Mindfulness, compassion, and the Pain Paradox

John Briere, Ph.D.
Department of Psychiatry and the Behavioral Sciences
Psychological Trauma Program
Keck School of Medicine
University of Southern California

www.johnbriere.com

Pain and suffering

• Classic Western approaches to pain
  • Labeling and badness
  • Bad feelings, psychopathology
  • Support for avoidance/fixing/suppressing/numbing
    • Just get over it
    • Take a pill
    • Buy this car

Pain and suffering

• Confusing pain and suffering
  • “Pain is inevitable, suffering is optional” (except when you don’t have the option)
  • Pain is the direct effects of adverse things, traumas, losses, and unprocessed memories of those things
  • Suffering is when pain is psychologically misinterpreted and is avoided, rejected, suppressed, numbed, or denied
    • Only optional to those who are able to tolerate pain
The Pain Paradox

- Suppression, rejection, or avoidance of pain = increased suffering and decreases awareness
  - Literature on substance abuse, dissociation, thought suppression
  - Limits to processing, the downside of numbing
- Nonjudgmental acceptance of pain = decreased suffering and increases awareness
  - Direct experience of pain/distress allows it to be processed, decatastrophized, and gained from (posttraumatic growth)

Implications for intervention

- Mindfulness as the antithesis of avoidance
  - Intentional, ongoing awareness of the present moment, with acceptance and without judgment
- “Inviting your pain to tea” (exposure interventions)
  - Avoiding avoidance, to the extent possible
    - “Leaning into pain” (Brach)
    - “Invite your pain to tea”

Implications for intervention

- Allowing “naked,” non-overwhelming distress in the context of compassionate caretaking
  - Clinician compassion
    - Nonegocentric appreciation of the suffering of others with a desire to relieve that suffering
    - Biological role of compassion in attachment circuitry
Suggested readings


