A Quiet Revolution
Mindfulness and Relationship: Therapists Are Learning New Ways to Be With Their Clients

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Synopsis: This article highlights the way mindfulness and the process of contemplative retreat can be used to cultivate relational skills within helping professionals. Please direct requests for permission to reprint at: Jerome@JeromeFront.com If you reference this article in your writing, please let us know, we would be interested in the applications.

It's only 9 a.m., but the coastal haze is already dissolving on this cold December morning in the Malibu hills. In the spacious room where I'm leading a retreat on relational mindfulness, several dozen therapists sit with their eyes closed, silently attending to their breathing. Some relax in chairs, while others sit cross-legged on the floor, pulling blankets around themselves for warmth. I'm feeling excited and hopeful, but I notice, too, a touch of nervousness diffused throughout my chest and belly. Today we may be venturing into some uncharted territory. As the guide, am I open and ready? Closing my eyes, I notice that the momentum of these musings has carried me away. I take a deliberate breath, acknowledge the thoughts, and let them pass. In the silence, I relocate my body via the waves of my breathing.

This scene may call to mind the opening moments of any mindfulness workshop--the inviting silence, the attentiveness to breathing, the catching oneself in the midst of a familiar story line. But the therapists in this room for a daylong retreat are here for something more: to explore relational mindfulness--qualities of presence, receptivity, empathy, and attunement--and to learn a process for directly kindling these qualities to life in our encounters with clients.

Renowned meditation teacher and researcher Jon Kabat-Zinn describes mindfulness as "the awareness that emerges through paying attention on purpose, in the present moment and non-judgmentally, to the unfolding of moment-to-moment experience." Many people understand this process as a path toward individual growth and healing, and it is. But the paradox of mindfulness meditation is that in cultivating a more attuned and loving relationship to ourselves, we nurture our capacity for a more resonant connection with others. Particularly in the therapy relationship, mindfulness has a pay-it-forward momentum--for when clinicians are more attuned to
their clients, they, in turn, can more readily move forward into greater awareness and kindness toward themselves.

Gaining Some Respect
The concept *mindfulness* has so permeated the psychotherapy universe that it's hard to chart exactly how this happened. Several years back, a therapist acquaintance confided to me that he'd wanted to study meditation for decades, but had shied away because, "Where I come from, the whole idea of meditation carried with it the whiff of hemp and the fear of gurus." Indeed, until the early 1990s (or later, depending on your geographical location), many still equated meditative practices with New Age thinking, the kiss of death for therapeutic legitimacy.

Then science discovered meditation. In the last 15 years, scores of research findings on the salutary physical, emotional, and spiritual impact of meditative practice have emerged from the fields of psychology, medicine, education, and neuroscience, eliciting widespread interest from clinicians. Most recently, these disciplines have begun to explore the ways in which mindfulness can enhance relationships.

In his 2007 book, *The Mindful Brain*, psychiatrist and brain researcher Daniel Siegel describes how relational qualities may be inseparably intertwined with mindful awareness, even at the level of brain structure. He observes, "By exploring the notion that mindfulness, as a form of relationship with yourself, may involve not just attentional circuits, but also social circuitry, we can then explore new dimensions of the brain aspect of our mindful experience." Further, "If mindfulness promotes the development of resonance circuits, then we can imagine that we will become attuned to the internal lives of others as well as to ourselves."

Such explorations, as well as the burgeoning number of therapists who practice meditation themselves, have created an explosion of interest in learning about the implications of mindfulness for clinical work. The Center for Mindfulness in Medicine, Health Care and Society, primarily known as the birthplace of the Mindfulness-Based Stress Reduction (MBSR) program, reports that 7,000 psychotherapists and other health care practitioners have participated in its mindfulness professional trainings. At last check, the Massachusetts-based Institute for Meditation and Psychotherapy listed more than 170 articles on mindfulness and
therapy on its website, nearly all of them published within the last 10 years.

In my view, this recent upsurge of interest is more than a passing clinical fancy; it has the potential to become a foundational element of our work. This is because mindfulness meditation is able to rescue some of our most vital therapeutic qualities--receptivity, empathy, presence, and attunement--from the realm of intellectual construct and provide a powerful, experiential method for awakening them within each of us.

**The Paradox of Silence**

*With my eyes closed, I more easily recognize the faint sounds of crows playing somewhere above the nearby cliffs. I'm aware of feeling strangely soothed by these birds; their distant calls echo in my body and mix with the soft rise and fall of my breathing. Now I hear the shuffle of feet moving across a rug. Opening my eyes, I recognize a few therapists from my weekly meditation class making their way to an open space in the room. One of them, Carol, makes eye contact with a seated woman. They hug, and afterward linger with each other, speaking only with affectionate, knowing smiles. I wonder whether the silence makes it easier for them to resonate with the warmth that seems to pulse between them. And . . . I've become lost in thought again. This happens so easily! I close my eyes and, once again, sink back into my breathing and the enveloping silence.*

The silence that permeates our retreat room isn't merely a support for selfexploration; it's also an invitation to take a temporary break from the obligations of the social self. In ordinary situations, we tend to make initial contact with others via such exchanges as, "What kind of work do you do?" or "Where are you from?" But on this clinical retreat, such surface or "horizontal" connecting can undermine the purpose of our shared work. I've found that when horizontal exchanges proliferate early in the process, they tend to become the group norm, diverting us from attuned listening and intimate relating. Another paradox: intentional silence allows for the possibility of more genuine communication.

It's rare that we're given permission to be silent in a social setting. But when we're offered that chance and are guided in the ways of silence, profound learning can take place. Silence can be a loving invitation to look inward and become more mindfully attuned to the subtle personal and interpersonal dimensions of our immediate experience. No longer
preoccupied by small talk, we're freed to see and feel things that may have been invisible previously.

My emphasis on silence as an element of relational work has been inspired, in part, by the writings of a Benedictine monk. Fr. Hugh Feiss has spent decades studying and living in accordance with a document called The Rule of St. Benedict, which spells out an approach for making individual contemplation work while living in community. In his book of the subject, Essential Monastic Wisdom, Feiss observes that the first word in St. Benedict's Rule is "Listen"--arguably our most fundamental activity as therapists.

Feiss goes on to describe contemplative living as "a training in the art of listening, which begins in silence, develops in attentiveness, and is perfected in communication." This perspective has helped me to understand the pivotal role that silence plays in the therapeutic relationship, for it is the open space in which presence, mutual attunement, mindful listening, and resonant communication can arise. As Jungian analyst Jean-Pierre Schnetzler observed: "It is within the analyst's silence that the patient finds his voice."

Whole-Body Listening
To begin our cultivation of relational mindfulness, we start with the body scan. Adapted from the MBSR program, this is a detailed, sensuous process of getting in touch with the moment-to-moment nuances of bodily sensation, feeling tones, and subtle mind processes that we often take for granted--or fail to notice at all. This experience of rich, embodied awareness rebalances our customary, head-first style of relating by including the body as a source of intelligence. Since the body speaks to us in the language of sensation and movement, a mindful attunement to these bodily "voices" can help us listen better to what's going on inside us--a vital prerequisite for being able to truly hear and be empathic with others.

*I ask participants to prepare for the body scan by lying down on their blankets. There's a bustle of quiet, purposeful movement as people slide chairs out of the way, fetch blankets, and make last-minute adjustments. One woman stuffs her journal into her backpack and then briskly zips it up, as if to say, "No more notes!" She unfolds her blanket into a large rectangle and lies down with a sigh that carries the lush, relieved tones of letting go.*
Stretching out on my own blanket, I begin by asking participants to simply bring receptivity to their moment-to-moment experience. "Locating your breath by how it feels in your belly or lower back," I say. "Just softening and becoming receptive. If you like, you might experiment with your attention as though it was a satellite dish, directing it to the region of your belly and patiently waiting for sensation to arrive into awareness."

I ask everyone to remain open and curious, noticing what, if anything, moves across their mind, and then to bring their attention back to the place where they feel their belly or lower back moving. Pausing for people to practice this step, I'm awed, as always, by the sense of focus and aliveness that permeates the room.

**Moment-to-Moment Miracles**
My interest in mindfulness for therapeutic relating was sparked, in part, by my own experience on the client end of the therapy relationship. I'd gone to see Dr. Burke after my dad died in a violent accident, and I didn't know what to do with my grief. I felt saturated with it, and, at the same time, immobilized. In therapy sessions, I can remember looking down and away, trying to fend off my unbearable sadness while feeling terribly embarrassed that I needed somebody's help.

I'm sure that neither Dr. Burke nor I thought of ourselves as even remotely engaged in a meditative process. Still, in those moments of frozen sorrow, I'd often sneak a look at Dr. Burke. Invariably, he appeared relaxed and present, clearly unafraid of my inner storm. Sometimes, we just sat together in silence as he attended to my smallest gestures, sometime nodding as if he understood, or maybe even felt, the invisible parts of me I couldn't articulate. Once, I said to him, "I want to talk about it, but I can't." He embraced me in his gentle gaze and said, "I see that you want to, but some part of you feels stuck or afraid." Again and again, I experienced the moment-to-moment miracle of being both soothed by, and visible to, this unassuming man. Gradually, Dr. Burke's unwavering attunement and empathic attention nourished my own ability to attend to the intensity and nuances of my emotions, and to stay with them long enough to become more patient and sympathetic toward myself.

**When Mindfulness Meets Therapy**
My experience with Dr. Burke piqued my curiosity. By the time I'd started graduate school in clinical psychology in the late 1980s, I'd developed my
own mindfulness meditation practice. It was becoming increasingly clear to me that the processes of mindfulness and psychotherapy were like the flip sides of a coin, each engendering present-moment awareness and self-reflection via its own distinctive pathway. Yet there seemed to be little cross-fertilization between these two worlds. In my own work as a therapist, I was often aware of how challenging it was to stay fully present with clients, especially the ones who pushed my buttons. Might the practice of mindfulness—that is, a direct, full-bodied experience of the present moment—help therapists develop more attunement to, and empathy with, clients?

With a lot of passion and no neuroscientific hard data available to refer to, I plunged in. By the early 1990s, I'd begun to create my own experiential, clinical trainings on mindfulness, pulling together elements gleaned from my own meditative experience, contemplative tradition, and some promising psychological explorations of empathy. These included Daniel Stern's work on "affective attunement" and "emotional resonance" and Heinz Kohut's emphasis on "feeling one's way" into the client's subjective world with a knowing that included "the expansion of the self to include the other . . . and understanding the echo evoked by the self."

A few years later, a couple of prominent therapists began to weigh in from an explicitly meditative perspective: psychologist Jack Kornfield described therapy at its best as "a shared meditation," while psychoanalyst Jeffrey Rubin began to explore how a therapist's own meditative practice could deepen presence and optimal listening. This was exciting stuff, but also frustrating, because these innovative thinkers hadn't outlined any specific protocols for clinical training. Even in our early clinical workshops, I knew that participants needed a direct, embodied way to kindle presence, empathy and attunement. We needed, quite literally, to "be there."

Then, in 1997, I attended the first of several group trainings in Mindfulness Based Stress Reduction with Jon Kabat-Zinn and Saki Santorelli. I felt as though I'd come home. In the intensive meditative practice, body work, and group process we learned in these trainings, I felt immediately how this experiential process revealed relational dimensions within each present moment. It was here that I first encountered the body scan, a richly powerful experience for me that I'd later adapt for my own clinical trainings on resonance and embodied listening.
As I continued to explore experiential possibilities for enhancing clinical presence, I discovered the work of Charlotte Selver, who was neither a mediation teacher nor a psychotherapist, but a gifted pioneer in the field of sensory awareness. In the 1960s and 1970s, she quietly influenced a whole generation of leading meditation teachers, including Alan Watts, Shunryu Suzuki, and Jack Kornfield, as well as such pioneering therapists as Carl Rogers, Fritz Perls, Abraham Maslow, and Virginia Satir. In her workshops, she guided participants through a series of deceptively simple sensory activities that elicited an embodied, curious, nonjudgmental attitude toward their own experience. Having tried them out myself and adapted them to my workshops, I can attest to their power.

Looking Deeply
As I invite participants outdoors for our "Listening to the World" meditation, they grab sweaters and blankets and wander outside to find seats on the benches of the cliffside garden. We move at a leisurely pace through all of the senses, ending with a meditation on the sense of hearing. "Letting the sounds simply arrive into your body, noticing also any movements of your mind. Opening to the nuances of sound; listening to the subtle, felt tones in your body."

I save this listening meditation until just before we return to the workshop room, because at this point, we intentionally break our silence. Now our work is to extend this same, immediate, full-body knowing and listening directly into our relationships with one another. Initially we form twosomes, taking turns practicing mindful listening and speaking. Then, bringing our chairs back into the larger circle, we gather as a group. I remind participants to identify and attend to whatever emerges within themselves, and then, if they so choose, to express their experience with immediacy and authenticity.

Robert, a tall, weathered-looking man of about 50, speaks first. He tells us how the recent death of his mother has occupied most of his retreat, "It's been months since she died, and I haven't cried for her yet," he says. "But today, in the garden, I saw these tiny blue flowers that she loved, and I found myself missing her." He sits very still as tears stream down his face. As others nod reflectively, I thank Robert for sharing with us. Then, Theresa, a young woman who's been sitting against the back wall, puts up her hand. "When Robert was talking, I kept feeling like I had a few urgent questions for him," she begins, raising herself to a kneeling
position so we can see her better. She pauses, as if unsure whether to continue. I urge her to take her time, and in the resonant silence that follows, each listener practices the real-time gift of presence, as we might do in session.

Finally, Theresa speaks again. "What really happened was that when Robert was crying, I felt like I was going to cry, too," she says, her voice wobbling slightly. "I think I wanted to interrupt him only so that I wouldn't cry." She looks up at the ceiling for a moment, and then brings her gaze back to the group. "So, instead, I just sat quietly with what he and I were feeling in our own ways. And it was okay. My eyes welled up, but I was able to hold it all."

As the group sharing continues to unfold, I feel grateful for a process that can reap such depths of awareness, openness, and connection. At the same time, I understand that what we're doing is hard work, and likely only to get harder. For it's one thing to embody these qualities in the supportive environment of a therapists' retreat, and quite another to hold on to them in the improvisational dance of a real-world therapy encounter.

**Remembering to Breathe**

Thinking about how hard it can be to be mindful in the therapy room, I recall my first session with a large, broad-shouldered man named Steve, who'd recently been released from prison for armed robbery. Through the years, he'd also logged multiple convictions for aggravated assault. As he strode into our first meeting wearing jeans and T-shirt, my impression was of 250 pounds of tattooed muscle. In his measured Texan drawl, he began by telling me that he was torn between making amends with his estranged wife and returning to his lawless life on the streets.

"Don't get me wrong, I love her to death," he said, his voice thick with restrained fury. "But you have no idea how much fun it is to go out and get crazy." He laughed loudly, and then leveled a challenging glare at me and said, "So you think you've got the answers for all this, right?" As I struggled to gather my thoughts, he leaned forward on the couch, clenching and unclenching a fist. "And I'm supposed to completely trust you, right?" he sneered. "Why the hell should I?"

My first thought was, "Who's closer to the door, me or him?" Other possibilities-- only slightly saner--darted through my head. Should I discuss
the boundaries of therapy with him? Should I confront him about his tone? Instead, just as I'd learned to do in my challenging meditation moments, I deliberately attended to my breathing and racing heart. Then as I managed to widen my awareness beyond my inner alarm bells, I sensed a faint awareness in me that Steve--however belligerent his manner--was actually trying to connect with me by being as candid as he could. Whether his approach to me was a test, a threat, or a desperate plea didn't matter at the moment; what mattered most was understanding how important honesty was to this man, and whether I could reciprocate. "I can't think of any good reason why you should trust me yet," I told him. "We haven't known each other long enough for me to do anything trustworthy. Maybe, after we spend some time together, you can decide whether I'm trustworthy or not." Steve looked at me for a long moment. Then he stared at a spot on the wall. Finally, he began to nod his head. "I've never done this therapy thing before," he said, softening back into the couch. "Tell me how I'm supposed to do it."

**Widening Ripples**

It's my hope--and expectation--that relational mindfulness will wield an impact far beyond the therapy room. Already psychotherapists and meditation teachers are beginning to customize mindfulness practice for larger systems. For example, a Los Angeles program called Insight LA now offers the "Growing Spirit" program that provides families with regular, daylong opportunities to practice mindfulness and learn to bring more compassion and joy to the hard work of nurturing a family.

Meanwhile, the corporate world is beginning to dip its toe into relational mindfulness. I was invited recently to provide mindfulness training for a Fortune100 company whose IT department had just built a national management team and hoped to ground its interpersonal culture in more open, empathic communication. Schools, too, are beginning to catch on to the potential of mindfulness. For the last several years, I've led a mindfulness training for a local high school music department that performs at highly competitive events. The students and I discuss the phenomenon of silence and how, without it, there's no music--just noise. Then, as these teens learn to meditate and become more familiar with the tones and rhythms of silence in their bodies, they're gradually able to bring more mindful reflection, concentration, and relaxation into their music and their daily lives.
We may even see a time when mindfulness is used in the service of world peace. In a public talk at the Pasadena Civic Center in October 2005, Zen master and Nobel Peace Prize nominee Thich Nhat Hanh called for groups of trained, mindful listeners to reach out to disenfranchised people and warring factions throughout the world. He identified the foundational element of peacemaking as the experience of being deeply seen and heard. Therapists who have their own mindfulness practice and clinical skills in group work may be ideally suited for this vital mission.

Of course, whatever kind of mindfulness-grounded therapy training or teaching we might choose to do, we can be effective only to the extent that we're willing to walk our talk. Luckily, there's no shortage of opportunities to respond with more awareness and compassion to the challenges of our daily lives.

**Touching the Invisible Ocean**

*On our last, late-afternoon break of the day, I walk across the patio near the bell tower, where I can watch the sun lowering over the entire coast. On my way, I notice Carol, a therapist in my weekly meditation class, sitting alone on a bench. She's crying. As I move a bit closer, I hear her whisper, "I can't see the ocean."*

I stand there for a brief moment, taking in this possibility. She looks up at me, struggling for composure. "This is the first Saturday that I haven't worked in years," she says. "And I've been sitting here for 20 minutes thinking about all the money I'm losing today. I'm also thinking that I should be spending the day with my kids." Gesturing toward the coastline, she begins to cry again. "The ocean is right in front of me, and I'm missing it!" I kneel down beside Carol on the clay-tile patio. After a few moments, her tears subside and she begins to shake her head from side to side, as though trying to grasp something elusive. "I've spent so much of my life like this," she says finally. "I've missed a lot of things, and I'm realizing now that once they pass you by, you can never get them back." The rawness of Carol's honesty stuns me for a moment. After a silence, I ask, "Can you notice that you aren't missing too much of what's happening for you right now, in this very moment?" When she nods very slowly, I gently continue: "Right alongside your sadness, can you feel that soft breeze on your skin, and see the waves moving way out there in the ocean? Can you let a little more of this in, right now?"
"I'll try," Carol says. She begins to cry again, but this time, with her eyes open, gazing at the ocean. After several minutes, her breathing becomes steadier. I sense that she's moving into a fuller awareness of herself. In my own body, I can feel the shift too—as if we've taken a step forward together. Now she looks at me, smiling. "I'm starting to see," she says.

My experience with Carol moved me because she was so forthright and vulnerable, and also because she spoke so directly to our human dilemma. It's my story, and yours. When we're unhappy with some aspect of our lives, so often, we shift into autopilot, pretend we're just fine, or escape into one addiction or another. Unknowingly, we begin to miss out on the very moments that make up our lives, whether we like them or not, expect them or not, find them painful or not. Whole realms of our lives can become like Carol's ocean—right in front us, but invisible.

Each moment is already here in all its fullness, waiting for us to immerse ourselves in its sometimes muddy, but always restorative, waters. Only when we begin to fully inhabit our own moments, it seems to me, can we be of real use to those who seek our help. For whatever presenting sorrows our clients may bring to us, they, too, hope to glimpse a little more of the ocean.

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