

Mindfulness: Self-awareness vs. Self-criticism

written by Guest Author | July 22, 2016

The beginning of a new year traditionally is a time of fresh starts and planned improvements in one's life. While we psychotherapists know sell the fragility of good intentions, nevertheless these heartfelt hopes are at the start of any initiative for change. For us, change has a dual focus: how we improve clinically, and how we develop "the person of the therapist." Articles on "the person (or the self) of the therapist" have existed in the professional literature for years. They stress the individuality of each therapist, and that our development is a never-ending dynamic process.

The "self" needs to be self-conscious, aware of its own workings. We know that self-awareness is a necessary part of a therapist's skill set. But by itself, self-awareness is not sufficient to make us into better therapists. "Mindfulness" is also required. Mindfulness combines self-awareness with how we use it, for ill or good, for growth or condemnation. The term is much in the media these days, but the concept has been around for a long time. "Mindfulness" is our English word for a basic recommendation found in ancient Buddhism. It has also been the title of numerous recent books, for example the 1989 book by Harvard psychologist Ellen J. Langer. It is also an emphasis in several newer therapies, such as DBT, ACT, IFS, and others.

Mindfulness begins with a question: "All right, what's happening in this brain box of mine? When I unpack it, what do I find?" An answer to the question might be: "I find the most amazing stuff, which I never suspected was there when I was 21 and didn't really know myself very well. And when I become mindful, I am aware of all sorts of raw feelings, and fantasies and impulses, that serve to remind me of my common humanity. In addition, my mindfulness invites me to *accept without condemnation* all those inner reactions. They may *feel* good or bad to me, but they are simply artifacts of my existence as a human being."

Mindfulness also promotes a focus on the present moment. Therapists for years have encouraged "living in the here and now," a phrase that emerged from Gestalt psychology. Instead of dwelling on guilts about the past or anxieties about the future, one learns to concentrate on the immediate moment. So often, people do not pay attention to what they are experiencing and doing right now. Their minds are jumping ahead or revisiting the past, instead of being aware of and paying attention to what they are actually feeling, thinking, and doing in the present. People admit this when they say, "My mind wandered," or "I wasn't thinking about what I was doing." At the same time, we are also trained to consider a client/patient's past experiences and future dreams or anxieties as other important factors in treatment. So we can encourage mindfulness to help a patient/client from *dwelling excessively* on past bad experiences or fears of a bad future.

This focus on immediacy prompts its own questions to the self of the therapist: "What am I thinking or feeling *right now*? What fantasies or images are popping up into my consciousness *right now*? What

was my mind doing just now, right before I paused to ask myself these questions? What scenario was I rehearsing, what memory was I replaying, what pleasure or trouble was I anticipating, what conclusions was I repeating to myself? Or was I somehow distracting myself, going vague or changing the subject, to avoid facing something unpleasant? What are the predictable patterns of my mind at work? Can I study the workings of my mind and not end up discouraged, overwhelmed, or craving some quick fix?"

As clinicians, we swing between being in the moment, and considering the claims of past and future, in all our sessions. We also learn to pause and take seriously those moments of fleeting *uneasiness* that flicker on the edges of our consciousness. A problem may arise only when we become aware of inner thoughts or feelings that are unwelcome or upsetting to our sense of self, and then our private distress can interfere with our professional concentration on being present with our client/patient. This is when the mindfulness of the therapist can neutralize the seeming "badness" of any inner events, and free us simply to observe them without judgment, and activate our inner scientist to analyze them as sources of useful data about ourselves and those we work with.

Mindfulness is an important utensil in the therapist's professional tool kit, but it is not always easy to do. As trained therapists, we are not supposed to be judgmental or moralistic about anything we hear in a session, or about the person who's telling us. (We do consider the consequences of behavior, however.) Yet when it comes to monitoring our own honest private reactions to patients/clients who may be difficult or pathetic or sexy or threatening, our own self-evaluations may become a problem for us. We may become aware that we *feel like* scolding, or showing direct affection, or becoming teacherly, or getting rid of a particular patient/client. We may also become aware of *feeling* sexually attracted to, or disgusted by, or helpless concerning, or furious toward, the person we're working with. If our mind slides too easily into a self-critical mode, making punitive remarks to ourselves, our consciousness becomes split between doing therapy and tending to our own distress.

The good news is that mindfulness does not pass judgments. It is not the same as our conscience ("super-ego" for psychodynamic therapists). Our self-awareness is our inner scientist, observing and ever-curious about new emerging data. "Oh, now I'm feeling warmly and sexually attracted to this particular patient/client. That's so interesting. I wonder what it means. Am I sexually frustrated in my personal life? [This would be a *subjective* counter-transference reaction.] Or is this person exuding a strong sexuality toward me, which would suggest something else (neediness-?) about his/her personality? [This would be an *objective* counter-transference, induced by the client/patient.] I am pleased to know that my emotional reactions are good clues to certain realities, within me or my patient/client, that deserve my attention." Mindfulness is the cultivation of this inner curiosity-without-condemnation.

On a mindfulness continuum, most therapists operate somewhere between the extremes of a punitive self-criticism and a denial of any faults or weaknesses or blind spots. For most therapists, there is a fluctuation of self-awareness that sometimes is praising and other times is self-correcting. We are trained to see our own reactions as "grist for the mill" therapeutically, and not to be surprised or self-condemning if we experience feelings of sexual arousal, anger, disgust, envy, anxiety, or affection in

relation to those we work with. Yet we may still be uncomfortable with experiencing such feelings, even though our professional training and ethics prevent us from ever acting out such feelings (and their fantasies). “I know it’s OK to feel this way, but I wish I didn’t,” or sometimes “If I react this way, does it mean that I’m not a good therapist?” This is where our “observing ego” (a term from psychoanalysis), being self-aware without moral judgment, can help us.

Written by guest author, David C. Balderston, Ed.D., LMFT