore her experience of herself as despicable, and notably short of sleep on top of it, I was at a bit of a loss as to how to proceed. After a brief silence, I said, "You know, this is the strangest coincidence, but my grandmother died last night, and all I could think of was, 'ding dong the witch is dead'." Molly's mouth literally dropped open. "You didn't like her?," she asked. I said, "She was the meanest person to ever walk the face of the earth and I know what you mean about going to a funeral and being with a lot of people who are sad. But she was a vampire who sucked the life out of my mother, and I'm just glad she's gone."

After a moment, and in a surprisingly calm voice, devoid for once of the simultaneously accusatory and self-recriminating tone characteristic in our sessions, Molly asked me when and where the funeral was to take place. I told her that we would be attending our respective events at the same time, separated only by a time zone. Finally, she said, "Well, I feel a lot better knowing you don't seem to hate yourself for feeling the way you do. It's okay to feel what you really feel, even it's ugly." In a surprising turn, I had somehow resonated to Molly's wish to consider herself to be a decent person, giving her permission to feel the things she was actually feeling. She experienced herself as truly acceptable to me, despite her "ugly" thoughts and feelings, and her sense of herself as hateful was transformed in that moment. It is not an exaggeration to say that the tone of our relationship completely and permanently changed at that moment. Molly's experience of herself underwent a dramatic change as well, and she could finally begin to embrace her thoughts, feelings, and needs as valid and permissible, if with some difficulty at first. Shortly thereafter, she made some sweeping changes in her home life and appearance and is today a significantly more vital and fun-loving woman who makes an effort to allow herself to be optimistic, frequently with good success.

There was no way of predicting that my statement would have that kind of effect; it was not the first time I had ever made a personal self-disclosure to Molly. I do believe it could have only happened in the context of

the many years we had struggled together; according to complexity theory, phenomena of this sort “arise out of the nonlinear, self-organizing interactions between the system’s history, the system’s current state, and the system’s environment (Coburn, 2002, p. 664).

This example also illustrates a complexity theory construct that states that, due to the nonlinearity of the system’s interactions, small events can lead to large results. Molly’s transformation occurred after a single interaction in a tumultuous treatment that had gone painfully on for years. That one statement could just as easily have been predicted to be organized as an indicator that I was being self-absorbed and unattuned to Molly’s needs, but in that moment it served to mirror her deep desire to feel like a good person, despite her unwanted feelings. By the same token, large causes do not necessarily lead to large results. To use Molly’s treatment as an example again, a few years ago our wires got crossed and she was left unaware that I would be absent from my office at her appointed time. Especially given Molly’s history of rejection and abandonment, I feared that this event would plunge us back into the collapsed state we had endured for so long. She, however, was completely understanding and forgiving of the event. Nonlinearity removes the illusion of certainty from our interactions.

Complexity and nonlinear dynamic systems theories also keep us cognizant of the fact that we cannot fully understand any aspect or component of the system’s activity in isolation. Complexity theory employs the concept of “framing” to articulate this rule. Whenever we examine or highlight an interaction, or an individual’s subjective response to an interaction—for example, Molly’s reaction to my self-disclosure—we are placing a frame around it, which arbitrarily lifts it out of the overall context within which it is embedded. This is necessary to be able to think or talk about what is going on; however, the awareness that it is but a part of a larger and constantly changing whole guarantees that no single aspect of the transaction will be given primacy as “causal.” Although this may not feel like good news to those who feel more comfortable with a prescribed set of therapeutic action steps to take, ultimately, more of the innumerable possibilities embraced by complex systems thinking retain their potential for actualization.

Although the outcome of successful mirroring experiences is frequently manifest in tangibles, such as a child or patient’s increased sense of cohesiveness and self-confidence, the heart of the experience of mirroring lies in the subjectivity of the mirrored as feeling gotten, understood, recognized, or seen in a self-enhancing way, as well as in that of the parent or analyst who registers the others’ response and his or her own corresponding increase in self-efficacy. Although in complexity theory we would recognize

that this outcome is evenly distributed over the system, at the phenomenological level, the experience is felt to be one's own. I turn to a brief vignette to illustrate this point.

Susan is a young woman in her mid-30s, who complained that she does not really know what she is feeling most of the time. She requested that I help her identify what goes on within her. While each session during the first few months of treatment left me feeling that I had adequately tracked her affect states, longings for connectedness, and her fears about revealing herself, I was a bit taken aback at the start of each new session. "I feel like you weren't really with me last week," she starts. Not really with her? How could she feel that way? I had been reflecting back every feeling state like a professional tennis player returning complex serves!

Finally curious enough to put down the tennis racket, I let myself experience more fully how we both seemed to feel when I had apparently "mirrored" her accurately. Indeed, I had precisely identified something she was feeling, but for some reason it led only to a lackluster agreement on her part or, even worse, a slightly crestfallen air. "Something feels funny here," I said. "Even though we've identified what you're feeling about this, I get the sense that I'm missing something, that you're not experiencing me as with you right now." Her eye gleamed more brightly as she eagerly agreed. "We're both acting like I am the one identifying what you're feeling, which feels to me right now like it's just validating your fear that you don't know what you're feeling. I have the sense that you did know what you were feeling, and gave me the authority to know it in some way?" Bingo. Finally, Susan feels "gotten." "That's exactly what it feels like," she exclaimed. "My mother always contradicted what I was feeling, like I shouldn't be angry that my [mentally ill] sister got all the attention. She and my father were the only ones who could know what I was really feeling." Susan needed me to validate for her that she actually did have the capacity to identify her feeling states, and that it did not jeopardize our relationship for her to be the one to know what she was feeling.

Susan's tendency to relinquish the identification of her affect states to others had led to the development of a very problematic relationship with a friend who convinced her that she was vastly more attuned to Susan's inner states than was Susan. Repetitions of the type of interaction described earlier have afforded Susan greater confidence regarding the state of her emotions. Not only does she present herself less and less uncertainly to her friend, thereby eliminating many opportunities for her feeling state to be co-opted and renamed, she is also increasingly able to hold on to her sense of herself in what was previously a deeply confusing and dissociating experi-

ence. Her ability to contradict her friend's opinions provides an example of the far-ranging influence that nonlinear interactions have on systems far removed from the treatment room. Our struggle together to facilitate the emergence of an experience of being understood shows how change can occur at a local level, within Susan's sense of herself. Susan, her sense of self reorganized around feelings of competency and greater safety in owning her own feelings, in a nonlinear fashion then influences interactions at more distant locations, in her relationships outside the therapeutic setting.

The deep attunement to our patients made available by an empathic stance within the system comprised of our interpenetrating subjectivities affords us an opportunity to respond to, and provide validation for, the many, varied, and fluctuating senses of self that are organized around particular affect states. Our response to our patient is emergent from within this system, reflecting our current experience of who he or she is right now. That response might be verbal—an articulation of an as-yet unsymbolized feeling need that seems to our patient to be utterly unacceptable to either have or to express. But, our mirroring response may just as well be conveyed in a subsymbolic manner (Bucci, 1997), organized and communicated outside of cognitive awareness—a smile, for instance, or leaning forward in response to a sensed need for closeness that implies acceptance, or the sudden pupil dilation that accompanies our preverbal recognition of the sudden and surprising arrival of a new affect state.

MIRRORING AND SHAME

When the experience of feeling recognized, accepted, and appreciated emerges within a patient, his or her need for mirroring is being met. Many aspects of the self require confirming recognition, including abilities, talents, accomplishments, and personal attractiveness. Primary among the aspects of self that require such acceptance are affect states, both expansive states, such as joy and exuberance, as well as painful states of fragility, vulnerability, shame, and wounded neediness. Too often, caregivers are overwhelmed or unable to process their own reactions to the intense affect states of their child, whether they are states of high arousal or emotional experiences that the parents themselves have disavowed and cannot tolerate in their child. Often, shame-prone parents experience their child's expression of particular emotions as reflecting badly on them, and either overtly or covertly convey the message that those emotions are inappropriate and threatening to their interpersonal tie. Their inability to provide adequate mirroring responses leaves the child believing that what she is feeling is bad

and must be rejected, that her needs are undesirable, and that she herself is bad, unlovable, and just too much to bear.

Amy, an outwardly highly successful, intelligent, happy, and calming presence to most people in her life, sits across from me on the couch, and I look into eyes that are dark, black pools of fathomless pain. Although the harrowing story of her childhood foretells of her extremely painful existence, I seldom experience her like this, so invested is she in protecting this wound from the acid-wash of another's gaze. I said, "This is where you really live, isn't it?" Her face contorts as she struggles to prevent a grimace, and her dark eyes truly become pools as tears collect from the depths. She cannot talk about her experience; any attempt to articulate her inchoate and overwhelming emotions is instantaneously met with an overriding sense of shame and futility. "There isn't enough time for me," she manages to croak out. My experience is of sitting with a terribly wounded and frightened animal that is longing for warmth and kindness while simultaneously dreading the overstimulation of caring contact and terrified of retraumatization. "I'm not going anywhere," I say softly, and refrain from reaching for my water glass because it feels like too sudden a movement will scare her back behind what we have come to know as "the wall." Both verbally and nonverbally, her sense of fragility and her fear that no one can bear to witness her in this state are being responded to. Implicit in this communication is the message that I recognize her fear and do, indeed, want to be with her, despite the absence of the protective persona that she feels renders her less despicable.

The case of Amy also illustrates a double-edged aspect of mirroring—namely, that what is seen can feel deeply shaming to the patient. Amy is a person who prides herself on figuring things out and getting the job done, and whose preferred sense of identity is organized around those capacities and her ability to be a source of light in a profoundly dark world. Allowing us to access together other parts of her, the ways in which she experiences herself as dead and her light as extinguished, endangers her sense of identity and puts us both in touch with brutally unmet needs that trigger abject mortification.

Being seen in these self states is extremely traumatizing for Amy, and I often feel a measure of responsibility for her pain and helpless to provide badly needed comfort or even relief. Shame states, therefore, emerge spontaneously in both of us and, from a systems perspective, can be seen as distributed across the dynamic system we comprise. Shame does not belong solely to one or the other of us. It is, instead, generated dyadically. Understanding painful affect in this way can make it easier to bear and less necessary to disavow, permitting me to remain as fully present as possible to, and accepting of, the distressing feelings Amy is manifesting in the relationship.

This, in turn, will make it more likely that I will be able to convey badly needed recognition with sufficient attunement and acceptance that she will come to feel that it might, someday, become safe enough to be seen. Successful experiences of mirroring result in increased self-esteem in both of us; as her sense of self becomes more cohesive and she experiences her affect and very being as less toxic, my sense of efficacy also rises. The effect of successful mirroring is thus fed back into our complex system in a process understood as “recurrence.” These beneficial effects in turn become part of our ever-changing patterns of being together by way of the self-organizing capacity inherent in the relationship we are constantly recreating together.

DISCUSSION

Dynamic systems theories provide increased flexibility in approaching psychological phenomena with a less rigid, more fluid sensibility. With an emphasis strictly on process, rather than on reified structures contained in the mind, such perspectives embrace the concept of nonlinearity. In removing the illusion of certainty regarding the result of any therapeutic transaction, nonlinearity simultaneously prevents the foreclosure of ongoing process, and the emergence of other potential outcomes, that a sense of certainty can engender. With this sensibility, we are less likely to be invested in a particular outcome and more capable of interest in and curiosity about what actually is taking place.

The phenomenon of “emergence” is singularly important in thinking about what takes place in the psychoanalytic encounter. I sought in this paper to demonstrate that there are a multitude of factors comprising the event we call “mirroring”—an event that has, in theory, a seemingly simple trajectory: By virtue of empathic attunement with our patient’s experience, we are able to reflect it back to him or her, he or she feels understood, and understands, and increased self-esteem and self-cohesion results. In actuality, the affect states around which increased self-esteem is organized are emergent from within a highly developed, extremely complex milieu that involves, as some of its many components, each participant’s individual history, the history of the therapeutic couple, and the mode of relating the couple currently enjoys. All of these factors, and more, contribute elements to the interaction that allow the emergence, in a non-predictable manner, of states of mind that may interact to produce an experience of being seen and understood.

Framing any of the factors that interact within the complex system that is the therapeutic dyad allows us to talk about and learn more about that aspect in isolation from the greater context in which it is embedded.

Awareness that this is what we are doing safeguards against our drawing premature, incomplete, and inaccurate conclusions about the therapeutic action or the subjectivities of either participant. Optimally, we are able to traverse such highlighted facets of the ongoing process with the awareness that they are necessarily ubiquitous and inextricably intertwined in nonlinear ways into the tapestry woven of the interpenetrating subjective worlds of each member of the dyad.

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TRANSLATIONS OF ABSTRACT

Las teorías de los sistemas dinámicos como las teorías de los sistemas dinámicos complejos y no-lineales aportan una mayor flexibilidad al abordar fenómenos psicológicos con una sensibilidad menos rígida y más fluida. Nos suministran un lenguaje procesal que se aleja de la direccionalidad lineal al construir la acción psicoanalítica y favorece la sensibilidad ante lo que emerge. Este artículo sitúa el concepto de la especularización en el terreno del pensamiento de los sistemas, en un esfuerzo de por un lado de ilustrar la teoría de los sistemas, y por otra parte elucidar los procesos especulares en más profundidad.

Les théories des systèmes dynamiques telles que les théories des systèmes dynamiques non linéaires et de la complexité offrent de plus en plus de flexibilité dans la façon d'aborder les phénomènes psychologiques à partir d'une sensibilité plus fluide, moins rigide. Elles nous fournissent un langage de processus qui nous éloigne d'une direction linéaire dans la compréhension de l'action psychanalytique en faveur d'une sensibilité de l'émergence. Cet article situe le concept de réponse en miroir à l'intérieur des domaines de la pensée en systèmes dans un effort pour à la fois illustrer les concepts de la théorie des systèmes et pour élucider plus pleinement le processus de réponse en miroir.

Le teorie dei sistemi dinamici così come le teorie della complessità e dei sistemi dinamici non lineari forniscono sia una maggiore flessibilità nell'approccio dei fenomeni psicologici sia una sensibilità meno rigida e più fluida. Tali teorie forniscono un linguaggio di tipo processuale che, allontanandosi dalla prospettiva di un'azione psicoanalitica costruita lungo una direzionalità lineare, privilegia la sensibilità verso i fenomeni emergenti. Questo articolo situa il concetto del rispecchiamento all'interno del dominio dei sistemi di pensiero con l'intento sia di illustrare i concetti della teoria dei sistemi sia di delucidare più pienamente il processo del rispecchiamento.

Dynamische Systemtheorien wie etwa die Komplexitäts- und die nonlinearen Systemtheorien bieten eine erweiterte Flexibilität im Zugang zu psychologischen Phänomenen mit einer weniger rigiden, offeneren Sensibilität. Sie stellen uns eine am Prozess orientierte Sprache zur Verfügung, die die psychoanalytische Aktion so konstruiert, dass sie sich von einer linearen Gerichtetheit weg hin zu einer Sensibilität für das eben Auftauchende bewegt. Diese Arbeit stellt das Konzept der Spiegelung in den Rahmen systemorientierten Denkens in der Bemühung, sowohl die Konzepte der Systemtheorie als auch den Spiegelungsprozess mehr zu erhellen.