

Chapter 12

Relational Mindfulness, Attachment and Deconstruction of the Self



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12.1 Relational Mindfulness and Associated Factors

The experience of mindfulness has always been described as the result of isolated practice. Contemplative traditions from which mindfulness developed, such as Buddhism, emphasize retreats as the main form of practising meditation. In fact, present research confirms that the highest increases in levels of mindfulness occur on meditation retreats and not in everyday worldly life. Although Eastern and Western monastic traditions have lived on in monasteries, the reason they developed was to facilitate survival; they were secure from outer world, and it was easier to obtain food and assistance from lay practitioners and rulers. But monastic rules typically involved silence most of the time; monks were to obtain from idle conversation and worldly affairs. Consequently, the experience of mindfulness that is usually achieved during formal meditation is considered difficult to experience or maintain in coexistence with interpersonal relationships unless the practitioner has great experience in meditation (Garcia Campayo 2019).

However, according to the Buddha, it is possible to maintain a state of equanimity and mindfulness regardless of where we are and who we are with. Siddhartha Gautama said to his disciple Ananda, *I remain fully in a dwelling of emptiness (Majjhima Nikaya 121; 3)*. This idea is frequently repeated in the Pali Canon, where the Buddha describes how he can talk and share with kings, princes and other people without losing his state of consciousness. The experience of long-term meditator is that firstly you attain this state in isolation through formal meditation. It can then be experienced during informal meditation (i.e. everyday life) when you are alone

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doing repetitive activities such as walking, washing dishes or cooking. Afterwards, it can be experienced in interpersonal relationships when you are listening, but not speaking. The greatest difficulty is to be mindful when speaking to others, because the experience of self greatly increases when we speak.

As social animals, we humans spend most of our lifetimes communicating with others. Therefore, an important challenge is how to maintain mindful states during interpersonal relationships. This chapter reflects on two fundamentals for facilitating interpersonal mindfulness: a secure attachment style and the reduction in the strength of the self.

12.2 Attachment Styles and Interpersonal Relationships

12.2.1 Attachment Theory

The term “attachment” is a classic psychoanalytic concept developed by Bowlby (1969) in reference to the emotional bonds that humans form with other people throughout their lifetime. The attachment system is essentially developed in the first years of life based on the relationships children form with their parents or primary caregivers. This connection is the strongest emotional tie that humans feel for others, and it reflects the most basic and essential needs that exist: those of feeling loved, safe and secure.

Bowlby (1969) asserted that when a child senses danger, they instinctively activate their attachment system in order to seek their parents’ care and protection. Adults, in turn, have evolved to respond to the demands of their offspring. When children systematically find safety, security and the opportunity for social interaction in their parents, they develop a “secure attachment”. Where a child’s relationship with a parent figure lacks these conditions, it is highly likely to warrant the adjective “insecure”. A child may feel secure with both parents, secure with one and insecure with the other or insecure with both. A child might also have felt insecure with both parents, but secure with a secondary attachment figure who was part of their immediate social setting (Marrone et al. 2001). It is important, however, that children are able to securely connect with at least one of their figures of reference, given that the attachment style they develop in those first years of life will have significant repercussions on their psychological and emotional development.

12.2.2 Stages of Attachment

Bowlby (1969) describes four essential phases in the development of attachment:

1. *Pre-attachment* (from birth to 6 weeks of age). During this period, a child’s behaviour consists of genetically programmed responses that help to guarantee survival. Babies summon the attention of other humans by smiling, crying, etc.,

and they are able to manifest their sense of well-being when other people interact with them (e.g. when picked up, spoken to, etc.). They do not yet show any specific attachment as such, but demonstrate a clear preference for the voice of their mother over that of any other adult.

2. *Indiscriminate attachment* (between 6 weeks and 6 months of age). In this phase, children more consistently direct their behaviour towards their mother than towards other people (following her with their eyes, laughing when with her, babbling when she is near, etc.). However, they still show no anxiety when separated from their mother despite clearly recognizing her. What causes them distress is lack of human contact, e.g. when left alone in a room.
3. *Discriminate attachment* (between 6–8 months and 18–24 months of age). At this age, the emotional bond with the mother is so evident that the child tends to protest when separated from her. After 8 months of age, the only thing that will typically calm babies is to be held by their mothers. Most of a child's actions (crawling, for instance) are focused on attracting their mother's attention.
4. *Formation of reciprocal relationships* (18–24 months +). This phase is characterized by the appearance of language and the ability to mentally represent the mother. Children at this stage understand that their mother's absence is not definite when she is not present. After the age of 3 years, children deploy a series of strategies for controlling interaction with her by forcing her at certain times to negotiate leaving and returning to the home.

Completion of these four phases results in a solid emotional bond. Children no longer demand the constant attention of their mother and feel secure that she will respond when needed.

12.2.3 Attachment Styles

Bartholomew and Horowitz (1991) developed a system for classifying styles of attachment by dividing them into four main categories. These styles are believed to define the way we relate to other people. There are one secure attachment style and three insecure attachment styles with different characteristics.

- *Secure attachment style*. People with this style had a mother or father who demonstrated that they were available, affectionate, tolerant and empathetic during their first years of life and as a result developed great self-confidence and the ability to trust others. During their childhood, they learned that they were worthy of being loved and that other people were reliable and able to provide security. As adults, these people have no difficulty in being able to receive and give affection and to maintain satisfactory interpersonal relationships.
- *Preoccupied attachment style*. This style tends to occur in individuals whose parents responded to their needs in an unstable and variable manner during their childhood. In other words, they were attended to at certain times, but not at others, which may be habitual of parents with certain medical conditions or psy-

chological disorders, preventing them from providing steady care for their children. The children are unable to understand that this intermittent care is not their fault and develop low self-esteem and a poor self-image. However, the concept they have of others is positive because they have experienced what it is to feel loved. As adults, they become people who are very dependent on others, coming to renounce their desires and initiatives when these come into conflict with those of others, merely for the need to please and be liked, in order to feel loved.

- *Dismissive attachment style.* This style is developed by individuals whose parents were neglectful in their way of relating to them, without the existence of abuse. Unlike the preoccupied model, adequate care was never provided. Children learn that they can never count on support from their parents and that they have to manage on their own. Consequently, these people develop complete mistrust of others and excessive self-confidence, which causes them to have little understanding of others' needs for affection in their relationships with others, given that they learned to survive in emotional terms autonomously and without assistance from others.
- *Fearful attachment style.* This style is developed by people who have experienced cold or violent care, as a result of rejection or punishment. These individuals develop a very negative view both of others and of themselves. This style may be typical when parents are alcoholics or substance-dependent or when they present with personality disorders. Abused children cannot understand that their parents have a disorder; they only think that they are doing something wrong which merits punishment. The consequence of this is that they spend their childhood endeavouring to understand what they are doing wrong and they try to change in order to avoid punishment, despite never succeeding. They develop a poor self-image because they have never felt loved and a poor image of others because they feel they are not reliable enough to be able to give them love and care. They have low self-esteem, negative affect and a great inability to develop close relationships with other people.

12.2.4 Importance of Attachment Styles

It is believed that 65% of children present with a secure attachment style and the other 35% present with one of the described insecure attachment styles (Prior and Glaser 2006). The attachment style of parents predicts 75% of their children's attachment style (Steele et al. 1996). Although there are other influences apart from attachment, children with a secure attachment style are more likely to become socially competent than their insecure counterparts. They also have greater ease in acquiring social skills, developing intellectually and forming a social identity. On the whole, they tend to be more successful on all levels than children with insecure attachment styles. In short, attachment styles modulate the image we have of ourselves and of others and are therefore key to the relationship we have with ourselves and with others. Attachment style predicts feelings of guilt and shame towards ourselves and feelings of anger and mistrust towards others. Mindfulness and compas-

sion therapy is key for clarifying and modifying the relationships we have with ourselves and others and is therefore closely related to attachment styles.

12.2.5 How to Know Our Attachment Style

Attachment style is a key psychological variable that predicts the kind of interpersonal relationships, vulnerability to psychological distress or success in social or laboural areas of an individual. This test, based on research by Bartholomew and Horowitz (1991), can help us to identify it (Box 12.1).

Box 12.1: Attachment Styles

We summarize several phrases that describe the way people relate to others. First, select which of the four best describes your relationship with others (qualitative assessment). Following that, as most of us present characteristics of several styles, write down at the side of each paragraph a number from 1 (totally disagree) to 10 (totally agree), describing up to which level you identify with each statement (quantitative statement).

1. **SECURE:** It is easy and pleasant for me to establish close relationships and intimacy with others, so I can share worries and deep feelings with them. I feel comfortable both trusting in others and when others trust in me. However, I understand it is normal that I should dislike some people and that sometimes I can be alone.
2. **PREOCCUPIED:** I feel uncomfortable when I am not in an affective relationship, so I am used to giving up my wishes and objectives to maintain relationships at any cost. This is the way I act as part of a couple and with friendships and family relationships. I am always fearful of disappointing others. I think my partners and friends could leave me at any moment, so I try to pay attention in order to find any indication that they are going to leave me. I tend to be jealous.
3. **DISMISSIVE:** I feel better when I am not in any affective relationships, either with a partner or with friends. I feel afraid to give up something that is important for me for the sake of a relationship. The most valuable thing for me is my sense of independence and self-sufficiency. I prefer not to depend on anyone or to feel that others depend on me. I feel that people are weak and will do anything to stay in a relationship.
4. **FEARFUL:** I feel bad and worried when I become intimate with others because I am afraid they will hurt me. I would like to maintain affective relationships but I feel it is difficult to trust in or depend on others. I worry about how much I can suffer if I do not keep my distance from others. I have been through extremes in my relationships, idealizing certain people despite not knowing them well enough and feeling very disappointed when they do something I dislike.

The test is assessed in two ways:

- *QUALITATIVE*: Describing the main attachment style.
- *QUANTITATIVE*: Describing the ratio between secure attachment and insecure attachments. A “coefficient of attachment style” is then calculated in this way:

Secure attachment value (numerator)/the sum of the values for preoccupied, dismissing and fearful attachment styles (denominator). Values above 1 imply secure attachment, and values less than 1 suggest insecure attachment.

12.2.6 *The Concept of Compassion*

One of the most commonly used definitions of compassion in psychology is the one formulated by Goetz et al. (2010), which describes compassion as “the feeling that arises in witnessing another’s suffering and that motivates a subsequent desire to help”. Another very similar description is that devised by Paul Gilbert (2009), “a sensitivity to suffering in self and others with a commitment to try to alleviate and prevent it”. Compassion is not only an emotion but also a motivation that guides human behaviour. One of the most widely used models in compassion is the one created by Neff. She defines compassion based on the three pillars described in Box 12.2.

Box 12.2: Components of Compassion Model According to Neff (Neff 2012)

1. *Mindfulness*: To be aware of our and others’ suffering, without judgement or criticism. Suffering is not denied nor do we escape from it. We must not get trapped by it, as most humans do (Neff refers to this as overidentification). This step is key, because we cannot feel compassion unless it is for a person who suffers. Also, if we overidentify with suffering, we will only create empathy, not compassion, and we will be at risk of burnout.
2. *Common humanity*: To be aware that the suffering we are experiencing just now has previously been experienced by millions of human beings, is being experienced at this moment by millions of people and will be experienced in the future by millions. Any suffering we feel is inherent to human nature. It is not our fault, but the result of our humanity. The opposite of this feeling is isolation, which is necessarily associated with guilt or shame; useless feelings lead to the chronification of depression.
3. *Self-kindness*: Affection and understanding towards ourselves when we experience suffering, instead of self-criticism, guilt, shame or denial of our pain. It involves treating ourselves like helpless children or as beloved friends. The opposite would be destructive and blaming self-criticism.

There are several protocols for the development of compassion for use with psychiatric patients and healthy individuals. We have developed one specific protocol whose aim is to allow people to acknowledge their attachment style and enable them modify it towards a more secure model. This treatment improves interpersonal relationships.

12.2.7 Attachment-Based Compassion Therapy (ABCT)

This compassion protocol is structured into eight weekly sessions, each with a duration of approximately 2 h. It is described in greater detail in the book, only available in Spanish, *Nuevo Manual de Mindfulness* (García-Campayo 2018). It describes the theoretical foundations for the model, its structuring into sessions and the exercises to be used in each session.

The model is structured around the following theoretical foundations.

1. Bowlby's attachment theory and the classification system for attachment styles by Bartholomew and Horowitz.
2. Contributions from other compassion models: the structure of the three brain circuits by Paul Gilbert and a series of exercises that most protocols take from tradition.
3. Contributions from other cognitive and third-generation therapies: aspects of mindfulness taken from mindfulness-based interventions (García-Campayo 2015a), awareness of values through specific techniques from acceptance and commitment therapy (ACT) and radical acceptance from dialectical behaviour therapy (DBT).
4. Contributions from tradition: theoretical foundations from tradition, such as Tibetan Buddhism, but also from other religions, such as native American beliefs in which compassion plays a part, given that it is the common denominator in all of them. Logically, as is habitual in mindfulness and compassion therapy, any religious or cultural connotation has been removed from these techniques, and their efficacy has been evaluated from a scientific perspective.

The programme is structured into eight sessions. The first session works with the theoretical aspects related to the evolution of our brain, happiness and suffering, and the concept of compassion is defined by eliminating erroneous beliefs that tend to be associated with it. A very important part of all sessions is devoted to both formal and informal exercises. Participants are instructed in a series of formal exercises that stress aspects of compassion towards ourselves and our body that are core to the programme, and participants are asked to practise them regularly. A series of informal exercises devoted to personal care are recommended, and this awareness should be applied to daily life. Recordings of the exercises in each of the sessions are made available to all participants to stress the importance of doing the exercises at home.

12.2.8 Effect of ABCT on Attachment Styles in Healthy People

The aim of this study (Navarro-Gil et al. 2018) was to assess the efficacy of ABCT for improving self-compassion in a healthy population and determine whether improvements in self-compassion mediate changes towards a more secure attachment style. The study consisted of a non-randomized controlled trial with an intervention group (ABCT) and a waiting list control group. In addition to pre- and post-intervention assessments, a 6-month follow-up assessment was included. Participants were healthy adults attending ABCT courses who self-rated as not having any psychological disorders and self-reported as not receiving any form of psychiatric treatment. Compared to the control condition, ABCT was significantly more effective for improving self-compassion as evidenced by changes on all subscales on the Self-Compassion Scale (SCS), except isolation. Effect sizes were in the moderate to large range and correlated with the number of sessions received. ABCT also led to improvements across all subscales of the Five Facets of Mindfulness Questionnaire (FFMQ), except describing. ABCT decreased psychological disturbance assessed using the General Health Questionnaire (GHQ-28) and decreased experiential avoidance assessed using the Acceptance and Action Questionnaire (AAQ-II). Furthermore, ABCT led to significant reductions in levels of anxiety and avoidance. Secure attachment style significantly increased in the ABCT group and was mediated by changes in self-compassion. In summary, ABCT may be an effective intervention for improving self-compassion and attachment style in healthy adults in the general populations.

The bond of attachment is the most special of emotional relationships formed between babies and their caregiver. But not all forms of attachment are equal. Depending on the type of relationship, attachment will be more or less secure and adequate, leaving a deep imprint on individuals and marking the way they form relationships with others. A secure attachment formed in the first years of life is the basis for balanced emotional development and is key for forming positive relationships with others.

ABCT is a compassion protocol based on this psychological construct, attachment style, which can be used on both the general public and patients with medical and psychological disorders. It has been adapted to the cultural setting and healthcare systems of Latin countries (Latin America, Spain and Portugal). The preliminary results from this intervention are promising, and users have shown high levels of acceptance and adherence. There have been very few and minor unexpected effects. The versatility of the model enables its facilitation for general use in the healthcare systems of Spain, Portugal and Latin America.

12.3 The Importance of the Reduction in the Strength of the Self in Relational Mindfulness

12.3.1 *The Self-Concept*

The self-concept is the set of ideas that a person has about him-/herself and about his/her characteristics. It is defined by a sense of continuity over the time and by identification with the body. It is the idea of a being that thinks, feels, wants and acts.

There is a *social* self-concept associated with identification and belonging to several specific social groups and not belonging to other groups. For instance: “I am Spanish (not British or of any other nationality), Catholic (not following any other religion), supporter of Real Madrid (not of any other football team)”. In addition, there is an *individual* self-concept that is specific to biographical history. For instance: “My name is Javier García. I have a brother and a sister. I studied at the La Salle school and at the University of Zaragoza”. Both concepts have a social origin (Sammut et al. 2013). Our knowledge and beliefs about ourselves are structured in our memory as a) memories of personal events and their context (self-biographical memory) and b) memories of our abstract characteristics (semantic memory). We never have all our information activated in our memory at the same time. Different information arises depending on context. After organization, information retrieved from long-term memory, both biographical and semantic memories, modifies perception, understanding, feelings and behaviour.

There are several theories on self-concept. It is generally accepted that they include the following aspects (Sammut et al. 2013):

1. **MATERIAL**. An aspect including both physical appearance (e.g. “I am handsome/ugly, fat/thin, short/tall” or any other description of our body) and material properties (“I have a house, a car, a computer”, etc.).
2. **SOCIAL**. This aspect refers to the kind of relationships we have with other people (e.g. “I have good friends”; “I trust my parents”; “people like that are my enemies”) and the labels other people have placed on me (e.g. “I am quite popular”; “they say I am shy”).
3. **PSYCHOLOGICAL**. This aspect consists of attributes such as:
 - (a) Personality traits or habitual behaviours and feelings – they constitute our main self-definitions (e.g. “I am honest” or “I am jealous”).
 - (b) Likes or hobbies – what attracts us in all fields (e.g. “I like running” or “I like Spanish omelette”).
 - (c) Ethics and values – what is important in life for us; many people consider them the core of their self (e.g. “I most value helping people, saving the planet and practising my religion”).

- (d) The sense of coherence and personal identity (e.g. “I know what I want in life”; “I am not coherent”; “I am always changing my mind”) and the locus of control (e.g. “I decide my life and am in control it”; “I am at the mercy of other people or of fate”).

Self-concept distorts our interpersonal relationships in this way because it interprets the world, other people and situations. Our feelings and behaviours are highly predictable depending on the characteristics of our self. Therefore, awareness of our self is key to understanding how our communication is biased.

12.3.2 *Self-Concept Is Built over the Time*

The sense of our self seems to develop at the age of 2 years, when we start to use language. The inner dialogue, the conversation we maintain with ourselves at every moment, begins at the same time as our use of language. When we speak to others, we speak to ourselves. By the age of 7–8 years, our use of language is perfectly consolidated, and so is our inner dialogue.

Initially, we describe ourselves with passive physical attributes such as “I am tall and blond”. Afterwards, conductual description is used, through which we compare ourselves with others (e.g. “I am talkative”; “I am or shy”; “I am clever”; “I am stupid”). Later on, social characteristics are used (e.g. “I have many friends”; “I am good at reading”). In the beginning, children use extremes to describe their psychological characteristics in a dichotomous pattern of “all or nothing” and applied globally (e.g. “I am shy” or “I am brave”). Negative attributes appear by the age of 9 years. From 10 to 12 years on, psychological traits are the main differentiator of the self. During adolescence, owing to the importance given to peers, the most important traits are social/interpersonal skills. Finally, in late adolescence, social and psychological characteristics are integrated into a wider and global view of personality.

Two key concepts for the maintenance of the self are continuity of identity and singularity. Continuity is based on our name, body, social status, possessions and preferences, which are considered immutable. And, above all, it is due to our memory, which stores everything we have experienced during our lives, and to our inner dialogue, which continuously updates our memories. Based on this, we need to develop:

- *Continuity of identity.* This means that descriptive traits are not modified. Obviously, change is allowed, but it should be explained based on an internal narrative that preserves coherence. We can be ourselves despite changes if such changes can be explained for external or internal reasons. This is the base of biography, the internal story of what we have lived.

- *Singularity*. Based on the comparison with others. Since the end of the twentieth century, the pressure experienced by the inhabitants of modern societies to be different from the others has been extreme. We only can be ourselves if we are different from the rest.

12.3.3 *Self-Reference Bias*

The self distorts the world and interprets it in a biased way (Moghaddam 1998). This assumption, defended by traditional contemplative Eastern traditions, has recently been confirmed by psychology. The self, or at least parts of it, is continuously sustained by our inner dialogue and interacts with and distorts our present experience. For instance, we remember much better any experience affecting us than any other event that is unrelated to ourselves. The reason for this is that self-referential information is more elaborate and we classify it better within our categories and frames of reference.

Some aspects of self-reference bias are:

- *SELF-GENERATION BIAS*. People remember better information actively generated by themselves than information that is passively received.
- *SELF-IMPLICATION BIAS*. Tasks in process are better remembered than finished tasks.
- *SELF-CENTRED BIAS*. People overestimate their importance or responsibility in past events. For instance, when both members of a couple are asked about how they share household tasks, the total average always exceeds 100% because each member overvalues their own effort. Another example is that individuals tend to think that other people are more similar to everybody else than they are to themselves. The desire and need to be different are quite powerful.
- *COMPARISON BIAS*. In situations where cooperation is required, individuals prefer to compare themselves to people who are more highly skilled. However, in situations of competition, individuals prefer to compare themselves to others with similar talents. Individuals who suffer from disabling and/or chronic diseases prefer to “compare down” as a way to cope with anxiety and preserve their self-esteem (e.g. “the cancer I’m suffering from is a terrible disease, but AIDS is even worse”). Studies confirm that humans are more motivated to preserve a good self-image than to obtain accurate and reliable information about themselves.
- *ETHNOCENTRIC BIAS*. The tendency to perceive our own group (regardless of whichever it is) as heterogeneous and full of differences, whereas other groups are described as homogeneous and without differences among individuals. Throughout our evolutionary history, differentiating between individuals inside and outside of the group was quite important because we had to compete with them to obtain food and for survival. Stereotyping and prejudice against other groups are universal phenomena (Du et al. 2003).

12.3.4 The Development of the Self over Human Evolution

When human beings were hunter-gatherers, there was less self-consciousness than there is now (Loy 2018). In an environment where we had to hunt continuously and where we could become prey at any moment, we learned to feel and think like a predator in order to survive. The development of agriculture during Neolithic Age required fences and walls to defend crops and cities. Surplus production was the basis for wealth and money, and humans gradually became separated from nature. In older cultures, such as in Mesopotamia, ancient Egypt, or in native American culture, the connection with environment was not completely lost. The entire organization of society, hierarchies and daily habits, among others, was connected by a deep religious belief. They considered it to be the way of the world and that human actions followed a universal order. This gave people a sense of belonging and meaning.

Ancient Greek culture, the origin of Western civilization, broke with that way of thinking. They asserted that humans were not obligated to follow the natural order but they could be free to live as they wanted and to alter the environment without the need to follow any rules. This seems quite obvious to us nowadays, but it was an absolute revolution at the time. It brought about the emergence of democracy, together with a deep sense of empowerment and freedom. It was a time in which sense of self greatly increased and continued to do so until it reached a peak in twentieth-century Western civilization.

12.3.5 The Self-Concept in Individualistic vs Collectivist Cultures

Hofstede (1980) was the first to introduce this concept, which was further developed by Triandis (1989), mainly in relation with the influence of culture on the self. Individualistic societies have been defined as those that place more importance to the individual than on the group. They are mainly represented by Western cultures, such as those of Europe and countries like the United States, Australia and Canada. On the contrary, collectivist cultures place greater emphasis on the group in relation to the individual. These include much of Asia, Africa and the less developed Latin American countries. This is obviously a very general classification. The range of collectivism-individualism within these groups varies greatly as it does for individuals in every culture, depending on their family and educational background.

As a general pattern, Asians show less clarity regarding the self-concept, having less intense feelings of self and lower self-esteem. They also describe themselves as less extroverted (Heine et al. 2001). Low self-esteem is not necessarily associated with collectivist societies, despite the fact that these cultures emphasize obligation and generate higher anxiety because of the intense shame associated with deviation from cultural norms. On the other hand, individualistic societies appreciate self-

ideals such as self-realization. This leads to higher levels of depression as there is a risk of frustration if these ideals cannot be achieved. In collectivist societies shame predominates over guilt, while the opposite occurs in individualistic societies. However, in general terms, intercultural differences are more important than individual differences within a specific culture.

12.3.6 Distorted Assumptions About the Self

We believe that the self exists because, unconsciously, we are not aware of the following distorted assumptions about the self:

1. *CONTINUITY*. We have the idea that our self starts when we arrive in this world and that it disappears when we die. We feel that it is the doer of our actions, the thinker of our thoughts and the feeler of our emotions and perceptions and that it inhabits our body. Despite the many changes we experience over time, we have an overall feeling of continuity. We think that something like a “basic essence” is maintained during our lifetime.
The sensation of continuity occurs because of memory. It remembers all the events taking place in our life from the ages of 2 to 3 years, when language appears. Our memory and inner dialogue build a narrative that gives an impression of continuity to our entire life. This is called biography. It is not what has actually happened but what we have told ourselves about what has happened.
2. *COHERENCE OR SENSATION OF AN ONLY SELF*. This is our sense of biographical coherence. If we felt we were continuously changing our feelings, thoughts and actions, we would think we were being possessed by a spirit. We have the sense of being only one person, not several. However, there are contradictions:
 - At a given time. There can be differences between our body and our thoughts (“I am tired but I want to go to the cinema”). And “I” do not know what to do.
 - Over the course of our lifetime. We may have frequently changed our actions (moving from one job to another without a clear reason), our feelings (loving many partners) or our thoughts (changing our political preferences many times). We usually blame other people for the decisions that change the trajectory of our self, one important reason being interpersonal conflicts.
3. *ORIGINALITY*. We need to feel we are different from other people. If we were to be exactly the same as all other humans, with the same labels and biography, why would we hold on to such an uninteresting self? Difference is the essence of individualism and, ultimately, of narcissism. Homogenization, the absence of personal identity, is the basis of communism. Our name is the certificate that shows we are different from others, and our sense of self greatly increases when we hear our name.

4. *CONTROL*. We think we can exert a strong control on our body and mind. During the period between 2 and 3 years of age, children throw tantrums when they discover they cannot control the world. We suffer from similar emotions as adults. We are greatly disappointed when we find we cannot control our body when it suffers from diseases or the ageing process, or we find we are unable to control our mind when emotions take over us. We have an unrealistic perception of mind and body when we say they are our self or they are ours. These phenomena are transient, changing, impersonal and beyond our control.
5. *INDEPENDENCE OR NON-DUALITY*. This last aspect is more difficult not only to experience but even to imagine. We do not usually observe our internal phenomena (emotions, thoughts, perceptions) because we merge with them. On the other hand, external phenomena such as a noise or a house are clearly identified as “external”. However, mindfulness considers that object and subject inter-influence each other continuously. The outer object is always interpreted and distorted by our mind; it does not exist as a reality. But we consider what we perceive to be real. For instance, when somebody takes a dislike to us, we tend to think that there is something about them that we dislike. What is really happening is that there is something in our relationship with them that causes produces dislike. Although we do not like that person, other people do; not everybody dislikes them.

All these distorted perceptions of our self influence our interpersonal relationships. It is necessary to be aware of them if we are to avoid being biased by them. In the next section, we attempt to summarize some aspects of the self that we should keep in check to minimize their influence on our relationships.

12.3.7 Being Aware of the Main Biases in Interpersonal Relationships Caused by the Self

Because of their large number, we focus only on those we consider to be the most important and the easiest to control:

- (a) *Avoid labelling; describe only (or at least be aware that we are labelling)*

The most important labelling of our self does is to classify events or objects are pleasant or unpleasant. Every time we describe people, objects and events, particularly if we feel a strong liking or dislike for them, we are unable to describe them objectively using labels which everybody would agree with. On the contrary, we describe them with emotionally charged labels that are not necessarily shared by others. But as we consider ourselves to be reliable, it amazes us that other people do not see the world as we do. This causes conflicts with others. We can compare a subjective description against a more objective version.

DESCRIPTION 1: TOTAL SUBJECTIVITY. John is a middle-aged, short, overweight and not very likeable man. He has a dull job, but he acts as if he were an executive. He talks a lot and is quite annoying. He says uninteresting things and feels the need to seek attention with his histrionic behaviour. Everyone at the party yesterday thought he was awful.

DESCRIPTION 2: TENDING TOWARDS OBJECTIVITY. John is a 50-year-old man, standing 160 centimetres tall and weighing over 90 kilogrammes. He works as an administrative assistant and, according to the way he describes it, he seems to have a very interesting job. He has a round face and a bald head. He tends to monopolize conversations and he seems to seek attention with his behaviour. He speaks slowly and repetitively. He is not likely to go unnoticed.

We can see that in the first description there is hardly any objective information. It is clear that the speaker does not like John and uses many negative adjectives. As a result, the impression we have of him is not a positive one. The consequence will be likely conflicts between the speaker and John but also an unfavourable image of the speaker. On the contrary, the second description is nearly objective. We cannot deduce the speaker's feelings about John. Conflict between John and the speaker is not foreseeable because no value judgements had been made.

The consequence of all these biases is our habitual dialogue. In Table 12.1 we see more examples of subjective description and a more objective version.

(b) *Avoid generalizing*

Another frequent cognitive bias is generalization, in other words, the tendency to evaluate the whole person based on an isolated behaviour. For instance, if you shout at your child once, it does not mean you are a bad parent, or if you forget your house key once, it does not mean you are forgetful. Isolated actions are not maintained personality traits, but human beings are used to simplifying and generalizing. The consequence of a negative judgement is mistrust in that person.

Table 12.1 Subjective and more objective descriptions

Subjective description	More objective description
He isn't very affectionate	He tends not to express his feelings
He makes a bad parent	He has shouted at his child during moments of stress
He can't stand me	He barely speaks to me, and when he does, he tends to keep a poker face
He always has to be right	I don't think he listens to my opinions
He's selfish	I have the impression he doesn't take my feelings into consideration
He's never loved me	He has never expressed any affection for me in any way or with any conviction that I might have expected in recent years

(c) *Avoid reading other people's minds*

This is one of the most disturbing mistakes in interpersonal relationships and probably the one that causes the most conflicts. It is particularly common in relationships between couples, but it is equally problematic in other relationships. It is the mistaken idea that we can guess the intentions of others, the reason why they behave as they do. Even if we know the other person well, we should never doubt their words, and we should trust them. This adverse bias is expressed through sentences such “You always want to control me”; “You never like what I do”; and “You laugh at my feelings”. The speaker imagines that they know the deeper reasons for the other’s actions but that is impossible. We should use sentences as “I feel as though you want to control me”; “I have the impression that you never like what I do”; or “Sometimes I think that you laugh at my feelings”. We should put the emphasis on what we feel, and then we can talk about others’ behaviours without interpreting their reasons and suggest that a change in their actions would change our feelings.

(d) *Avoid taking things personally: people cannot choose*

This may be one of the most important lessons of third-generation techniques. It is implicit in all of them. Buddhism also accepts it as such. For instance, in his theory of psychoanalysis, Freud says “Biography is destiny”. Skinner also limits individual freedom, which he defends in his book *Beyond Freedom and Dignity*, emphasizing that we human beings are the consequence of our biological circumstances (genetics among them), psychological circumstances (learning and attachment style) and environmental circumstances.

We should be aware that when people act, they have a limited freedom range due to their biological, psychological and environmental circumstances we have described, which makes their behaviour highly predictable. This can help us not to take other people’s behaviours and the impact they have on us personally. People do not want to harm us when they act; they are unable to act in any other way. We are only collateral damage, unwanted victims of their own desires and conflicts.

12.4 Conclusions

In summary, we have studied two psychological constructs that have great significance for interpersonal mindfulness. The first, attachment style, gives structure to the kind of relationship we establish with adults and is based on our own attachment model developed with our parents. We provide tools with which to identify this model and suggest ABCT to modify problems in this area.

The other psychological construct is ego. We reflect on deconstruction of the ego and on the distorted assumptions of ego and describe the main psychological distortions in interpersonal relationships caused by the self. We try to make people aware of these so that they can avoid being trapped by them when relating to other people.

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