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**Mindfulness, Women, and Childhood Abuse — Turning Toward What’s Difficult**
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*Mindfulness is not a change-based therapy, but it can be deeply therapeutic and can engender the transformation of habituated patterns.*

We are never rid of our history, nor do we need to be. Whatever we’ve experienced in our lives can be useful in helping us navigate what’s to come. The challenge is to be willing to turn toward that which is difficult and learn how to relate rather than react to what’s presenting itself.

Mindfulness offers the possibility of relating differently to what’s already here by understanding that there’s nothing to get rid of and everything to accept.

Our unwanted and self-destructive habits often were formed as children to help us survive. Childhood abuse, whether physical, emotional, verbal, sexual, or the covert traumas of neglect, oppression, and isolation, demands that if the child is to survive, she must create coping skills to deal with the abuse and the inherent messages about who she is.

It’s a smart and resourceful child who figures out how to survive abuse. It’s a child who taught herself how to use her mind to cope with experiences, words, and pain over which she had no control. Her repeated lifesaving reactions to the abuse habituated neural pathways in the brain at that time but often aren’t life sustaining later in life. Now this strong, deeply entrenched mind must be met with a steady, kind, and nonjudgmental platform that will afford her the possibility of freedom from suffering.

Mindfulness is about relating differently to our unwanted thoughts, feelings, and physical sensations. To do that, we must find a way to turn toward what we fear so that we no longer need to dissociate, replace thoughts and feelings, or distract ourselves in order to function. By paying purposeful attention in a particular way, we can learn how to skillfully remain present to internal and external experiences and wisely determine how best to take care of ourselves.

One way this takes place in mindfulness-based work is in turning toward what we believe is so intolerable that if we don’t run, we won’t survive. When we come to know the taste, texture, temperature, shape, sound, and movement of difficult thoughts, emotions, and physical sensations in the body that we’ve been avoiding, they’re no longer lurking shadows constantly threatening to overwhelm us, causing us to be hypervigilant. They’re felt and known for what they are: conditioned thinking, reactive emotionality, and intense physical sensations, all of which are transient. Observed and held in awareness without judgment, we gain perspective, allowing them to come and go, each taking its right-sized place in the scope of who we are.

By simply slowing down to notice what’s here, we can begin to better self-regulate our emotions. Turning toward the difficult offers the possibility of freeing ourselves from the patterns we fear the most. Learning to stay is useful in that it gives us a foothold into understanding what fuels our disordered thinking and behaviors. In this approach, change evolves out of awareness, not because it’s the goal. We don’t have to change anything in order for change to occur.

**A Process Without a Goal**
Change isn’t the intention, focus, or goal of becoming mindful or mindfulness meditation. Not having change as a goal is one of the most difficult elements to embrace in mindfulness practice because it seems to be the antithesis of why women who have abuse histories enter therapy. In therapy, the survivors, and often the clinicians, are focused on eliminating or changing thought patterns or behaviors.

But mindfulness isn’t a change-based therapy. In fact, it isn’t even a therapy, although it can be deeply therapeutic. That isn’t to say that, in becoming mindful, nothing will change. Change is inherent within this practice and can engender the transformation of habituated patterns. Within this practice is the possibility of leaning into acceptance of what’s here right now and, in doing so, becoming aware that choice exists.

Through meditation and mindfulness practices that facilitate connection to the senses and the sensations created by the coming and going of the breath and entire physical body, an incremental shift of the survivor’s external locus of control to an internal sense of authority begins to develop. Rather than making the goal be to trust our own wisdom, we learn experientially through being mindful of breath and body how to develop an inner listening so that we know how best to take care of ourselves. This self-knowledge through being with rather than an overt effort to intentionally change contributes to growing a sense of self-trust and personal safety, which is, for a survivor, a radical way of being in the world.

**Simple but Not Easy**
Much of what makes this simple practice so challenging is staying with what arises. Our minds have been trained to jump off or cling to passing thoughts—thousands of them—all day long. We get caught up in an old storyline or new fantasy, and we’re gone for minutes, hours, or days, lost in swirling thought tornadoes that exhaust, anger, convince, and confuse us. But trying to push away or pass an unpleasant thought or feeling takes us away from the experience that can free us.

Often survivors don’t even know what they’re running from because it’s been suppressed, buried for decades under the tremendous struggle to be someone other than who they are—someone without imperfections, someone perfect. If we focus on stopping behaviors such as cutting, bingeing, purging, or replacing unwanted thought patterns, then we’re only addressing the symptoms. Certainly, suicidality and active self-injury must be addressed first for the client’s safety before engaging in meditation, and even then mindfulness practices aren’t for every client.

The moment we try to change—whether it’s a difficult thought, emotion, physical sensation, or behavior—our effort goes into pushing away from or against the unwanted thought, feeling, or sensation, and the struggle becomes a matter of willpower. When we believe a behavior or thought is bad and that it has no worth, our energy goes into getting rid of the behavior. Most survivors have spent their lives doing just that. Thich Nhat Hanh, a renowned Zen master and author, says it this way: “There are real, painful feelings, strong emotions, and troubling perceptions that agitate or make us afraid. With the energy of mindfulness, we can spend time with these difficult feelings without running away. ... This is what we can do with all our emotions, feelings, and perceptions.”

Through the lens of mindfulness, we see our perceptions and behavior as ways in which we try to take care of ourselves, and we create the space to become curious about it rather than critical. We become open to meeting the experience without judgment rather than closing down against it, and that allows for the possibility of choice to arise. In mindfulness, everything is useful, and there’s nothing that needs to be eliminated, so all energies can be used to move toward what we want.

**‘Fear Is Here’**
The challenges of working with women who have experienced abuse can be many and often are as overwhelming for the clinician as they are for the client. Fear in all the forms it takes—resistance, anger, sadness, anxiety, shame, avoidance, lack of boundaries, extremes—stems from a powerful mind on programmed autopilot. For a survivor, acknowledging that “fear is here” is being mindful of the present moment’s experience. This can help shift the tendency to move away from discomfort by thinking about rather than experiencing what’s arising in body and mind.

Most survivors carry an overwhelming belief that there’s something wrong with them, that they’re worthless, undesirable, and undeserving of love. While reflecting on years of sexual abuse by her father, a client said, “I should have done something to stop it.” The impossibility of a 5-year-old stopping an adult male didn’t even register with her, only that she was bad because she should have done something to stop him. That’s not realistic or useful, but shoulds are part of the makeup of these women who are driven by extremes.

When we appreciate how powerfully conditioned a survivor’s mind is, we can better understand how her resistance to giving up certain beliefs and behaviors isn’t stubbornness or self-destruction but is grounded in the fear of being seen, exposed, and feeling out of control. Without these conditioned mind patterns, she knows no other way of coping with thoughts and cellular memories, flashbacks, and perceived threats. Mindfulness doesn’t demand that she get rid of coping skills but instead honors them and lays a path to experiencing the fear through engaging the body and decentering, not detaching, from the thoughts.

Survivors have tremendous courage, determination, and resilience. They’re quick to recognize and relate to how meditation and mindful living will challenge and benefit everything they believe in and live by. Mindfulness takes courage to practice and builds the courage to live.

It’s impossible to alter our relationship to something unless we know where we are right now. And we can’t know that until we can stay put long enough to breathe our way through what scares us: our reactive behaviors, frighteningly intense feelings, and relentlessly critical thoughts. A survivor of childhood sexual abuse once told me, “I would rather suffer the merciless critic in my head beating me up for bingeing than feel the feelings that drive the binge.”

We need to be able to stay with what terrifies us so that we can experience the transient nature of those feelings and learn that we can survive our worst fears. Then we will understand that the very thing we’ve been running from is causing us to run.

**Resistance**
When clinicians encounter resistance in survivors, they often become frustrated, discouraged, and judgmental. Looking at the clients’ behavior from a mindfulness point of view, clinicians can see it as another way in which clients are trying to take care of themselves, no matter how destructive the behavior may seem.

A client who was a survivor of incest resisted giving up her goal to stop purging. She hated herself for this “bad and disgusting” behavior, and she was “weak.” She believed that once she stopped the purging, her bingeing would stop. If she didn’t stop it, she lacked willpower.

But as Elissa Epel, PhD, a psychologist and researcher, pointed out in her TEDX talk “The Illusion of Control: Human Behavior and Donuts,” willpower is finite energy. Purging and bingeing are only symptoms, and when the client couldn’t stop either, her only success was in fueling her endless cycle of failure. If her focus was on changing the purging behavior, then her thinking and energy were attached to the behavior she didn’t want. Since she couldn’t go in two directions at the same time, she couldn’t move toward what she really wanted: freedom from this cycle of suffering.

**Boundaries**
A major difficulty for survivors that permeates every aspect of their lives is the inability to establish and hold boundaries. Lack of boundaries comes from the survivor’s belief system that she’s too much—too loud, too stupid, too fat, too thin—or not smart, pretty, clever, funny, thin, or good enough. If you think you’re either too much or not enough, then you don’t believe you have a right to say no/stop or yes/more because you aren’t deserving. If you can’t say either, you can’t set a boundary, and you’re frozen in uncertainty, the place you wish to avoid at all costs.

In a mindful approach, the survivor learns to set limits by determining what amount of anything—time, intimacy, argument, food—is right for her. No energy is put into how she’ll maneuver someone else to get those nor is any energy put into pushing away who or what she doesn’t want. The focus is on figuring out what’s enough for her and knowing that she has a right to those boundaries. “This is enough for me. This is all I’m willing to give.” Small steps lay down a path she can recognize.

**Extremes**
Many female survivors do what I call “living at the extremes” because it’s how they learned to see their world. That world sounds like should or shouldn’t, black or white, good or bad, now or never, perfect or failure, right or wrong, and all or nothing. That’s why strict exercise regimens, severely restrictive diets, and perfectionism are so attractive and repeatedly attempted. That’s why survivors believe an outside authority and not their own inner wisdom.

Disconnection from a body that you perceive has betrayed you and/or that you dislike makes it difficult to access physical sensations related to thoughts and emotions, hunger and fullness, pain and pleasure. It means you can’t use the wisdom of your own body and must rely on only your head and on thinking that was conditioned decades ago. There never has been a middle ground for these women, yet mindfulness is all about finding a resting place between extremes. By slowing down to feel your feet on the floor or the physical contact the body is making with the chair or attending to the breath, this moment of self-calming interrupts automatic thinking, relaxes tense muscles, and creates a small space in which to notice what’s here internally and externally, giving room for choices to be made known.

**A Radical Stance**
Through the skills of mindfulness, survivors learn to take a different stance in relation to their thoughts, emotions, physical sensations, and behaviors. Staying present without judgment to what’s here right now is important in reducing drama in survivors’ lives. Most drama resides in the mind as they dwell in the past or race into the future—neither of which exists except in their thinking.

Ultimately, mindfulness practices conserve energy, time, and wear and tear on the body and soul. The practice of becoming mindful is practical, but it’s not a quick fix. In a culture where an answer to your every desire—whether it’s food, music, a new outfit, information, or entertainment, the next high—is just a tap or click away, mindfulness offers a steady, compassionate path to freedom. The idea of engaging in a process in which change isn’t the goal is radical, yet both client and clinician can benefit by embracing a mindfulness-based stance.

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