Mindfulness in Sexual and Relationship Therapy

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Reflections: Towards a mindful sexual and relationship therapy

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Let’s imagine that I am holding an object made of gold. It is so precious and it is mine – I feel I must hold onto it. I grasp it, curling my fingers so as not to drop it, so that nobody can take it away from me. What happens after a while? Not only do my hand and arm get cramp but I cannot use my hand for anything else. When you grip something, you create tension and limit yourself.

Dropping the golden object is not the solution. Non-attachment means learning to relax to uncurl the fingers and gently open the hand. When my hand is wide open and there is no tension, the precious object can rest lightly on my palm. I can still value the object and take care of it; I can put it down and pick it up; I can use my hand for doing something else. (M Batchelor, 2001, p. 96)

This quote from Buddhist writer Martine Batchelor captures what is fundamental to mindfulness for me. In Buddhist philosophy the point of practising the kind of mindful attention and being-present which has been described throughout this Special Issue is to recognise how suffering operates (Barker, 2010a): Suffering emerges from our habitual tendency to try to grab hold of everything that we want, and to attempt to avoid or eradicate everything that we don't want.

This attachment/avoidance pattern is what Batchelor describes in the wonderful metaphor that she gives of the golden object. When I am meditating, or slow-walking, or mindfully washing up, or attempting to be present to a conversation, or taking time-out following a conflict, what I am trying to do is to notice what I am grasping onto, and what I am tempted to hurl away. Becoming more aware of this pattern of interacting with the world helps me towards a way of being where I can hold things more gently and lightly, so that I can really see them. The metaphor works well for feelings, for thoughts, for the stories that we tell about ourselves and others, for relationships, for memories, for our goals in life, for how we relate to our body, and for many other things.

My own engagement with mindfulness has highlighted - for me - the ways in which these patterns of grasping and hurling away are inextricably linked to the social messages that we receive from the world around us, and the ways in which these operate through us in our thoughts, our feelings and how our bodies respond. Through mindfulness we aim to cultivate a slowing down and curious noticing which we bring to our whole lives, not just to moments of meditation. So we might notice a tensing and desire to look away after catching a glimpse of ourselves in the mirror, and recognise the template of 'attractive person' that we are using as an unhelpful point of comparison. Or we may catch a self-critical thought bubbling up in our minds after a conversation, and the associated feeling of shame and flood of painful memories. Through mindful reflection we realise how this moment is embedded within the excessive self-scrutiny that we're encouraged into by wider commercial culture which insists that we are lacking and require perfecting, rather than allowing us to accept the inevitability of our imperfection and vulnerability (Barker, 2013a).

For me mindfulness is vitally biopsychosocial (Barker, 2013b), and it is this mindful awareness of how the social operates through the psychological-and-biological experience which is often most powerful and useful. Mindfulness opens up the possibility of cultivating a different way of doing things in ourselves, and – crucially – it opens up potential for us to put such alternatives back into the world around us. I often use the term 'social mindfulness' for this perspective because recent psychological and therapeutic versions of mindfulness seem to de-emphasise the social, and I believe that we need to do the opposite (see Stanley, Edwards & Barker, in press).

A Social Mindfulness of Sex and Relationships

During my COSRT training days on Mindful Sexual and Relationship Therapy (MSRT) I invite participants to write detailed memories of two erotic, sensual or sexual experiences. They pick the same kind of experience (masturbation, having a fantasy, sex with a partner, or receiving a massage, for example) and write an in-depth description of one time which was fulfilling and one
which really wasn't. We then consider the differences between the two.

Generally it is striking that the fulfilling experience is more mindful. Words associated with it often include things like being: present, relaxed, in the flow, aware, at one with my body, attentive, connected with another person, and so on. The reason for this mindful experience of sex being fulfilling seems to be that it does not keep getting snagged up and caught on the jagged edges and sharp points of social expectations, assumptions and demands, in the way that less fulfilling experiences do. When we slow down and notice what is happening during less fulfilling sexual or sensual experiences we generally find that we are treating our body as a separate object, rather than recognising ourselves as embodied (see Bazzano, this volume). For example, we evaluate how our body looks in this position, try to stop it making certain noises, or insist that it responds in a certain way. We get fixed upon the goal of a certain sex act, or orgasm, or response from a partner. And, if we reflect upon it, we can see that all of these things come from a cultural perception of what 'good', 'normal' sex should look like: whether this is the one we see in mainstream media, or some alternative from our own particular religious, sub/cultural or sexual community.

So, in sex, we often operate in the kind of grasping/hurling away pattern that Batchelor describes in her metaphor. We grasp hold of the kinds of sex, bodies, exchanges, sensations and feelings that we've learnt that we should be seeking, and hurl away those that we've been told we shouldn't. As sex therapists we frequently see the problems with this way of being sexual. Desperate desires to become erect at the right time and for long enough often result in problems getting and keeping erections. Deep unhappiness with bodies that don't fit the perceived ideal leave people desiring to make surgical changes, or engaging in painful sex because they find it impossible to relax. Pressure to orgasm makes orgasm a very difficult thing to achieve. Huge stigma around certain kinds of sex prevent many people from tuning into their desires and finding out what they enjoy sexually. And excessive emphasis on sex culturally means that it can become compulsive and obsessive for some (see Loy, this volume).

A similar pattern of grasping and hurling away is common in romantic relationships and present in most of the clients we meet who are experiencing relationship conflict, break-up, or difficulty meeting partners. Pressure to find the one 'right' person who will provide us with a happily-ever-after leaves people grasping after perfection and rejecting anybody who doesn't quite make the grade (Barker, 2013a). Also we insist that such relationships constantly validate us: that they reflect back all the ways in which we want to be seen, and none of the ways in which we don't want to be seen. As Welwood (1996) points out, this kind of grasping/hurling away of a partner's view of us is the root of much relationship distress, and can be addressed by opening to our vulnerability and coming to see ourselves, and our partners, in full human beings rather than through the limited lens of objectification (what we want them to be for us, and what we think they want us to be for them, see Barker, 2010b).

Mindful Sexual and Relationship Therapy (MSRT)

My concern is that, as with so many of the other popular forms of mindful therapies, the versions of MSRT which have emerged so far do not engage as fully as they might with this attachment/avoidance social world in which people are embedded, which is such an integral part of their suffering. For example, the mindful therapies which have been put forward for depression may do an excellent job of helping people to focus on the present moment rather than being overwhelmed by memories of the past or fears for the future. And the mindfulness techniques that people are taught might be a great way of helping them not to latch onto negative thoughts and proliferate them when they are depressed (Barker, 2010a). However, there seems to be to be something lacking if there is no consideration of the wider self-monitoring culture in which we are embedded, which is massive part of the experience of depression for most sufferers (Barker, 2011a).

At its worst, mindfulness which neglects such social elements risks exacerbating the common perception that struggles like depression, or sexual or relationship problems, are internally caused
by flaws or faults in the individual person. A fully biopsychosocial understanding could alleviate such fears and appropriately aim at changing not just the individual experience but the problematic aspects of the social world around them, which are implicated in their suffering (Barker, Vossler & Langdridge, 2010).

We need to be careful not to simply tag mindful practices or techniques on to existing forms of SRT, but rather to allow the important challenges that mindfulness raises (about the cultural tendency towards grasping and hurling away, or the problematic splits we make between mind and body, for example) to resonate throughout our work and our understandings. My fear is that we could end up with a version of mindful sexual therapy which, for example, attempted to get people to have sex which they found painful and distressing through techniques which enabled them to 'be with' the experience of pain and distress during sex, rather than attending to what the pain and distress might be telling them about their (social) assumptions about the kinds of sex that they 'should' be having (Barker, 2011b). An MSRT that fully embraces current psychiatric notions of sexual dysfunctions and paraphilias certainly risks perpetuating problematic notions of the kinds of sex that should be grasped and hurled away (see Barker, 2011c).

Similarly, I would be concerned by a mindful relationship therapy which bought into common cultural ideas, for example, that people require a romantic relationship in order to be healthy, that romantic relationships must be sexual, that they are more valuable that friendships, that they must be monogamous, or that 'success' equates to longevity of relationship. It seems important that we allow our mindful engagement with relationships also to question the patterns of grasping and hurling away that people are encouraged into in romantic relationships, which may be implicated in people staying in deeply unhappy relationships, and in them leaving relationships too quickly at any sign of trouble, as well as in many of the conflicts and sexual problems that they experience (Barker, 2011d).

If we are aiming at a more mindful form of SRT then I think it behoves us to be reflexive about our own (social) assumptions about both sex and relationships (Richards & Barker, 2013). If we just focus on internal aspects of individuals and attempt to alter these with mindfulness techniques towards what is assumed to be 'good' 'functional' or 'healthy' sex and relationships then there is a danger that we will never address the toxic cultures within which sexual and relationship problems occur. I wonder how likely lasting change will be if we don't engage with huge part of the problem: the current social context of sex and relationships (see Loy, this volume).

I hope that the ideas, theories and practices covered in this Special Issue will be of help to readers in seeing the value of mindfulness and in integrating it into their own therapy. In this final reflection I hope that I have also left you with a sense of what the Buddhist philosophy in which mindfulness initially developed might further have to offer if we are prepared to engage with it. It is worth remembering that Buddhism emerged as a form of social activism in response to the rigid caste systems of the world in which the historical Buddha found himself, as well as in response to the culture of attachment and avoidance which was prevalent back then as it is now, in a different form (Barker 2013b). Buddhist mindfulness invites us into a fuller, more biopsychosocial, engagement with our patterns of relating to ourselves, our bodies, others, and the world around us. It offers the potential for a way of being which is not only more present, less judgemental and more attentive (as the western definition of mindfulness has it) but which is also more compassionate, more ethical, and more critically engaged: where we can see the value in 'swimming against the stream' of popular thought (S Batchelor, 2010, p.125) and of finding different ways of relating as therapists, as people in relationships, and as embodied beings (Barker, in press).

Lori, Alex and I very much hope that many of you will join us in continuing the conversations opened up by this Special Issue at the COSRT conference on Mindful Sexual and Relationship Therapy which is happening on November 2nd 2013 in London. We will bring together some of the contributors from this Special Issue with others who have written on forms of mindful therapy which might be particularly useful in our work. Please see the COSRT website (www.cosrt.org.uk) for details of the conference and how to register.
References

Biography
Meg Barker is a senior lecturer in psychology at the Open University and a UKCP accredited therapist who integrates existential and mindful approaches. Meg works closely with COSRT, organising their conferences and providing CPD, and Meg’s research and writing is also in the area of sexuality and relationships, including the recent self-help relationships book Rewriting the Rules! (www.rewriting-the-rules.com). Meg has recently completed a book on mindfulness for therapists which will be out later this year, and which includes chapters on both sex and relationships. Their blog on mindfulness can be found at www.socialmindfulness.wordpress.com).