Sexual Trauma and Connecting with the Self: Analyzing Mindfulness Strategies When Dissociation Is Triggered During Masturbation

Alisha Fisher

Abstract—Healing from sexual trauma can be a tumultuous process, filled with loneliness, confusion, and many unknowns or surprising road bumps. Survivors of sexual violence will often battle with the post traumatic difficulties following the trauma, some of which involve struggles with reconnecting with sexual pleasure. The goal of this paper is to analyze various papers to identify if there is a connection to survivors navigating the symptom of dissociation during self-pleasuring care through grounding and mindfulness strategies. We conclude that there can be benefits to engaging in strategies of grounding and mindfulness care can bring a level of presence to survivor’s mind, and body that can assist with reducing the anxieties and dissociation events during solo play. As such, service providers of survivors of sexual violence should be discussing the options of solo masturbation experiences mixed with grounding and mindfulness processes for survivors to heal and re-claim their sexual lifestyles.

Keywords—Masturbation healing, sexual violence survivor, survivor healing, survivor masturbation.

I. INTRODUCTION

SEXUAL violence changes the way a survivor understands their body and their intimate connection to themselves and other. Experiencing sexual violence is a pandemic health concern that impacts over a third of women worldwide [1]. Research on sexual violence illustrates that survivors struggle with the post traumatic effects of sexual violence, and they can experience various sexual problems, involving sexual dysfunction and a decrease in sexual satisfaction [2]. Many survivors of sexual violence attribute their current sexual functions issue to that of the assault [3]. Research on survivors of sexual violence state that the most common sexual dysfunctions were a fear of sex, arousal, and desire dysfunction [4]. The post traumatic impacts do not just reside within the mind of the survivor, but it also impacts their sexual behaviors with others. Van Berlo and Ensink [2] found that female survivors had a decline in sexual satisfaction, indicating that the support for survivors need to have a component that assists in enhancing sexual functioning.

Throughout the every-day and sexual lives, many survivors of sexual violence commonly experience a post traumatic symptom of their trauma called dissociation. Dissociation is symptom of trauma whereby the mind feels temporarily separated or split off from the body [5]. The symptoms of dissociation can vary, and some survivors describe it as their mind and body being in separate rooms, or that their mind is involuntarily wondering away, and they become disconnected to themselves and their partners [5]. The current model of support that sexual assault, abuse, and domestic violence centers acknowledge as a useful tool to lessen the dissociation symptom is grounding and mindfulness strategies. However, even with the pervasive impacts that sexual violence has on survivors’ sexual lives, many of these centers do not work with survivors on navigating solo sexual experiences post assault. Whether that is a limitation of service provider scope, and/or a lack of understanding of how best to handle discussions about the journey of a survivor’s solo sexual pleasure, survivors need tools and strategies to navigate dissociation that is not only relevant to their everyday experiences, but also their sexual ones. O’Callaghan et al. [6] stressed that therapists, and service providers working with sexual assault survivors need to have methodologies in place to not only discuss sexual behavior and identity in a non-judgmental approach, but also provide strategies for navigating post traumatic sexual dysfunctions. Current treatments for sexual assault survivors have not been designed to specifically target both trauma symptoms and sexual dysfunction. The approaches to healing and sex for survivors of sexual violence are rooted in heteronormative oppressions of pleasure. This heteronormative approach focuses on penetrative sex with penis possessing partner. With most survivors noting a myriad of sexual dysfunctions as a symptom of their trauma, it is important that researchers and service supporters engage in a greater understanding about the safest consensual form of sexual pleasure, solo masturbation. The purpose of this analytical research paper is to examine the effectiveness of grounding and mindfulness strategies for survivors to overcome one of the main symptoms of sexual violence, dissociation, during solo masturbation experiences. The analysis will comprise of a literature review investigating five articles outlining research from sexual violence and dissociation, the benefits of masturbation and orgasms for the female body, and mindfulness healing techniques. The literature review will highlight some of the blind spots of masturbation for survivors of sexual violence, as a method a healing and how the strategies of grounding and mindfulness can be useful tools to regain control when dissociation symptoms arise. The remaining portion of this research will reflect on the prevalence of sexual violence and how

Alisha Fisher is with California Institute of Integral Studies, Canada (e-mail: alisha.jj.fisher@gmail.com).
heteronormativity can impede the healing process for survivors. The analysis will then investigate the power and control aspects of sexual violence, and how pleasure needs to be part of the healing narrative by reflecting on the pleasure cycle, the #MeToo movement, and how masturbation can be a process of reclaiming that power and control.

II. LITERATURE REVIEW

This literature review will investigate five articles outlining research from sexual violence and dissociation, the impact of masturbation and orgasms on the female body, and the effectiveness of mindfulness healing techniques. The first two articles will explore the ways in which dissociation impacts female survivors of childhood, and adulthood sexual violence during partnered sexual intercourse, and the symptoms of dissociation. The third article will examine how female masturbation and pleasure is rooted in a mental experience, not a physical one. The final two pieces of research will articulate how mindfulness-based programs can reduce feelings of anxiety, depression, stress, and post-traumatic stress symptoms (avoidance/numbing). The remainder of this paper will establish the need for client and clinician comprehension of how practicing mindfulness during solo female masturbation can lessen dissociative symptoms.

Dissociation is a common experience for survivors of sexual violence, and it is important to reveal how the different forms of dissociation can negatively impact the relationship survivors have to themselves, and others. Wendy Maltz, an internationally recognized Sex and Relationship Therapist, takes a different approach to comprehending sexual and symptoms of dissociation. With her article [8], *Treating the Sexual Intimacy Concerns of Sexual Abuse Survivors*, she administers a questionnaire to more than 140 survivors, partners of survivors, and clinicians specializing in sexual health to produce a healing guide for all survivors of sexual violence, their partners and service providers. Maltz [8] concludes that most victims of sexual violence often withdraw from social interaction, experience stress disorders, and have sex and relationship difficulties. There are ten main symptoms of sexual violence, and three of them are closely related to dissociation, “having difficulty becoming aroused or feeling sensation, feeling emotionally distant or not present during sex, and experiencing intrusive or disturbing sexual thoughts and images” (p.323). Utilizing this research from Maltz will provide a lived-experience framework about how dissociation can reveal itself within survivors’ daily lives and during partnered sex. Within this article there is also a lack of distinction between partnered sexual acts versus solo sexual acts, and it would be interesting if these symptoms still arise in solo pleasure. What Maltz’s research provides is a proven guide that dissociation impacts survivors of sexual violence, and that there are varying ways in which it is expressed. Maltz [8] also acknowledges mindfulness tools for addressing sexual dissociation within therapy, “breathing comfortably, relaxing, staying present” (p. 325), which will be investigated later in this review.

To investigate more on dissociation for survivors, Bird et al. article [7] on *Dissociation During Sex and Sexual Arousal in Women with and Without a History of Childhood Sexual Abuse* examines how dissociation impacts survivors of childhood sexual abuse (CSA), and those who did not experience childhood sexual abuse (NSA), during sex with a partner and in their daily life. In their analysis of 22 survivors of childhood sexual abuse, the researchers found that there was an importance of recognizing the different forms of dissociation (i.e., derealization and depersonalization) and that each of these forms of dissociation yielded different symptoms for survivors of childhood sexual violence. This study identified “depersonalization [as] a sense of feeling disconnected from one’s body… [and] Derealization [as] feeling as if the external world is strange or unreal” [7]. The researchers found that there is a more nuanced relationship with dissociation, in such that depersonalization was associated with lower-level sexual functioning for survivors of CSA, whereas derealization was found to have a positive association of arousal during sex, for all women in the study [7]. The term of dissociation perhaps may be too general for this population, and an alternative term to use, “depersonalization,” is more accurate to discuss throughout the paper. This research did have some shortcomings, as the sample size was quite small, 22 survivors, and that these were survivors of childhood sexual abuse, meaning that there could have been survivors in the NSA sample that experienced sexual abuse later in life and the forms of dissociation could expose themselves another way at different stages of life. A more robust study investigating sexual assault at different points in life could generate potentially more accurate results on how dissociation, and its varying terms, impacts survivors. Another important aspect to this study is that acts of dissociation occurring for survivors of childhood sexual abuse versus survivors from their teens or adult years could experience varying symptoms of post-traumatic stress. A final aspect worth noting was the analysis was only about partnered sexual functioning, not solo sexual experiences, and that there could be different forms of dissociation occurring for partnered sexual acts, versus solo sexual acts.

For many survivors of sexual violence, avoiding sexual pleasure is not a healing strategy that is usually sought out, in fact for some sexual pleasure can be a coping strategy and healing mechanism. Sexual pleasure has a myriad of benefits, and it is important to understand the factors that can contribute to that form of pleasure. Kontula and Miettien [9] gathered longitudinal evidence from 1971-2015, where 12,687 Finnish female participants from the ages of 18-81, were analyzed to understand the roles of factors that contribute to female orgasms from a variety of different contexts, including “sexual desire, masturbation, clitoral and vaginal stimulation, and sexual self-esteem” (p.1), to name a few. Kontula and Miettien [9] found that the catalyst to more reoccurring orgasms were related to more mental presence and a relationship to oneself, others and the environment that was positive, relaxing and fueled by a sense of calm. When it comes to female pleasure, it is not just about how good it feels physically, but about how connected and comfortable the female feels mentally. They [9] also found that more frequent masturbation with women, did not equal more orgasms, but more masturbation did lead to more
pleasureful intercourse connections. Orgasm may never be the goal when it comes to solo, and/or partnered sexual acts, but what this research provides is an understanding that the way in which a female can reach a pleasurable form of sexual connection is through the need to be mentally comfortable within themselves and experiencing more solo pleasure led to more fulfilling-partnered experiences. This research may not articulate if any of these women have experienced any form of sexual violence, and when, but the importance of this research shows us that there is a need for female mental focus, and presence during sexual pleasures, as well as the significance of solo play having a positive effect on future partnered sexual connections.

Since the connection to the environment, others, as well as one’s mental state is needed to have more fulfilling encounters of sexual pleasure, then it is important to examine the usefulness of mindfulness practices and how they can play a role in reducing symptoms of dissociation. Call et al. [10] explored the effectiveness of two brief elements of an empirically supported mindfulness-based protocol, hatha yoga and body scans, in the decrease of anxiety and stress indicators for 91 female undergraduate students. They [10] found that females in the brief group of the meditation-based stress reduction (MBSR), hatha yoga and body scan conditions, had substantially larger decreases in anxiety and stress compared to those who were not involved in the MBSR group. Females engaging in mindfulness practices, even when completed briefly, can have immediate positive impacts on mental health.

Since the post study was completed immediately after the mindfulness practice, there is an unknown of the long-term benefits of this practice. But, since the primary aim of this paper is to understand how mindfulness practices can limit dissociation during female solo masturbation, then the long-term effects may not be as relevant to this study alone. This study did not specify if these females had experienced any forms of sexual violence and if that could have had an impact on their outcomes. Survivors of sexual violence may experience dissociative symptoms at a higher rate than those who had not experienced sexual violence [10]. Even though Call et al. [10] did not examine the sexual violence component, it is apparent that mindfulness practices do have a positive effect on one’s mental health. With that being said, the next article will look specifically at the efficacy of mindfulness practices on survivors of childhood sexual abuse.

Mindfulness practices can have differing impacts from one individual to the next. Since trauma re-shapes a survivor’s brain, it is important to examine the long-term effects of mindfulness practices for adult survivors of childhood sexual violence. Participants of Kimbrough et al. [11] consisted of mainly females (89%), between the ages of 23–68, who were survivors of childhood sexual abuse and enrolled in an eight-week mindfulness MBSR program, with a check-in at 24 weeks. The researchers found that at the end of the MBSR eight-week program, depressive symptoms were reduced by 65%, anxiety and of three post-traumatic stress disorder (PTSD) symptom criteria, symptoms of avoidance/numbing were most greatly reduced. After 24 weeks, the final assessment found that the participant’s mindfulness skills were still apparent in their everyday lifestyle. Although this study lacks a randomized control group, the findings that survivors benefited in multiple psychosocial ways by employing mindfulness practices into their lives speaks volumes for the need for mindfulness practices for survivors of sexual violence. This study also only looked at overall psychosocial functioning, which provides a foundational component to advantages of mindfulness practices, but the lack of connection to how that specifically impacted sexual functioning is a component that will need to be investigated further.

As the final paper’s aim is to evaluate how mindfulness can be that useful tool to combat dissociative symptoms during solo masturbation for survivors of sexual violence, this literature review highlighted some key areas of research that support this assertion. The research states that dissociation after experiencing sexual violence has a variety of symptoms, and that some of these symptoms are negatively impacting the survivor’s presence during sexual activity. When it comes to female masturbation practices, the mental state is more of a factor to experiencing pleasure, then the physical pleasure themselves. Since female masturbation is fueled by mental connections, and survivors of sexual violence experience mental post traumatic symptoms, there needs to be mindfulness techniques incorporated into that solo play to lessen the impact of anxiety, depression, stress, and post-traumatic stress symptoms (avoidance/numbing).

III. SURVIVOR HEALING: SOLO MASTURBATION AND GROUNDING APPROACHES

According to the Rape, Abuse & Incest National Network, every 73 seconds an American is sexually assaulted, and when it comes to acts of sexual assault, and attempted sexual assault, females ages 16-19 are four times more likely to be victims [12]. These harrowing statistics are just a small glimpse into how serious of a health concern sexual violence is throughout the world. Sexual violence is a profoundly violating and distressing experience for the survivor. Researchers have concluded that survivors of sexual violence experience a variety of sexual dysfunction issues that are attributed to that of the assault [3]. Many survivors experience a reluctance to have sex, and/or difficulties with desire or arousal [4]. Despite that many may assume that sexual assault is just sex gone wrong, sexual assault is about control and power, not about the sex itself, and this is why the negative impacts of sexual assault are not just problematic for the mind, body and soul, but can also be a lifelong struggle. In fact, RAINN [12] asserts that 8 out 10 sexual assaults are perpetrated by someone known to the victims, and in 97% of all reported cases the perpetrator was male. This motivation to sexually harm comes from the perpetrators need for control and dominance over that body. In abusive relationships, regardless of orientation, sex can be used as a manipulative tool to assert that dominance, whether by withholding sex, threatening sex, or engaging in sex without the partner’s consent. The expectations surrounding relationships and having to engage in sexual acts as a proclamation of your love can produce a feeling of necessity to
engage sex, even when they may not feel ready or wanting to participate.

Expectations to engage in sexual relationships, as an indicator of social status, can be found in media, role models in our lives and within the education system. Within the education system, McNeill [13] asserts that heteronormativity is embedded within multiple states education system across the United State of America, and that these policies enact and legitimate an affective discourse of the nuclear family as something that is to be desired and healthy. According to McNeill [13], sexuality education sends clear messages about the importance of abiding by, “gendered behavior and proper sexual behavior,” (p.828). This heteronormative form of sexual education has profound impacts on youth, in such that, Ott et al. [14] uncovered a gendered expectation that if the male youth are involved in a sexual relationship with a female youth, then their social status among their friends increases. Sex is not just a form of connection within a romantic relationship, but rather that this endeavor, as a status symbol to be obtained, sends a message about a male’s power and control that they gain from that sexual identity. The female body is a form of social status currency to the male youth in Ott et al.’s [14] research. If the current culture of female objectification reinforces these traditional forms of heteronormativity and masculine sexual triumphs, as a powerful form of justification of sexual violence and control, then sexual violence will continue.

Since sexual violence is about power and control, then healing from sexual violence is about regaining that power and control. Maltz’s [8] research with survivors concludes that victims of sexual violence often withdraw from social interaction, experience stress disorders and sex and relationship difficulties. Therefore, the healing process needs to address how a survivor can manage and overcome these difficulties, or rather, symptoms of trauma. Maltz [8] found that many of the symptoms of trauma are closely related to that of dissociation, such as, “having difficulty becoming aroused or feeling sensation, feeling emotionally distant or not present during sex, and experiencing intrusive or disturbing sexual thoughts and images” (p.323). That interplay of numbness on both a physical and mental/emotional level is an intimidating barrier that often deters a survivor from healing, or even engaging in sex ever again. Connecting the physical and emotional worlds is no straightforward task, however the feeling of gratification that a survivor can acquire from reclaiming that power, that was once taken away, can be elating. Pleasure needs to be part of a survivors sexual healing journey once they are ready to do so. When writing about the #MeToo movement and the stories that survivors were sharing about their trauma of sexual violence, Friedman [15] asserts that discussions about the intersections of sexual violence and sexual pleasure must be happening. Friedman acknowledges that, “managing to reclaim our pleasure — whether through sex or any other means — in the aftermath of sexual violence is a triumph, proof positive that we are stronger than the people who tried to erase us through violence, [15]. Effectively navigating the sexual dysfunction disadvantages that survivors experience after harm presents a challenging avenue to their sexual liberation.

Studies have shown that sexual pleasure has a myriad of benefits for our health. Engaging in pleasurable forms of sexual activity stimulates a variety of neurotransmitters that impact not only our brains but a few other organs in our bodies. One of those neurotransmitters that is released in our brains during sexual activity is oxytocin, also known as the, “feel-good,” trusting hormone, that relaxes and eases the tensions throughout our bodies [16]. There are numerous benefits to sexual connection, but the dissociation that many survivors recount impedes their ability to be present and enjoy sexual pleasure [7]. Kontula and Miettiien’s [9] work on female pleasure found that the catalyst to more reoccurring orgasms were related to more mental presence and a relationship to oneself, others and the environment that was positive, relaxing and fueled by a sense of calm. Basson’s [17] work would also articulate the need for mental excitement in women, to understand the female response cycle. Basson [17] states that, “sexual arousal in women often is more a mental excitement, very much about the appreciation of the sexual stimulus and less about the awareness of genital changes,” (p.63). The issue with female’s sexual arousal is that when the factor of trauma, or in this case sexual violence, is something that the individual experiences, then brain’s future ability to effectively decode what sexual connections are consensually being engaged in, or which are not, becomes misidentified and sends signals of unnecessary triggers to the rest of the brain. Once the trigger has been identified, then the symptom that many sexual violence survivors experience occurs, making sexual experiences difficult to navigate and enjoy. The brain’s function of recognizing and relaying triggers is a survival mechanism, which is incredibly effective when someone wants to survive. But, when it comes to the experience of sexual connections, post assault, the brain will recognize some similarities from the assault, and will then rapidly start to dissociate the individuals mind to avoid experiencing further harm. Since sexual violence is a form of harm that is enacted by one individual onto the other, then focusing directly on healing sexual dysfunctions with other person may produce more unnecessary triggers and cause the survivor to not only disengage from sex with their partner but disengage from sexual connection altogether. A possible method to limit these triggers could be to remove the other body from the interaction and focus on solo forms of sexual pleasure, such as solo masturbation.

Masturbation has similar benefits to sex and orgasms, but without the added stress of thinking about how and what their partner may be thinking. Sex is more than just a biological experience; it is also an emotional and spiritual once. Sexual performance anxiety can rise when engaging in sexual acts with another partner, and these anxieties can manifest in a variety of forms such as, fear of reaching orgasm too quickly, or not quick enough, body image issues, and fear that one’s techniques may
not be pleasuring their partner enough, among many others [18]. The post traumatic responses to sexual violence can numb or can shift those anxieties into a hyper-aroused state. Moving into a solo space of sexual pleasure can remove the performance anxieties and allow the survivor to concentrate on their body and mind’s responses to sexual stimulation.

Participating in solo forms of sexual pleasure can provide the survivor with the power and control to make decisions about what part of their body is being touched when, how hard, and for how long. Survivors have reflected on their solo masturbation practices as a space of reclaiming and learning to love their bodies in ways that they never thought possible. Survivor, Maya Browne [19] stated:

Knowing that I could still be intimate with myself was reassuring and empowering. I feared that I’d remain a traumatized victim, but somehow, I had become a liberated survivor. I felt safe in my own body again, though I never believed I would be able to. I trusted myself again, when I believed I never could.

Masturbation can increase a survivor’s comfort and physical awareness and can become a foundation for enjoyable sexual experiences with a partner. Kontula and Miettinen [9] found that more frequent masturbation with women did not equal more orgasms, but more masturbation leads to more pleasurable intercourse connections. If survivors of sexual violence are wanting to engage in sexual interactions with other bodies, then the strategy of solo masturbation as a path to sexual pleasure can not only lead to a better understanding of what, and how sexual pleasure is produced within the survivor, but can also lead to more pleasurable connections with others. This is not to say solo masturbation is a safeguard against triggers of dissociation, as Browne [19] asserts after experiencing an orgasm from solo masturbation, “I was numb from my head to my toes and can only describe it as leaving my body, even though I couldn’t have been more present.” [19]. Female survivors’ sexual experiences can be negatively impacted by dissociative symptoms [8]. Educating survivors about mindfulness practices have been a proven strategy to effectively navigate dissociation that arises for survivors [11]. By empowering survivors to engage solo masturbation practices, as a method of reclaiming control of sexual bodily autonomy, with strategies to overcome dissociation, can aid in the healing process of a survivors every-day life, and within their sexual lives as well. Beginning with solo pleasures, can provide survivors with a deeper understanding of what sexual pleasure means to them, and can assist in recognizing signs when dissociation is being activated, or when their pleasure needs are not being achieved.

IV. CONCLUSION

In conclusion, sexual violence is a pandemic that is impacting millions of women worldwide, and many are struggling with the post traumatic symptom of dissociation and sexual dysfunctions [4]. More research and attention need to be geared toward female solo pleasure experiences and mindfulness practices can aid to alleviate those dissociative symptoms. The research states that dissociation has a variety of symptoms, and that some of which are more impacted during sexual activity [5]. So, when it comes to female masturbation practices, the mental state is more of a factor to experiencing pleasure, then the physical pleasure itself, and that more masturbation leads to more pleasurable intercourse connections, [9]. Since female masturbation is fueled by mental connections, and survivors of sexual violence experience mental post traumatic symptoms, there needs to be mindfulness techniques incorporated into that solo play to lessen the impact of anxiety, depression, stress, and post-traumatic stress symptoms (avoidance/numbing). By engaging in forms of mindful masturbation, survivors can enhance their awareness of what pleasure means within their bodies and minds, without the anxieties that can arise with another partner present. The current model of support that sexual assault, abuse, and domestic violence centers acknowledge as a useful tool to lessen the dissociation symptom is grounding and mindfulness strategies. The implication of this research reveals that mindful masturbation is a necessary tool that both survivors and service providers could apply to their work in understanding how trauma impacts the survivor’s mind and body during solo intimate acts, as well as a healing opportunity to reclaim a survivor’s sexual agency that many survivors emphasized was taken away during the assault.

REFERENCES


