

How to Work with Clients Who Blame

Module 1: The Neurobiology of Blame

Part 1: The Neurobiology of Blame

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How to Work with Clients Who Blame: The Neurobiology of Blame

The Neurobiology of Blame

Dr. Buczynski: How do we help clients who can't seem to break out of the blame cycles that cause so much grief in their life?

For people who blame others for their problems, they can often get stuck in a rigid mindset that fuels a need for fault-finding. They can fall prey to painful blaming patterns that impact their relationships and stymie their personal growth.

So how do we help blamers change their outlook?

To start off, it could be useful to quickly review the biological process that's often at the heart of our tendency to blame others.

You might remember this from social psychology. I'm talking about fundamental attribution error.

Dr. Harrell: The example I sometimes give when I'm teaching this is "Someone falls on a banana peel and you say, 'Oh, they're clumsy. They're...' – we're attributing to the fault of the person.

But if we fall on a banana peel, we're likely to say, "Who put that banana peel there? Somebody needs to clean up the street," or all that kind of thing. So there's actually some kind of natural cognitive process of externalization.

Dr. Buczynski: That's Dr. Shelly Harrell. And she'll often introduce the concept of fundamental attribution error to her clients. You see, Shelly believes that this kind of psychoeducation can help bring more color to a client's understanding of why they blame.

Not only that, but it helps Shelly avoid those battles of "who's right and who's wrong" when a client starts blaming others for their issues.

"When I see someone else, I think there's some character problem. But if that same thing were to happen to me, I might tend to look for some other external characteristic."

In this case, she's helping her clients see that blame is a part of the human condition. We're simply hardwired to find fault in others.

Dr. Harrell: People will often laugh with that example and recognize, "Okay, yes, I do do that. When I see someone else, I think there's some character problem. But if that same thing were to happen to me, I might tend to look for some other external characteristic" – or external situation.

It's not always bad to look at an external situation, but if it's a habit and becomes a barrier to empowerment, to people recognizing that they can make an impact on things in their lives, then I think it can sometimes be a problem.

Dr. Buczynski: Shelly is going to get more into this idea of externalizing and empowerment a little later in the program. But right now I want to continue looking at the brain and the vital role it plays in blame.

According to Dr. Dan Siegel, there's an interesting phenomenon in the neurobiology of people who always find fault in others. And it originates in the default mode network of the brain.

Now, just for quick review, we're talking about the ventromedial prefrontal region and the midline areas, all the way back to the posterior cingulate.

Inside these midline areas is where Dan says we construct our sense of "self". This is how we see *ourselves* as an individual, separate from the rest of the universe.

Dan calls it the "solo self".

Now, in addition to our separate self, we also need to have a sense of our context, of the world we live in.

This is where it can get tricky because some people focus almost entirely on their separate self. Any awareness of the context or the interconnectedness of themselves to the world is very minimal.

So this brings up a question. What determines how much a person focuses on each of these two types of self-awareness?

Dr. Dan Siegel: One thing we've learned in the last like five years is there seems to be this mutual inhibition. The more constructing you are of your separate self, the less sensation you have. The more you're just with sensation, the less you have of a separate self. It's a really interesting balance and there's lots of studies to support that view.

"The more constructing you are of your separate self, the less sensation you have. The more you're just with sensation, the less you have of a separate self."

Dr. Buczynski: Ok, so this idea is important because it can play a central role in how people might fall into a blaming style.

You see, when a client is prone to seeing others as being the source of their problems, it could be because they have an excessively differentiated sense of self. They're *more* aware of their "solo self" and *less* aware of how they are in interaction with others and less aware of the context of the problem.

Dr. Ron Siegel: One of the things we find is that we construct our sense of separate self, including the blaming separate self, by talking to ourselves about ourselves a lot. When we're in an angry, blaming snit, we're reviewing over and over in our mind usually how good we are and how bad the other person is. That's why we're blaming them.

"We construct our sense of separate self by talking to ourselves about ourselves a lot."

Dr. Buczynski: That's Dr. Ron Siegel. Ron points out how a strong sense of a separate self can lead a person to mostly seeing others as the root of their problem.

In these cases, the default mode network is often going into overdrive, focusing entirely on the self.

But here's the thing. At the same time this is happening, something else interesting is taking place. The brain is not only preoccupied with the *self*, but it's also revving up with worry about what *others* think.

So there's this interesting polarization going on. You have these thought patterns of "I'm thinking about me" combined with "what do other people think about me?" Dan Siegel calls it the "**OATS**" factor: **Others And The Self**.

Dr. D. Siegel: In that self-preoccupation – not that the default mode is bad because this is also the mode that is involved in empathy and compassion, so we need to realize this is a very social set of circuits – but if it's excessively differentiated it isn't linked into the whole system. The social circuits become self-preoccupied: "Where do I fit in the social system?"

"If it's excessively differentiated, the social circuits become self-preoccupied: *where do I fit in the social system?*"

If you have an excessively differentiated default mode, what you're going to do is, if something goes wrong, "It's you. It's you. It's you." It's *never* going to be *me* unless I'm masochistic and I keep on saying, "Oh, it's bad." It's like a Woody Allen thing, "It's about me. It's about me. It's about me."

Dr. Buczynski: What we're talking about here is a lack of integration of the default mode network. And this can lead to the scenario that Dan just laid out, where a client simply can't see their own role in the problem. And nowhere can this be more apparent than when we're working with issues of narcissism.

Dr. D. Siegel: When you have someone with narcissistic proclivities what happens is everything that is positive is attributed to this solo self. Everything that is negative cannot be held within a reflective stance and is projected out onto "the other."

What happens in that situation, then, is there's a problem. Let's say at work - it's always the other person doing it. There's a problem in an organization and it's the other person doing it. If there's a problem in a family, it's the other person doing it. If there's a problem in a one-on-one relationship, it's the other person.

Dr. Buczynski: Now, in module three of this program, Dr. Christine Padesky will share a practical strategy for working with clients who present with narcissism. You'll want to check that out.

But to get back to Dan's point, when the default mode network is excessively differentiated, it can prevent us from considering other people's perspectives. We're not able to say "I wonder how the *other* person feels about the situation" or "I wonder what *their* experience was".

So this brings up the question: how do we work with people who blame when, at least to some extent, that propensity to blame is coming from their brain?

Dr. R. Siegel: it's having more of an appreciation of our interconnectedness more of the time, and *acting* more as though we have an appreciation of our interconnectedness.

"When we turn our attention to moment-to-moment sensations, the relative strength in our consciousness starts to shift."

When we turn our attention instead to our breath or some other object of awareness and tune in to moment-to-moment sensations, and become more aware of interoceptive experience, then the relative strength in our consciousness of this narrative about how bad the other person is and how good we are, versus the experience of moment-to-moment sensation starts to shift.

The thoughts start to feel as though they're occurring more against the backdrop of this other, sensory, experience.

Dr. Hanson: I'll explain that to people, actually: that simply by being aware of internal sensations like the movements of your joints (even as you practice putting!), let alone tune in to the internal sensations of

breathing, that just doing *that*, becoming more aware of your body, kind of from the inside out and the bottom up, will help you naturally be more able to tune in to other people.

And it contains the bonus benefit that as you repeatedly tune in to your own body, you build up this sense of the ongoing livingness of the self, the “going on being,” as Donald Winnicott talked about, that’s so important to track.

As you go on being yourself, you can then open to the emotions of others without feeling so flooded by them and so overwhelmed by them. You’re like a deeply rooted tree through which their feelings flow. Maybe some leaves get blown away, but you’re still standing there after the storm has passed.

Dr. Buczynski: That was Dr. Rick Hanson. Both he and Ron bring up an interesting perspective. By staying in the present and being more in tune with sensory experiences, it can weaken the good vs. evil narrative that sets us on a blaming course. This can start to change the way the client sees the problem.

Now, to use that in clinical practice, how do we increase our client’s awareness of their physical sensations so that we can foster a shift away from blame?

Well, Ron points to a famous study done in 2007 at St. Joseph’s hospital in Toronto, that was led by Norm Farb. The study suggests that there is a fundamental difference between two types of self-awareness: the experiential self and the narrative self.

When we’re in the narrative self, we are continuously repeating a version of the story of what happened and why the other person is the one to blame. When we are in the experiential self, we’re simply in touch with our bodily sensations and possibly our emotions, like sadness or hurt.

Here’s how the study administrators helped bring a greater focus to the experiential self.

Dr. R. Siegel: They had people talk, basically describe themselves at the level of experiential self, which is simply, “It’s warm in the room right now; I feel a little perspiration here. My heart’s beating because I’m speaking publicly” – that sort of thing, versus narrative self: “I’m a man. I’m a psychologist. I’m a father. I’m a husband” – these different ways of doing it, of appreciating the self or experiencing the self.

When people did more meditation practice, they were more readily able to shift into this experiential level.

An interesting side effect of this is the idea that as we move into this more experiencing-self level, or less of what Dan’s calling the *excessively differentiated solo self*, we’re more likely to see ourselves as interrelated and even perhaps co-created with other people.

Of course, if we saw ourselves as more interrelated and co-created, the likelihood of moving into blame is going to be less.

Dr. Buczynski: Ok, so the more we stay with our sensations, the less focused we are on blaming others.

If we want to amplify this experience of sensations as a way to help resolve blame, how might we do that?

Well, Dr. Kelly McGonigal suggests that we go outside.

“Simply being aware of internal sensations like the movements of your joints helps you naturally be more able to tune in to other people.”

“If you want to alter the default-mode network in a way that’s a little easier than meditation, in nature seems to do it.”

Dr. McGonigal: If you want to alter the default-mode network in a way that’s a little easier than meditation, nature seems to do it. It just floods the cortex with all sorts of sensory information: sounds, and smells, and sights.

If you want to have a different conversation with someone, to take a walk with them might lead to a very different coregulation – as everyone was talking about – versus when you’re sitting in a room and having that same sort of blame cycle.

Dr. Buczynski: That right there can be key. If we can find a way to focus on our sensory experience, we might be able to disrupt the blame cycle.

Ok, let’s just backpedal for a second here because I want to get back to the imbalance between these two types of self-awareness. I want to get into how this phenomenon might occur in the first place. Basically, what causes this kind of excessive differentiation of the default mode network?

Well, there are many things. Early childhood trauma can be a factor. Also if there was an unusual parenting style, like if there were no boundaries growing up and the person learned to pull back into a self-protective state.

This can help explain why a client’s brain might orient more toward accusing others. They simply can’t sit with their own responsibility in the matter.

Part of the reason for this is that they struggle with what you might remember as **the five aspects of empathy**.

Dr. D. Siegel: One is **empathic resonance** – feeling another person’s feelings.

Another is **perspective-taking** – seeing it from another person’s point of view and realizing their point of view may be different from yours and still valid; they’re really challenged with this.

The third is **empathic understanding** where I say, “If I were in that perspective and feeling those feelings, hmm, I think this is what it would mean for me. This is how my mind might function if that were *my* experience. It’s not – but if that were, I get that’s what...” It’s kind of an empathic imagination.

Then there’s **empathic joy** - feeling really happy for another person’s happiness and really proud of another’s success.

Then there’s **empathic concern** which is “I see your suffering so then I’m going to take action to reduce your suffering;” it’s basically a synonym for compassion.

You see a challenge in these five aspects of empathy in someone who keeps on projecting that “it’s all about someone else.” Part of the work, if we’re looking at the work, is to work on these five aspects of empathy and see which ones might be especially difficult for a person. Without these five which are pre-frontally mediated – this midline circuit does this – this is what you want to work on to help a person stop being someone who always pushes people away and accuses other people.

“Part of the work is to work on these five aspects of empathy and see which ones might be especially difficult for a person.”

Dr. Buczynski: Later in the program, we're going to look a little deeper at some of these aspects of empathy. And we'll explore how we might use them to help clients shift away from blame.

But before we move on, let's just quickly summarize what those five aspects are:

One is **empathic resonance**. Two is **perspective-taking**. Three is **empathic understanding** or **empathic imagination**. Four is **empathic joy**. And five is **empathic concern**.

In the next video, we're going to look at how trauma can spark changes in the brain that make clients more vulnerable to blame.

I'll see you there.