



Awakening Clinical Intuition

*An Experiential Workbook
for Psychotherapists*

Terry Marks-Tarlow

Foreword by Allan N. Schore

“We must be able to see through the eyes of another, while standing in our own shoes.”

Awakening Clinical Intuition: An Experiential Workbook for Psychotherapists

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The Meadow: A Guided Meditation

I sat, comfortably, and breathed—several ocean breaths, consciously narrowing my throat on the exhalation. My senses focused inward. I followed the gentle voice on the mp3 cd and entered a high mountain meadow. A slight breeze tickled the fine hairs on my cheek and neck. The sun’s warmth relaxed any nervous wondering. I smelled dry dusty dirt. I reached down to stroke the velvety leaves of the mule’s ear growing in abundance and listened to a squirrel chirp his warning of my presence. I saw the shovel and was drawn to a place to dig. A chest or container of some sort, I was told, awaited my discovery. Within it were items foretelling a story, just for me. I opened the chest eager to see what lay inside: a light brown, leather-bound journal, soft supple leather, the kind that feels luxurious to the touch, ivory pages, unlined, an expanse of space for me to explore, a sharpened yellow No. 2 pencil, a squishy pink eraser, and an orange-ish feather with brown trim. I looked again to see if I had missed something. I knew that once I buried the box and left the meadow there was time to reflect and write in response to guided questions; and yet, I felt as if something was missing.

Clinical Intuition

According to Terry Marks-Tarlow, PhD, when we interpret guided imagery journeys such as my experience with ‘The Meadow’ (Marks-Tarlow, 2014, p. 159) or any outcropping from our unconscious, “it is important to use clinical intuition and not a set formula to process meaning” (p. 161). Marks-Tarlow (2014) offers her insights into clinical intuition and its place in our lives and in our clinical practice in her newest book entitled, *Awakening Clinical Intuition: An Experiential Workbook for Psychotherapists*. It is the offspring from its parent book, *Clinical Intuition in Psychology: The Neurobiology of Embodied Response* (Marks-Tarlow, 2012), where Marks-Tarlow grounded clinical intuition in interpersonal neurobiology and offered case vignettes, personal stories, and original artwork as guideposts for readers’ understanding. Her intention for this ‘workbook’ is to offer a user-friendly, hands-on, experiential journey into the realm of intuition for personal growth and clinical application— “the writing is less heady,” she says.

Following in its parent’s footsteps, *Awakening Clinical Intuition* offers extensive data detailing the developmental foundations of intuition; however, the language is plain, simple, a fascinating read that captured my attention without straining my analytic left-brain’s need to figure it out—the concepts flowed readily, easily. And, as in its predecessor, the importance of empathy, play, humor, imagination, and metaphor are encouraged and supported as practitioners learn how to use clinical intuition to develop and express their wisdom. Marks-Tarlow designed the guided exercises (an mp3 cd comes with the book) to stimulate embodied experience and enhance readers’ access, awareness,

and self-trust in intuition. She notes that intuition must be nourished indirectly, via experiences and reflections; it cannot be explicitly taught.

The heart of this workbook is about being with the experiences to open yourself to your intuition (and potentially your intuitive guides). Reading the scripts provided in the book, reading the reflection sequences, reading but not experiencing will leave the reader hanging. Blank spaces are provided in the workbook so readers can write about their experiences; questions are provided to guide readers as they reflect on their own experience as well as to guide discussions with patients. The reflective component is in place ‘to bring the experience home’. “It’s one thing to have an experience,” she writes, “another to process it and embody it.” As a reviewer, I read through the book with an eye for what it offered. As a person, I did many of the exercises and found myself curious enough to spend more time following the paths that appeared before me. This workbook is ideal for those new to the concept of intuition as well as those already familiar with and using intuition in their lives and practice. Marks-Tarlow will stretch your awareness, and she offers new experiences to share with your patients. She is clear in her stance, however, that as therapists we must hold our hypotheses lightly—we must check out our intuitions and never assume they are true because at times it is difficult to distinguish between grounded intuition and ungrounded countertransference. Her intention is for readers to use their curiosity as a place to move forward in their clinical work.

In terms of formatting, there are ten chapters ranging from cultivating inner space and making time, to finding your center, gaining perspective, and developing your



Glee! by Marks-Tarlow

clinical “sense abilities”.

Each chapter tethers the past (both key concepts from the parent book as well as information from preceding chapters in this book) to the present conversation as well as to upcoming concepts. It is a blend of fact, opinion, and experience. Marks-Tarlow adheres to her own advice—the book’s design is playful, humorous, and imaginative including creative original artwork, word placement on the page, use of font style and size, and white space. At times you are reading a textbook with a first person presence then you’re immersed in poetic ramblings as she teaches readers how to “listen for the music under the words” and “attend to the texture of the silence” in their clinical interactions (p. 170). As readers tune into what they feel, see, and know, as they experience being intuitively in sync with their patients such that all aspects of themselves are aligned so they become present to themselves in an actual moment in time, Marks-Tarlow hopes to “counter robotic, dehumanizing, and demoralizing trends by placing clinical intuition in its central guiding place” (p. 198).

Incorporating prenatal and perinatal psychology concepts (employing knowledge about infant growth and development) with the metaphorical use of life and experience, Marks-Tarlow locates “inspiration along with intuition as aspects of implicit processing with the human right brain” (177). If your left brain is too busy trying to analyze patients and fix them, “the right-brain capacity to step into the dyadic dance by keeping time with the underlying music of relational rhythms is inevitably blocked” (page 42). She uses the breath to tap into our source of vitality; every breath, she writes, represents a chance to reset the balance between effort and release. “From a perspective in which the breath captures the whole of our being, inhalation represents the capacity to find, see, and nourish ourselves as well as to take in new things. Exhalation represents the capacity to release, let go, and clear out what is toxic, unnecessary, or emotionally unhealthy” (p. 55).

Using these exercises during clinical sessions and taking time to observe yourself in relationship with your patients, readers will have the chance to notice the contrast between their right-brain sensory-based looking and their left-brain cognitive-based labeling where they actually

stop taking information in from their eyes. “When we operate intuitively,” Marks-Tarlow writes, “we flow in an unpremeditated, nonlinear fashion with whatever catches our attention” (p.88). Conscious decisions are left by the wayside and “an emergent process arises by which joint attention shifts and flows according to the intersubjective field of how two people intermix from moment to moment in mind, body, and brain. The closer we remain to our implicit primary sensory experience, as unfiltered by thought, analysis, or strategy the more responsively we align ourselves with intuitive facilities” (p.88).

According to Marks-Tarlow, the primary function of clinical intuition is to inform us of our true perceptions, feelings, and responses on a moment-to-moment basis, at the dynamic edges between self and other, between the inner and outer worlds. As therapists move beyond simply accessing present-centered

embodied perception and truly integrate, contain, and process it in a way that is thoroughly unique to who they are as their most authentic selves, they will experience a transition in their clinical work—in their sense of knowing and being with



Heart of the Rising Sun by Marks-Tarlow

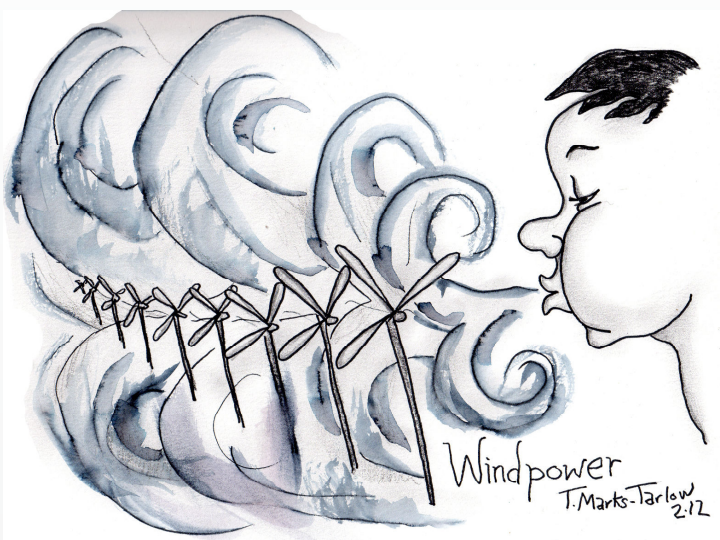
themselves and their patients.

A wise mentor in her own right (with over 30 years of experience), Marks-Tarlow leaves readers with an important message, one that resonated strongly with me: “Although inspired by the techniques and insights of others, we must simultaneously commit ourselves to discovering our own truths” (p. 170).

Now that the pressure of reading this book to write a formal review is over, I will revisit the exercises and spend more time being in the exercises and in the reflection. I get the gifts that were present in my box in that high alpine meadow, but I’m not so sure about that lingering feeling that something was missing.

References

- Marks-Tarlow, T. (2014). *Awakening clinical intuition: An experiential workbook for psychotherapists*. New York, NY: W. W. Norton & Company.
- Marks-Tarlow, T. (2012). *Clinical intuition in psychotherapy: The neurobiology of embodied response*. New York, NY: W. W. Norton & Company.



Original artwork by Marks-Tarlow