Conference or Workshop Item

Title: Supporting mindfulness beyond the short-term intervention

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Supporting Mindfulness beyond the Short-Term Intervention

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Applications of Mindfulness Meditation in Clinical Contexts

The awareness that emerges through paying attention on purpose, in the present moment, and non-judgmentally to the unfolding of experience moment by moment1, 2 is a treatment though a structured course of around six to ten weeks.

Broad group of interventions knows as Mindfulness Based Interventions (MBIs) which include Mindfulness Based Cognitive Therapy (MBCT), Mindfulness Based Stress Reduction (MBSR), Mindfulness is also used within Dialectical behaviour therapy (DBT) and Acceptance and Commitment Therapy (ACT). Key components - sitting meditation, Hatha Yoga, body scans. Interventions include a secularised adaptation of the traditional Buddhist meditation practice.

Research assessing effects of MBIs suggests promising interventions in clinical setting; e.g. a recent meta-analysis2 found a moderate effect size for treating anxiety and mood disorders.

Concerns with short-term nature of MBIs

Stripping meditative practices of their religious and cultural trappings has enabled us to understand them from the perspective of cognitive science and to apply them in local settings. But has this process of secularisation and Westernisation gone too far and by doing so undermined the mechanisms by which MBIs are supposed to help?3

Psychological concerns

- What is the evidence for the longevity of the effects of short-term MBIs vs long-term, ongoing practice?4
- Six- to ten-week interventions may be inducing state mindfulness, but can they truly alter trait mindfulness?5
- Some evidence of benefits of long-term practice1, 6 - but harder to research…
- What are the risks of mindfulness practice? There are claims that MM may have inherent risks if unsupported (only for some).5, 6
- Increase in anxiety
- "Spiritual materialism" /
- Dissociation from emotions
- Even psychotic episodes in susceptible individuals

Traditional concerns

- Buddhist practice takes place in the context of the ‘three jewels’ of Buddhism, one of which is Sangha, or community.
- Sangha provides encouragement, mitigates risks of drop-out
- A community in which issues around MM can be discussed and supported
- Buddhist mindfulness training occurs in the context of an ethical framework that is lacking in Western applications.

Suggestions for on-going support

Being ‘in the moment’ is not a new concept, its emphasised across schools of thought for enhancing wellbeing: benefits of being in a state of ‘flow’, open awareness and observation enabling better self regulation, and importance of attention in making health related changes.5, 6 As such concept of mindfulness important to bring into all aspects of life, and so ongoing support would enable what has been learnt in a relatively short time to be continued.

Ongoing support needs to be in place alongside and following interventions to place emphasis on developing a longer term practice for wellbeing, and to offer support post-intervention should challenges arise and for motivation.

Suggested options include partnership with local health and mental health service providers to be on hand for referral to the sitting group as well as for assistance should individuals need to be re-referred. This could be in the form of weekly group meditation sessions which would promote more of a long term use of the practice as a form of preventative practice (e.g. avoidance of depression relapse), than to be used as an intervention after the issue has arisen.

Groups could be on a referral basis following participation in an intervention program. The groups would not be compulsory, but would be strongly suggested as a way of maintaining positive outcomes of the intervention as well as building more resources for ongoing wellbeing.

References:


Self-referral

(7)