

## **Mind the Gap: Navigating the Interplay Between Language and Experience in Mindfulness Instruction**

A case study with women experiencing involuntary childlessness

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February 18, 2025

### **Abstract**

This research explores mindfulness instructors' challenges in conveying concepts that foster personal experiences rather than imposing a predefined narrative. Recognizing the limitations of a one-size-fits-all approach, the investigation aims to uncover strategies for more inclusive and individualized mindfulness instruction. Expanding on a project developed during a 2021 Mindfulness Instructor training at MNDFL, qualitative methods are employed to gather data from mindfulness practitioners, specifically women experiencing involuntary childlessness. The case study is supported by theoretical research, comparing the collected data with existing approaches to linguistically sensitive and culturally responsive mindfulness practices. The goal is to enhance mindfulness instruction by promoting inclusivity and equity, identifying effective approaches for diverse populations, and broadening access to the transformative benefits of mindfulness.

Keywords: Mindfulness, Diversity, Cultural Adaptations, Involuntary Childlessness, Mental Health

## **Mind the Gap: Navigating the Interplay Between Language and Experience in Mindfulness Instruction**

Mindfulness is an ancient practice that has been finding its way into our modern lives and health care systems ever since its popular adaptation *MBSR* (Mindfulness-based stress reduction) by John Kabat-Zinn, which bridged its origins in the East with Western lifestyles and expectations (Kabat-Zinn, 1990). In a lot of contexts, mindfulness is presented as a silver bullet that is both easy to access and safe. Numerous studies have shown how well it can work for a variety of mental health challenges (Oman, 2023). However, the ease of access is not a given and there are factors which can limit its effectiveness that are not yet widely appreciated.

When it comes to mindfulness, it's important to note that while it is an *experiential practice*, we do use *language* to talk about it, for example to introduce concepts, to guide practices, or to share our experiences during group talk. Language includes examples, metaphors, and stories, and is intricately connected to culture. Even when mindfulness instruction intends to convey concepts that foster personal experiences, it is at risk of unintentionally imposing a predefined narrative that excludes or alienates practitioners whose life story or cultural background doesn't fit. Feeling excluded or alienated can create barriers between the person who needs mental health support and the types of support that are being offered (Williams et al., 2022). Even worse, it can cause them to not feel safe enough in the offered environment, so that their nervous system stays on alert and can't go into relaxation mode which in the end, deprives them from experiencing the transformative benefits of mindfulness practice.

Although mindfulness could potentially be beneficial to everybody, one size does not fit all when it comes to how it is offered to people in all their diversity of cultural backgrounds and life experiences. Studies show that some of the adverse effects that practitioners experience have

less to do with mindfulness practice itself and more with how it is being taught, who teaches it, and in which environment (Castellanos et al., 2020; Treleaven, 2018; Watson-Singleton et al., 2019; Williams et al., 2022).

### **A Study with Women Experiencing Involuntary Childlessness**

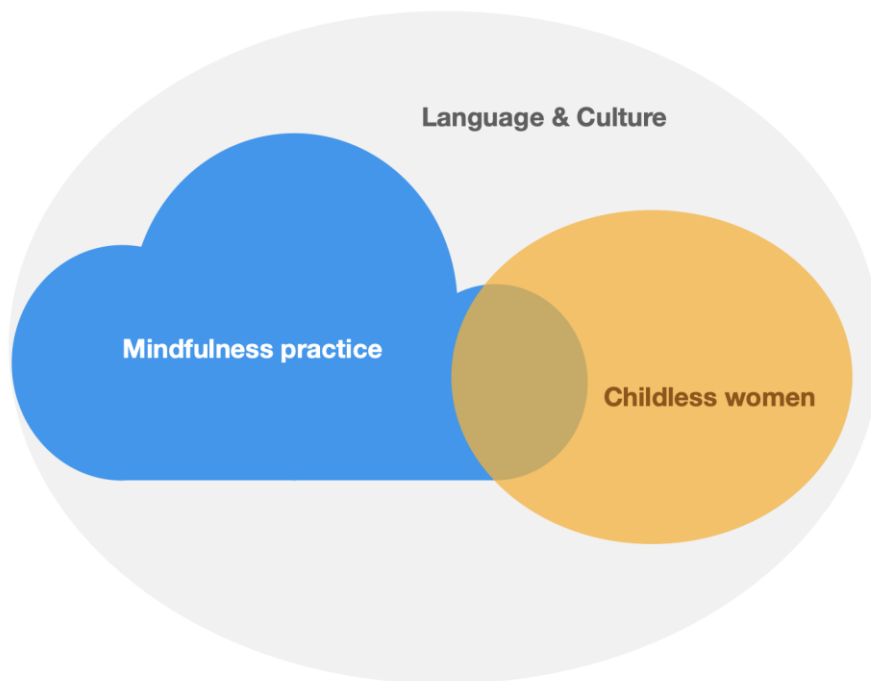
When I committed myself to regular mindfulness practice almost 7 years ago, it did indeed have a lot of positive effects, on my mental health in particular. However, in some contexts, it also had some adverse effects, or let's just say: mindfulness didn't work well in all ways it was offered to me. I suspected it had something to do with my life experience of unexplained infertility that led me to become involuntarily childless.

As part of the practicum of my Mindfulness Instructor training at MNDFL in 2021, I offered mindfulness sessions to other childless women who then provided their feedback on the experience. Their response confirmed my suspicion regarding the importance of how, where, and by whom mindfulness is being offered.

When mindfulness practice and childless experience meet in the particular societal and cultural context a woman is living in, she often just can't relate to what she hears, and at times feels uncomfortable or even triggered. Given the transformative benefits mindfulness practice can have, and the potential factors that can limit access, it seemed essential to follow up with a case study to gather more data in order to answer the question: How we can we ensure that women who experience childlessness can fully benefit from the transformative effects of mindfulness practice?

**Figure 1**

*Mindfulness practice & childless women in the context of language & culture*

**What it Means to be a Childless Woman**

There are many doors that lead to childlessness, Jody Day reminds us in her trailblazing book *Living the Life Unexpected: How to Find Hope, Meaning and a Fulfilling Future Without Children* (Day 2020). There could be a chronic illness or (unexplained) infertility. You could not have met the right partner at the right time, or a partner who wasn't open to having any or more children. You could be in a non-heterosexual partnership and assisted reproduction is not an option for you, or unaffordable or illegal where you live. You could feel ambivalent about parenthood because of your own upbringing and childhood. Just to name a few (Day 2020, p.20). But regardless of how you got there, childlessness stays with you forever. There is no moving on, just a moving with.

When not having children was not a choice (in contrast to the so-called *childfree*)<sup>1</sup>, it is very often associated with a loss, of a dream, of an expected identity, of a societal status (parent or grandparent), of a life that most of your friends and family are allowed to live, probably without ever putting much thought into it. Experiencing the grief from this loss is one reason why involuntary childlessness can turn into a mental health challenge. To make matters worse, the mourning for those experiencing childlessness as a loss is often met with disbelief by others:

If we miscarry, ( ... ) fail to conceive or never have the opportunity to try ( ... ), our loss can remain invisible to others; it's known as 'disenfranchised grief' because it's grief that our society does not recognize and which consequently many of us feel shame for experiencing, if we allow ourselves to experience it at all. (Day, 2020, p.86)

At first glance, childlessness might seem a private matter, and of course it is that as well, yet as societal beings we experience ourselves in relation to others around us. “At a time when somewhere between 15 and 30 per cent of women are reaching the menopause without having had children”<sup>2</sup> (Day, 2020, p. 70), the default assumption in most situations is that all adults of a certain age are parents, and all women are mothers. And if you don't have children, the assumption is often that it was your choice. The concept of involuntary childlessness and its challenging reality is rarely acknowledged. Which is interesting because only 10% of women without children identify as *childfree* (Day, 2020, p. 45). The *reproductive identity* (Athan, 2020) one is given, or allowed to carry by circumstances, plays a huge role in our status and privileges within a group, and the belief system of pronatalism, prevalent in the US and most societies of the world, “... an attitude or policy that is pro-birth, that encourages reproduction,

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<sup>1</sup> The present paper/study follows the definitions of the terms “childless” vs. “childfree” by Day (2020, p. 19)

<sup>2</sup> The actual demographics vary between countries, for a detailed picture of childlessness around the world see Day (2020, pp. 45-48). In the US, the numbers hover around 15%. Statista provides data for 2022, using the term “childless” to refer to all women without children and not just those who are childless not by choice, see <https://www.statista.com/statistics/241535/percentage-of-childless-women-in-the-us-by-age>.

(and) that exalts the role of parenthood” (Carroll, 2012, p. 15) can lead to societal devalorizing of those women who didn’t ‘reach’ motherhood, the perceived/expected pinnacle of a woman’s life.

As with many societal undercurrents, people’s beliefs often stay in the unconscious and judgements remain in the dark, but during the 2024 Presidential election campaign in the United States, we’ve been able to see them out in the open when one political side used the term “childless cat lady” to disparage and denigrate the candidate of the opposite side. This was an unfortunate reminder of the need to focus research on childless women as one of the lesser studied minorities who exist in each and every society.

### **Literature Review**

In recent years, publications in both academic and popular literature have begun to consider the diversity of mindfulness practitioners and how this awareness of the audience informs the teaching of mindfulness. A variety of adaptations of mindfulness have been explored to address the needs of different audiences. While the specific needs of different groups of people vary, the principles that motivate these adaptations are generally applicable.

For this review, we identified relevant adaptations of mindfulness to a specific audience, which fall into three broad categories, and examine them with an eye toward the role of language. A comprehensive survey is beyond the scope of this research.

### **Offering trauma-sensitive mindfulness**

In his book *Trauma-sensitive mindfulness: Practices for safe and transformative healing* (Treleaven, 2018), the author proposes the concept of *trauma-sensitive* or *trauma-*

*informed mindfulness*<sup>3</sup> to bridge two intentions that at first seem to conflict with each other: “how can we minimize the potential danger of mindfulness to trauma survivors while leveraging its potential benefits at the same time?” (Treleaven, 2018, p. xvii). His approach emphasizes the need to feel safe (enough) to practice mindfulness and raises awareness for the fact that mindfulness practice can have adverse effects and can even bring up trauma: “mindfulness and meditation can be exceptionally challenging for someone with dysregulated arousal ( ... ) one of the brutal costs of trauma” (Treleaven, 2018, pp. 92-93). What makes it even more challenging to mindfulness instructors and practitioners is that “people can experience trauma in a variety of ways” (Treleaven, 2018, p. xx) and, like the author, might not be aware of their own trauma, cannot easily predict when they get triggered, or are not familiar with symptoms of dysregulation. To address these challenges, he introduces a wide range of modifications that instructors can make, through the five core principles of his framework, which can be viewed as a collection of best practices.

The first three principles: *Stay Within the Window of Tolerance* (Treleaven, 2018, pp. 87-111), *Shift Attention to Support Stability* (Treleaven, 2018, pp. 112-126), and *Keep the Body in Mind* (Treleaven, 2018, pp. 127-149) focus on the process of mindfulness practice itself. Instructors are advised to educate themselves and others<sup>4</sup>, first and foremost on the concept of *window of tolerance* “a zone that lies between the two extremes of hyper- and hypoarousal [where] we are more equipped to tolerate the full range of our experience” (Treleaven, 2018, p. 93). A mindfulness instructor who is knowledgeable about trauma and how “*triggers* ( ... ) set off memories or flashbacks related to a traumatic event” (Treleaven, 2018, p. 96) can observe participants to notice signs of dysregulation or dissociation and to help participants learn to

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<sup>3</sup> Aligned with the definition of “trauma-informed care” by the National Center for Trauma-Informed Care (Treleaven, 2018, pp. xxii-xxiii).

<sup>4</sup> To make education more accessible, Treleaven offers a distilled version of his trauma awareness effort in a free 1-hour webinar (Treleaven, 2020).

observe themselves to notice such signs on their own. A trauma-aware instructor is in a position to adapt their mindfulness guidance: “Trauma often leaves people feeling violated and absent a sense of control. Because of this, it’s vital that survivors feel a sense of choice and autonomy in their mindfulness practice. We want them to know that in every moment of practice, they are in control” (Treleaven, 2018, p. 137). This is where language comes into play because it is with a deliberate choice of language that the instructor can offer trauma-sensitive guidance of mindfulness practice, and in this way minimize the risk of turning the mindfulness experience into one with adverse effects:

Survivors need to know that they won’t be asked to override signals from their body, but to listen to them - one way they’ll learn to stay in their window of tolerance. We can accomplish this, in part, through our selection of language. Rather than give instructions as declarations, we can offer invitations that increase agency. ( ... ) In all of our interactions, we can tailor our instructions to be invitations instead of commands. ( ... ) Another way to emphasize choice is to provide different options in practice ( ... ) the choice to have their eyes open or closed, or to adopt a posture that works best for them. (Treleaven, 2018, pp. 137-138)

And when despite all the best efforts, the guided practice brings up trauma, the instructor uses, again, language to create a container of understanding and support to those in need, and then offer guidance in how to recognize when and how to *applying the brakes* which means to “purposefully slow the pace of their mindfulness practice in order to feel safe and stable” (Treleaven, 2018, p. 106).

The forth principle, *Practice in Relationship* (Treleaven, 2018, pp. 150-176), emphasizes “that trauma recovery happens in community” and shows ways to leverage the “power of community” (Treleaven, 2018, p. 160) within and outside of the setting of mindfulness practice and offers several modifications where language is key, like “sending out a questionnaire to help gather information about the participants” and this way “screen for trauma” (Treleaven, 2018, p.



161), which could lead to “establish(ing) a collaborative relationship with potential candidates before entering into a mindfulness program (Treleaven, 2018, p. 165). Another recommendation is to “establish community agreements” because “setting a container for collective mindfulness practice helps with safety” (Treleaven, 2018, p. 166). Creating safety extends beyond the mindfulness practice itself, not just to the interpersonal relationships but also to the physical space where it is being offered. Creating “safer spaces” (Treleaven, 2018, pp. 146-149) as part of principle three, *Keep the Body in Mind*, covers a broad spectrum of environmental modifications such as easily accessible exits and scent-free spaces, predictable schedules and covered windows that protect privacy, as well as offering a gender-neutral bathroom because “the stress of being continually confronted or questioned about one’s choice of restroom is an additional violence, or microaggression, that can lead to overwhelm and dysregulation” (Treleaven, 2018, p. 149).

Treleaven reminds us that “adopting trauma-informed practice involves an ongoing commitment to increase one’s consciousness about the ways people are impacted by systems of oppression,” (Treleaven, 2018, p. 149) and that “conceptualizing interpersonal trauma as simply an individual tragedy leaves out the systemic conditions that so often lie at the root of trauma - racism, transphobia, poverty, and state violence, for example” (Treleaven, 2018, pp. 198-199).

The fifth principle, *Understanding Social Context* (Treleaven, 2018, pp. 177-200), confirms that “this is the larger social context in which trauma-sensitive practice will be taking place (Treleaven, 2018, p. 193)”. The recommended practical steps go back to the mindfulness instructor themselves and their position within the social context. The first proposed modification is an exercise in mindfulness with guiding questions that help to raise awareness “of your own social memberships and the dynamic of power in a given moment, and how this might impact any given interaction” (Treleaven, 2018, pp. 192) which can then lead to taking action, for example in the form of increasing awareness and speaking out against injustice (Treleaven, 2018, pp. 197-198).

## Creating an Inclusive Mindfulness Community

Becoming aware of the diversity of the audience can lead to the realization that “sometimes the systems put in place to accommodate community practice are a better fit for some than for others. They come with a set of assumptions about many things - including bodies, sexuality, and ideas about behaviors that are ‘normal’ or polite” (Krempasky et al., n.d., p.3), and typically “many things function under the assumption that everyone is cisgender (non-trans\*)” (Krempasky et al., n.d., p. 5). In their guide *Developing trans\*competence: A short guide to improving transgender experiences at meditation and retreat centers*, trans\* members of the LGBTQ+ Buddhist community share a vision of inclusivity by offering both “a deeper understanding of trans\* people’s experiences as well as structural solutions that can be implemented in a sangha<sup>5</sup>” (Renson et al., n.d.). The authors remind us why it is so important to make all members of a mindfulness community feel welcome and included:

As Buddhists, when we practice kind awareness, or mindfulness, we practice being intimate with what we encounter in each moment, on both the internal and interpersonal levels. In order to fully do this in an organized practice setting, one must feel safe and at ease, and be able to be vulnerable. To create these conditions, sanghas must actively work to undo subtle and explicit oppression. (Renson et al., n.d.)

The recommendations for “building more inclusive practice environments” (Krempasky et al., n.d., p.14) are addressed to organizers and participants of meditation and retreat centers alike and go into detail over pitfalls before offering practical steps for modifying practice settings. A lot of these directly or indirectly effect how language is being used, for example how to address

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<sup>5</sup> Sangha is a Buddhist term referring to a community of fellow practitioners.

(or refer to) each other with pronouns and preferred name (Krempasky et al., n.d., pp. 4-7), how to assign facilities (bathrooms, showers, and dormitories) to participants (Krempasky et al., n.d., pp. 8-11), and how to use registration forms to solicit related information from participants by asking questions like “what is your gender”, “what gender pronoun do you go by”, and “for shared rooms, which dorm assignment best suits your gender” (Krempasky et al., n.d., p. 7). To keep the guidelines up-to-date and relevant for the intended purpose, the authors “stress that ( ... ) organizers should include trans\* people and members of other traditionally excluded groups in conversations about planning, issues that arise, and evaluating the ( ... ) experience” (Krempasky et al., n.d., p.14). There is just no substitute for getting input and feedback directly from those who we are trying to reach and include in our mindfulness offerings.

Informed by the observation that “due to widespread ignorance about transgender experiences, we have each encountered situations in which the container for our practice felt very unsafe” (Krempasky et al., n.d., p.3), the authors encourage mindfulness instructors to find opportunities for educating, like an opening talk or an orientation at a retreat, “to remind people of basic inclusivity issues” (Krempasky et al., n.d., p.12). These deliberate efforts “will show trans\* people that practice leaders are aware of these issues and would be receptive to any concerns that come up” (Krempasky et al., n.d., p.13). There are vignettes inserted throughout the guide “in order to provide the reader with a clearer understanding of our experiences as trans\* and gender nonconforming people” (Krempasky et al., n.d., p.3). The vignettes go far beyond depicting negative experiences in existing environments, as a matter of fact, several of them make the vision of an inclusive mindfulness setting come alive by describing it in vivid details as if they were true already, like these two examples from (Krempasky et al., n.d., p. 1):

I feel connected to my sangha because I can trust them to treat me appropriately and with respect. When I introduce myself to someone, I trust that they will not assume the wrong pronouns for me ( ... ) My sangha is a place where I don't need to worry about encountering the transphobia and cissexism that I often encounter in the world. I can

focus on practice and connection, and I feel relaxed in my body, not on guard for disrespect.

In part, my feeling of safety comes from seeing plenty of trans\*and gender-non-conforming folks in the sangha and in leadership and knowing that their voices are being heard. I can safely invite my trans friends to take part in the sangha because I know they will be respected. I never catch people staring at me because I look gender non-conforming.

Aligned with this educational purpose, the guide contains a glossary of applicable terminology and resources for further reading (Krempasky et al., n.d., pp. 17-21).

### **Customizing Mindfulness Offerings**

Although mindfulness practice is by now widely used within the context of mental health, the number of studies that specifically focus on a particular audience remains low. But those that do “examine the efficacy ( ... ) on specific minoritized populations” (Williams et al., 2022, p. 9), find that customized offerings can improve engagement and efficacy of evidence-based treatments like mindfulness-based interventions (Castellanos et al., 2020; Watson-Singleton et al., 2019; Williams et al., 2022). These types of customizations are also called *cultural adaptations* and, according to Bernal, refer to modifications “considering language, culture, and context in a way that is compatible with the client’s cultural patterns, meanings and values” (as cited in Castellanos et al., 2020. p. 318).

For their systematic review and meta-analysis of mindfulness-based interventions for a Hispanic audience, Castellanos et al. 2020 developed a “cultural adaptation count ( ... ) based on Bernal’s dimensions of cultural adaptation” (Castellanos et al., 2020, p. 318). At least four of the eight dimensions cited belong to the broader category of language that is used in this present study. Specifically, *Language* in the narrow sense of translation (for example into Spanish); *Metaphors* that “include familiar objects and symbols of a client’s culture or utilize sayings or

idioms to make their clients feel more comfortable and/or understood”; *Content* as it “refers to knowledge about the cultural background of the client and how it is explicitly included in treatment”; and *Concepts* as it refers to “conceptualization and how clinical researchers and therapists theorize the presenting problem and, more importantly, how it is explained to the client”. Closely related to language as a broad category is the dimension *Persons* “referring to the cultural “match” between clients and therapists” (Castellanos et al., 2020, p. 318).

Of the eight dimensions, *Language* and *Persons* turned out to be the most prevalent adaptations by far; *Metaphors*, *Methods*, and *Context* were adapted in much lower frequency, and the other three dimensions *Content*, *Goals*, and *Concepts* were (almost) always absent (Castellanos et al. 2020, p. 328) with the caveat that “it is possible that cultural adaptations were included in the studies, but no clear description of the adaptation was made in the reviewed paper” (Castellanos et al., 2020, p. 329). Overall, the conclusion was that there “is clear evidence to suggest that cultural adaptations can improve evidence-based treatment implementation among Hispanics, but more methodologically rigorous studies are needed” (Castellanos et al., 2020, p. 330).

The recent study with African Americans by Watson-Singleton et al., 2019 shows how important it can be that the mindfulness instructor, the *Persons* dimension, literally and figuratively speak the audiences’ language and understand theirs. Due to the history of oppression, it makes a considerable difference if the voice of the mindfulness instructor sounds like theirs because “for African Americans being told what to do (e.g., ‘attend to your breath’) by a ‘white voice’ can implicitly conjure up past and present experiences of racial trauma” (Watson-Singleton et al., 2019, p. 135). While the analysis by Castellanos et al., 2020 had to content with data as it was presented in descriptions of existing studies, they ran their own qualitative study, a “four-week mindfulness-based intervention with African American women” (Watson-Singleton et al., 2019, p. 136) using focus groups and interviews to drill deeper into specifics

about cultural adaptations that could “address obstacles that hinder African Americans from reaping the full benefits of these interventions” (Watson-Singleton et al., 2019, p. 133).

The results of their study showed that language in the narrow sense of translation (like for the Hispanic audience of the analysis by Castellanos et al., 2020) is not required, however, the key factors for increasing engagement are intricately linked to language: using culturally familiar concepts and avoiding terms that are “causing discomfort and disinterest during practices”, for example replacing the term “meditation” with other terms like “awareness”, “relaxation”, or “mindful” (Watson-Singleton et al., 2019, p. 135); adjusting content and metaphors to convey the cultural values of “self-empowerment, interdependence, and story-telling” (Watson-Singleton et al., 2019, p. 135); and “clear messaging that its development was ‘for us by us.’” (Watson-Singleton et al., 2019, p. 135). In this context, the person delivering the message is part of the message, which is why including African American facilitators makes all the difference. They “not only serve as trusted gatekeepers for culturally-responsive interventions, but also they provide much needed competencies (e.g., cultural understanding) not offered by non-African American facilitators” (Watson-Singleton et al., 2019, p. 135).

## **Methodology**

### **Background**

The present research expands on a project developed during a 2021 Mindfulness Instructor training at MNDFL with Rev. angel Kyoto williams where three mindfulness sessions were offered to a small group of childless women as part of the practicum. Feedback from the participants revealed how much of a difference it made that both the facilitator and all participants happened to all be childless. It turned out that this set up made the participating women feel more at ease and helped them let their guard down, which they didn’t even realize they had put up.

The women's response to my practicum project highlighted some of the challenges facing the instructor and confirmed the complexity of my personal experience with mindfulness practice. Motivated by these insights, a case study was conducted that employed qualitative methods to gather data from mindfulness practitioners, specifically women experiencing involuntary childlessness. The objective was to gain a more detailed understanding of the factors that can impact the effectiveness of mindfulness practice for this population in order to make recommendations for improving the instruction.

It's important to note that this research is informed by my own lived experience as a childless woman and by my expertise and experience as a mindfulness instructor.

### **Case Study**

The case study was conducted by gathering the participant's input through a questionnaire that was organized like a semi-structured written interview containing mostly open questions. This allowed participants to share their own story with as much detail as they wished, in the privacy of their own place, and at their own speed.

The questionnaire started with inquiries about overall positive and challenging experiences with mindfulness practice before a deep dive into the main focus of the study: participants' experience with the language of mindfulness and potential barriers to access related to language. Finally, participants were asked about their preferences regarding types of mindfulness practice and the environment in which mindfulness practice is being offered.

To respect the privacy of the participants and ensure the analysis remained objective, the data was collected anonymously and then analyzed by question, instead of looking at all answers from one participant, to further disconnect them from a particular participant. The data was gathered between July and September of 2024.

## **Participants**

Similar to my practicum project a few years ago, I was able to tap into the childless community and reach women who know me, trust me, and were willing to participate. But this time, the reach was much broader as my network had grown over the years.

Of the 20+ women who expressed interest to participate, 8 completed the questionnaire during the data collection phase of the study. They were located either in North America, Australia, or Germany, with ages ranging between 45 and 55. All participants had experience with mindfulness and considered mindfulness helpful for their overall mental health.

## **Results**

The results are presented here by grouping the findings, gathered across all questions, into the following categories: context of practice, language, and barriers to access. This organization looks at the situation of childless women and mindfulness practice first from the broadest perspective, then narrows the focus to the intricacies of language itself, and finally considers factors that might discourage practice all together.

### **The Context of Mindfulness Practice**

The study examined the context of mindfulness practice from two perspectives: the environment in which it is offered and the types of mindfulness practice that are being offered.

When it comes to the environment, a clear trend emerged regarding the childless status of the facilitator and the other participants: it does matter if they are childless. Responding to the question: “How much does it matter to you that the facilitator is childless as well?”, which allowed for a response between 1 (*Not at all*) and 5 (*It’s a requirement for me*), six out of eight participants indicated that it mattered a lot or was a requirement for them, and the remaining two participants indicated that it mattered. Thus, the status of the facilitator is indeed important. When asked: “How much does it matter to you that the other participants are



childless as well?”, six out of eight participants indicated that it mattered or mattered a lot, and the remaining two participants indicated that it mattered a little bit. None indicated that the childless status of facilitator or participants didn't matter to them. These trends align with the feedback from the small sample of childless women who participated in the practicum in 2021.

The results did not show any clear preference between practicing either in a group or alone, online or in person, live or with a recorded session, self-guided or guided by a facilitator. Further research is required to confirm if this was caused by a limitation of the survey technology.

When it comes to the types of mindfulness practices, the picture is not as clear. The participants were given a list of eight types (Grounding, Breathing, Body scan, Self-compassion, R.A.I.N., Lovingkindness, Gratitude, Movement-based mindfulness) and were asked to indicate which ones they prefer and which ones they choose to avoid. They were then offered to expand on their experience with an open-ended question: “Feel free to share more about why you prefer or choose to avoid these practices.” Although some mindfulness types were preferred by some and avoided by others, there was no clear trend. Based on the detailed explanations in the follow-up question, the participant's experiences depended less on the type and more on how a mindfulness practice was introduced to them: “I need to trust the teacher” or “I'm good with all those practices as long as I do them privately or with safe people.” Most issues that were brought up belong into these three categories:

1. **Relationship with one's own body after infertility and reproductive trauma.** A mindfulness practice like the body scan puts the focus on individual body parts which some participants might experience as their personal *no-go zones* and don't feel comfortable to explore any further because they feel loaded and/or trigger a challenging emotional response.

2. **Dismissing conflicting feelings, in particular loss and grief.** Gratitude practice or Lovingkindness practice can feel like an attempt to neglect, ignore, or invalidate pain and loss which reminds practitioners of their disenfranchised childless grief.
3. **Using triggering language.** This can be the term “Mother Earth” during a Grounding practice or referring to loved ones, in particular children or grandchildren, during Lovingkindness and Gratitude practice.

### **The Language of Mindfulness**

The focus of the study was on the use and effects of language in the context of mindfulness practice, and the questionnaire made a distinction between language that is not relatable, and language that makes one uncomfortable or acts like a trigger. When asked: “During the following formats of mindfulness practice, how often did you encounter language that you couldn’t relate to with your own personal experience?”, all participants indicated that it had happened at least a few times in interactions with the facilitator and within a group as well as during instructive messages and guided mindfulness practice. When asked in a follow-up question: “How often did you encounter language that made you uncomfortable or acted like a trigger?”, the answers were more varied, and yet, there was a clear trend of interactions with the facilitator and within a group causing childless women to feel uncomfortable or triggered due to language.

After each of these questions, participants were invited to expand on the experiences and share as many examples as they wished, which most of them did in detail. Participants came back to the issue of language over and over again when responding to more general open-ended questions such as: “Has mindfulness practice ever made you uncomfortable? Or is there something that keeps you away from mindfulness practice or from continuing with it?”, or “Have you ever experienced any challenges with your mindfulness practice that related to your childlessness?”

Their experience included instructors “using inclusive language as though we were all parents” and “pontificating about how wonderful children and parenthood is”. It also included instructors using examples “related to parenthood, motherhood, fatherhood, grandparenthood etc. with language that assumes we all have children”, often starting their sentences with expressions like “as parents we”, “our children”, “as a mother”, or “as mothers we all”.

This type of supposedly relatable language creates the opposite effect in those who, for reasons out of their control, cannot relate to it. One woman describes it this way: “I could feel an anxiety almost panic rise inside me as I felt isolated in the group as though I did not belong there. I did not know at the time, but this was part of the ongoing trauma I was experiencing as a women unable to conceive her children, there was no safe place for me to share or be with my loss.”

The data also show that alienating experiences are not limited to the facilitator and their instructions but can be inadvertently caused by group members as well. One woman reported: “Conversations (within the group) often went into the weddings of their children and grandbaby conversations ... these conversations could ... take up a lot of space and I felt outside our group and (at) times it was triggering.”

For a subgroup of the research participants, the mere use of words and metaphors out of the semantic field of procreation posed a challenge: “Any time the concept of Mother Nature of Mother Earth is used... There is something in me that blocks me from wanting to understand or use this analogy.” For others, it depended on the underlying attitude of the speaker:

“Conversations about children are not my issue but the assumptive language (all women have children, and if they don’t they must not have wanted them) and the emotional labor that I (as a woman unable to have children) is expected to offer to such conversations.” When it comes to those limiting beliefs, it’s hard to say what is more challenging for a childless woman, people that assume they are parents as well, or people that assume “not being a parent was by choice” and in this way failing to see the loss experienced by a childless woman. Being exposed to such

situations within the context of mindfulness practice adds to the all too familiar experience of their grief being disenfranchised by society. And as one participant reminds us, the alienating experience can go even further: “I find groups of women, even in the mindfulness sphere, to be unaware of internalized pronatalism”, so that a woman without children can find herself not “just” feeling excluded but as much as feeling devalored compared to the mothers in the group.

### **Barriers to Accessing Mindfulness**

Beyond asking about past experiences, the questionnaire solicited participants’ input on imagined future situations, posing the question: “If you haven’t experienced any situations yet where language was challenging for you, do you have any concerns about this potentially happening?” The responses show that anticipatory fear and a particular type of cultural mistrust keeps at least half of the childless women in the study from (re-)joining mindfulness groups, from trying out new mindfulness instructors, or makes them, at least, very hesitant to do so: “I’m definitely very apprehensive before joining a course or a class”, or “ I ( ... ) am hesitant to try new teachers for fear of being triggered or distracted by insensitive or lacking in awareness language.” And even if they decide to put themselves out there to practice mindfulness together with others, the worry about potentially being exposed to challenging language can be a constant companion.

### **Discussion**

When we try to map the needs of childless women to mindfulness practice, it becomes clear that the study provides data to support all three flavors of mindfulness adaptations discussed in the literature review, which should be considered complementary rather than mutually exclusive:

1. Taking into account the potential childless trauma that these women have experienced and that could be brought up by mindfulness practice.

2. Making all participants feel welcome and safe including those from the minority of childless women.
3. Customizing mindfulness offerings by childless women for childless women.

### **The Space of Mindfulness Adaptations for Childless Women**

There is a temporal dimension to the space of linguistically sensitive and culturally adapted offerings for childless women. Depending on where a woman's situation falls in the healing journey of childlessness, one type of mindfulness adaption could be preferred over the others. Customized offerings might remain the only acceptable safe option until childless awareness has broadened within the mindfulness community or until an already existing childless aware inclusive offering is recommended to her.

Another temporal aspect comes from the fact that the realization that you've become permanently childless can create a kind of before and after experience when it comes to mindfulness practice. In the years before, mindfulness might have proven to be helpful, maybe even particularly important during infertility treatment, and then it's not helpful anymore or at least not in the same way or under the same formerly helpful circumstances. As one childless woman shares in the questionnaire: "I haven't been to formal mindfulness or meditation programs since I became childless. I don't trust that the facilitator will be life experience aware and may thoughtlessly trigger my childlessness grief from the unaware childfree-by-choice or parenting perspective. This feels quite sad to me." In this case, the woman experiencing permanent involuntary childlessness needs to find new ways to make mindfulness helpful for her again.

### **Customizing Mindfulness Offerings for Childless Women**

During the early stages of childless grief, when you are particularly vulnerable, it might make all the difference to switch contexts and find a group where mindfulness is offered by

childless women for childless women similar to the customized approach for racial and ethnic minorities. Matching mindfulness offerings to the cultural and societal perspective of a childless woman can help participants to newly engage with mindfulness or to get access to its transformative benefits for the first time. Here is how one participant of the study put it:

I realized how I could not fully relax inside other meditation groups until I shared some time sitting with others with my shared CNBC<sup>6</sup> experience. It seems the part of me that is always bracing in a world that does not see or acknowledge my losses and pain could rest in the safety of a teacher and other participants who I knew were not going to say things that furthered my marginalization.

To my knowledge, there are some examples of such customized offerings already available within the childless community where mindfulness is offered to childless women by a childless woman, but they are limited to certain locations or time zones even when offered online.

### **Creating a Childless Aware Inclusive Mindfulness Community**

When a woman is further advanced in processing her childless grief, it might be possible to dip her toes back into a more diverse group, although, like for any societal minority, the expectation for it would be that it is welcoming to all members. This is where the childless awareness of facilitators and other participants comes in, whether their societal status is parent or childfree. “It doesn’t worry me if the facilitator is not childless, but my preference would be they are childless aware and not insensitive,” explains it one participant of the study.

The first step towards the goal of childless-aware inclusive mindfulness offerings would then be to raise awareness about childlessness in its complexity and offer guidelines to those who want to offer mindfulness groups or retreats, an approach similar to the guide *Developing*

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<sup>6</sup> In the childless space, “CNBC” is a common acronym for “childless not by choice”.

*trans\*competence* (Krempasky et al., n.d.) discussed in the previous section. And it's encouraging to know that, as one participant of the study tells us, there is already some level of awareness out there in the existing world of mindfulness:

Teachers who do not use their experiences with being parents as a way to teach the Dharma and whom I feel safe enough with. Although they may mention or share a personal experience about their children, they do not assume we are all parents in the room.

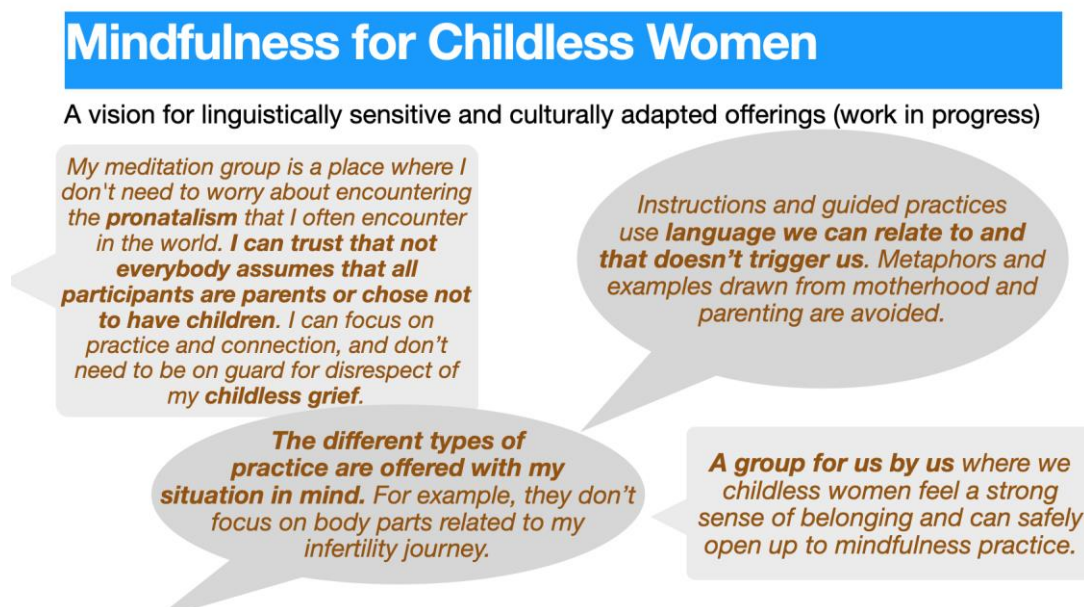
Guidelines could be derived from the data collected by this and similar studies.

## Conclusion

Coming up with exhaustive and detailed guidelines goes beyond the scope of this project, but as a first step, data from the questionnaire was distilled into vignettes and presented at the Global Mental Health Conference at Sofia University in August 2024. Each of the vignettes touches on a distinct aspect of linguistically sensitive and culturally adapted offerings, and taken together, they paint a picture of how we/they envision mindfulness for childless women.

### Figure 2

#### *Mindfulness for Childless Women*





In addition, this first attempt at a (non-)exhaustive list of language was derived from the study data. Most of these examples of language that can be experienced as triggering by childless women belong to the semantic field of procreation:

**Table 1**

*Language that can be experienced as triggering by childless women*

Category of language	Language examples from questionnaire responses
Seemingly inclusive expressions	As parents we, as a mother, as mothers we all, like a mother, our children
Stories	Parenthood, motherhood, fatherhood, grandparenthood, children, grandchildren
Metaphors	Mother Earth, Nature Earth, Giving Birth, Creation
Analogies	Being told to feel motherly love, nurturing energy, care
Reference to body parts	Any body part that is linked to reproduction
Reference to sound	Background sound/music that includes the heartbeat of a fetus

Both, the vignettes and the list are meant to be of practical use and, until more detailed guidelines are available, can be shared with mindfulness instructors as well as participants in mindfulness groups who are not yet familiar with the complexity of childlessness and who's aim is to make their own mindfulness offerings or even just their conversation more welcoming and inclusive to the often-overlooked minority of childless women.

### **Transformative aspects**

As is often the case, particularly in the realm of transpersonal psychology, this research study is closely related to my own lived experience, a fact that created an inner motivation to follow through, helped me better understand the problem, and opened doors when it came to recruiting research participants. Beyond all that was the transformative power of going through this study together with my fellow co-researchers, the women who were brave enough to

participate and share their deep experience in answering the questionnaire. Considering this topic worthy of a research study and speaking on behalf of childless women at a mental health conference, where most attendees of my presentation had not spent a lot of time thinking about childlessness but showed honest curiosity and were eager to learn more, changed me (and possibly all of us at the same time). There is a deeper sense of presence and a stronger sense of belonging, first and foremost to the childless community but also to the much broader community of mindfulness practitioners, instructors, and researchers. And then there is a sense of responsibility and advocacy emerging. When it comes to minorities, never underestimate the power of being seen. And the power of seeing, when you belong to the unquestioned majority.

### **Next steps**

The outcome of this study on the interplay between language and experience in mindfulness instruction, through the lens of childless participants, invites us to expand research on several aspects of this topic, and at the same time, reminds us how important it is to include childless women into any research that has a focus on minorities. When it comes to mindfulness, it would be fruitful to drill deeper into the sociolinguistic aspects of language and diversity within the minority group of childless women, touching on the aspect of intersectionality.

Yet, the present study almost urges us not to wait any longer, but to apply its rich data into advocacy and towards the goal of raising childless awareness now. The idea would be to incorporate the data into educational material like guidelines or even a course for those interested in offering more inclusive mindfulness and then disseminate this material in partnership with an experienced advocacy group or an established community like the Childless

Collective<sup>7</sup>. To close the loop and connect back to those in need for mindfulness practice, this effort would be augmented with a directory of mindfulness offerings that are safe to try because they are either customized and offered by childless women for childless women or recommended as inclusive and childless aware.

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<sup>7</sup> This private online “gathering place for childless women and nonbinary people was founded as “Gateway Women” by Jody Day, and is hosted under the name “Childless Collective” by Katy Seppi since 2022 (<https://childlesscollective.com/>).

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