

# **Mental Health**

**MJ Barker**

# Introduction

Welcome to my free book on mental health. These free books are collections of the pieces and essays that I've written on various subjects over the years for those who would rather print them off as a hard copy book, or read them - collected together - on an e-reader. I aim to update these books with any new writing on each topic every new year, so feel free to come back then for the updated versions.

*Note that some of these pieces were written over a decade ago now, and before many of the most profound shifts that the world - and I - have recently been through. I hope that it is of interest to see how my ideas have evolved over this period. But please do be mindful of the context in which they were written as they may not always represent either my own, or culturally current, thinking/practice on these topics.*

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# Mental Health In General

## Mental Health: My Thoughts

October 2020

I was stoked recently to be [interviewed](#) for the [So Many Wings](#) podcast, which is one of my favourite podcasts – about transformative mental health and social justice, hosted by mental health activists and creators [Sascha DuBrul](#) and [Jacks McNamara](#).

In the podcast we covered topics like:

- What it means to write an “anti self-help book”
- Plurality and trauma
- The intersections of psychology, gender non-conformity, and relationship structures outside the mainstream
- The crucial and complicated nature of consent
- Navigating the contradictions of academia and DIY media production

You can listen to the podcast [here](#), and I’ve included the questions and answers I prepared in advance here as it contains a pretty good update on where I’m at and what I’m working on these days...

### **How would you like to introduce yourself, your ancestors, and your connection to place?**

So many possible answers to this, and I note an initial grief response. It’s not easy for a white British person to feel great about their ancestry or connection to place with Brexit looming and attention on the ongoing horrific impact of colonisation and white supremacy. More personally I’m very connected to the legacy of intergenerational trauma at the moment in relation to mental health, so biological ancestors feel complex.

After sitting with it though I realise I do connect with ancestors in other ways, maybe like Armstead Maupin distinguishes between logical vs. biological family. Logical ancestors could be the queers, freaks and weirdos in the past who trod similar ground to me: the [‘creatively maladjusted misfits and changemakers’](#) as you so nicely put it on the website.

Also I’ve practised a version of Buddhism for the last 20 years, particularly following the teachings of Pema Chodron, and I’m aware she calls her lineage something like the messed up (mishap) lineage because so many of the great teachers had terrible pasts and struggled immensely. There’s also a lot of what’s called ‘crazy wisdom’ in that lineage, and I like that connection to celebrating madness.

I do feel very connected to place as in nature – as followers of my Instagram will be aware. Moving recently to a place where the land meets the sea, and there are hills to walk in and nearby forests, means a lot to me.

How would I like to introduce myself – it's an interesting one given I'm [plural](#) – something I know you covered on a recent podcast with [Dick Schwartz](#). I'm a system of seven people and we collaborate to write books, podcast, serve our communities, and train others around mental health and collective care, as well as on gender, sex, and relationship diversity.

**While we feel like the language of “mental health” is totally inadequate and misses so much of how people experience emotional distress in the world, we are using the term on this podcast so people can find us and have a sense of what movements we may be coming from. Can you speak a little to your own journeys with “mental health” and moving beyond that construct?**

Absolutely, in a way it's perhaps a reverse journey to the one many take. I trained in psychology and was lucky enough to be exposed to critical psychology understandings very early on. I then trained as an existential therapist which has big overlaps with the anti-psychiatry movement. My Buddhist approach would also be highly critical of dividing people into binaries of mad/sane, normal/abnormal, etc. I have colleagues who are very involved with [mad pride and mad studies](#). So from the start my own writing was always very informed by these perspectives: questioning of conventional diagnosis and treatment of mental health struggles, and locating struggles in oppressive systems and structures – and wider cultural messages – rather than in individuals.

However, in some ways I think I did focus 'out there' to some extent to avoid looking closer to home – particularly at the ways early child development shapes our suffering – because this felt like risky territory, and because so many of the approaches which take this view have such a poor history of individualising struggles and pathologising queer people.

I'm now finding the work of people like [David Treleaven](#) (who you also had on the show), [Staci Haines](#), my co-author [Alex Iantaffi](#), and others super helpful for bringing together social justice perspectives with the neurobiology of intergenerational, historical, and developmental trauma. Alex would definitely be another great person for the show as they do the [Gender Stories](#) podcast and are just publishing a book on [gender as a form of trauma](#).

Personally there were severe mental health struggles present for grandparents on both sides of my family. Both were highly impacted by the second world war I suspect. The stigma around such difficulties, and attempts to eradicate 'negative emotions' in an attempt to avoid them, play a big role in my own mental health struggles. The labels I could apply – with caution of course – to myself would be [developmental trauma](#), [DID](#), and something like CFS (recognising the lack of clear separation between physical and mental health).

I'm also thinking a lot right now about moving towards what is often seen as 'mad' as being vital for transformation. For me the most helpful things have been moving towards [experiencing all](#)

my feelings – especially the ones we’re most taught to hide or eradicate in our culture like shame; to embrace the experience myself as multiple people and hear all their voices; to talk to myself (the classic ‘first sign of madness’); and to go towards the most tormented and traumatised parts of myself with deep kindness.

### **What does it mean to you to write an “anti self-help book?”**

I’ve said a bit about locating people’s struggles in wider systems and structures, and cultural messages, already. The first anti-self-help book I wrote was Rewriting the Rules which focuses on relationships. So it locates the struggles we experience in relationships largely in the cultural myths around love: that the best basis of a relationship is the experience falling in love, that romantic love is the most important kind of relationship, that we can expect to live happily ever after and have great sex till the end of time with our partner, that kind of thing!

Again drawing together trauma-informed and social justice perspectives – on the podcast I do with Justin Hancock – the Meg-John and Justin podcast – we now consider the ways in which neoliberal capitalism shapes our understandings and experiences of relationships, and how families pass such understandings and experiences on – as a kind of intergenerational trauma. So we learn ways of relating which hurt us and others. For example, yearning to get all our needs met in a romantic love relationship, struggling to have boundaries and to express our needs, being out of touch with our emotions and feelings, feeling that we have to hide parts of ourselves if we are to be loved, etc.

With Justin and Alex we’ve taken a similar approach to sex and to gender as well. Alex and I do a series How to Understand Your... (gender/sexuality/relationships) And I also do this graphic guide series with Jules Scheele – comic introductions to queer, gender, sexuality, and hopefully mental health and love in future – which take a similar approach.

### **How did you get into working at the intersection of psychology, gender non-conformity, and relationship structures outside the mainstream?**

Again perhaps an unusual origin story for a mad queer person, but it started with trying very hard to conform to the norm. At university all I wanted was to find The One and settle down with him, be the woman behind the great man, be good for the other people in my life, become a therapist to help others, basically conform to heteronormativity and femininity. I only did a PhD because my partner was doing one and I didn’t know what else to do!

Over the course of my 20s I began to question what the norms of relationships, sex, and gender did to me. I increasingly felt how they impacted my mental health and definitely did not lead me to having good relationships, good sex, or a happy relationship with myself.

In my late 20s, after discovering feminism and social constructionism, I discovered the overlapping bi, polyamorous, and kink communities. Through those I explored different ways of doing sex and relationships, and later on gender. In also questioning some aspects of those

ways of doing things I've got to where I am now – a plural, queer, trans, largely-solosexual relationship anarchist! And very much still a work in progress.

**Can you tell us about how you navigate the relationship between your work in academia and your production of DIY media like zines and your participation in queer and other subcultures?**

I'm a recovering academic! I [left academia](#) last year because I was finally able to earn enough money from writing and related work and wanted to focus on creating more DIY type content for a general audience, and serving my communities in other ways.

There was certainly always a tension within academia between the way things were done there and who I was and the work I wanted to do, so it is a relief to now be self-employed. It is perhaps impossible not to internalise the toxic aspects of what is a neoliberal capitalist institution where you have to produce a great deal, hide vulnerability, and compete.

That said, academia gave me access to many of the ideas that influence my work – which I am passionate about making more accessible to all – and supported me to train as a therapist, and to focus on public engagement. I have huge gratitude for the feminist and queer psychologists who supported me on that journey in particular.

**Can you tell us more about your work around biphobia, bisexual invisibility, and mental health?**

Sure. Part of my work with the bi community was co-founding an [organisation focused on bi research](#), and together we wrote [The Bisexuality Report](#). One of the key findings of that was that bi people have worse mental health than both straight and gay people. This seems to be the result of biphobia and bi invisibility. Because of binary cultural understandings of sexuality, bi people are often assumed to be lying, going through a phase, confused, greedy, manipulative, etc. That stigma, and the fact their bi-ness is not believed so they often have to come out repeatedly or remain closeted, takes a toll. Also they are often rejected by both straight and queer communities, which can be extremely isolating.

Of course similar things are true for non-binary people who question the binary of man/woman, and sometimes also of cis/trans. This is what led Alex and I to write the book [Life Isn't Binary](#): exploring how our culture tends to binarise everything, and what we can learn from non-binary people of all kinds. We also tackle the mad/sane, rational/emotional, and positive/negative emotions binaries in there, for example.



**The consent checklist: What conditions are necessary to have consent? In what kinds of situations is consent crucial and complicated? How did you get into doing work around consent?**

The consent work I do is certainly motivated by being a survivor, and one who – like many – suffered both from the sexual assaults themselves, and from the cultural gaslighting around them which made it so hard – for years – to recognise them as such, and to get out from under the fog of minimising, denial, shame, and victim blame.

It also feels vital to me to link consent to all the other work I do. Most of the trauma people experience takes the form of non-consent, from physical, sexual, or emotional abuse at home and/or school, to forms of oppression where you learn that your body, life and labour is not valued as much as others.

Consent often focuses on sex, but many of our relationships, workplaces, and other institutions are deeply steeped in non-consent. So I'm all about trying to make everything more consensual, and recognising how incredibly hard that is.

I think of consent as ensuring that everyone involved in a relationship or interaction is free-enough and safe-enough to express their needs and desires, their limits and boundaries, knowing that they will be respected. This needs to be an ongoing, relational process, with awareness of the power imbalances and social scripts which make consent very hard – if not impossible.

It's also about learning about how to be accountable, and to employ models of transformative justice, when consent violations occur, something I'm still learning a lot about.

**We're both IFS geeks and recently interviewed Dick Schwartz, the founder of IFS – based on your recent writings, it seems like you have a relationship to parts work. Can you tell us more about that?**

You could say that! In the last 5 years I experienced myself increasingly vividly as 6 – then 7 – parts or selves. What began as an exploration into my gender and erotic fantasies, ended up as a much more clear sense of plurality, and now most of my work is informed by this, including writing many of my blog posts as dialogues between different parts. My lived experience during lockdown has not been of living alone, but of living in a family of 7 who have been getting to know each other much better!

I only came across IFS recently. Initially I was informed more by my dear friend Trevor Butt's work in personal construct psychology, and then John Rowan and Mick Cooper in the UK, and Hal and Sidra Stone in the US, all of whom present versions of parts work as a useful therapeutic approach for everyone.

I'm fascinated that while one branch of psychology and psychiatry was dismissing 'MPD' as made-up between clients and therapists, and invested in making people singular again, another bunch of therapeutic approaches were suggesting that everyone could benefit from getting in touch with their inner children, inner critics, etc. as separate parts of themselves.

Lately [plural communities](#) have challenged the pathologisation involved in DID and embraced being plural systems, with many diverse experiences and understandings under that umbrella.

### **Can you tell us more about your investigations into plurality and trauma?**

I'm aware there are plural folks and systems who find the link with trauma very helpful, and those who view it as another way of pathologising plurality and regarding it as 'lesser' than being singlet.

I find it helpful, but just as I'd say it is equally important for trans and cis people to examine their relationship to gender, I would suggest that it is helpful for systems and singlets to explore their relationship to trauma. In such a non-consensual culture do any of us escape trauma? Might it be that trauma is part of what leads some of us to fragment into plurality *and* some of us to cling on to a sense of being a singular self, when actually we are all complex and containing multitudes?

The book that brought it all together best for us is [Janina Fisher's \*Healing the Fragmented Selves of Trauma Survivors\*](#), which we have recently written over 15,000 words of blog post about! Fisher locates our various parts in trauma survival strategies, which certainly maps onto our inner experience. We have parts connected to [fight, flight, freeze, fawn, attach](#).

Like many authors on developmental trauma and shame Fisher suggests [cultivating parts](#) who can take a more parental role, holding and hearing the traumatised parts, and bringing our systems to a point of earned secure attachments, and expanding our window of tolerance for difficult feelings, which has been a huge part of our work.

### **What current projects are you excited about?**

A friend recently said that their vision of me during lockdown was that – as a prolific writer – I'd be holed away working on my masterpiece. After a moment of shame I realised they were quite right. For the first time in my life I'm not working on a writing project, but the project of inner work, deep trauma healing, spiritual practice, transformation, or whatever you want to call it.

It feels both personal and political to me though, because it is also intrinsically about how I can relate with others in more ethical, consensual ways, and about how I can engage with my work – and the wider world – the same. There's a lot in plurality, I think, that echoes calls from intersectional feminists to look deeply at our own potentials to be both victims/survivors and oppressors/abusers, before we engage with others.

In terms of creative projects, Alex and I have our [workbook on self/collective care](#) coming out soon, and Jules and I our [graphic guide to sexuality](#) – both very exciting.

Alex and I are writing again together in October. Justin and I continue to create together. And Jules and I are collaborating with some others for a graphic guide on trans voice, and hopefully a further graphic guide on mental health in 2021/22. I think you'll enjoy the fact that the creative theme we have for this one is superheroes and superpowers.

# Mental health care

May 2017

I was recently interviewed by [Bridget Minamore](#) for a piece in [The Debrief](#) on [young men and mental health](#).

You can read the full article [here](#), and here are my answers to Bridget's questions about mental healthcare and people being open about their struggles.

## **What are some of the biggest barriers to people accessing good mental health care?**

One major barrier is financial. While there is some good mental health care provided on the NHS, and by voluntary agencies, if you have less money or no money then it is much more difficult to ensure that you see a practitioner who is a good fit for you, and you may well be limited to a certain number of sessions. Wealthier people have a much greater range of private options available to them, and can shop around to find somebody they have a good relationship with: which is the most important factor predicting success in therapy.

After that I would say the stigma around mental health is still a massive barrier. People can be scared to acknowledge any struggles to themselves and others. For many groups it goes beyond an issue of stigma and shame, to being actually dangerous to admit to mental health difficulties, for example in terms of risk of losing work or having control over treatment taken out of their hands. Again it is generally the most marginalised groups in terms of class, race, disability, etc. for whom this is most risky.

## **What sort of practical support do men and young people with mental health issues need?**

For men a major barrier are the cultural expectations around masculinity which can make it very hard to speak openly about emotions or admit to having problems. Until we have some major cultural shifts in how we understand gender, this means that it can be good to offer support tailored specifically to men, perhaps in ways that fit masculinity better than conventional therapy. For example, peer support which takes place in sport or pub settings can feel a better fit for some men.

In addition to being protected from poverty, discrimination, abuse, neglect, and violence (key causes of mental health problems), young people drastically need better personal and social education in schools to help them to learn about how to handle difficult feelings and develop relationship skills. These kinds of preventative measures would be far better than treating young people after they've developed mental health difficulties. However, of course, until the world has

changed we definitely need good online and offline support for young people to go when they're struggling.

**Do you think it's a positive that people in the public eye are speaking more about mental health issues? Why?**

I think it can be very helpful indeed in decreasing the stigma around mental health, and letting people know that it is okay to struggle. However, unfortunately, people in the public eye often tend to tell very particular stories around their mental health issues: often stories where the issues are seen as purely biologically caused, and stories where they 'got better'. It's important to recognise that many mental health difficulties are caused by social problems, such as the ones I've already mentioned, and that many people do not have the resources that celebs have to get help and support.

**What are the problems in the NHS at the moment re mental health care? What solutions are needed?**

The main problems would be those facing the whole NHS at the moment of being hugely under-resourced and under-staffed. We need far greater investment in the NHS to enable it to support all those with mental and/or physical health needs, and we need to become a more welcoming country to immigrants, many of whom have just the expertise that we need.

**Are you worried about the fate of the NHS with regards to mental health care? Why?**

Very worried given the current lack of investment in the NHS. It's just one more area where we see a widening gap between the rich (who can afford private therapy and other healthcare) and the poor (who can't). Often those with less money will end up getting 6 sessions of CBT, maybe online rather than in person. This can be helpful, but it doesn't work for everyone, and it can even be counter-productive for somebody whose distress has very real social causes to locate their suffering in individual 'negative automatic thoughts', for example. If we want to tackle mental health problems we need a more equal society.

End of story.

For more on the social side of mental health struggles, check out my zine on [Social Mindfulness](#)

# Mental health and emotion

February 2017

*See my free book on feelings for more on emotions.*

Samantha Harvey recently sent me a great set of interview questions for her project on mental health. She kindly agreed that I could share my answers here as well, so here they are.

## **What is your understanding of the phrase ‘mental health/wellbeing’?**

For me that would be the state where life doesn't feel like a struggle, where we feel generally able to cope with things that happen, and to treat ourselves relatively kindly. Often 'mental health' is seen as in a binary with 'mental illness': either we are mentally healthy, or we are mentally ill, and those are seen as relatively fixed states. For me it's more of a continuum that all of us go up and down over the course of our lives.

## **What possessed you to create your zine 'Staying with our Feelings' and what reactions and feedback did you receive from consumers? (Ps. I love the layout and sketches!)**

I'm so glad you liked it! As with most of my work it was inspired by my own struggles, and what I've found works for me, and for the people I work with. I was struck that lots of different approaches to mental health include this same idea that it's useful to stay with our feelings. However, a lot of folks I talk with don't really know what that means. So I decided to make a simple zine to explain it, and to give some suggestions about some of the different ways of doing it.

The feedback has been really positive! A lot of people say the zine is a lot more accessible to young people, or neurodiverse people, for example, than a book or even a written website. The mix of images and words can make it both more engaging and easier to understand.

## **Which emotion from your experience and understanding do you feel is becoming most prevalent in modern day society and why?**

I would have to go with self-criticism – is that an emotion?! – anyway the whole set of shame type feelings where you feel bad about yourself and like you're a terrible person, or there's something wrong with you, or you're nowhere near as good or worthwhile as everyone else. It's very linked to the feeling of depression, as well as anxiety that people might 'find you out'. This is highly prevalent in modern society because consumer culture is based on making us feel bad about things so that we'll buy products which we're sold on the basis that they will make us happier, more attractive, more successful, or whatever. Also it's pretty handy for those in power

if we're all so busy worrying about ourselves that we don't get politically involved, or act against the cultural messages or structural inequalities that hurt us.

**You stated in your [Ladybeard article](#) ' Depression and Anxiety is a sane response to an insane world' do you believe these illnesses are a modern day construct and what do you see for the future of our generations in terms of emotion?**

I think this is even more clear now than when I wrote that article! With everything that is going on post-Brexit and post-Trump, depression and anxiety could be seen as a pretty sane response. However I would always say that our experiences are 'biopsychosocial'. It's not that social conditions alone 'cause' mental illness, but rather they weave together in a complex way with our bodies and brains (our biology) and our unique life experiences (our psychology) to result in our own particular patterns when it comes to our mood and how we tend to react to things.

My hope for the future – whether it is realistic or not – is that a key emotional state will be kindness, or compassion, because that's what we desperately need in order to counter our self-criticism, and the tendency to judge others, or treat them as disposable.

**Why do you think emotion and our mental health is such a taboo subject?**

We're taught to feel a lot of shame about mental health difficulties. Also, we're taught that some emotions and 'positive' and others are 'negative' and we should really only feel the 'positive' ones, otherwise we're a failure at life. The Pixar movie [Inside Out](#) is one of the most profound things I've seen about how actually we need all of our emotions in order to have good mental health. Trying to only feel joy, and no sadness, anger or fear, for example, is paradoxically one of the main things that tips us into depression.

**I want to understand how we can learn to communicate our feelings more and cope with our mental health better. Therefore, can we use our physical strength to help our mental health. Do you feel there is a correlation between the two, if so, how and why?**

Oh absolutely the two are connected. In the West we've separated the body and mind for a long time now, but actually they can't be separated at all. We're embodied beings. So one of the most helpful things we can do to stay with our feelings is to learn to locate them in our bodily sensations. Similarly, doing things where we feel that great sense of being in our bodies often has a profound impact on our mood. People often feel that when they are moving, listening to music, or being in nature, for example. Again the cultural message that our bodies are something to be 'perfected' and 'beautified' in order to fit some conventional ideal of what is attractive goes completely against this embodied approach!

**From my research I have been focusing on ‘The Emotional Economy’, which discusses how we are feeling more feelings than ever before and trying to find new ways to express ourselves. I feel there is a revolution taking place around normalising mental health outside the medical arena and in the creative space, would you agree?**

I think to some extent yes there is much more information and understanding about mental health than there was when I – or my parents – were growing up, for example. But the problem is that we still tend to ‘individualise’ mental health problems – seeing them as something that some people have because of their faulty brains, or faulty thinking – rather than recognising just how tied they are to the wider culture, and to material conditions like poverty, homelessness, and experiencing discrimination, for example.

**Furthermore, through what form of creativity (for example art, performance, film) would you say this is most prominent?**

Oh hard to say. I’m a big fan of comics, and I think that the large number of mental health web-comics and graphic memoirs has been hugely helpful in capturing diverse experiences of mental health struggles, and normalising them. I worked with Caroline Walters and Joseph de Lappe to make 4 issues of *Asylum magazine* about this if you’re interested in finding out more.

**My big idea is encouraging Generation Y, also known as the IPOD generation (Insecure, Pressurised Over-taxed and Debt-ridden) to go outdoors and do something creative as a means to help express their mental-self more positively. Do you agree and do you see this working?**

Absolutely I think both those things are incredibly helpful when it comes mental health – although I’d be wary of advocating them for everyone because different things work for different people, and at different times in their lives.

The IPOD thing is interesting because if those are the key problems (and I think they probably are) then I’d be focused on what we can do to give this generation more security, less pressure, less tax, and less debt. Hence the answer would be political and social reform rather than anything else. So yes get outdoors (on a march) and do something creative (write to your MP, make a placard) 😊

I think Audre Lorde’s famous quote also comes in here ‘Caring for myself is not self-indulgence, it is self-preservation, and that is an act of political warfare.’ Even if we locate the causes of much of our suffering in wider society, it’s still vital to do forms of self-care in order that we have the energy to resist and protest. For me getting outdoors and being creative are certainly two essential forms of self-care.



**If you could describe your mind as a biscuit, what would it be and why?**

A Florentine coz it's pretty nutty 😊

**If you could describe your mind as a colour palette, what would it look like and why?**

Going back to *Inside Out* I would hope it'd look like a rainbow, indicating that I was okay with being in all of the different emotional states. It's probably a lifelong process to get there though.

# Mental health beyond binaries

October 2016

On 12th November I'll be speaking on a [panel](#) for [Ladybeard magazine](#) on mental health. I wrote a piece for their website [here](#) about my own thoughts on mental health and [the problems with the mad/sane binary](#).

I've experienced mental health struggles for most of my life. For me, like many of us, that means that I've had a high level of self-critical background noise a lot of the time: thoughts that I've done something terribly wrong, or that I will do, or that there's something wrong with me. It often manifests as a low, heavy mood: a kind of grey fog over everything that makes it difficult to see things clearly, to make decisions, or to appreciate the beauty of the world around me. At its worst, it has tipped into extreme self-loathing and the urgent wish to eradicate the 'bad' parts of me in order to make myself acceptable.

Despite these experiences I've always been reluctant to label myself with the terms that might seem obvious when you read this description. I've probably ticked the boxes for several of the recognised 'psychiatric disorders' in my time, but I don't feel comfortable identifying as a person with depression, as mentally ill, or as having a psychological problem. Equally I don't feel comfortable identifying as sane, mentally well, or psychologically healthy. As with so much in life, I feel that the binary – in this case between 'mad' and 'sane' – is actually part of the problem.

## **The mad/sane binary**

The mad/sane binary is present in all of the mainstream messages that we receive about mental health. For example, high profile campaigns to end mental health discrimination have often centred around one, apparently game-changing, statistic: 1 in 4 people have a mental health problem. Celebrities like Stephen Fry and Ruby Wax have used the figure to speak bravely and openly about their experience of mental ill health, but the danger of that statistic is that it suggests that 75% of the population do not experience any mental health problems at all. Rather than seeing mental health as a continuum which we might all move up and down over the course of our lives, we're forced to stake our identity on one or other side of a strict dividing line:

'Either ... I have a mental health problem – I need help – it's not my fault

Or ... I don't have a mental health problem – I don't get help – it is my fault'

In this way we're placed in a double bind, because accepting one side inevitably involves denying the other, and neither side promises a great outcome. If we're seen as having a mental health problem we may well feel utterly disempowered, as if there's nothing that we can do to improve our situation. If we're seen as not having a mental health problem we might feel like we can't admit to having any problems or get any support because we're completely responsible for our own happiness and well being. The responsibility either rests entirely with other people, or entirely with ourselves, and either way that puts us in an untenable position.

Linked to this is the fact that both sides of the binary internalise suffering, seeing it as a purely individual thing, rather than a symptom of wider social issues. We are forced to view mental health problems as inborn, either caused by illness (perhaps a genetic vulnerability and/or brain chemistry issue) or by a personal deficiency (such as bad habits, faulty thinking, or lack of moral fibre). This can be very damaging because there's strong evidence that all our human experiences are biopsychosocial: a complex interaction between the world around us, our personal experiences of it, and our bodies and brains, with all of those aspects influencing the others. We risk doing further damage to ourselves when we attempt to change our individual experience without recognising the role of social injustice or cultural messages in our suffering.

### **Social suffering**

For example, it's clear that structural oppression and social inequalities have a major role in mental health struggles because we see far higher rates of such difficulties in groups who are socially marginalised. One recent UK study found that women were 40% more likely to develop anxiety and depression than men, for example, another found that LGB people are twice as likely to be suicidal as straight people, and a further one that BAME people are six times more likely than white people to be admitted as in patients in mental health services. We need to recognise the role of intersecting marginalisations in mental health struggles, and the ways in which social experiences such as poverty, discrimination, and the experience of trauma are highly related to psychological distress.

We also live in a culture, which encourages the very kind of self-critical thinking that's a feature of all the most common mental health problems. The French philosopher Michel Foucault famously used the analogy of the panopticon prison for our culture. In this prison there's a single guard sitting at the top of a central tower in the middle who is able to see into all of the prison cells. Prisoners end up monitoring their own behaviour all of the time, just in case they might currently be being watched.

Foucault argued that our culture works in this way through all of the pressure we're under to self-improve, and to present a positive, successful self to the world. We're made to feel fear that we might be lacking or failing in some way, and we're sold products which claim to help us to allay those fears. Makeover shows, self-help books, and beauty products are some of the more obvious examples. Social media also encourages us to maintain the illusion of perfection online, leading to endless rounds of self-evaluation and comparison.

In a world where so many of us are struggling with very real social problems, it's vitally important to acknowledge the cultural context we're in and to resist individualising our suffering. The mad/sane binary is very effective in preventing challenges to toxic policies and practices because people are not aware of the social context of their struggles, and because there is a fear that if you do speak out you will be dismissed as 'insane'.

We can see this at play in the recent moves to regard unemployment as a psychological problem and the insistence that those claiming benefits undergo cognitive behavioural therapy. The responsibility is placed on the individual rather than on wider societal problems, and resources are focused on psychological change rather than addressing economic inequalities. There's a high risk that people are left in the same damaging situation, but with an even greater tendency to blame themselves for it.

### **A sane response to a mad world?**

The psychotherapist Winnicott famously said, of depression: "The capacity to become depressed [...] is something that is not inborn nor is it an illness; it comes as an achievement of healthy emotional growth [...] the fact is that life itself is difficult [...] probably the greatest suffering in the human world is the suffering of normal or healthy or mature persons". Perhaps we would do well to view the depression, anxiety, and other mental health struggles that most of us grapple with at some point as a sane response to an insane world. This would shift the emphasis for change away from the individual and towards the wider societal structures and cultural messages around us.

I know that what has helped me the most in this area has been to recognise the social and cultural aspects of my struggles. It's a huge relief to allow the weight of total responsibility to lift, and to recognise the role of internalised self-criticism and social power dynamics in my experiences. This acknowledgement also allows me to engage critically with the mad/sane binary: resisting the sense that I'm completely responsible for my difficulties and the sense that I have no capacity at all to help myself. In this way I can cultivate a kinder relationship with myself, on the one hand, and feel more of a sense of kinship with all of the others who are in the same cultural boat. Such connections enable the possibility for collective resistance and for social activism, which feel like a much better focus for my energy than continually trying to change myself.

### **Find out more**

My [zine on social mindfulness](#) covers these ideas in more detail. My zines on [Staying With Feelings](#), [Self-Care](#), and [Plural Selves](#) are also relevant to mental health.

# Mental health: beyond a health focus

June 2012

A number of **news pieces** in recent weeks have discussed a new **report** which found that only 25% of people with mental health problems get the help that they need. Articles highlight both the frequency of such difficulties (a third of families having a member with mental health problems at any one time), the high **financial cost** of not treating such difficulties, and the **effectiveness of treatments** like cognitive-behavioural therapies (CBT) for those who do receive them.

Certainly it is extremely important to make support available when people are struggling. However, these news reports seem to miss something by regarding this purely as a health issue, and by focusing only upon treatment once mental health difficulties are present rather than also considering measures which may prevent such problems or increase resilience.

The fact that so many people suffer with issues such as depression and anxiety has implications far beyond the health service, and the focus on targeting funds only at treatment for existing mental health problems seems somewhat blinkered.

As a starting point, here is a list of other arenas which could usefully attend to statistics on mental health and shift policy and practice accordingly. In all of these areas a broader **biopsychosocial understanding** of the experience of mental health problems would be of value:

## **Education**

Many of the negative patterns of thinking about, and treating, ourselves when we are struggling are laid down in childhood and adolescence, and experiences such as bullying, alienation, abuse or neglect in youth certainly increase our vulnerability. For this reason we could put more resources into addressing problematic school cultures and into cultivating the kinds of emotional and social skills that we know to be helpful during the early years of life. It seems strange that we wait until people are really suffering before teaching them how to understand, and work with, painful emotions and difficult relationships.

## **The workplace and employment**

Viewing mental health as a purely internal personal matter neglects the role that the world around us has on whether or not we find ourselves struggling. Situations of workplace bullying or harassment, and toxic cultures where everyone is expected to work long hours or where employees are not valued, are certainly implicated in suffering and could be usefully addressed by awareness raising and increased resources.

Additionally, the perception of mental health difficulties could be usefully addressed on an organisational level. Destigmatising mental health problems such that employees are able to say when they are struggling could help a great deal, as could allowing everyone a few 'stitch' days a year when they take time out to look after themselves (after the phrase 'a stitch in time saves nine').

Finally, many find that some kind of employment – whether of a more or less conventional type – acts as a buffer against mental health problems in various ways. It can provide an income, give a structure and routine to the day, enable some form of contact with others, and ideally provide a sense of meaning and purpose. As a culture we seem to have swung from a situation of encouraging those who are struggling not to work (in ways which often increases their isolation and sense of being unable to do so), to one of forcing people who have become used to not working back into work. Resources could be usefully put into finding a more balanced and supportive approach.

## **Media**

There could be greater recognition of the role of media in encouraging a certain way of viewing and treating ourselves, which many authors have linked to problems like anxiety and depression. Research consistently links limited beauty ideals to **body image anxiety**, but it goes further than that. Advertising, and much other media such as magazines and self-help books, often rely on encouraging people to think that there is something wrong with them that needs fixing (in order that they will buy a product). Makeover shows, reality TV, and popular contests like X-factor promote a limited idea of what it is to be a successful person, and arguably exacerbate a sense of failure among those who don't meet the standard. The sense that we need to monitor ourselves and compare ourselves against others is opposite to the kind of **compassionate and kind** treatment that many regard as the key way of avoiding/combating problems like depression.

## **Wider culture**

News articles often neglect to report the differences in rates of diagnosis of mental health problems. All of these suggest that those in more marginalised groups are more prone to such difficulties. Again, this suggests that access to individual counselling and therapy should not be the only approach to dealing with this problem. Attending to societal inequalities and injustices is vital, not just from a human rights perspective, but also from a mental health perspective.

# Mental Health – Beyond the 1 in 4

October 2011

This long read covers what we know about mental health, and why I think that distinguishing between those who are, and are not, mentally ill, is unhelpful.

## Biopsychosocial Perspectives

I recently heard Saroj Datta give an update on the latest evidence regarding the interactions between genes and the environment in relation to mental health. Saroj was involved in the OU science course on [mental health](#) which takes a 'biopsychosocial' approach to the issue, and her talk demonstrated just how impossible it is to tease apart those elements: bio, psycho, and social (which is why they are combined into one word).

I already knew about [neuroplasticity](#): the fact that the way our brains connect up changes over the course of our lives depending on the experiences we have (this is the way that we learn, of course, but we often forget this and regard brains as static and unchanging). Saroj presented evidence that there is also flexibility on a genetic level. Whilst the set of genes in every cell in our body remains fixed, whether they are 'switched on' or 'express themselves' is not. [Animal studies](#) have shown, for example, that a glucocorticoid receptor gene tends to remain switched off, leading the animal to be fearful and anxious, unless the mother displays nurturing behaviours (due to not being anxious herself) in which case it is switched on, leading to pups who are calmer and less stressed. This research is in its early stages, and needs to be treated with caution when applied to humans of course.

[Human research](#) supports the genetic-environmental interaction, finding that, for example, rates of depression are high when a particular allele of a gene is present *and* someone has experienced three or more stressful life events, but lower if just that allele, or just the life events, are present. It is the *interaction* between genes and environment that is vital. There have been similar findings in relation to childhood maltreatment. However, it is important to remember that some people were still depressed without those particular elements in the place (either that gene allele, those life events, or the two together): so this is not the whole picture. Also there is unlikely to be any one single gene involved in any element of human behaviour, but rather many.

Saroj suggested that such 'epigenetic' changes are potentially reversible and it has been suggested that this, and neuroplasticity, may explain why there are multiple different routes to [repair and recovery](#).

My own interest has been mainly about the social end of the biopsychosocial composite, but it is vital to remember that this is as impossible to tease apart from the rest of it as the bio end is. The ways in which the society in which we live understands, and treats, people, is vital to the way in which we understand and treat ourselves. And one of the main things our society currently does is to split apart the biopsychosocial in a deeply problematic way when understanding issues of distress or 'mental health'.

## Why I don't like the 1 in 4 statistic

It is important to say, before I start, that here I am absolutely *not* doubting the existence of severe distress, or the toll that it can take on people who are struggling and those around them. Rather I am questioning the way that we currently categorise and work with such experiences, and the role of wider culture in them (which so often gets missed).

What sparked this line of thinking, for me, was a series of adverts a few years back under the **Time to Change** campaign about mental health, which was put together by the Institute of Psychiatry, Mind, and several other mental health organisations, with the aim of ending mental health discrimination. The adverts featured celebrities such as Stephen Fry and Ruby Wax speaking openly about their own experiences of distress, and many quoted the '1 in 4' statistic. For example, the poster with Stephen Fry on it said: '1 in 4 people, like me, have a mental health problem. Many more people have a problem with that.' Ruby Wax's said '1 in 5 people have dandruff. 1 in 4 people have a mental health problem. I've had both.'

Clearly the statistic was intended to raise awareness of the commonality of mental health problems and to decrease the stigma of those experiencing them. However, I feared that it was in danger of doing quite the opposite.

The 1 in 4 figure is problematic anyway as it is not clear where the figure **actually comes from**. Of the few studies which have found something like this figure, some have been measuring families rather than individuals, mental health has been measured in various different ways, and it is unclear whether we are talking about, for example, 1 in 4 people at some point during their life, or 1 in 4 people in the last year, or 1 in 4 people at any given point in time.

However, for me, the bigger problem is the potential impact of the figure. 1 in 4 suggests that 75% of the population do not experience mental health problems. That is a substantial majority. The danger is that this situates people with mental health problems as 'them' (compared to 'us' who don't have any such problems). As we know very well in psychology, the creation of any kind of **'us and them'** situation increases, rather than decreases, likelihood of discrimination.

Most of us will experience some form of abuse in childhood (if we include **'bullying'** by peers, which I think we definitely should); all of us will experience life events such as bereavement of a



loved one in adulthood which tend to result in a period of high distress; not to mention the **existential givens** of life which we all struggle with. Given this, is 'ill or well' a useful model at all?

The common **dichotomous** understanding which I see amongst counselling clients, friends, and students alike when they are talking about their own – and other's – experiences of distress and suffering is as follows:

*Either*

I'm ill – I need help – it's not my fault

*Or*

I'm not ill – I don't get help – it is my fault

People commonly feel, deeply and certainly, that these are the only two possible places to be: ill or not ill, and that the other aspects presented here follow from that. Not only is this a splitting up of the unsplittable **biopsychosocial** which I mentioned in the previous post. It also suggests that there are only two options: biology or choice (social doesn't even come into it). Mental health problems are seen as an individual – frequently physiological – problem which requires treatment (commonly drugs, sometimes also therapy) to fix. However, if there is no evidence of such an individual problem (if no diagnostic label fits, for example, or if there is suspicion that they are not suffering enough) then the person cannot be ill and therefore any struggles must be their own fault.

This way of understanding things is problematic on all levels. It prevents many people with distress from admitting it because, if they do admit it, they will have to give up control, take on a victim/ill identity, and open themselves up to stigma and discrimination. Those who embrace diagnosis may be disempowered (due to the sense that they can't help themselves and must require expert help). They may feel that they have to take certain treatments (often drugs) because of the common idea that mental health problems are biologically caused and must be biologically treated, despite the question marks which still exist over **whether**, and **how**, such drugs work and whether they are the **most appropriate way** of addressing such issues in all cases (not to mention the vested interest of 'big pharma' in perpetuating this particular understanding). There is no room here for sociocultural explanations or for more complex involvement of personal agency.

Also, many people oscillate between the two positions as **neither side really captures the complexities of human distress**. This means that those who don't identify as having a mental health problem are haunted by the fear that perhaps there is something terribly wrong with them which needs fixing (and hiding this fear, and any signs that they might be struggling, puts them under immense pressure). Those who do embrace a label such as 'depression' are often

haunted by a huge sense of guilt that *maybe* they are not really ill and maybe this is all their fault and they are totally to blame (which massively exacerbates any suffering they were already experiencing).

This puts people in a horrendous double-bind when it comes to speaking about their own, inevitable, distress and struggles in life. If we openly disclose as 'depressed', for example, (as many people did on the recent 'world mental health day') we run the risk of reinforcing this ill/well split such that those who do not embrace such an identity feel their struggles going unacknowledged and the pain of that invisibility. If we keep quiet about our distress, or resist such labels, then we can equally reinforce the ill/well split as we are read as 'well' by those around us.

We need to move to more biopsychosocial model of distress. We need to recognise that distress – in its various forms – happens for complex multiplicity of reasons, and that we *can* have a personal role in exacerbating and ameliorating it, but that acknowledging such a role does not mean that we are totally 'to blame' or 'at fault'. We need to understand that we can all access support rather than it being something only for a certain few, and that *different things work for different people at different times*. We need to challenge either/or illness/wellness dichotomies and to consider other possible models and metaphors for distress.

## Diagnosis

The common practice within the current mental health system when people are distressed is to diagnose them (to find the category in the **DSM** or **ICD** which best fits them) and to treat them accordingly.

Previously I said a lot about why people who are suffering might want to embrace a diagnosis of a mental health problem. After this, I will say more about why practitioners may be wedded to this way of working with distress. Here I will outline some problems with diagnosis in general.

As I mentioned, for people who are struggling, diagnosis is often seen as the only option other than seeing themselves as totally 'to blame' for their own distress. Also, it may be the only way to access support and community, and to be taken seriously by employers and others whose understanding they may need as they are struggling. Given that this is the world we currently live in, it is important for those who are critical of diagnosis not to impose that on others. Rather we might explore, with them, the potential losses and gains of taking on a diagnostic label (something explored in the Open University **counselling module**). Common losses which people express are that no label fits them perfectly, that – if they do embrace a label – they feel trapped by it (that this is all that they are all that they'll ever be), and that they are treated differently by other people.

Irving Yalom points out this **problem with diagnosis**, that it easily fixes people (the way that a kiln fixes a pot) and can prevent us from treating people as whole, complex human beings. Rather, it is easy for professionals to see people as a 'bipolar' for example, or as a 'borderline personality disorder' (assuming that that category is all that they are, and that this person will be the same as other people in that category). Actually there can be multiple diverse meanings for people who fall into the same category which it is vital to explore. Take **agoraphobia**, for example, which involves fear of being outside the home. This could be about a fear of social contact, a sense of shame about oneself, an oversensitivity to noise, a genuine concern around violent attack (racist or homophobic, for example), an inflated concern over the risk of crime, superstitious fear of an accident happening, worry over one's own capacity for anger and violence with others, or many other things (and combinations of things).

The point about fixing people is supported by the famous Rosenhan study '**on being sane in insane places**' which was conducted in the 1970s. He got a group of people to present to psychiatrists. They didn't wash for three days and said that they heard the word 'thud'. All were admitted to hospital and all were diagnosed with schizophrenia (except one who presented to a private clinic who was diagnosed as manic depressive, which is telling about class and diagnosis). Once admitted, the people said that they were fine and didn't report any further symptoms. Nonetheless they were kept in for weeks at least and their behaviours were still read as ill or disordered. For example, queuing up for lunch early because they were bored was labelled 'oral acquisitive syndrome' and making notes was labelled 'compulsive writing behaviour'. Science writer, **Lauren Slater**, repeated the study in the early 2000s herself. She didn't get admitted, but was diagnosed and medicated by everyone she presented to, reflecting shifts in understanding and treating mental health problems.

Clinical psychologist, **Richard Bentall**, has pointed out the incoherence of many diagnostic categories: It is possible for two people, categorised in the same way, to have completely different clusters of symptoms. Some symptoms which are generally seen as signs of mental illness, such as **hearing voices**, are experienced by many people and are not always viewed as problematic.

Also, there are issues with the cultural and historical specificity of diagnosis. The classic example of this is the fact that **homosexuality** was included as a disorder in the DSM until 1973 and in the ICD until 1992. Other consensual sexual behaviours which are considered 'outside the norm' (such as fetishes, sadomasochism and transvestism) are still listed despite lack of evidence linking them to distress and calls for them to be **removed**.

This raises the question of to what extent diagnosis of disorder represents individuals being in conflict with the norms of society rather than a genuine pathology. There are many other examples of this. For example, the '**sexual dysfunctions**' are categories for people who don't have the amount, or type, of sex that they are expected to have by wider society. Categories of 'premature ejaculation' and 'vaginismus' suggest that 'proper sex' involves penile-vaginal penetration.

We might also think about what things are classified as addictions and what are not (in relation to what is socially acceptable), or what forms of self-harming are pathologised (cutting and burning oneself, but generally not smoking, drinking to excess, risky sports or driving, or cosmetic surgery).

Many have argued that the high levels of diagnosis of depression in women (and the greater likelihood that distressed men will be criminalised as ‘bad’ whilst women will be pathologised as ‘mad’) are related to cultural expectations around femininity and masculinity. Also, black and minority ethnic people are more likely than white people to be diagnosed with ‘severe’ mental health problems and to be hospitalised and treated with drugs, arguably due to the western norms inherent in the diagnostic categories, as well as experiences of racism and social injustice.

Going back to Rosenhan’s study we may regard the world that we currently live in as rather an ‘insane place’ (particularly given the current economic and ecological situation) and question what it means to respond ‘sanely’ to this. Winnicott famously said, of depression: ‘The capacity to become depressed, to have reactive depression, to mourn loss, is something that is not inborn nor is it an illness; it comes as an achievement of healthy emotional growth...the fact is that life itself is difficult...probably the greatest suffering in the human world is the suffering of normal or health or mature persons...this is not generally recognised.’ In recent goals for everybody to be ‘happy’ there is a danger that we pathologise, even more, quite reasonable forms of distress.

## Us and Them in Mental Health

Given the problems with diagnosis covered above, we might ask why practitioners continue to employ these, often without critical consideration, and to maintain a split between the ill and the well.

In her book, *Users and Abusers of Psychiatry*, Lucy Johnstone suggests that it is very tempting for mental health practitioners to treat clients or patients in an ‘us and them’ way because of how invested they are in the current system. There is the danger that, without such clear splits, their job security would be in danger. Also they would lose the sense of expertise and professional power that they have if, for example, there was a de-medicalising of distress or a de-professionalisation of support for people who were struggling. There is a danger, more widely, that those who have an investment in being seen as sane, in control, and professional require a comparison group of those who aren’t (and this may play out in mental health systems, in families and other groups, and in society at large).

Christina Richards presents a further reason why it may be difficult for practitioners to shift away from an ‘us and them’ approach to distress. She argues that underlying a resistance to change

might be a sense of: “I have been doing things this way for years and will continue to do so as this way must be right (because if I have been doing it wrong for all these years look at all the pain I’ve caused/ time I’ve wasted/ good I could have done)”. It boils down to: “I can’t act in the future, because that proves I could have done so in the past”.’

This way of thinking can keep people very stuck on both sides of the ‘us and them’. For practitioners it prevents critical exploration of their current ways of understanding and practising, and substantial revision of diagnostic manuals, etc. which have been used for so long. For clients or patients it makes it difficult to change in ways that might alleviate suffering because changing is seen as acknowledging that one could have changed previously (this is especially difficult because taking personal agency is seen as putting a person on the ‘not ill’ and ‘all my fault’ side of the dichotomy explored in my second post). The more time passes, the harder it can be to step away from the way you have been doing and seeing things. There is a kind of tyranny of consistency which would be helpfully addressed by a model which embraced the fact that people change over time and that it is okay to revise and adapt the way we used to see things or admit that we were wrong in the past.

Richards quotes the great sage, [Esme Weatherwax](#), who said that ‘*Sin ... is when you treat people as things. Including yourself. That’s what sin is.*’ Whilst, of course, we require some kind of language to describe, and make sense of, our experiences of distress, we need to be cautious of ways of understanding that function to trap people and to concretise things rather than enabling them to move. We also need to be alert to understandings which assume that the biopsychic can be disconnected from the social such that it is only the individual who is seen as disordered or malfunctioning, rather than wider systems, and only target treatment at the individual (rather than the family, the school, the organisation, the media, or wider culture, for example). The social aspect is something that I will explore further now.

## Self-monitoring Culture and Distress

A friend of mine recently posted a [cartoon](#) on Facebook which had Sigmund Freud saying ‘before you diagnose yourself with depression or low self-esteem, first make sure that you are not, in fact, surrounded by assholes’. I responded that I thought this said something rather profound about mental health at the moment. Could it in fact be said that a key aspect of many experiences of suffering is the problem of being ‘surrounded by assholes’ or – to be more generous – being surrounded by damaging cultural messages perpetuated by those around us?

When I first started counselling I became very aware that virtually everybody I saw was convinced that there was something wrong with them that needed fixing, mostly based on the fact that – when they looked around themselves – nobody else seemed to be struggling the way they were. Conversations with close friends, and self-reflection, suggest that this is an extremely common feeling: that everybody else is managing fine so there must be something wrong with me. Of course, when I asked clients how they thought they appeared to other people they

recognised that they generally put on a 'happy, managing everything fine mask' which probably gave off the impression that they weren't struggling either.

It strikes me that many experiences of depression, anxiety and other common mental health problems have a strong element of self-scrutiny and comparison to others in them (whilst, of course, I am wary of proposing any universal explanation because these experiences mean many different things to different people and at different times). Michel Foucault used Jeremy Bentham's **Panopticon** to explain how people self-police in contemporary society. In the Panopticon prison there is a tower in the middle and cells all around an outer circle, such that a guard in the centre could – at any time – be looking into your cell. Because of this, prisoners begin to monitor their own behaviour rather than having to have huge numbers of guards. This idea has been linked to the high degree of surveillance that we now have, meaning that we could – most of the time – be being watched or recorded.

Foucault suggested that contemporary culture worked in this way more broadly. People are encouraged to scrutinise and judge themselves at all times, with advocations to self-improve, to work on themselves, and to present a positive and successful self to the world. This is linked to consumerism which is all about seeing ourselves as lacking and needing something to fill that lack. Advertising, and many other forms of media, create fears (e.g. we might look bad, be out of date, or be a failure) and then offer products to allay those fears (e.g. beauty products, the latest fashion, recipes for success in various arenas).

Within such a culture it is no wonder that people would be particularly driven to constant self-scrutiny, comparison to others, and presentation of themselves as happy, satisfied and successful (even when they may not be any of these things). This shores up the 'us and them' that I wrote about in my second post. Rather than distress and suffering being an inevitable part of everyday life, it is seen as a problematic lack which must be addressed, and is probably outside of the power of the person who is suffering to address.

Perhaps the major challenge for mental health practitioners, counsellors and psychotherapists is the danger that our work can perpetuate this perception: creating new diagnoses and categories and offering an ever-increasing menu of products to fix these (at a price). Even the one-to-one therapy situation is at risk of exacerbating this sense that people are wrong and need fixing, given that one person (the client) is encouraged to express their distress to another person (the therapist) who is generally fairly quiet and certainly not expressing any of their own problems. This is not to say that therapists and counsellors should be inappropriately burdening clients with all their difficulties. But we need to find ways to challenge the idea that the client's struggles mean that there is something wrong with them, and the perception (which most clients have, even when they are therapists themselves) that the therapist has no struggles, or deals with them all perfectly.

**Existential therapy** includes the idea, not only that all people will inevitably suffer, but also that all responses to this suffering are *sensible* so long as we properly understand the person who is

responding in this way. This, to me, is a very useful counter to the common assumption of something being 'wrong' and the person being flawed and lacking in some way if they do not respond in ways that are deemed culturally acceptable.

## Alternatives: Care and compassion for all

Above I have argued for a complex understanding of suffering and distress which is very cautious of applying diagnostic criteria and of dividing people into 'ill and well' 'us and them' boxes. Perhaps a better model of distress is of a continuum which we all go up and down during our lives, and where we are not fixed at any given point. I've also emphasised the importance of not splitting up the bio, psycho, and social in our understandings of distress, and suggested that we must not neglect the social aspect of the biopsychosocial because societal ways of understanding people (which we internalise and which, no doubt, are represented on a neurological level) are involved in our difficulties. This is particularly the case in the way in which we are encouraged into self-monitoring, and in the way in which individuals who are in conflict with societal norms tend to be pathologised as disordered individuals.

If we resist the temptation to 'us and them' thinking then perhaps we can make more of a connection with people when they are distressed (rather than attempting to distance ourselves from them in ways that maintain them as 'them' and protect us from any sense that we might experience similar things ourselves). Then we might be able to ask questions such as 'what works for me when I am distressed?' which may lead to more helpful responses when others are struggling (although, of course, we must be cautious of assuming that everybody works in the same way that we do – perhaps the question is more like 'given everything that I know about this person, what might they be needing right now?') We might reflect, for example, on times when we've been under chronic stress or when a crisis has occurred in our lives.

Broadly speaking, when we reflect on what is *unhelpful* when we are distressed we might come up with things like: taking away the aspects which makes the person what they are (things that they regard as central to their identity such as work or relationships), removing people's sense of personal freedom and choice, and regarding them as inexplicable or baffling, for example questioning why they can't just stop feeling, or responding, in the way that they are doing. On the other side, we might find that what *helps* when we're distressed is not being overloaded with anything else, being treated kindly and patiently and being around those we feel safest with, being reassured that we are still free (but perhaps we don't have to make lots of decisions right now), and feeling that we are understood and that our response is a perfectly explicable way of responding to this situation (which involves somebody taking the time to understand what it means to us).



The vital role of [compassion](#) (from others and towards oneself) has been emphasised by many recently, and is part of the reason, perhaps, why various forms of [mindfulness-based](#) therapies are suddenly so popular (as they often encourage practices of self-care and compassion). Compassionate treatment of self and others is, perhaps, an opposite to the judging-comparing-monitoring mode which is so culturally encouraged at present. Rather than fearing that we are lacking, pretending that we aren't, and trying to prove that we are better than others, we accept that everyone is imperfect, are open about our struggles, and move away from a competitive way of relating with others.

Vitality, an alternative compassionate, or [self-caring](#), form of working with distress does not present this as something that is necessary just for people who are struggling (reinforcing that 'us and them'). Rather it is seen as something everybody needs to engage in to counter those omnipresent self-monitoring messages (which affect us all) and to address the struggles and distress which we all experience.

#### **Find Out More**

- Many of the ideas in these posts are explored, in more detail, in [Understanding Counselling and Psychotherapy](#).
- A very accessible book that covers many of these areas is Richard Bentall's [Doctoring the Mind](#).



# Mental Health and Relationships

## Supporting each other through mental health struggles

June 2015

Novaramedia is currently publishing a number of useful articles around the theme of mental health, including pieces on [work and mental health](#), and one on [talking therapies](#).

They asked me to submit something that particularly addressed mental health in the context of relationships, so I wrote this article on [supporting people in our lives when they're struggling](#).

Most of us will experience a mental health difficulty like depression, anxiety or addiction during our lives. And at some point, most of us will have a friend or family member who is mentally unwell.

Our culture tends to view people with mental health problems in one of two ways. Either they have brought it on themselves and need to 'pull their socks up', or they have a 'disorder' and need help because they're incapable of helping themselves.

When faced with a friend who is suffering it is tempting either to blame them for their problems and try to shake them out of it, or to leap into 'rescuer' mode and try to fix them.

Neither extreme is a good solution. We can end up angry and resentful if we hold them responsible for their problems, or burnt out from all our attempts to help. They can end up more defeated and self-critical than ever if they feel culpable, or kept in a guilty and powerless state if they can't respond to our efforts.

As a therapist and psychology academic I am often asked to give advice on supporting friends when they're in difficulty. Here are seven thoughts on how you can help without either rescuing or blaming.

### **1. Listen.**

If we've had a particular difficulty ourselves, or know somebody else who has, it's easy to assume we know what it's all about. But these things can be very different for different people, so it is vital to start with listening to what it's like for your friend. Some people experience depression as a flat low feeling, whereas for others it feels more desperate and frightening. Some people harm themselves for a release of tension, whereas for others it is a punishment, or a kind of soothing.

Similarly we might have thoughts about what will help our friends based on our own experiences or assumptions, but it is better to check in with them. If they are struggling they may not know for sure what's best, but they might know what to avoid because it makes things worse. You could make a list together of some possibly helpful things to experiment with.

## **2. Be present with them.**

Once somebody has a label like 'depression', 'PTSD' or 'personality disorder', people around them often start to treat them very differently. If somebody was distressed, or quiet, or acting strangely last time we saw them, it is easy to expect that they'll be the same the next time. Often one of the best things we can offer, as a friend, is to be present with them however they are on this particular occasion, instead of treating them as their label, or as how they were last time.

It can be useful to have some time out ourselves, before seeing them, in order to put ourselves in a good place to be with them as they are today. We may have to scale down the kinds of things we normally do together, but doing an activity that isn't all about their mental health can really help.

## **3. Get support yourself.**

If somebody we care about is suffering it can take a big toll on us too, for all kinds of reasons. We may feel guilty or hopeless, we might give a lot of our time and energy to supporting them, or we might find ourselves picking up on their feelings and finding that we're also low or anxious after seeing them. It's important that supporters get support too. Think about who you could lean on a little more. There are helplines and counsellors available for carers and others in supporting roles.

## **4. Know the limits of what you can offer.**

When somebody is suffering we often want to do anything we can to help, and it is easy to offer more than we're able to give. The experience of offering something and then having to pull it away again can be rough on both of you. If your friend asks for a particular kind of support it is okay to ask for some time to think about it before responding. Think about the other demands in your life, what your limitations are, and how long you might be able to offer it for.

## **5. Be part of a wider support network.**

Linked to point 4, everyone has different skills and none of us can be everything to somebody. You might be great at practical support but not very good at sitting with somebody who is crying. You might be a wonderful person in a crisis, but need a lot of space if you're around somebody else day in day out. For these reasons the ideal situation is to have a network of support rather

than just you. Think about whether there are others – friends, family, professionals – who could offer support too.

## **6. Maintain your boundaries.**

Most people who are suffering will be kind to those around them, but some people can become quite insular when they are struggling. It is definitely important to give them a break on this, but it is also important that you know your boundaries. For example, it's not okay for your friend to ask you to keep the fact that you're supporting them a secret; or to expect you to be their only means of support or their therapist; or for you to be the recipient of threats or other behaviours which would be considered abusive under other circumstances. It is okay for you to change what you can offer if these things happen, or if your situation changes.

## **7. Be flexible.**

Finally, it is easy to get stuck in your role as your friend's supporter. Over time this can actually make it more difficult for them to shift out of their role as the one needing support. Don't treat your friend as somebody who only gets help and never gives it. When we're suffering it can feel incredibly powerful to realise that we are valued and still capable of supporting others – even in small ways.

Also, there will certainly be times in your lives when your positions are reversed and you are the one needing help. After what they've been through your friend may well have just the expertise and experience you need, so be prepared for your roles in each other's lives to shift over time.

## **More information.**

**Mind** has an extensive section on supporting people with mental health problems, and lists of further contacts.

**Rethink** provides information and a helpline for carers, friends and family.

There are also support groups and helplines available for those offering ongoing support through [www.carersuk.org](http://www.carersuk.org) and [www.carers.org](http://www.carers.org).

# Mental health and relationships

October 2012

Today is **World Mental Health day** so I thought I'd write a post about mental health in relationships.

My own position on **mental health** is that we all struggle, sometimes, with experiences of fear, sadness, anger, loss, shame, etc. which make life very difficult. Perhaps one of the most challenging times is when everyone in a relationship is struggling at the same time. That is what I will mostly focus on here.

I went to a very interesting workshop on this topic at the weekend which helped me to think through some of these issues. The workshop highlighted the fact that many people had shared experiences and had developed similar, very helpful, strategies for dealing with them. Of course I won't write anything here about specific examples given because the workshop was confidential, but I do want to thank the other people there for helping me to clarify my ideas as well as for giving me the confidence to write this post.

## **Pressure to seem fine**

The backdrop to why struggling is hard in relationships is the pressure that we are under to prove that our relationship is 'fine' at all times. People are often very fearful that if they admit that they have any difficulties, friends and others will say that it is the relationship that is at fault. Given that relationships are inevitably challenging, this can reinforce concerns that most of us have that perhaps there *is* a problem with our relationship.

For people in less conventional relationships, this issue may be exacerbated because any acknowledgement that things are not perfect could be taken, by others, as proof of what they always suspected: that this kind of relationship can't work.

Such fears often mean that, when we are struggling, we don't let anybody else in besides our partners. This can put strain on the relationship in multiple ways. We might feel that we are entirely responsible for our partners' struggles (and for making them better) and that they are entirely responsible for us in return. Also, if everybody is presenting a perfect relationship and a struggle-free self to the world, then we can feel very alone knowing that we don't really fit that.

## **Wanting to stop partners from struggling**

One result of all this is that we can end up constantly monitoring our partners for any sign that they are starting to struggle, and then – if they do show signs – trying to cheer them up or prove

that they are being irrational. This, of course, is rarely helpful and often makes it more, rather than less, likely that they will feel anxious, self-critical, or hopeless.

Perhaps part of this aim to stop partners from struggling is the fear that we too will be drawn down into the suffering that they are experiencing. If we have had really difficult times ourselves in the past then this fear makes a lot of sense, but unfortunately the reaction to it (trying to stop anyone from feeling bad ever) is pretty unhelpful!

Instead of trying to prevent ourselves, and our partners, from ever struggling, we can try to acknowledge that we will all go through easier and harder times, and that it is okay to be sad, anxious or angry. Paradoxically, accepting such feelings often makes them less debilitating than if we layer extra difficult emotions on top of them (feeling sad about feeling sad, fearful about feeling angry, etc.) In relationships, one great thing we can offer our partners is acceptance that however they are feeling is acceptable and sensible given the situation they find themselves in.

Another part of this is recognising that just because a partner is feeling something, doesn't mean that we have to feel it too. We might feel guilty if we are having a great time in life, whilst a partner is going through a difficult period. However, we are often of more use to them, and to ourselves, if we can hold both those things simultaneously (rather than trying to make them feel as good as us, or sinking down because they are struggling).

### **Different things work for different people at different times**

What about those times when everyone in a relationship is having a hard time at the same time? Perhaps the most important answer is that different things work for different people at different times. For some people, at some times, it may be better to separate off and/or get support elsewhere, whilst others, at other times, find it good to get together for some mutual kindness.

An important part of this is recognising that, even in relationships where people have a lot in common, they might need quite different things when they are having a tough time. For example, some people long for physical contact whilst others find any kind of touch difficult. Some need to talk it all through till they feel better and some find words difficult. Some really want to be alone, whilst others find isolation incredibly hard at such times. And some like others to try to fix things whilst others just want to feel understood. Mutually respectful conversations about what different people find useful when things are difficult can be extremely useful, especially because it can be very hard to articulate these things in the moment when we are suffering.

Here are just a few ideas which might be helpful, and it can also be helpful to remember that all these options are available.

## **Stepping up**

A great example that came up in the workshop, which I've experienced myself, was of spider phobia. I used to be somewhat scared of spiders myself, always asking somebody else to get rid of them. But I noticed that when I was with a partner who was very scared of spiders, I became much braver and actually rather enjoyed being the one to wield the glass and postcard.

Something similar often happens when more than one person is struggling. One person somehow realises that they do have a bit more strength or energy than they thought, and steps up to do some looking after, supporting, or problem-solving (whatever is necessary). It can be empowering to realise how much more we often have than we think we have, even when we've had a rough day or things are hard and we thought that we had nothing left.

The important caveat to this is that it can become problematic if it is always one person who becomes the 'stepper upper' in such situations. Getting stuck in roles (such as the emotional one and the rational one, or the victim and the rescuer) often leads to problems. So it is worth, when you are not struggling, having a conversation about how you might ensure that that doesn't happen.

## **Getting space**

When more than one person is struggling and the struggles seem to be spiralling everyone into even worse places, it can be a very good idea to recognise this and get some time apart. This can happen, for example, when everyone feels that the difficulties they are having right now are much bigger than those that the other person/people are having, and keeps trying to show how much more desperate a place they are in. It can also happen when needs are very incompatible at that time (e.g. one person wanting silence and one wanting to talk).

Again, it can be useful to have agreed plans for what will happen at such times (how to ask for time out, where to go, how to know when to approach each other again, etc.)

## **Support from outside**

It is wonderful if there are people in your lives who recognise that acknowledging difficulties doesn't mean there is anything wrong with you or with the relationship (often quite the opposite). If we can cultivate friendships like this then it can often be good to go to those people at times when people in the relationship don't have much to offer each other because they are struggling so much. Often an outside perspective can be a breath of fresh air, and taking the weight off a partner can allow them time to get to a stronger place.

Again, it can be helpful to lift our sense of responsibility that we should always be in a position to be able to help our partners, and to recognise that we can't always offer that, and that sometimes being alone, or with other people, might be more useful.

### **Kindness and calmness**

When we are weathering storms together with partners (whether the same storm, or different ones), it can often be helpful to focus on very calm, kind activities rather than trying – for example – to fix everything or to carry on with our plans as normal. For example, we might retreat to bed, cuddle up in front of the television, read each other stories, or go out for a walk together somewhere that feels safe. It's good to acknowledge that we don't have much to offer and to think what we have got available, and what activities might be helpful all round. Making sure that we get the basics (food, rest, and some physical activity) can also be very important at such times.

When we are being kind and calm to each other we can often stop the tough stuff from spiralling any deeper and create the right conditions for a gradual improvement. Instead of flailing around desperately trying to fix things immediately, we can find some safety and comfort where we are now, remembering that things will inevitably lift, and will be more likely to do so if we don't force it.

I hope that some of these ideas will be helpful, and that Mental Health Day enables all of us to reflect on how we are all able to contribute to each others' mental health: We can add to others' sense of pressure and alienation, or we can ameliorate it by being open about our own struggles and by offering what we have available.

# Self-Help

## Self-help interview

November 2014

**When did self-help books become bestsellers in the US? Why? What were the first self-help authors who made their way to the top?**

The term 'self-help' was first used by Samuel Smiles in Scotland in 1859, but it was in the US that the idea of self-help books really took off in the twentieth century. Perhaps the first major self-help authors were Dale Carnegie in the 1940s (*How to Make Friends and Influence People*), Norman Vincent Peale in the 1950s (*The Power of Positive Thinking*) and Thomas A. Harris in the 1960s (*I'm OK, You're OK*).

**What have been the preferred topics of self-help books?**

There have been two major ideas in self-help books. The first idea is that people are in control of their own destinies and can improve themselves and their lives by thinking more positively and changing their attitudes. This is the empowerment message in books like *The Power of Positive Thinking*, and the 1980s bestseller *The Secret*.

The second major idea in self-help books, which conflicts with the first idea, is that people cannot help their troubles and that the problems we have are due to bad situations we have been through. For example, *I'm OK, You're OK*, and many other books, blame toxic parenting for the difficulties that people have in life. These kinds of books have been called victimisation self-help books.

**Do you think that these topics have altered over time? Do you think that there are changes in self-help topics in different decades?**

There are definitely shifts in self-help books over time. The empowerment books were popular up until the 1960s, then the victimisation books became much more popular as people began to suspect that there weren't such easy answers to their problems. However, there was a backlash against that in the 1980s with a return to books which promised people that they could control their own destinies and improve themselves.

In recent years, there has been a move towards positive psychology books which focus on how people can be happy and successful through using various psychological techniques.

However, there have also been a few books (like my book and the books of [Oliver Burkeman](#)) that have criticised self-help books for focusing too much on the individual rather than the social situation that they are in. It is damaging to suggest that all people's problems can be fixed by



thinking differently if there are real reasons for their problems (like poverty, unemployment, and discrimination). Also it is often the messages that people receive from the world around them (like the mainstream media) that make people feel worse about themselves. So perhaps we should focus more on changing the world than on changing individual people.

**Some people suggest that books of popular science devoted to help people to improve their lives can be considered self-help too. What do you think about this?**

I like the idea of broadening out self-help to include popular science books, social science books which address the social reasons for people's problems, and also more spiritual books about how to live ethically and compassionately. The popularity of mindfulness is something that I have been writing about recently, finding that people are increasingly drawn to meditation practices and compassion-based approaches to self-help, which hopefully also help them to relate better to other people and to the world around them.

# Oliver Burkeman and the future of self-help

February 2013

Last week I gave a talk on self-help books to literature students at [UEA](#) and, thanks to the marvellous [B. J. Epstein](#), I had the thrill of having my own self-help book read and discussed by a class full of students. You can view the presentation I gave [here](#).

The session gave me an excuse to delve a little deeper into the [history of self-help books](#), to understand more why they came to be the way they are and what is so problematic about that. I also managed to chart one potential future trajectory of self-help, building on this criticism. For this I particularly considered the writing of [Oliver Burkeman](#): one of my favourite discoveries over the last couple of months thanks to his entertaining and radically different approach. I'll outline some of his ideas here so that you can see what an alternative to conventional self-help might look like.

## A bit of history

Examining the history of self-help we can see that books in this genre have tended to be of two types. The first type – *empowerment self-help* – emerged in America after the great depression and drew on the [New Thought movement](#) which believed in the power of positive thinking. Such books held out the promise that by imagining good things and striking the right attitude people could bring what they wanted to themselves: wealth, friends, success, etc. The second type of self-help became popular in the late sixties and seventies. Known as *victimisation self-help*, books in this category tend to blame the wider world for any problems that individuals have. Akin to the [twelve step programmes](#) for addiction, these books are concerned with reassuring readers that their difficulties are not their fault but down to something beyond their control like having toxic parents or a disorder or disease of some kind. Power is located outside the individual.

In the 1980s and 1990s there was a backlash against victimisation self-help and a return to an extreme form of empowerment self-help which argued that any problems were down to the individual and could be fixed by positive thinking. For example, a quote in the bestseller [The Secret](#) by the author's fellow self-help writer, Bob Proctor, says "Why do you think that 1 percent of the population earns around 96 percent of all the money that's being earned? Do you think that's an accident? It's designed that way. They understand something. They understand The Secret, and now you are being introduced to The Secret." The Secret in question is the New Thought law of attraction, that successful people bring positive things to themselves merely by thinking about them.

Clearly both these forms of self-help are problematic, and together they set up a false binary around human struggles which is similar to the either/or view of mental health which I've

discussed elsewhere. It seems that we have to believe *either* that we are personally responsible for all our problems but that we can fix them by changing ourselves, *or* that the world is responsible for all our problems but that we are powerless then to do anything about them. If we buy into the empowerment way of seeing things then it easily slips into victim blame, whereby we regard everyone, including ourselves, as to blame for any problems in life. If we buy into the victimisation way of seeing things then we have to believe that there is something fundamentally wrong with us and give up any sense that we could do anything about our difficulties.

### **A third way? Oliver Burkeman**

In recent years it seems that a few authors have been looking for a kind of third way of doing self-help: a way that involves breaking out of this problematic binary. What I have called anti-self-help self-help starts from a criticism of the assumptions of the self-help movement in general. It asks questions about whether it is actually good to strive for the things that self-help suggests that we strive for: happiness, wealth, success, a romantic relationship, etc. Are these good things to have and, even if they are, is striving for them the best way of going about it? Anti-self-help self-help locates any problems that we have in the wider society that surrounds us, the messages we receive from it, and how we relate to these, rather than seeing us as isolated individuals responsible for everything that happens to us. But, at the same time, it sees us as actively engaged with this wider world and able to engage with it in different ways, rather than as powerless.

A great example of such anti-self-help self-help is the writing of Oliver Burkeman. Like his Guardian newspaper column, *This Column Will Change Your Life*, his first book, *Help!*, presented an analysis of existing self-help books, attempting to pull out actually useful suggestions from the overwhelming mass of contradictory messages that he found. His second book, *The Antidote*, builds on the criticisms of self-help that he came to when writing *Help!* and suggests a radically different approach. Positive thinking, argues Burkeman, actually makes us suffer. The empowerment self-help movement has got it completely wrong. What he offers in its place refuses the disempowering position of victimisation self-help, but instead embraces the potentials of what he calls a 'negative path'. This draws on a cluster of approaches taken from philosophies from Buddhism to Eckhart Tolle, the Stoics of Ancient Greece to the Mexican Day of the Dead. What these have in common is that they all do the opposite of 'positive thinking', instead turning to face the difficult stuff of life.

Thus Burkeman argues for the benefits of meditating on the inevitable fact of our own mortality. He critically evaluates the way in which we tend to react to 'bad things' in our day-to-day life, and considers alternatives where we recognise our own role in categorising what is good and bad and trying to get all of the former and none of the latter. He explores meditation and building the capacity to be with difficult feelings, turning towards the things that scare us rather than away from them. He considers the power of just getting on with tasks we are avoiding, rather than assuming that we have to 'find our passion' or 'get motivated' before we can do anything. He explores the value in considering the worst that could happen (and whether what is happening

is 'just bad' or 'absolutely terrible') as well as asking yourself whether you have a problem right now, in the present moment. He questions who this self is that we are trying to improve through self-help, and wonders whether it might be more useful to reflect on whether such a thing really exists in any meaningful sense, rather than assuming that it does and engaging in a futile quest to make it better.

I loved *The Antidote* because it resonates so well with the answers (and – perhaps more usefully – questions) that I have come to through my own journey through the ways in which psychology, psychotherapy, philosophy, and sociology have understood human suffering and what can be done about it. Like my work, the book is particularly rooted in Buddhist philosophy and it is very nice to see that engaged with so thoughtfully, rather than just being offered as another set of techniques to **make people happier**.

### **The anti-self-help self-help manifesto**

Where to from here? I would like to see many more anti-self-help self-help books which start from a critical stance towards the self-help industry and offer something more valuable to people who want to think about how they are living and how they might do it differently. Such work would, I think, share some of the following things in common:

- A critical stance towards conventional self-help
- A critical stance towards normative taken-for-granted ideas about what makes a good person and a successful life, and whether happiness and wealth are the best things to be striving for
- An informed understanding of the problems with telling people that they are flawed in some way and need to change by striving after something different
- Drawing on research evidence from psychology and sociology, as well as philosophical understandings from across the globe (not just the 'west'), in order to suggest what might be helpful to people
- Locating people's problems in the inter-relation between them and the world around them rather than entirely internally or entirely external – regarding people as biopsychosocial beings rather than focusing on one of those aspects (bio, psycho, social) to the exclusion of the others
- Suggesting ways forward which involve engaging with the world differently, and recognising how difficult this can be and arguing for wider social change, rather than putting all responsibility on the individual
- An ethical commitment to putting something different 'out there' even though the publishing industry conservatively continues to try to publish the same kinds of messages as before

There is more about self-help with useful links to other work [here](#).

## Self-help or not self-help?

April 2012

I recently read a great new book by my colleague, Scott Cherry, called *How to Stop Reading Self-Help Books*. As well as being an entertaining read it presents some serious problems with self-help books and the self-help industry more widely. The book ends with a programme for weaning oneself off self-help books, written in a self-help book style of course!

But of course I am in a bit of a strange position in relation to criticising self-help books because haven't I recently written something which looks very much like a self-help book myself? Here I want to summarise some of the reasons why I agree, with Scott, that it is worth being very cautious about such books, and also to explore some possibilities for engaging with this genre creatively (and, as Scott emphasises, critically) rather than wishing for its total demise.

### Anti-self-help

In the introduction to *Rewriting the Rules* I call my book an 'anti-self-help' book. The reason for this is that in the very title 'self-help' there is an implication that there is something wrong with you (the self) which requires help.

So most other relationship self-help books locate the problems that people have with relationships (either problems getting together with someone, or difficulties in relationships) in the individual who is reading the book. There is a suggestion that the reason that we have problems with relationships is due to something within us such as being too needy, not understanding the 'opposite sex' well enough, failing to be enticing enough, or being poor at the art of seduction. The answer, of course, is to be found within the pages of the book: we need to change ourselves in order to fix our problem.

Similarly self-help books on other topics identify a flaw in the reader which can be addressed through following the advice in the book in order to create a more successful self.

In *Rewriting the Rules* I take a different perspective and suggest that the reason that we (all) struggle with relationships is mostly to do with something outside our selves: the messages that we receive about the way we should do relationships. And that it is these that could do with changing.

Furthermore I locate a lot of the problems that people have, in relationships with other people and with themselves, in the very way of seeing yourself that self-help books encourage. I argue that self-help books are part of a wider culture (reality TV, celebs, advertisements and so on) which encourages us to constantly monitor ourselves, to compare ourselves to other people, and to judge ourselves, whilst trying to present a perfect image to the world.

Striving to be a perfect self and to have a perfect relationship puts a great deal of pressure on people which paradoxically makes it much harder to be kind to ourselves or to be content in our relationships. Body ideals leave us feeling miserable about our bodies, constant critical comparison to others is linked to depression, and trying to have a Hollywood romance leads to relationship distress.

So *Rewriting the Rules* is an anti-self-help book in that it doesn't suggest that our problems can be located in something that is wrong with us, as individuals, and it also tries to work against the mainstream self-help industry which I perceive as generally part of the problem rather than the solution.

### **So can't we help ourselves?**

In one way *Rewriting the Rules* is arguing that culture is the thing that needs to change, not us as individuals. For example it would be good if culturally we stopped having such narrow ideals of beauty, or seeing people as to blame for their problems, or telling them that there's only one way of having sex or doing relationships.

However, it wouldn't be a terribly helpful book to read if it just said 'culture is to blame, not you!' and left it at that. For one thing we all have to operate within culture as it currently is, and for another thing culture is us, and can shift, so it's worth thinking a bit about how we can be part of that (and who already is doing that). For that reason, in the book, I explore other ways of doing things that are out there (aside from the most prevalent messages about relationships) and ways in which we might navigate the culture we find ourselves in – resisting it, opening it up, creatively engaging with it – to find other ways of relating to ourselves, to each other, and to culture itself.

So I do offer lots of suggestions in the book which might sound a lot like conventional self-help. For example, in the chapter on relationship conflict I offer some guidelines that we might follow when we are fighting. In the chapter on attraction I suggest some ways in which we might learn to treat our bodies, and the bodies of others, more kindly. And in the chapter on sex I draw on sex therapy and sexual community ideas about how to tune into, and communicate, our desires.

### **Critical thinking is the key**

Scott Cherry's book is subtitled *some simple steps and a dash of critical thinking*. This is really the key for me. Most self-help books do not include much in the way of 'critical thinking' whereas that is what *Rewriting the Rules* is all about. I'm inviting the reader to think about what those messages are (about how to have relationships, and how to treat ourselves) and then think critically about those, and to consider what we often take-for-granted and bring that out into the open to think critically about as well.

Thinking critically might involve looking at the research evidence, or asking questions such as 'is this useful for me?', 'what about the people around me?', 'who is excluded from this?', 'how might it be for them?' and 'what alternatives might there be and what would they be like?'

Of course once we've had a good critical think we might decide actually this is just fine for us and to keep on subscribing to those messages or ideas. The thing is to have them available for thinking about, rather than just believing that we have to go along with them, and to open them up to critical reflection.

### **Self-help books of the future?**

Scott's analysis of self-help books is very useful because it helps us to see what self-help books have tended to look like until now. Unfortunately the publishing world is quite resistant to anything that looks different to those existing books, as I found during my long search for a publisher. They know that those books sell and it is daunting to take a risk on anything different (and for this reason I will always be grateful to Routledge for taking a risk on my book).

The majority of self-help books propose individual internal causes for problems and offer the words of wisdom of the author as the solution for everyone. What if we challenged both of those ideas in books of the future?

First, we could move away from internal causes. Instead we could embrace what most academics now accept as a better way of understanding difficulties (from depression to relationship troubles to pain) which is a biopsychosocial model. We need all of those levels of understanding when making sense of our experiences, and they are inextricably interwoven in complex ways. Most self-help books neglect the latter part (the social) so we need to bring it back in.

Second, we could recognise that different things work for different people at different times. My book would have been very poor indeed if it said 'here is the one true way of doing relationships and everyone should follow it'. Clearly people think about, and manage, their relationships in all kinds of ways. People like to live alone or with others, to combine finances or to keep them separate, to have one main person in their life or many, and all sorts of other differences.

So I would like self-help books to recognise this and to be more of a jumping off point for people's own explorations rather than providing them with a single, universal, destination. It would be particularly useful to give examples of lots of the diverse things that people find helpful (as I'm hoping to do in a book I have in mind on all of the different things that help with depression). Also I would think that a good self-help book would be about asking questions more than it was about providing answers.

There are examples of self-help books that I would advocate, so I can't criticise the whole lot of them. [Dorothy Rowe's](#) books (on depression, friendship and the like) are a great example of books which include the social aspect and question taken-for-granted. Whilst I don't subscribe to all the theories that [Paul Gilbert](#) draws on in [The Compassionate Mind](#), this book is both biopsychosocial and encouraging of a more compassionate (rather than critical) way of treating ourselves. Books like [Esther Perel's Mating in Captivity](#) and [Dossie Easton](#) and Janet Hardy's [The Ethical Slut](#) challenge conventional rules of relating and explore how we can manage our relationships in different ways. Both books embrace diversity rather than offering one universal way of doing things.

Every book is imperfect and limited, but it seems to me that it is possible to write a self-help book that opens things up more than it closes them down and which, rather than offering some final point of 'self-fulfilment' (which, as Scott points out, should mean that we no longer need any self-help books), more humbly offer itself as an invitation into critical thinking on an area: a starting point for the reader's own continued explorations, and an encouragement to change the world rather than fixing our selves.

### **Find out more**

Scott's book is available [here](#).

There's a helpful history of self-help books, with consideration of the ways in which they are valuable and potentially damaging by [Laura Vanderkam here](#).

[Petra Boynton](#) asks 'self help or self harm?' on her blog about relationship books.

[Micki McGee](#) has a [Self Help, Inc.](#) blog on the topic.

There's an interesting post about the possibility of scientific self-help [here](#).

There's a more positive take on the subject by [Alain de Botton here](#).

Other books which critique the self help industry, listed in Scott's book, include:



- Kaminer, W. (1992). *I'm dysfunctional, you're dysfunctional: the recovery movement and other self-help fashions*. New York: Addison-Wesley.
- McGee, M. (2005). *Self-help, Inc. Makeover culture in American life*. Oxford: Oxford University Press.
- Pearsall, P. (2005). *The last self-help book you'll ever need: repress the anger, think negatively, be a good blamer & throttle your inner child*. New York: Basic Books.
- Peele, N. V. (1995). [1989] *Diseasing of America: how we allowed recovery zealots and the treatment industry to convince us we are out of control*. San Francisco: Jossey-Bass.
- Salerno, S. (2005). *SHAM: Self-help and actualization movement*. London: Nicholas Brealey.
- Simmonds, W. (1992). *Women and self-help culture: reading between the lines*. New Jersey: Rutgers.
- Tiede, T. (2001). *Self-help nation: the long overdue, entirely justified, delightfully hostile guide to the snake oil peddlers who are sapping our nation's souls*. New York: Atlantic.

# Self Love

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megjohnandjustin.com/you/self-love/*

## **What does loving yourself mean?**

When people think of self-love they might imagine somebody looking in the mirror saying 'I love you' to themselves: a very big ask for most of us. We could move away from the idea of love as a feeling, towards bell hooks's definition of love as something we do (a verb, or doing word).

Feeling or stating love for another person isn't necessarily a loving thing to do, for example if we act on the feeling in an entitled way, or say 'I love you' when we know it discomforts them. What is loving is to practice love: to act in ways that treat them kindly and consensually. Similarly, if we take the pressure of being able to feel love for ourselves, or say that we love ourselves, we can simply practice doing loving things towards ourselves. We don't have to be able to feel it or say it to be able to do it, but doing may expand our capacity to feel it in time.

## **Why don't people do self-love?**

Self-love is not prioritised in our culture. It's often seen as selfish or self-absorbed, as a weird or 'woo' thing to do, or as making you a bit of a loser or sad person because being loved by others is regarded as more valid than loving yourself (a bit like the way sex with others is seen as superior to solo sex).

The Ancient Greeks saw self-love as one of the main kinds of love: Philautia. Various forms of Buddhism regard befriending yourself, or cultivating gentleness and loving-kindness towards yourself, as vital. So there are models for self-love across time and around the world.

Our struggle with self-love is rooted in our consumer capitalist culture where selling products relies on making people feel that they are lacking and need something to fill that lack: A culture focused on having rather than being. In fact in such a culture even self-love itself becomes commodified: we're told that we aren't good enough at it and need to spend money and time on it on top of everything else.

## **Intersectional self-love**

Self-love is likely to be harder for some groups than others. For example, women are particularly brought up to locate their worth in their relationships with others (being good, desirable, and loved by others). It's broadly seen as more appropriate for men to focus on their own goals and ambitions, expecting others to support those.

People whose lives, bodies, and labour are treated as less valuable than others may struggle to self-love because wider society teaches them that they aren't as deserving of it as others. People who are marginalised in all kinds of ways may have internalised shame and stigma in

ways that make it hard to love themselves. Disabled people are often taught that they are a burden and shouldn't ask for things that would be self-loving for them, or that they need to demonstrate how hard their lives are in order to access support so being self-loving is hard to do.

### **Why is self-love important?**

It would be great if we could just accept that we are worthy of love to the extent that this question didn't make any sense, but few of us do accept that. So here are a few reasons why it's better for other people too if we do self-love:

- Being loving and kind towards ourselves generally increases our capacity to be loving, kind, and real with others around us
- We need to replenish ourselves to have energy and support to give others
- When we focus on doing things for others we often do it in ways that don't really take account of what they want (non-consensual) and ways which obligate them to give back to us or leave us resentful or worn out
- Learning to be gentle and compassionate with ourselves is vital if we're going to look honestly at our patterns and how they hurt others, and how we're implicated in systems and structures that hurt others - which is pretty vital that we all do right now

### **Systems, structures and spaces to support self-love**

The systems, structures, and spaces around us often make it hard to practice self-love. So it's good to first think about how we might shift these things in our lives - creating micro-cultures that support us and our people to practice self-love.

For example we might think about the spaces we occupy everyday and whether we can carve out nurturing spaces and times for ourselves (e.g. a corner of the house for us, a nice spot we go to every day to be alone). Can we cultivate communities of friends and close ones where we mutually make time for self-love and help provide the times, spaces, and resources that support each other (e.g. peer-to-peer support sessions, journalling alongside each other, meeting in a group and sharing about our lives).

### **Rhythms, routines and relationships to support self-love**

Related to this are the rhythms and routines of our lives. It's good to play with this for a time before we settle into what works for us. For example, what routines might we have around getting up, mealtimes, travelling, and going to bed which make those particularly self-loving times? How can we invite the people we live with, colleagues, and others in our lives to help us self-love, and do the same in return for them?

### **Self-love languages**

The idea of love languages (the ways we like to give and receive love with others) can be useful to apply to loving ourselves. For example, do we like to self-love with quality time, gifts, words, service, touch, and/or other things? Again we might play with different ideas to find out what works for us. We might consider nourishing ourselves with tasty meals, making regular solo time

somewhere pleasant with a hot drink in the morning, journaling, getting gifts for ourselves, and looking after our bodies in various ways.

### **Loving our plural selves**

It can be easier to love parts of ourselves than the whole unit. For example, we might do loving things which we know our future self will appreciate, or send love back to past versions of ourself. We could access compassionate sides of ourselves to look after more vulnerable selves, or visualise a compassionate person in our lives - or fictional character - talking to us.

We might give gifts between different sides of ourselves, and do different activities which nurture - and give expression - to different sides too.

### **Self-loving as self-loving**

Solo sex can be a great way to practice self-loving. This might involve deliberately making space for it, and perhaps slowing it down rather than just doing it to have a release.

### **Go easy on yourself**

Finally please be gentle with yourself around this. Self-love easily becomes yet another stick to beat yourself with in our self-critical culture, and that's so not the point. Different things work for different people, and we do need help and support to do it. Play with the idea and go easy if it's tough at times.

# Mindfulness

## Mindfulness: It ain't what you do it's the way that you do it

Summer 2014

I've been interested in mindfulness for many years now. I've written a book on [mindful therapy](#) about how all different kinds of counsellors can engage with mindfulness, and how we can approach different struggles – like depression and anxiety – mindfully. It's a good starting point if you want to find out more.

Mindfulness is still the big idea in counselling and psychology. The 'gold standard' of counselling – cognitive-behavioural therapy – has turned to mindfulness as its 'third wave'. If you go to a mental health services it's likely they'll offer you some kind of mindfulness training. Self help books for depression and anxiety are increasingly mindfulness focused.

One conclusion I've come to is that there's no such thing as an inherently mindful or non-mindful activity. People – including myself at times – often have the idea that only certain activities could be mindful: like meditating, walking in the countryside, perhaps painting or other tranquil pursuits. There's definitely a notion that certain activities are anti-mindful or mindless, including things like watching TV, commuting or social-networking.

As with the idea that you're doing meditation wrong if you don't have a completely 'empty mind' I think this is a misconception which isn't helpful and which often leads people to beating themselves up that they aren't doing mindfulness properly – which really defeats the purpose! Just as you can sit in meditation without being mindful at all, I think you can also be mindful while you're texting or surfing the internet.

Here I want to say what I think mindfulness is and why it's all about the way you approach activities, not the activity itself.

### **Mindfulness**

Mindfulness is an idea which originated in Buddhism over two thousand years ago. It involves being aware of the present moment in an accepting way. The theory of mindfulness is that much human suffering involves our being out of the present moment – going over things from the past or planning for the future – in a way which tries to make things different, and which takes us away from any awareness of the here-and-now.

*I wake up in the morning and immediately remember something I said in a meeting yesterday which I'm worried sounded foolish. As I make coffee and eat breakfast I'm going over and over how I could have done it differently and what people will be thinking of me. Walking to work I'm planning for the day, concerned about how I'm going to fit everything in. I'm brought back with irritation as someone pushes past me on the tube. At work with each task I undertake I'm focused on getting it out of the way so that I can get on with the next one. I keep refreshing my facebook and twitter to distract myself because I'm not enjoying the work. I start worrying maybe this job is no good. If only I worked somewhere else, then I'd be happy. I spend the journey home daydreaming about a different life but the distance between my life and that one brings me down. Back home I switch on the TV and escape into my shows.*

The practice of mindfulness involves deliberately cultivating the opposite to this habitual mode of being. Instead of wishing that things were otherwise, we try to be with them as they are with acceptance. Instead of going off into past and future, we try to stay in the present. And instead of missing what's going on around us, and in our bodies, we deliberately bring awareness to those things.

That explains why the basic mindfulness practice is just sitting still and paying attention to your breath going in and out. That's a good way of practising being in the present moment and being aware of the most basic aspects of experience. Also, our breath connects us to the world in a fundamental way, and it's always there, so it's a useful focal point.

But the idea that we should have an empty mind while we are practising mindfulness is a misconception because the whole point is to be present to whatever is here in the moment. Inevitably that will include sounds outside, thoughts and feelings bubbling up, an itch or pain in the body. Mindfulness is about embracing all these things in a kind of spacious awareness: not latching on to any of them, but equally not trying to ignore them either. And of course we'll find ourselves following a thought process that's just too sticky to avoid, or forgetting our breath when the building noise outside annoys us. At those times we just notice what's happened with interest, and the impact it has on us, and gently bring ourselves back to the breath.

The real, and only, purpose of practising mindfulness (whether we do it in sitting meditation, or slow walking, yoga, painting or whatever works for us) is so that we can bring that way of being into the rest of our lives. Again, this is no easy matter, and berating ourselves every time we realise that we are not being mindful is really not the idea!

Thich Nhat Hanh, who wrote *The Miracle of Mindfulness*, suggests that everyday tasks like washing up and eating a tangerine are good ones to practise bringing mindfulness into our daily life. And that makes a lot of sense because, like breathing, they're relatively simple activities which makes them conducive to that kind of accepting awareness of the present.

## All activities can be mindful

However, I think it's important to realise that all activities can be done mindfully, and that's really what mindfulness is aiming for – without imagining that that is really achievable all of the time, which is why every now and again it is useful to stop and breathe.

So what of those activities which seem the furthest removed from mindfulness? Isn't television always distraction and escapism? How could day-dreaming ever be present when it is all about the future or the past? And surely it isn't possible to be mindful as we dip between email, facebook and twitter, skipping randomly from one thing to another without enough time to take any of them in?

I disagree because in terms of experience I feel that there is a difference between times when I'm watching TV as a distraction and times when I'm engaged with it. Or times when I'm aimlessly wandering around the internet versus times when I'm connecting with this person and that idea in a way that's present and open to each one. There are times when I can be fully present to a day-dream.

I suspect that we do all need some time in our daily routine when we're still, or focused on a very simple task, in order to observe our usual habits and to cultivate a more mindful way of being. But I also think we can bring that into the rest of the kinds of lives we have today, noticing when we've strayed away from it and kindly reminding ourselves to come back.

*I wake up in the morning and sit for a while, noticing how I'm drawn to thinking about that meeting yesterday and gently bringing myself back to the breath. Making a coffee I appreciate the smell as I open the tin, the feel of the warm mug in my hand, the soapy water as I wash up afterwards. Walking to work I think over what I have to do in the day and notice a knot of stress building. I gently bring myself back to the tube, sharing a smile with a fellow commuter as we do-si-do out of each other's way. At work I take time to check in with a colleague, wryly noticing my desire to ask whether they thought I was foolish in that meeting yesterday. I think about which task I'm most in the mood for and devote a couple of hours to that before moving on to less interesting things. In a break I enjoy the free-floating sense of dipping around facebook and twitter, and focus in on a couple of posts that interest me, enjoying the brief connection with someone on another continent who's thinking about such similar things to me today. Walking home from the station I create a daydream about an imaginary party with all my favourite fictional characters. I can feel the evening air on my face and see the people walking past me at the same time as I'm sharing cocktails with Anna Madrigal and Dr. Watson. Back home I make myself a meal, noticing the colours, smells and textures of the vegetables as I chop them. I close the curtains and watch an episode of my favourite show, appreciating the sleepy cosiness of the end of the day.*

# Mind the gap: The (micro and macro) gap as a radical act

May 2020

This post is all about the value of making gaps – micro to macro – in our everyday lives for self-consent, for relating well with others, and for resisting wider non-consensual cultures. There is a plural post on this subject in my free book on Plurality.

## Micro and macro gaps

You could see gaps on a spectrum between the micro and the macro. On the micro level it could be as small as taking a breath between sentences \*breath\*. For example, that might apply when writing or speaking. Next level there is the value of taking a gap between one daily activity and the next: to be in the present moment rather than racing on to the next thing. Then we might consider gaps in the week or month (like what we do with weekends or holidays or their equivalent). Finally, on the macro level, what about gaps following big life changes or upheavals?

I've noticed a tendency to overlap both big relationships and big projects – like books I'm writing. Just as it feels unfamiliar and edgy to allow gaps between daily activities, it can feel similarly difficult to allow gaps between people and projects, but so essential in order to mark endings, process big changes, and settle. With a big enough gap I can know that new relationships and projects are intentional and consensual, rather than an attempt to avoid difficult feelings or (re)create myself to avoid being with who and how I am. Perhaps as the level increases in size, the gap needs to be longer in order to slow down and process what's just gone, and to tune into what to do next.

## Consent and the gap

Slowness weaves together with consent because it's a way of ensuring that our consent with ourselves – and others – is ongoing rather than a one-off. For example, if we start the day with a to-do list and only feel okay if we complete it, that is one-off consent (like starting sex with a script and only feeling okay if we manage to follow it). If we check in, ongoing, during the day, as with sex it is more likely to be [consensual](#).

Babette Rothschild's concept of [mindful gauges](#), and Love Uncommon's practices for [self-consent](#) can help us to use the gap to learn what our body feels like when it is in – and out of – consent.



## **Why do we avoid the gap?**

We avoid slowing down – or giving ourselves gaps – because they often confront us with the very feelings we were trying to avoid by going at such speed, particularly tough ones like fear, shame, and loneliness. Paradoxically the more we're able to slow down and be in those moments, the less uncomfortable they are likely to be, because we become more used to being with ourselves whatever the feelings, and often the feelings don't have to be so intense: shouting loudly to be heard over all the noise of busyness and distraction. Kindness is key. We need to cultivate enough kindness with ourselves to be able to stay with ourselves in those moments. Staying in those moments cultivates kindness, and cultivating kindness helps us to be able to stay.

## **How do we avoid the gap?**

Many of us use combinations of the **four F trauma** strategies to avoid slowness and gaps. Fight is when our mind is constantly busy blaming others or ourselves for everything and trying to control our experience. Flight is when we throw ourselves into work and productivity. Freeze is when we constantly distract (e.g. with TV, social media, food, etc.) Fawn is when we rush to please others and respond to every bid for our attention. Some of these things can – on the surface – look slow (like when we're obsessing mentally or crashing out in front of the TV), but if we're checked out then we're not really being present to ourselves or the moment. It's not so much about what you do, but about how you engage with it.

## **The gap as prevention of – and response to – reactivity**

When we make gaps regularly we're more able to notice when we've become reactive: when our nervous system has shifted into that fight or flight mode, or dissociated. Regular check-in gaps during a day can enable us to notice such a shift when it is still just a flicker, and allow our nervous system to come back to neutral. We can also commit to pausing and looking after ourselves additionally whenever we notice that flicker come up during daily activities, and we're more likely to notice that when we're used to slowing down. Staying with the **flicker can stop it becoming a flame or fire**, and also help us to learn what to do when the reactivity is more accelerated.

## **The gap as a radical act**

Some may critique such slowness and spaciousness as only possible with privilege, and this connection is worth being aware of. However, slowing down and creating gaps – as much as we can realistically manage – does also mean we're far less likely to hurt others, and ourselves, and damage relationships. It's when we're sped up, over-stretched, distracted, or dissociated that we risk treating ourselves and others non-consensually, lashing out, offering too much and having to pull it away, and making mistakes.

The gap can also be seen as a radical act under neoliberal capitalism where we're so often encouraged to produce more and more by going faster and faster. What would it mean to know that we're enough in this moment and don't need to be more? Could slowing down help us to be with the fear and shame we're trained into feeling unless we're happy, successful, and in a certain kind of love relationship? if we could be with those feelings kindly, might we be able to stop constantly striving for such impossible permanent goals.

### **Doing it your way**

There is no one true way of slowness. In recent years it has become somewhat fetishised in the form of mindfulness and/or meditation. While such approaches can help us to learn ways of being slow and still with ourselves, they often just result in another thing we're meant to do with our days, and another thing to feel bad about ourselves for not doing 'properly'. There is no 'properly'. It's not about 'not thinking' or 'feeling calm' or anything like that. It's just about pausing – briefly or for longer – and being aware of everything going on right now: sights, sounds, sensations, thoughts, feelings, whatever is there. We're not emphasizing any of it, not trying to avoid any of it, just being with it.

# Mindfulness: A strategy for social engagement?

September 2014

People who read my blogs and other writing will know that one of the things I'm heavily into is mindfulness. This is, broadly speaking, the practice of cultivating awareness, often through meditation where you gently focus on your breath going in and out, or on the sounds around you, or on your bodily sensations as you walk very slowly back and forth.

My excitement about mindfulness may seem a bit peculiar to those who know that the other areas which I'm passionately engaged in are all very social: issues around relationship structures, discrimination of marginalised groups in society, and power and conflict. Mindfulness seems such an internal, individual thing, how can it possibly be relevant to these matters. As somebody asked in an Open University seminar on the topic: 'where is the social?'

Such questions were the motivation behind a weekend workshop/retreat which I attended earlier this month. Steven Stanley and I put together the weekend with a group of colleagues to address the question of social mindfulness. The weekend consisted of a combination of periods of meditation and other mindful-type practices (such as [Qigong](#)), together with presentations and discussions linking mindfulness to various social issues including sustainability, interpersonal and intergroup conflict, prejudice and discrimination, mental health and communication.

Perhaps the most striking thing about the weekend was the way in which the kinds of challenges we were discussing were so live within the group itself. Perhaps – particularly as a relationship therapist – I should have expected that these [psychosocial](#) issues would come up in the *process* of our interactions as well as in the *content* of them. But I really didn't anticipate it, and I found it tough indeed to notice how much my thoughts, when meditating, kept returning to niggles about my exchanges with other people, and how many of our group discussions themselves became conflictual or manifested some of the very power dynamics which we were trying so hard to address.

Mindfulness retreats, in my experience, are often humbling experiences in this way: in the silence and stillness we are forced to confront the kinds of petty judging and competitiveness that we fall into a lot of the time, and it is not a comfortable experience. At times I found it frustrating. Perhaps on some level I wanted us to prove to everyone how socially beneficial mindfulness could be by having some wonderfully experience of perfect connection, simply because we were all being so mindful! But perhaps what really happened was a lot more useful because it reminded us that what we really were was just a group of human beings, with all the messiness that entails. The inevitable tensions, scratchiness, miscommunications and disengagements – if we are courageous enough to face them – provide a perfect arena for

thinking about how all our mindful ideas and practices could usefully be brought to bear on other social situations.

In my next two blogs I want to focus on two tensions, which emerged for me, from the weekend, which I think are key to this question of how mindfulness ways of understanding the world, and living our lives, might be useful in terms of wider social issues. The first is about whether we focus inwards on ourselves or outwards on the world around us. The second is about a tension between kindness and honesty. In both cases, of course, these are not mutually exclusive things, and perhaps the important shift is from an either/or way of seeing them (*either* I can focus inwards *or* outwards, *either* I can be kind *or* I can be honest) to a both/and way of embracing each 'side', or perhaps bringing them into dialogue with each other, or seeing what it is like to oscillate between them like a pendulum rather than prioritising one 'side' over the other.

### **Focus inwards / focus outwards**

Perhaps the most interesting discussion of the weekend, for me, was one about internal or external focus.

Some of us found ourselves arguing for the social benefits of very internal mindfulness practices because – if we do not look into ourselves in this way – we may well find ourselves intervening with others in ways that are harmful to them. One way in which we are all social is that our exchanges and interactions over the years (with close friends, wider groups and society at large), leave us with painful feelings, fears about ourselves, and uncomfortable habits. For example, we may have grown up in a family where it was expected that everyone be tough, or we may have been bullied at school for being a misfit, or we may have taken on board a wider societal habit of judging people by their appearances. If we are not aware of these things we may find ourselves just acting on them when we interact with others (e.g. trying to be the tough guy all the time). Or we might try to suppress them and keep them hidden, but find that they blurt out, or that we project them onto other people (e.g. using an appearance word like 'fat' as an insult without meaning to, or viewing somebody else as a misfit because we're trying not to be one ourselves).

The extreme 'internal' position might be that putting our 'stuff' onto other people like this is so inevitable that the best thing we can do is to focus inwardly a lot, and just endeavour not to cause harm in these ways. Trying to intervene with others is just too dangerous and will likely involve us imposing ourselves, or our society, onto them in ways that are deeply problematic because we can't ever know enough about their situation.

Perhaps the opposite view to this is to see the social benefits only of external practices where we do actually go out into the world and intervene. This view might look at internal practices, such as meditation, and ask what good they are doing. In a world where there is so much suffering, meditation, therapy and the like seem like incredibly privileged activities, only available

to a few who have the necessary time and resources. They can also appear like a kind of self-indulgent naval-gazing which encourage us to focus inwards on self-improvement or on beating ourselves up, instead of outwards on activities which might actually diminish suffering or help other people. Wouldn't it be better if all the time, energy and resources spent on such internal-focused practices was put into activism or directed towards those with greater needs?

The extreme 'external' position might be to focus entirely on intervention: to get out into the world and find out what the most pressing issues are (the threat to the environment perhaps, or poverty, or war), to develop our skills and knowledge in these areas, and to do something which might be of help. External mindfulness practices might take the form of encouraging people into mindful dialogue to resolve conflict (for example, by teaching listening practices), or they might be ways of increasing sustainability through encouraging awareness of 'conditioned arising' (e.g. where the pair of jeans we see in the supermarket came from, and what the impact is of buying them).

The well known mindfulness teacher, Thich Nhat Hanh, was presented with just this challenge of inner or outer focus. In the 1970s a monk asked him what the best response was to the crisis of refugees in Vietnam after the war: should the monks stay in their monastery and meditate, or should they get out there and try to feed and house the refugees. Thich Nhat Hanh responded that they should do both, and his book *The Miracle of Mindfulness* was written as a fuller response to this social issue. This is why the book focuses on bringing mindfulness into all our daily activities, rather than it just being something that we do sitting on a cushion.

Steven Batchelor, in *Buddhism Without Beliefs*, also emphasises a kind of oscillation between retreat and engagement. He says that our practice cannot be abstracted from the way in which we interact with the world, which needs to be with integrity, but perhaps we cannot know what the ethical way to act is if we do not take time to tune into ourselves and to consider others with empathy. However, we can never reach a certainty of the impact our actions will have, so we have to act, to be open to learning from our mistakes, to notice when our habits kick in when we are acting on self-interest, and then to act again, attempting to avoid this.

*'At times we may concentrate on the specifics of material existence: creating a livelihood that is in accord with our deepest values and aspirations. At times we may retreat: disentangling ourselves from social and psychological pressures in order to reconsider our life in a quiet and supportive setting. At times we may engage with the world: responding empathetically and creatively to the anguish of others'* (Batchelor, 1997, p.42).

Perhaps it is useful, also, to be aware of the risk of meditation – and other more 'inner' focused practices – to become a mode of self-monitoring, done with the aim of self-improvement, which takes us away from engagement with others, as well as of the risk that externally focused activities may be done in a way that hurts others if we do not attempt to be aware of what we bring to those situations in terms of our personal hopes and fears.

## Kindness / honesty

The second tension which emerged, for me, over the weekend was perhaps less explicit than the other one, and harder to capture. It is about whether we prioritise kindness or honesty in our interactions with others (and with ourselves).

Of course, again, these categories are not mutually exclusive. Indeed one understanding of mindfulness could be as a form of kind honesty, or honest kindness. It is not there in the early Buddhist definitions of mindfulness, which focus on open attention (which could, perhaps, be viewed as a form of honesty with ourselves), but recent western mindful therapies – for example – often bring together concepts of awareness with those of compassion or acceptance. And the kind of awareness which is advocated in mindful meditation, more broadly, is a gentle or kind one. For example, when we meditate we are encouraged to be aware of the thoughts and feelings that bubble up, but not to become too attached to them. However, we are also not meant to squash them or try to eradicate them. Rather the aim is to be compassionately aware of them, and to gently bring our attention back to our breath or other focus of meditation. This kind of practice reminds us of the sorts of stories and habits that we can get easily become caught up in.

When it comes to our interactions with others it seems that a prioritising of kindness *can* take us away from being honest, and a prioritising of honesty *can* take us away from being kind. For example, a mindfulness activity which I brought to the weekend (based on some writing I've been doing with Jamie Heckert) was about two different common strategies for dealing with situations of conflict where one person or group has more power than the other because of their social status. One of these strategies focuses more on kindness, where we try to compassionately understand where ourselves, and the other people, are coming from in the conflict and focus on reaching an understanding, being gentler with each other, and perhaps forgiving and accepting. The other strategy focuses more on honesty, where we look at what is going on in the conflict (perhaps explicitly and implicitly) and we name it publicly, drawing attention to the power dynamics which are at play and the privileges which one person or group has which means that their voice may be more heard than the others.

As I see it now, the dangers are that kindness-focused strategies may fall into 'niceness', whilst honesty-focused strategies may fall into 'rudeness'.

When we are trying so hard to be kind that we prioritise compassion over honesty, we may find ourselves ignoring or avoiding tensions which are there in order that everybody gets along. We might fail to see the power dynamics and marginalisations that are happening because we do not want to have to face difficult conversations, or even irresolvable conflicts. We might lose our critical awareness of the complexities of the situation, and the differences between us, in a comforting sense of our shared humanity and connection which may well not be there for everybody. We might find ourselves accepting what we take for granted rather than questioning it in a critical way. In our attempts to be kind we might end up causing harm as we silence some

voices and flatten the hierarchies that exist. If our aim is to increase kindness in the world, we may find ourselves doing the exact opposite as people feel even more hurt and raw and less inclined to engage with one another, or we ourselves behave passively-aggressively because we are suppressing any difficult feelings.

When we are trying so hard to be honest that we prioritise awareness over kindness, on a very practical level we may find that others are unable to hear what we have to say. The privileges, oppressions and power dynamics which we clearly see, and the problematic behaviours which we want to highlight, may well be so hard for others to own up to that they just respond defensively and shut down. This may particularly be the case if we communicate with them in an accusing or insistent way which doesn't include listening to their perspective at all. If our aim is to improve awareness and to encourage honest exchange, we may do the exact opposite as people feel far too unsafe to speak openly, and put up their defences such that it becomes even harder for them to see the problematic things that they are doing. It may be much easier for them just to dismiss us as rude people, or over-the-top activists, and walk away from the exchange. We may, ourselves, become so aggressive in our manner that others are scared or hurt by the exchange, meaning that we are perpetuating the very violence which we were trying to address.

There is a danger, in mindfulness, that we prioritise compassion to such an extent that we close down debate and difference and – unwittingly perhaps – prevent ourselves from seeing some of the problems that we are so keen to address. There is a danger, for those of us who are critically socially engaged, that we fall into judgement of others and shoring up our own sense of 'rightness'. Without compassion we may be unable to see our own potential for harming others (because it is too hard to face when we aren't being kind), or the personal and painful reasons which may lie behind other people's actions.

Perhaps this *is* social mindfulness: the attempt to be honestly kind, compassionately critical, and gently aware.

### **Where is the social?**

I hope that these explorations may go some way to answering my colleague's question about 'where is the social' in mindfulness. To summarise, I think it is (or can be) in there in the following ways, and probably many more:

- In recognising the inherent socialness even of our very internal experiences: the ways our interactions with other people throughout our lives have shaped who and how we are, and how much of our internal life is devoted to our interactions with others and the wider world.
- In employing meditation, and other practices, to 'swim against the stream' – noticing how wider assumptions and accepted behaviours operate through us, and committing to do otherwise.

- In mindfulness as a methodology – individually and in group processes – for understanding the complexities of how social aspects such as power and privilege operate through us.
- In mindfulness practices which are explicitly social. One example would be writing about how we, ourselves, experience being on two sides of an opposition (for example when we feel marginalised, or when we marginalise others), in order to understand the other perspective better. Another would be mindful dialogue, when we have conversations with the explicit intention of listening, hearing the other, and being aware of what we bring to the situation. A further example is in ways of making people's stories available in ways which illuminate what their lives are like within the current social context (e.g. of healthcare systems, or global politics).
- In 'retreating' in ways which leave us more able than to engage, rather than feeling too ragged ourselves to intervene in ways which may be useful to others.
- In using mindfulness to bring an ethics to our work on social issues which might mean that we make more of a difference, because we understand better how to communicate what we are saying in ways which can be heard and acted upon by others.

#### **Find out more:**

- Thich Nhat Hanh's community of interbeing represents one very social version of mindfulness.
- Gregory Kramer's 'insight dialogue' is an example of a social mindfulness practice.
- Steven and Martine Batchelor's website is another interesting way into mindfulness which considers many of these issues.



# Depression

## Tuning out, turning in – Turning out, tuning in: Depression and Conflict

May 2012

Yesterday I found myself reflecting on two different issues that I think about a lot: depression and conflict.

I'm about to start writing a chapter for my [mindfulness](#) book on depression so I've been mulling over what the experience of being depressed is like, and what things help and hinder when we're in that place. At the same time I'm becoming fascinated and concerned by the processes of conflict between people which seem to inevitably happen in all the academic and activist groups I'm part of. I'm wondering what might be done to maintain some kind of useful dialogue, rather than people convincing themselves that the other side is wrong and bad while they are right and good, and thus ceasing all engagement. Even as I see the problems in this approach I recognise the same tendency in myself.

As these two lines of thoughts unfurled themselves yesterday I found that they began to weave together into a similar set of ideas, so I decided to write a little about the patterns that I see in how we experience depression and conflict, and in how the experience can shift. Perhaps I shouldn't be so surprised that these ideas have come together: I deliberately started my [book on relationships](#) with a chapter on the self because of the connections that there are between how we relate to ourselves and how we relate to others.

### **Depression: *Tuning out, turning in***

When I reflect on being depressed the experience is one of being simultaneously *tuned* out, but turned in. What I mean by *tuned* out is that when we're depressed many of us become terribly concerned with other people and the outside world. We monitor ourselves closely through the imagined gaze of others and judge what we think they are seeing very harshly. We become anxious about what others will see in us, and frightened that we will get it wrong somehow and be exposed in all our uselessness. Decisions become very difficult because we are so *tuned* out – trying to be okay for everyone else – that it is almost impossible to *tune* in to what we want and need ourselves. We might find ourselves busily rushing around trying to please everyone and not letting on how much we are struggling, or we might withdraw from contact as much as possible for fear of what others might see if we let them in close.

At the same time as being *tuned* out, we are also turned in. While we are hugely concerned with what other people think of us or how we are being seen out in the world, we don't really see or hear the people around us because we are so turned in and focused on our own struggles. We often spend a great deal of time in internal conversations with ourselves about whether something is wrong with us, what it is, and how we might fix it. We view other people in terms of their danger to us ('they might see me as I really am!'), or the possibility that they might be able to help ('maybe they have the answer'), but it is hard for us to make the shift that is necessary to understand how they are feeling and what is going on for them. Often we assume that we are the only person who is this bad and full of problems, and we are so fixated on not showing other people that this is the case, or apologising to them for our perceived wrong-doing, that there is no space available to turn towards their experience and let go of all of our own stuff for a moment.

### **Depression: Turning out, *tuning* in**

When I think about the moments of relief when that heavy tangled weight of depression has lifted, they are often moments when I have managed to 'turn out' in spite of all this. Perhaps somebody else's pain has pierced my bubble, or in professional mode (as a tutor or counsellor) I've had to put my stuff down and turn towards another person to hear about their struggles, or I have remembered how this worked and deliberately reached out to somebody else and asked how they are doing. Sometimes the relief just takes the form of sitting on a train or walking down the street and suddenly opening up to the fact that all the people that I see have their own fears and desires, tragedies and triumphs, which are just as precious and concerning to them as mine are to me.

This turning out works on several levels. On a very basic level listening to somebody else, or imagining their world, means that our mind is occupied with something else for a moment and we have a brief relief from the clatter of noisy and critical thoughts that has been exhausting us. Then there is the way that helping somebody else (anything from flashing a kindly smile through to giving them a supportive shoulder to lean on) can leave us feeling better about ourselves: we do have something to offer after all. Perhaps most fundamentally though is the sense of connection to others which is an antidote to the sense of isolation and alienation that is a major element of depression for so many of us. If people let us in through opening up to us, or just reveal their pain on their faces, we might realise that they struggle too, often in similar ways to ourselves. We realise that they are also scrutinising themselves constantly with a stream of critical comments running through their heads. We are no longer alone. In fact that pain is the very thing that links us to everybody else.

Related to this it is often the case that in finding compassion for another person we become able to find a little of the compassion that we need for ourselves. This is an important part of what I'm calling *tuning* in. Instead of only being attuned to what other people think of us (whether we are normal or abnormal in society's view, whether or not this person approves of us, etc.) we can *tune* into our own feelings and experiences. By turning out and really seeing

and hearing the other people around us we might realise that they aren't really that concerned with us because they are so busy worrying about themselves. Or, if they are judging us and disapproving of us, we might realise that they are doing this out of their own pain and anxieties rather than because they are seeing any true flaw in us. For example, it might be that putting us down gives them a brief reassurance that they are okay, when they secretly fear that they are not. Even if there is an element of truth in any criticisms they are making of us, we can manage to hear it and bear it because we are no longer trying to present an unreal perfect image to the world. We are turned out enough to be able to appreciate our impact on other people, and *tuned* in enough to own up to such things without thinking that it means that we are a terrible person in total.

When we are depressed, or otherwise suffering, it doesn't really matter whether we start by turning out or *tuning* in. Either one begins to make the other easier. So it might be that we deliberately try to empathise with other people or imagine what they are going through, and that gives us the space to find a bit more compassion for ourselves. Or we might start by *tuning* in to ourselves – sitting with however we are feeling without judging it or criticising it – and that might enable us to open up and see the other people around us.

### **Conflict: *Tuning* out, turning in**

How are similar processes involved in conflict situations? It seems to me that often when a conflict bubbles up our reflex response is to *tune* out but turn in. We focus entirely upon the badness and wrongness of whatever has been done to us (*tuning* out), while our concern with the pain and suffering that the other person has caused in us means that we turn in on ourselves and find it almost impossible to hear where the other person is actually coming from (turning in).

This pattern is what leads to the escalation of conflict. Often both people or groups regard themselves as the wronged parties (*tuned* out) and both are so concerned with the suffering that this has caused to them that they can't find any empathy for the others involved (turned in). Under those circumstances each thing that one person or group does is interpreted as a slight by the other, who then try to express their pain and anger at what has been done to them which is read as an overreaction and unreasonable response by the original person or group who then responds defensively. We are all prickly and hyper-aware of everything that the other person says and does (*tuned* out), at the same time as being defensive and protective of the sore spots in ourselves that the other person is (often inadvertently) bashing up against (turned in). This means that we tend to interpret what 'they' do in narrow and simple ways, often assuming that they are acting out of malice or personal defects while we are very aware of all of the complexities of the situation that have led us to act in the ways in which we have.

In some ways conflict is the opposite of depression because we are hard on the other person and see them in limited ways, while being much more understanding of ourselves (whereas in depression we are much more forgiving of others than we are of ourselves). However, these

kinds of conflicts and depressions often have the same thing at their root: Our secret vulnerabilities and shames which we are afraid might be exposed. In both cases we are hyper aware of others who might be seeing these things (*tuning* out) and defending against the possibility that they will reveal something we fear is there (turned in). But in depression we defend by withdrawing and separating ourselves off, whereas in conflict we defend by lashing out and trying to make our pain all somebody else's fault.

### **Conflict: Turning out, *tuning* in**

It follows that we can also shift conflict situations in the same ways that we shift depression. We can attempt to turn out and/or to *tune* in. Again it doesn't really matter which one we shift first, it will probably make shifting the other one easier as well.

For example, we might start by *tuning* in. Instead of allowing ourselves to react in a knee-jerk defensive way to the other person or group, we might sit down on our own for a while with the aim of listening compassionately to ourselves: Why it is that whatever is happening has hurt us so much? Each time we start trying to list whatever the other person did wrong and why they are so bad we can gently bring ourselves back to *tuning* into ourselves instead: What are we feeling? What does it remind us of from other times in our lives? Which of the vulnerabilities that we know that we have have been triggered by this situation?

Alternatively we might start by turning out. We might recognise how we are limiting the other person or group by imagining them as just stupid, bad, crazy or malicious, and start trying to open up to the fullness of what they are and really trying to listen to where they are coming from. We may remind ourselves of the complex and multiple reasons that have led to us responding in the way that we have, and try to assume that the same will be true of the other 'side' of the conflict. In *Rewriting the Rules* I suggest we might turn our common accusation 'how *could* you do that!' into a genuine and curious question '*how* could you do that?' This might involve us on our own imagining all of the different reasons why the other person or group might have done what they did (given what we know about them if they are somebody we know, or just what we know about people). Alternatively, or after this, it might involve us sitting down with them with the intention of really listening to where they are coming from and trying to create a situation where they feel safer to tell us this.

The combination of turning out and *tuning* in will hopefully mean that during such conversations we can be more aware of what is triggered for us, so that we can respond to the situation itself rather than bringing in all our previous baggage. *Tuning* in also means treating ourselves kindly so we are less likely to take everything else somebody throws at us. If they are still in conflict mode then we can hear the pain behind their words, while not remaining in situations that are hurting us or taking on board criticisms that are unfair. This may involve, for example, insisting on more time apart before trying to communicate, or asking somebody else to mediate.

## Conclusions

Of course every depression and conflict are unique to the people involved in various ways, and I will not have captured here all the different things that they can mean to different people at different times.

With depression there are aspects of the social situations which are involved that mean that another important element is turning out towards wider society and the ways in which it encourages that self-monitoring, critical, way of being with ourselves. I've written more about that [here](#) and [here](#).

With conflict there are some important things to tease out about how we deal with very real power imbalances, oppressions, and privileges which are often in play. In my view the compassionate approach makes it more, rather than less, likely that people will be able to own up to these things and speak openly about their impact, but I also understand the fear that compassion and empathy for others could smooth over such things and lead to an acceptance of abusive and problematic situations. I write more about those tensions [here](#) and [here](#).

I hope that the idea of shifting from *tuning* out and turning in to turning out and *tuning* in is a helpful one for thinking through your own experiences of depression and conflict, and I'd be very interested to hear other people's reflections.

# Living alone and depression

March 2012

A **Finnish study** last week reported that people who live alone have an 80% increased risk of depression compared to those who live in families. This is of concern particularly because of the rising numbers of people who live by themselves (around a third in US and the UK, and even higher in urban areas). Since the risk of depression was judged by use of drug treatments for depression, researcher **Laura Pulkki-Raback** argues that the 80% figure may well be an under-estimate as it doesn't include those who are untreated, or treated in different ways.

The study itself linked living alone to poor housing in women and low social support in men (something that has long been found to be a risk factor for single men). However they are understood, the findings clearly point to the vital social role in depression: a condition which is commonly understood to be both internally caused, and in need of only internal treatments (such as drugs and therapies). We need to move to more **biopsychosocial** (or even sociopsychobio) understandings of this experience.

## The bounded self

Social psychologist **Kenneth Gergen** points towards one idea which may help to make sense of findings like these. In his book, **Relational Being**, he argues that in the past few centuries we have come, in the west, to see ourselves as 'bounded beings': as singular and separate from others. This is a culturally peculiar belief, according to **Clifford Geertz**, but one which we generally take for granted as a 'fact of life'.

Gergen argues that if I accept this view of myself:

*'I must always be on guard, lest others see the faults in my thinking, the cesspools of my emotions, and the embarrassing motives behind my actions ... I must worry about how I compare to others, and whether I will be judged inferior.'* (xiii-xiv)

He argues that this view underlies our education and organisational systems which evaluate us individually and encourage constant competition from the start.

Importantly, for our explorations here, Gergen suggests that depression can be located in this way of viewing ourselves. The inner critics and overwhelming fears of failure which are so familiar to us are part and parcel of this view of the human being. As well as the relentless self-evaluation, toxic comparison and defensive withdrawal of depression, the familiar sense of meaninglessness and pointlessness can also be linked to disconnection from others since meaning, for most people, is associated with their relations with others.

Speaking specifically about living alone, Gergen proposes that this is something which only really makes sense under this view of ourselves as fundamentally isolated. Alongside statistics on the numbers of people choosing to live by themselves, he cites evidence for decreases in close friendships and increases in loneliness in recent years.

Gergen proposes that an alternative way of seeing things is to regard ourselves as fundamentally relational rather than bounded. This is a view which is common to Buddhist and existential philosophies (which question the separation between self and others and stress interconnection), and constructionist and constructivist approaches (which point out that we become different 'selves' in our relationships with different people, and that our self is something that we construct in interaction).

### **Bounded selves and living alone/together**

Returning to the issue of living alone, we could see this as a situation in which the sense of ourselves as bounded and separated is exacerbated, especially in situations where we are also out of work or retired and have very little human contact day-to-day. It is possible to become very inward focused: listening to the loops of self-judgement and critical commentaries that go on within our heads. A vicious cycle is easily set in motion where our negative view of ourselves makes contact with others a frightening prospect, due to fear that they will confirm our self-perceptions, and we withdraw further into ourselves.

Such challenges are not absent for those of us who live with others. The bounded self view is pervasive and we also relate to other people accordingly: looking to our partners, children or parents to affirm and validate a positive view of ourselves, and fearing that they will do the opposite: seeing us negatively in a way that confirms what we dread is the real truth of who we are. This is what Sartre was talking about when he said that 'hell is other people'.

However, given the findings on living alone, it seems that – for many of us – contact with others goes some way towards loosening the tight grip on the self. Perhaps when we live up alongside others we have times when the self-and-other distinctions are blurred: as we share a moment, or physical contact breaks down the barriers, or we recognise our own pain or joy in the eyes of another, for example. Maybe we realise how much our own projects in life are bound up with other people, and how much they need us for their own projects, and a kind of mutuality and reciprocation comes from that.

Also, as we relate to different people in our lives we may notice that they, and we, have different sides in different situations, and also that they, and we, change over time. The recognition of our plurality and fluidity both provide relief from the grip of the bounded self. It makes far less sense to judge and evaluate ourselves (or others) when we know that we are multifaceted, and less sense to compare ourselves against others who are constantly shifting just as we are. If we can find the courage together, intimacy with others may even enable of us to reveal our vulnerability

and recognise it as something that connects us rather than being something we have to defend so desperately.

## **Implications**

So what are the implications of such findings on living alone and depression, and this way of understanding them? Clearly they point to the importance of human contact – but importantly contact which encourages a softening of the bounded self rather than further judgement and competition. We should be cautious, as a society, of policies and practices which leave people even more isolated and withdrawn. Such research should feed into current discussions, for example, of benefit systems and of how we treat older people.

Also it would be good to provide more real alternatives to living alone. At the moment, for many people, the decision is between living as a couple/nuclear family and living by yourself (if you are single or separated from such a unit). We need to **expand the options** and make it both socially and economically viable to live in other arrangements.

It is not that being alone inevitably reinforces the sense of the self as bounded. We can all probably point to moments of solitude in which we felt connected to others and the wider world, and this is something that can be cultivated in **meditation** and other solitary practices. It is quite possible to respond to the pain of the bounded self by surrounding ourselves with busyness, people and distraction in ways that become equally problematic. It is useful to consider the ways that we all relate to solitude, to being with others, and to wider community. At all levels we can operate as bounded, separate, units, or shift into a more relational, interconnected, mode.

## **Find out more:**

For another perspective on living alone, based on a qualitative research project on those who live by themselves, see ***I want to be alone: The rise and rise of solo living*** (The Guardian, March 30th 2012)



# New Year Resolutions

## Why New Year Resolutions

December 2012

New Year is a time when we often consider resolving to do things differently in the year to come. However, for many reasons, making New Year resolutions often ends up leaving us feel worse, rather than better, about ourselves. And the things we decided to change frequently fail to stick.

In the interview below I suggest that it might be better to consider alternative ways of making changes. I also put forward a few ideas for kinder resolutions if New Year does feel like a good time to start doing something different.

*According to research by [allabouthealth.co.uk](http://allabouthealth.co.uk), three-quarters of the 3,000 British adults they surveyed will break their New Year resolution by the second week of January. What is it about this time of year that makes us more susceptible to breaking those promises to ourselves?*

It is not so much that the time of year makes us susceptible to breaking promises but rather that it is the time of year when we are encouraged into making promises. The ways in which we make New Year resolutions often set us up to fail, so we end up feeling bad about ourselves.

### **Why do we make New Year resolutions in the first place?**

We make resolutions on New Year because there is a strong culture of doing so. When we're surrounded by magazine articles, TV programmes and advertisements about resolutions, all promising the possibility of a 'new, happier, more successful you', it's easy to feel like we have to join in.

The other reason that New Year resolutions appeal to us is that we are generally encouraged to feel that there is something wrong with us that requires fixing. Consumer culture relies on us believing that we're lacking in some way in order to sell us products. We need to compare ourselves against others and find ourselves wanting in order to believe that we need to look better, be more popular, own better gadgets, and sign up to various diets, dating sites, or gyms. Self-help books, makeover TV programmes and women's and men's magazines also sell us the message that we must engage in processes of self-improvement.

New Year resolutions feed us the hope that an overnight transformation might be possible on all of the things that we spend the rest of year worrying might not really be okay about ourselves.

## **Would we feel better about ourselves if we kept to them?**

I think we'd feel better about ourselves if we didn't make them in the first place! Many New Year Resolutions come from a place of feeling sad, angry or anxious about ourselves. When we make them and break them we end up layering further tough feelings about ourselves on top of the ones that we already have, including guilt, shame and self-loathing. Resolutions become an additional stick to beat ourselves with: we are only okay if we keep this – very challenging – promise to ourselves. If we then fail to keep the resolution we're likely to feel even worse.

## **Is there anything we can do to enable us to keep to them for the next twelve months?**

The first thing to do is to think about why we are making these resolutions. Do they come from a place of wanting to shift our lives in ways which will be positive for us, or is it more about thinking that we're not really okay the way we are? If the latter, then we might decide to focus our resolutions more on being kinder to ourselves rather than on trying to change.

Ironically many of the things that we make resolutions about (losing weight, getting fit, changing job, finding a relationship, etc.) rarely work when we try to do them in a harsh self-critical way.

For example, it is only when we let go of desires to look better and aim to be kind to the body that we actually have that we are able to tune into what it needs regarding food, and what kind of physical activity we actually enjoy and therefore have more likelihood of sticking to. It is only when we are kind to ourselves that we can cultivate the kind of confidence it takes to apply for jobs or meet new people.

We need to remember that we are all complex, multi-faceted, people rather than trying to force ourselves into a narrow model of perfection. We have all kinds of things about ourselves that are great, as well as those that are more problematic, just like everybody else.

If we do want to use New Year as a time to prompt changes in our lives then another thing we need to do is to really understand what has been stopping us from making those changes before. This involves recognising that we are sensible people who wouldn't do (or not do) something unless there was some good reason. Finding the sense in *why* this change is so difficult, scary, or threatening is the first step towards making it, because then we can do it in a much kinder way and address those blocks that are present.

You don't avoid exercise because you are lazy, rather it may be that your past experience with physical activity has been negative, or you struggle to feel that it is okay to take time away from work or other commitments. You don't avoid promotion because you're an idiot, rather it is perhaps that you are scared of failing, or of taking that step and having the pressure on you to keep succeeding. Understanding these reasons rather than just labelling ourselves as stupid, crazy or rubbish, is vital.

### **What would your top five tips be to people to help them keep their resolutions?**

- Don't feel pressured to make major resolutions just because it is New Year. Rather spend plenty of time thinking about things you want to change and do it when the time is right for you.
- Make kind resolutions from the assumption that you are okay just as you are.
- Don't use resolutions as a stick to beat yourself with. If you lapse that is okay, just see it as useful information about why this is so tough for you.
- Make the first step be about awareness. Try to understand why the change is difficult and why you want to make it so much. You need to understand yourself before you can change things.

Resolving not to make resolutions is always fine, and a good model for those around you who are inevitably struggling just as much as you are.

# Thinking Critically About New Year Resolutions

December 2014

It's that time again! As people who have read this blog before will know, I'm not a huge fan of New Year resolutions. First because I'm not convinced that times like **New Year** or **big birthdays** are the best time for making changes, and secondly because the resolutions that we make at these times are often enforced in an unkind way. This exacerbates our **tendency to be too hard on ourselves** as well as often **setting ourselves up for failure**.

Here are a few more thoughts on the matter, as well as some tips if you are keen to make some resolutions, but in a kinder way.

## **This may not be the best time of year to make promises to ourselves**

There are certain times of year, and times of life, when people often feel pressured to make promises to themselves and to change their lives in various ways. Generally these aren't great times to do these things because of all the pressure surrounding them. At times like that we often try to force changes, rather than making them kindly. Also we often try to make lots of changes all at once. We can end up feeling a huge sense of failure if we don't succeed because of all the pressure on the situation.

## **If we are going to, how can we make a resolution that will last?**

First it is important to choose one thing rather than several, particularly if those things conflict. For example, it really doesn't work if you decide to start eating less, exercising more, and getting up earlier, because all of those things conflict. If you eat less you have less energy for exercise until your body has got used to the change. If you exercise more you often need more, rather than less, sleep in the early days.

Also you want to pick something that you can do kindly, rather than in a forced way where you are constantly criticising yourself about it. We are already so prone to self-criticism that we don't need more excuses for that! For that reason it might be better to choose something fairly gentle, something where supportive others are doing it alongside you, or something that you can ease into gradually rather than a sudden change.

## **Is it a good idea to aim at something that challenges us?**

I think it is different for different people, and at different times in our lives. Sometimes people really feel like a challenge, and the confidence that you get from managing it can be wonderful. However, the risk is that we can feel really bad about ourselves if we don't manage it. I think that

the key here is kindness and flexibility. For example, if you feel really up for a challenge and decide to work towards a marathon or something that can be great. But if you then find that running stops being pleasurable when you're doing so much of it, or if you get lots of joint pain, then it'd be worth rethinking your plan rather than forcing it.

### **If we decide to stop doing something, how can we stick at it?**

Maybe consider doing it in a more experimental and playful way instead of deciding on it and sticking to it no matter what. For example, you might decide to change your diet in some way (going veggie, cutting out particular foods, or trying the 5/2 days diet). What about trying it for a certain period of time and noticing how your body responds? It may really not work for your particular body and that's important information.

### **Is stopping more negative than starting?**

It can feel more negative because you're withholding something from yourself – which presumably you like – rather than giving yourself something. So perhaps it can be useful to frame a change as starting rather than stopping. For example, 'I'm starting to experiment with a different way of eating or drinking', rather than 'I'm stopping eating junk food, or drinking so much booze'.

The biggest problem with just deciding to change anything though, is that we often don't give enough thought to what we get from it. There are always good reasons for anything that we do – even if we're not aware of them – so just deciding to change them overnight often doesn't work too well. Perhaps instead of deciding to start or stop anything, we could decide to spend the next few months noticing it more: learning how we currently treat our body (around food, cigarettes, alcohol, or exercise, for example), or whether there are periods of time that we could open up to a new hobby or interest, perhaps. Once we feel we have a better awareness then we can start to experiment with change, again to see how it goes rather than with a plan to definitely stick with it. Gradual change often sticks far better than sudden change. I rather like the Taoist saying which goes 'there is so much to do, there is so little time: we must go slowly.'

### **Quick Tips**

*Go slowly:* We often try to make changes before we really understand the situation (e.g. why we currently drink a lot, or don't exercise much). Instead of resolving to change something, why not resolve just to notice it for the next few months? When we understand what we get from the current situation, it is much easier to make a change that lasts.

*Treat yourself kindly:* It's easy to make changes in a highly self-critical way, and none of us need more of that in our lives! Try to focus on changes that treat you kindly, and put them in place gradually and flexibly. Don't beat yourself up if they don't work out. Even better, why not make

your resolution simply to treat yourself more kindly. You'll be surprised how many other changes come so much more easily if you can manage that.

# What resolutions open up and close down

*Originally published on the megjohnandjustin.com podcast/blog, 2017-2020*

How might we feel if we've made new year's resolutions or hoped for some kind of change between the end of the last year and the start of the new.

## **What New Year Closes Down**

There are all sorts of reasons why new year is not a great time to make these kinds of changes, and why we might be suspicious of the whole idea of having to make changes anyway.

Often this time of year - in the Northern Hemisphere at least - is cold, dark, and with poor weather. We're just coming out of holiday time which may well have been tiring, stressful, and brought up difficult stuff for us. It's a time of year when many people have little money and have got out of their regular routines. All of this can make it a tough time indeed to have the energy and resources for change.

Also the whole idea of a 'new you' for new year can easily become a way of being unkind or unfriendly to yourself which doesn't help anybody. Resolutions are often done in a goal-focused way, rather than a way that is present to your needs. As with sex - where aiming for an orgasm is a good way to ensure you don't have enjoyable sex *or* an orgasm - aiming for the goal of a specific change often makes people unhappy during the process *and* makes the change they're aiming at harder to achieve. Dieting is a good example of this - often being a tough process and leading to weight gain rather than loss long term. In all these areas it's worth thinking carefully about the normative wider cultural rules that say that being a certain way is better than being another way, for example if your resolution involved being thinner rather than fatter, more rather than less 'successful' or 'happy', in a couple rather than single.

New Year, like self-help more generally, individualises issues so it's on the person alone to see themselves as wrong in some way and to try to fix it - often by buying products. We can - and often do - question this kind of capitalistic mindset. It serves those with more wealth and power for those who are struggling to blame themselves rather than questioning the wider social situation - of austerity and alienation for example. Relatedly, it is very hard - if not impossible - to create and sustain change as an individual if the systems and structures around you do not support it - or even support the opposite way of being. How might we invite systems - like our families and friendship networks - to shift in ways that support any changes we do want to make?

## **What New Year Could Open Up**

It can be useful to have a regular point in our lives to reflect on where we've come from and where we're going. While we may question whether mid-Winter is necessarily the best time for everyone to do that, what might you consider if you do want to make changes?

What are other approaches than resolutions? The year compass invites a longer process of reflecting on the year just gone and the one to come, making flexible intentions rather than resolutions, recognising that we can rarely predict all the things are likely to happen to us. We could also think about change versus acceptance. What things about ourselves might me work on accepting in the year to come rather than changing? What does buying into the idea that we need to change do to us?

If we do wish to make changes then we might think about kinder and more sustainable ways to do these than getting up one morning determined to always - or never - do that thing now. For example, we might decide to spend the first quarter of the year putting things slowly in place to invite that change to come in the Spring or Summer: shifting the rhythms of our life to fit it better, inviting close people to support us, or systems around us to alter. We could take a more playful, experimental approach: Inviting shifts towards the change and then seeing whether it feels like that door is swinging open, slamming shut, or something in between. If it feels like a massive effort to push for that particular change perhaps the time for it is not now?

What would counter-cultural resolutions look like? I reclaimed and reversed my early experience of having a cry chart (to try to stop them crying so much as a child). This year I awarded myself star stickers each time I did shed tears! You could similarly choose to encourage in a particularly emotional state that you find difficult, give yourself an opposite message to a negative one you received as a child, or make another resolution against the grain of what wider culture encourages you to do. Again you can get playful and notice what happens when you give yourself permission to do something you want (or not to do something you don't want).



# Therapy

## When should I go to therapy?

*Originally published on the megjohnandjustin.com podcast/blog, 2017-2020  
megjohnandjustin.com/you/should-i-go-to-therapy/*

This post covers the signs that therapy might be useful, what to expect from therapy, what it opens up and closes down, and how to engage with therapy once you get there. 'Therapy' here covers therapy, counselling, coaching, and these kinds of related practices where you sit with somebody - usually one-to-one - and talk about your life.

Perhaps the biggest message is SHOP AROUND! The most important thing with a therapist is to find somebody you'll have a good relationship with which also means having a shared understanding. People often just go to the first therapist they come across, but it's really important to find somebody who is a good fit for you by doing at least as much homework as you would do around getting builders into your house or making a major purchase like a vehicle or musical instrument.

### **When you gotta go**

Perhaps two good signs that therapy might be a good idea are when you are really struggling, and when life feels stuck or stagnant. In the first case you might notice tough emotions coming up, a sense of overwhelm, or specific symptoms like anxious thoughts or controlling behaviours. In the second case it might be more that everything feels a bit bland or pointless, or you have a sense that you're avoiding looking at stuff that's probably important.

It can also be a good idea to get therapy support after a big or traumatic life event, if there's something major that's happened in your life which you haven't ever looked at, or perhaps as part of a regular check-in every few years with how you're doing in your relationship with yourself, other people, your work, and life in general.

People often struggle to go to therapy because they see it as a self-indulgence. However, in all these cases your struggles are likely to be impacting on others in your life too: either because it affects your relationships directly, or because you are relying on close people for support.

### **What therapy opens up and closes down**

Therapists can provide a supportive space for you to look at your stuff while having no agenda - in the way friends and family might want you to respond in a certain way, for example. They're a person who is completely on your side and helping you figure out what's best for you. Ideally they'll be empowering you in ways that leave you more able to be kind to yourself and to follow the path that feels best for you. They may help you to learn tools and techniques to apply to

your life more broadly, or be more focused on listening and helping you to make connections between what happened in your past and how you deal with things now.

One problem with therapy is that it can reinforce the idea that there's something wrong with us that needs fixing. It's important to remember that many of the struggles we have are totally, or largely, caused by shitty cultural messages, injustices, and family systems, work, and relationship dynamics that are toxic or painful. Ideally a therapist would help you to look at this context and address your part in it, rather than reinforcing the idea that you are individually responsible for your suffering. Also, although the therapist generally puts themselves in a good place to be there for you for that hour, it's worth remembering that they're a person in this world who inevitably struggles as much as you do. It's like you're both climbing your own mountain. They have the expertise, experience, and perspective to be able to look across to you on your mountain and give you some advice about the next handhold or foothold.

### **How to find one**

It's worth getting recommendations from friends and searching online for people who work with the kinds of issues you have in a way that sounds good to you. Pink Therapy is a good listing for therapists with expertise around gender, sexual, and relationship diversity.

We'd suggest looking at as many websites as you can find for therapists who work on the right topics in your area (or more widely if you're considering online therapy). Narrow it down to a few who feel good when you read about them, and then have an email exchange, phonecall and/or initial session with them to see whether it feels a good fit.

If you need a low-cost or free therapist then there are NHS therapists and counsellors through GP practices, as well as voluntary mental health and LGBTQ services in many places that provide therapy. There can be less choice here but it should still be important to assess whether it feels like a good fit, and the opportunity to ask for a different person if not.

It's worth checking whether a therapist has some form of training and accreditation, although there are a wide range of these that can be appropriate. The first session should give you an opportunity to ask all the questions you need to ask, and give you a sense of how this therapist works.

As with all professions there are some therapists who are exploitative and even abusive, so it is vital to be careful and find someone who is ethical and works with integrity. Also there will be many who can work well with some people but just aren't a good fit for you.

You should always feel that it's possible to end therapy if it's not working for you, and to find an option that's affordable. Therapy shouldn't leave you feeling scared and confused.

*There's more on different kinds of therapy in my free book on Feelings.*

# Queer, Plural Mental Health

## Queer Activism and Mental Health Activism: The Need For Dialogue

December 2020

Recently I was asked to speak on a panel for NSUN – the [National Survivor User Network](#) – about what mental health activism and LGBTQIA+ activism could learn from each other. NSUN is the UK's only mental health charity to center survivor and lived experience voices, everyone involved having lived experience of mental ill-health, trauma, and/or distress. This panel was part of their [2020 AGM](#). You can view the full panel discussion, with the awesome [Sabah Choudrey](#), [Suriya Aisha](#), [Kes Otter Liefte](#), and [Aimz Ruthron](#) here.

In this post I want to share some thoughts about the learnings that I believe are important, in both directions, between mental health activism and sexuality/gender activism. I also want to explore the separation that we make between these two areas and whether that might be part of the problem.

### **Separating out mental health and gender/sexuality**

The first thing we were asked to do on the panel was to introduce ourselves, including our own gender and sexuality – given the focus of the panel – and our lived experience of mental health struggles.

The answer I would usually give to this question nowadays – for example in the interview that I did for mental health podcast [So Many Wings](#) – would be something like this:

'My gender is [trans](#), my sexuality is [queer](#), and my mental health situation is that I'm a survivor of [developmental and relational trauma](#) who experiences themselves as [plural](#).'

So I could be diagnosed with post traumatic stress and dissociative identity disorders if using those psychiatric categories. If you wanted to add a question in there about my spiritual/therapeutic stance then something like somatic- and social justice-informed Buddhist mindfulness might get close to that.

As I considered this answer though, I realised that a deeper truth is that it really doesn't make much sense to me, any more, to distinguish my gender, my sexuality, my mental health status, and my spirituality in this way. The answer to all of these questions – gender, sexuality, mental

health, and spirituality – could be trans, they could all be queer, they could all be plural, traumatised, and mindful. They *are* all of them.

So the main point I want to make in this piece is that I think we should question the very separation between mental health activism and LGBTQIA+ activism. The reasons for this is not just because – as Black feminists have rightly pointed out – we have to fight all forms of injustice – whether or not they impact us directly – in order to be truly free. It's also not just because so many queers are also survivors due to the traumatising nature of marginalisation and stigmatisation. It's because the very separation of these aspects of our experience may well be part of the problem which leads to both the oppression of queer people and to the distress of survivors.

I'll return to this theme in more depth shortly. First, let's consider what each form of activism might learn from the other, if we did regard them as separable. For each I'll make a couple of key suggestions although there are many more we could consider.

### **What can mental health activism learn from LGBTQIA+ activism?**

My answers to this question are both things which more radical mental health activism has already learnt from queer activism, but which could definitely do with filtering through more fully to mainstream mental health activism.

First, LGBTQIA+ activism – whether the more mainstream or radical version – has generally located the problem of queer experience out there in the heteronormative, homophobic, biphobic, transphobic, acephobic, etc. culture, rather than in queer people themselves. This is a shift that began a long time ago, in the moves towards decriminalisation and depathologisation of homosexuality. It has continued as each new addition to the LGBTQIA+ acronym has eventually argued that their experience should not be understood as a problem within the individual, but an issue with wider normative society.

Within more mainstream mental health activism there is still often a sense of mental health struggles as something which are located within the individual, which require fixing, rather than as signs of a toxic culture, unjust social structures, or systemic problems within a family or workplace, for example.

Some mental health struggles simply wouldn't *be* struggles within a culture which accepted diverse experience rather than insisting that people follow certain rigid norms of behaviour and experience, and pathologised and stigmatised those who don't. Many other struggles are the result of forms of traumatic experiences such as marginalisation and non-consensual treatment, which are individualised in the person who is struggling, rather than recognised as being structural and systemic problems.

Survivor-led and mad pride movements have moved towards a more similar understanding to queer activism: that the problem is out there rather than in here, and that one important form of resistance is that of visibly taking pride in our difference, rather than accepting the shame and stigma of the wider world. For example we might question those who can manage to fit into the category of 'sane' in such an 'insane' world. We might celebrate the 'creatively maladjusted misfits and changemakers' that we are, as [So Many Wings](#) does.

### **What can LGBTQIA+ activism learn from mental health activism?**

My answers to this question are about what LGBTQIA+ activism could learn from the more radical and critical versions of mental health activism. I wrote more about this in [this paper](#) on why bi communities, in particular, could do with a more critical understanding of mental health.

One thing that's always surprised me in queer communities is the way people who are very critical about normative ways of understanding gender and sexuality, often seem to accept mainstream medical models of mental health. Folks who think carefully and queerly about the labels and categories that are imposed on our genders and sexualities, where those come from and who benefits from them, often seem comfortable labelling their mental health struggles with psychiatric categories, and accepting that those make them a certain kind of – disordered – person.

Also, many in the queer world challenge the binaries and hierarchies that are imposed on gender and sexuality, without applying this to mental health. So the main thing I'd like to see from a dialogue between queer and mental health activism, would be a more critical perspective on mental health among queers which questions binary divisions between normal and abnormal, mad and sane, functional and dysfunctional, healthy and unhealthy, rational and emotional, and so on. Just as with the binaries of man/woman, gay/straight, cis/trans, etc. we can ask who is served by such divisions, and whether they stand up to scrutiny. Alex Iantaffi and I explore these questions more in our book [Life Isn't Binary](#).

Secondly, mental health activism is – it seems to me – increasingly informed by somatic understandings of trauma and the way it operates in the body. Queer activism could certainly do with learning from such trauma-informed perspectives. My experience of LGBTQIA+ and sex positive spaces is that they are often unaware of this. For example, there's often little awareness in party and con spaces of the potential triggers of trauma, how these show up in the body, how to know that you – or somebody else – is in a trauma response, and the implications of this in for our sexual practices and relationships.

In more conscious sexuality and kink spaces, there can often be a sense that people should be pushed to their edges, or confronted with challenging activities as a form of catharsis, without an awareness of the potentially retraumatizing impact of putting somebody through a similar situation to one which was traumatizing in early life. Online [call-out and cancel culture](#), which is

prevalent in some queer communities, similarly lacks an awareness of the potentially retraumatizing impact of public shaming, and the traumatized places in ourselves that such impulses can come from.

### **Mental health activism *is* LGBTQIA+ activism and vice versa**

When I worked as a therapist, one thing that struck me was that gender and sexuality were almost always deeply relevant to clients' mental health struggles. This was true whether they were somebody whose gender and/or sexuality was marginalized, or somebody who was more normative in their presentation of their gender and/or sexuality.

LGBTQIA+ people's mental health struggles are clearly related to their experiences of marginalization, stigma, invisibility, discrimination, bullying, and so on. For more normative folks, it is often the attempt to adhere to rigid ideals of masculinity, femininity, and heteronormativity that is the problem.

For example, in relation to **gender**, we know that high rates of suicide and addiction in men is highly linked to toxic masculinity and rules against expressing vulnerability or emotion, and seeking help or support from others. We also know that high rates of depression, anxiety, and body shame in women is highly linked to the way femininity is defined in relation to others, and women's worth is wrapped up in their relationships and desirability.

In relation to **sexuality**, many people experience distress because the very limited ideas about the kind of sex that they should have, and the relationship contexts they should be having it in, bear little relation to their internal **erotic landscapes**. This mismatch plays out regularly in a vulnerable and embodied way during sex, which takes a great toll on mental health. It could be seen as a form of everyday non-consent enacted against the bodies of ourselves and/or of others.

So, whether we are marginalized in relation to our gender and sexuality or not, normative understandings of gender and sexuality **traumatize** us. For this reason, our mental health struggles, genders, and sexualities cannot easily be disentangled, in fact should be **explored together**.

### **Bringing mental health and gender/sexuality back together**

It strikes me that many cultures around the world do not separate out gender, sexuality, spirituality, and mental health at all. In many places the most spiritual people have also been those who were gender creative and erotically expansive. Language has developed in such contexts which captures that whole state rather than separating out gender, sexuality, and spirituality. In many faiths and communities, experiences which we might label mental health

struggles are seen as sacred experiences, or paths to enlightenment, and people going through them are honoured and supported.

The separation of gender, sexuality, mental health, and spirituality could be seen as a toxic aspect of racial capitalism, required to ensure docile subjects who are too busy policing themselves, and each other, around their 'normality' or otherwise to critically consider what is being done to them, or its impact.

Certainly we can see the roots of the current form of the binary gender model and heteronormativity in forms of capitalism which required women to work unpaid in the home supporting and reproducing the workforce. In many ways this has ramped up under **neoliberal capitalism** with its pressure to present a successful, productive singular self who is performing gender, sex, and mental well-being perfectly, while paying little attention to spirituality beyond the individualised kind of care required to keep them functional and productive.

Perhaps one of the reasons we see such high rates of distress in neoliberal capitalist cultures is this very severing of gender, sexuality, mental health, and spirituality, within such an unjust race and class system. This could, itself, be seen as a form of historical and intergenerational trauma, as authors such as **Alex Iantaffi** have suggested.

The work of **Audre Lorde** – and many **Black feminists** who've followed her – calls into question such separation. They suggest instead that we could understand 'the erotic' as a powerful resource relating to how we feel when we're most alive and mentally well which incorporates and transcends the sexual and the spiritual. If liberated such a resource would reveal and challenge all of the destructive forces we're operating under, and require something very different.

### **My trans, queer, plural, traumatised, mindful self**

You might find it useful – like me – to play with whether the labels you use to describe one aspect of your experience or identity are actually helpful to apply to other aspects. Perhaps this can be helpful in breaking down the divisions between gender, sexuality, mental health status, and spirituality.

I find trans a useful word to apply to all of these areas because my experience of all of them is different to what they were assumed to be when I was born, not just my gender. Also we can understand trans as signalling transition, or change over time, and I consider all these aspects of me as in a state of becoming, rather than being fixed.

The word queer can signal being outside of normativity of all kinds, and that certainly applies to gender, sexuality, mental health, and spirituality for me. Queer also involves questioning binaries, and the power structures they serve, which is something I'm keen to do, whether those

binaries be man/woman or cis/trans, gay/straight or sexual/non-sexual, mad/sane or normal/abnormal, spiritual/non-spiritual or Buddhist/secular.

In addition to transition, [plurality](#) is a word which captures my experience of selfhood better than most. Again this applies across all these aspects of being. My plural parts have different genders, they have different sexualities and erotic desires, they express [trauma](#) in different ways and fall into different [survival strategies](#), and they certainly come down in different places on a spectrum from secular to spiritual, or 'rational' to 'woo'.

Finally trauma and mindful are both words which are useful across all aspects of myself. I have certainly been traumatised by normative understandings of gender, sexuality, mental health, and spirituality which have been passed down through the generations to me. These are also all sites of trauma for me as I've experienced gender-related bullying and discrimination; sexual assault and harassment; [gaslighting](#) and stigma around my mental health struggles; and traumatic experiences in spiritual and conscious sexuality communities – both personally and in relation to the wider #MeToo moments that such communities have gone through.

Somatic and social justice forms of Buddhist mindfulness have been important for me, in addressing all these forms of trauma, and in coming to understand my self (or selves, or no self) better in relation to gender, sexuality, mental health, spirituality, and the ways these are all woven together.

### **Further resources**

- You can read a dialogue between me and Helen Spandler on what queer studies and mad studies can learn from each other [here](#).
- [This resource](#) that I wrote for the BACP explains in more detail why gender and sexuality are themes that need to be explored with all clients in relation to their mental health struggles, along with race, class, disability and other key intersections.
- This article I wrote about mental health as depression and oppression in relation to bi communities also deals with these themes [BarkerJoB2015Download](#)
- You can find more of my resources about trauma on my [trauma work page](#).



# Embrace your inner mutant superpower

April 2015

This might seem a bit of a departure from the usual stuff that I write about here, but stay with me and hopefully you'll see the connections. It's also the first thing I've written towards one of my long term projects, *Everyday Horrors*. This aims to bring together two popular genres of book which not many people have previously thought to combine: spooky story collection and self-help guide.

First I need to come out. Coming out is something I've done perhaps more than most people do in one lifetime. However this time it's a bit different. After much reflection I need to let you know that I am a shape-shifter. Transmogrifier, lycanthrope, trickster, chameleon: call it what you will. I have the mutant superpower of magically transforming to fit my surroundings.

In the rest of this post I'll use my own example to illustrate how you might come to identify, explore, and embrace your own inner mutant superpower.

## **Which mutant super hero/villain are you?**

There are two ways of figuring out your own inner super hero/villain nature. You can either start by exploring which characters particularly resonate with you, or you can start by examining your own life for clues. My own realisation involved a little of both.

*Read it, watch it, draw it, write it, pin it*

If you want to start with fiction then the trick is to delve into genres that appeal to you where characters have magical powers. The obvious examples are the DC and Marvel comic universes (and/or the movies and TV shows based on them), particular the mutant-packed world of the X-Men, or the many and various superheroes and supervillains in the Superman/Batman/Spiderman series. If that doesn't work so well for you then the fairy tales and myths of various cultures are packed with different kinds of monsters and magical characters, as are fantasy fiction, horror fiction, and science fiction. Check out recent shows like *Lost Girl*, *Penny Dreadful*, *Being Human*, or *Once Upon a Time*, or long term staples like *Lord of the Rings*, *Harry Potter*, *Star Trek*, or *Dr. Who*. For me the *Red Dwarf* and *Buffy the Vampire* TV series, and the books of Terry Pratchett and Neil Gaiman, are rich sources of material.

While you're reading, listening or watching, ask yourself which characters you're particularly drawn to. Which do you find attractive? Which scare you? Which do you relate to? Which do you fantasise about or long to [ship](#)? Check out [fanfic](#) based on the shows, books or movies you

like, or write your own. Doodle and sketch the characters that you're drawn to. Use an app like Pinterest to bring together pics and clips that appeal to you.

For me I started connecting the dots when I remembered how much I was drawn to the fox fairy story in Neil Gaiman's book *The Dream Hunters*, and to so many other stories about foxes, to the extent that I've planned, for years, to get a tattoo of a fox. I found myself linking that to the werewolves in *Penny Dreadful* and *Being Human* (the characters I relate to most in those shows). I also remembered how Mystique in the X-men, and the T-1000 in *Terminator 2*, had always held a particular horror for me. And I thought about how attractive I found Tom Hiddleston's Loki, and the episodes of *Buffy* where characters cast a spell which made everybody fall for them, particularly *Superstar*. Perhaps this could be seen as a kind of simultaneous shapeshifting like the *Camille* episode of *Red Dwarf* where the pleasure GELF appears to each person as their object of desire.

### *Your actual life*

The other starting point for exploration is your life. Think back to growing up: What survival strategies did you develop to get through the tough things you experienced? Were these visible or invisible to those around you (or a bit of both)? What patterns have you noticed in more recent years in the way you engage with the world or relate to other people? What makes life worth living for you? What is your worst fear? What would you like to have written in your obituary? Are there any superpower/mutant metaphors that fit these themes particularly well? Talk to friends. What do they notice about you? Which characters do they think you're most or least like? What superpowers would they say that you have?

Or you might delve into your dreams. Do you have any recurring ones? Are there common themes in the abilities that you have, such as flying or having great strength? What are your nightmares, for example do you dream of falling or being stuck in slow motion? What do you fantasise and daydream about?

For me, I remember a moment when a partner said that I was a chameleon. Thinking back to childhood I recollect how isolated and alienated I felt when I changed school: how I didn't fit in with any of the cliques and crowds there, just as it never made sense for me that we lined up separately as 'girls' and 'boys'. At first I survived this by standing apart, but eventually the pressure was too great and I learnt – clumsily and painfully slowly – how to fit in. By my next school I was drifting from group to group and finding a capacity to fit with all of them. I also notice – on an everyday level – how easily I slip into different accents and ways of talking in conversation, depending on how the other person speaks. Certainly recurring nightmares involve going back to being rejected and on the outside.

## Exploring your hero/villain sides

Once you've determined your mutant superpower/s, or the heroes and villains, demons and angels that you particularly identify with (there may well be more than one), you're ready for a bit more exploration. The way I see it, every superpower has its strengths and limitations. The hero/villain binary is not necessarily a helpful one because – as more recent movies and TV shows have showed us – it's rarely that simple. We can understand both the X-men who want to find a way to live alongside the humans, and the ones who want a complete revolution after years of oppression. We can empathise with the dark-knight version of Batman, or the common trope of the criminal psychologist and the serial killer as flip sides of the same coin.

In my favourite episode of *Buffy*, which I mentioned before, Jonathan Levinson casts a spell which makes him into a superhero, adored by everyone. However, in order to create a version of himself that is only the positive, strong, heroic parts, the other parts have to go somewhere. A shadow version is also created: in this case in the form of a real monster. You might think also Ursula Le Guin's *Wizard of Earthsea*, who summons – and has to eventually face – his own shadow. Or the Confidence and Paranoia, Dimension Jump, and Demons and Angels, episodes of *Red Dwarf* all of which imagine the best and worst aspects of the characters being made real.

So a useful point of exploration – to consider yourself and to talk about with other people in your life – is what the hero and villain sides of your superpower look like. You can't have one without the other: the difficult parts are so interwoven with the great parts that they can't be teased apart. It isn't even always obvious which aspects are 'good' or 'bad'. But it is definitely worth being aware of the possibilities and pitfalls of your powers. Here are some of the positive and negative shades of shape-shifting.

### *Superstar*

Thinking about myself as a shape-shifter, the positives for me – and I think for those around me – lie in the capacity to flexibly and fluidly adapt to situations. I notice how I can feel 'at home' in many different places and communities. I can often get excited by multiple projects – even those that aren't obviously interesting to me – throwing myself in and investing in them.

Also there is the capacity to empathise with different people. That is definitely helpful as a therapist. I find it relatively easy to pick up on how somebody is feeling, and to understand their way of seeing the world if they're able to let me in. I also think that a strength in my writing is that capacity to hold multiple perspectives simultaneously or to see things from 'both sides'. And I hope that I have something to offer to conflictual situations as I can often put myself in the shoes of two or more people involved. I find it hard not to.

## *Monster*

But shape-shifters in fiction are rarely positive characters. There are, therefore, many clues to the shadow side of shape-shifting abilities.

First if we think of Mystique, the Terminator T-1000, and Loki, these are all manipulators who non-consensually trick people into believing that they are other than what they are, for their own personal gain or to further wider goals. There's very little real empathy involved here other than the small amount it takes to know what other people expect – or want – to see. So the shadow side of the trickster is to be mistrusted and treated with suspicion, to be two-faced.

I don't experience my shape-shifting nature as deliberate. It feels much more like the werewolf who has no choice but to change every full moon, or the chameleon who can't help but adapt their colour according to their surroundings.

Different versions of myself feel drawn out of me by different people and situations, rather than me deciding – in any conscious manner – that I want to be a certain way. However, like Mystique, T-1000 and Loki, there is often a wider goal behind it: that is the desire to be liked and approved of: to belong. And although I don't deliberately transform my shape in order to achieve this, it can have the same effect as if I did. I know how it feels to have somebody look at you in disappointment or disgust as they see another side of you than the one they'd come to know and trust.

I mentioned the helpful side of shape-shifting as a capacity for empathy. One flip side of this is that it's easy to get so drawn into another person's way of being, or way of seeing the world, that I become somewhat lost myself. There's a risk that I become very much what they want me to be, but that that is unsustainable and eventually I shift again. Perhaps helpful in the short-term, but harmful in the long-term.

### **What is your kryptonite? Who is your nemesis?**

Of course all superheroes and villains have materials which remove their powers, which send them spiralling up to dangerous levels, or which flip them into their shadow side completely. They have nemeses who wield such weapons and who wish to destroy them. This is another thing worth exploring and remaining aware of.

As a shape-shifter there are many dangers. You can become stuck in one particular self, which eventually becomes brittle and may break under the pressure of trying to keep static what is, by its nature, fluid. And, in a world that is very invested in authentic, individuals who can 'find themselves' or be 'true to themselves', it can be scary to recognise that there is maybe no real, underlying self. It can also be easy to slip into wondering whether maybe there is a 'real self'

and that it is something 'bad': This is exacerbated, for me, if I know that people have stories of me which fix me in a particular way and which I have no control over.

Shape-shifters can also struggle with situations in which they're called upon to be multiple sides of themselves simultaneously, or in quick succession. I can feel exhausted and confused at the end of a day when I've been with many different people – or groups of people – all coming from such different perspectives, positions, or levels of awareness. The other day I felt overwhelmed in a situation where three people were seeing things in very different ways and I found myself flicking faster and faster between each of them. I have an image – I'm not sure whether it's from an actual film or TV show – of a shape-shifter trying desperately to morph into one thing after another, faster and faster, in order to find the 'right' shape, and eventually exploding, imploding, or dissolving into nothingness.

So my kryptonite would be becoming stuck – particularly in a self that I didn't like or respect, or being called upon to shift too much or too quickly.

Awareness of the danger of becoming stuck helps me to remember to cultivate different sides of myself, and the different relationships, places, and projects which bring them out. It's important to me to have multiple close people in my life instead of becoming focused on one. It's also important to move between different spaces (particularly country and city) and to take on different roles and study different areas (e.g. moving between time each week where I'm writer, activist, therapist, and academic).

Awareness of the danger of shifting too much helps me to take time alone, which enables me to find some kind of equilibrium and equanimity when I've been spinning too fast. It reminds me that I need grounding, and I cultivate places, practices, and relationships which help me to do that. And it helps me to see the importance of boundaries, to prevent me from getting too lost.

Of course I don't always get this 'right' by any means, but I feel like with each deepening of understanding I get a bit more of a handle on it.

### **Letting it go and opening up**

In *Frozen*, princess Elsa has the superpower of being able to freeze things. When this harms her little sister, Anna, her parents hide her away, wipe Anna's memory, and keep Elsa's powers secret until she can get them under control. After their parents die Elsa has to become queen. She emerges from her room but tries to hold back her powers in any way possible. However, she can't repress them forever. Eventually they explode out when she's in an emotional state. She's exposed as monstrous and, fearing the harm that her powers might do, she retreats to a solitary ice palace. There, at least, she is able to 'let it go' and stop holding back this vital part of who she is.

Eventually, with Anna's help, Elsa is able to return to the world. It seems to me that Elsa finally becomes able to channel her powers when she is open about all of who she is with others, as well as about her own vulnerabilities and fears, and the shadow side of the powers. She needs to be okay with herself *and* prepared to connect with others. Paradoxically the powers are most dangerous when she attempts to force control over them or hide herself.

Whether we're a shape-shifter or an Elsa, a hulk or a dark knight, an invisible person or a firestarter, it's important to embrace our inner hero/villain and to find ways of expressing it to others.

*Many thanks to Helen Bowes-Catton who started this train of thought, to Erich and Ludi because I'd never have got here without 9 Worlds, and to Melissa for making me think more about Frozen. The cold never bothered me anyway.*

If you want to read more about these kinds of ideas, check out my zine on [Plural Selves](#).

# Thank-you for reading

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