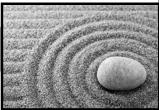
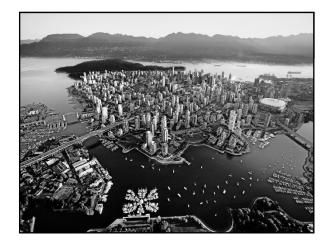
So you are thinking of using mindfulness meditation with your clients?

How to introduce and support Mindfulness-based Cognitive Therapy in your clinical work



Mark A. Lau, PhD

Psychologist, Vancouver CBT Centre & Clinical Associate Professor of Psychiatry University of British Columbia, Canada Visiting Professor, University of Glasgow, Scotland

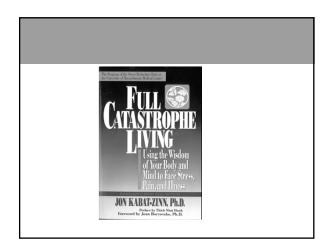


A human mind...

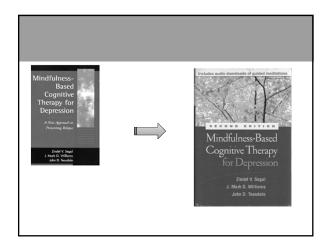
- is a wandering mind
 - Allows us to learn, reason, and plan but...
- · is an unhappy mind
- "...the ability to think about what is not happening is a cognitive achievement that comes at an emotional cost" (Killingsworth & Gilbert, 2010, Science, p. 932)

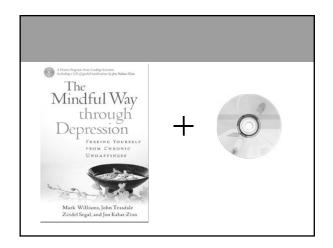
"Your beliefs become your thoughts
Your thoughts become your words
Your words become your actions
Your actions become your habits
Your habits become your values
Your values become your destiny"
Mahatma Ghandi

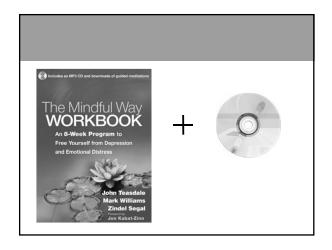
"And the faculty of voluntarily bringing back a wandering attention, over and over again, is the very root of judgment, character, and will. No one is compos sui if he have it not. An education which should improve this faculty would be the education par excellence. But it is easier to define this ideal than to give practical instructions for bringing it about" (James, 1890, p. 401).











Objectives: Content

- 1. How to train individuals in mindfulness
 - How to introduce mindfulness meditation to your clients
 - Core mindfulness practices
- 2. How to support clients in their mindfulness practice
 - Practice of Inquiry
- 3. Guidelines for MBCT instructor training

Objectives: Process

Assumptions:

- General consensus is to do this from the platform of an embodied mindful presence
- 2. Embark on a process/journey
- 3. Not knowing what will emerge

In this workshop, we will rely on experiential exercises combined with theoretical scaffolding

Empirical support for mindfulness-based group interventions

- Meta-analytic and systematic reviews generally support clinical efficacy (e.g.):
 - Bishop, 2002
 - Baer, 2003
 - Salmon et al., 2004
 - Grossman et al., 2004
 - Brown et al., 2007
 - Coelho et al., 2007: MBCT for depressive relapse
 - Hofmann et al., 2010: MBIs for anxiety and depression
 - Piet & Hougaard, 2011: MBCT for depressive relapse
 - Chiesi & Seretti, 2011: MBCT for psychiatric disorders
 - Khoury et al., 2013: MBI for anxiety, depression & stress
 - Kuyken et al., 2016: MBCT for depressive relapse

Empirical support for MBCT for...

- Depression
 - Prevention of depressive relapse
 - · Residual symptoms +/- suicidal ideation
 - · Current depression
 - · Treatment resistant depression
- · Bipolar disorder
- Anxiety Disorders
 - Generalized anxiety disorder
 - Health Anxiety
 - Panic Disorder
 - · Social Anxiety Disorder

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Clinical uses of mindfulness

- · Therapist informed about mindfulness
- · Therapist with a mindfulness practice
 - Cultivate a more mindful presence in therapy
 - Can be applied to any therapy approach
 - Can contribute to symptom reduction (Grepmair et al., 2007)
- · Interventions Based on Mindfulness Principles
 - Acceptance and Commitment Therapy (ACT)
 - Dialectical Behavior Therapy (DBT)
- Mindfulness-based Psychotherapy

Mindfulness

"Mindfulness means paying attention in a particular way....

- on purpose
 - in the present moment
 - non-judgmentally."

Jon Kabat-Zinn

Myths about mindfulness

Mindfulness is NOT

- · A relaxation practice
- An attempt to reach a particular state of mind (e.g. positive, calm)
- · Self-absorbed detachment
- · A blank mind
- · A panacea or quick fix
- · A religious practice
- · Positive thinking



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Core mindfulness skills

(Lutz et al., 2008

- · Concentration, focused attention
 - Stepping out of automatic pilot
 - Directing attention
 - Stability of attention on a specific object
- · Mindfulness, open monitoring
 - Attention to a wide range of objects
 - Leads to a greater awareness of how the mind works and how it creates suffering
- · Compassionate acceptance

Stepping out of automatic pilot

- Theme
 - Living on automatic pilot vs conscious awareness
- Rationale
 - In doing mode one is typically on automatic pilot
 - When focused on goals don't notice present moment experience-Based on premise that tomorrow is more real than today
- Intention
 - Intentionally stepping out of automatic pilot
 - Access being mode
 - A step towards gaining conscious choice in our lives

Stepping out of automatic pilot

- Practice: Raisin exercise
 - · Introduction to what mindfulness is
 - Illustrates that we can choose to step out of old habits of mind (doing-mode) and focus on experience in the moment-ground one in the midst of distress (being mode)
 - Experience qualities of mindful attention, e.g, beginner's mind
 - Can change experience by how we pay attention to it
 - · Notice things we might otherwise not notice

Stepping out of automatic pilot

- Practice: 3-minute breathing space
 - THE way to step out of automatic pilot and reconnect with the present moment
 - Awareness Noting what you are feeling
 - 2. Gathering- Bringing attention to the breath
 - 3. Expanding Expanding awareness to include a sense of the whole body



Stepping out of automatic pilot

- Practice: 3-minute breathing space
 - Routine
 - When experiencing distress
 - As a prelude to attending to thoughts
 - As a prelude to taking wise action



Stepping out of automatic pilot

- · Practice: Mindfulness of routine activities/eating
 - Showering, brushing teeth, eating etc.
 - Learn to recognize when in doing mode/difference from normal experience

Paying attention: Directing attention

- Theme
 - Thinking about vs directly sensing experience
- Rationale
 - Lost in thought
 - Doing mode relies on ideas
 - Living one step back from life
- · Intention
 - Shift from living in the head/thinking to directly sensing in the body
 - Connect directly with life

Paying attention: Directing attention

- Practice: Body scan
 - Sustained practice in engaging, disengaging, and shifting attention to different objects of awareness
 - Practice of letting go of thoughts and returning the attention back to the intended focus, i.e., the body

Paying attention: Stability of attention

- Theme
 - Dwell in past/future vs being in the present
- Rationale
 - Mental time travel is part of doing mode: pastrumination/future-worry, planning
 - This takes us out of direct experience
 - re-experience past losses/failures
 - experience fear/anxiety
- Intentior
 - Disengage from unintended time travel
 - Being fully present; available to the direct unfolding of experience

Paying attention: Stability of attention

- Practice: Combined stretch and breath meditation/Mindful stretching/movement
 - To observe mind wandering and reconnect with bodily sensations
 - To become familiar with the habits of mind
 - Use the breath/bodily sensations to reconnect with the here and now

Categories of practice

- · Informal and Formal practices
- · Object of attention
- · Turning towards safety or difficulty

Mindfulness-based practices

- FORMAL PRACTICE (30-40 minutes)
 - Refers to mindfulness meditation (e.g., body scan, breath meditation, mindful stretching)
 - Opportunity to experience mindfulness at deepest
 - To learn how the mind works and to systematically observe its contents
- INFORMAL PRACTICE (secs. to mins.)
 - Mindful attention during daily activities
 - 3-minute breathing space
 - standing in line/waiting
 - eating without distraction
 - notice your environment; when you notice a phone ring, door slam etc., take a moment to sense where you are and how you feel
 - "Every day is a retreat...it's just not as quiet."





Object of attention

Vivid, more intense sensations vs more subtle sensations

- Movement
- · Sounds
- Taste
- Breath in belly
- · Air at tip of the nose

Turning towards safety or difficulty?

Safer ('external')

- · Soles of the feet
- Sounds
- Taste
- · Natural environment
- · Eyes open

More challenging (core of the body)

- · Belly
- Throat

Sequencing?

Has client developed concentration?

- · Some present-moment awareness
- · Notice mind wandering
- · Can let go of criticism and judgement
- · Become kinder
- · Aware of a stable, calm center
- + Open Monitoring = Compassionate Practice & Equanimity

The Eight Sessions and Core **Tasks of MBCT**

Initial assessment interview

- · Learn about factors associated with their depression
- · Provide a rationale for MBCT
- Emphasize that the program involves hard work and require patience and persistence
- Exclude if suicidal w/o counseling support, or abusing drugs/alcohol

Description of group MBCT

- Format
 - 8 X 2 hour weekly sessions + 4 follow up meetings
 - Daily homework
 - Groups of up to 12-15 recovered depressed patients

General session structure

- Meditation
- Review of experiences (i.e., inquiry)
- · Additional exercises
 - e.g., 3-minute breathing space, CBT techniques
- · Assign between-session practice

Session 1: Awareness & automatic pilot

- Theme
 - Intentionally stepping out of automatic pilot
- Agenda
 - Orientation to group
 - Group guidelines
 - · Introduction in pairs
 - Raisin exercise
 - Body Scan

Session 2: Living in our heads

- Theme
 - An opportunity to explore direct bodily experience
- Agenda
 - Body scan
 - Practice & homework review
 - Thoughts and feelings exercise
 - Setting up Pleasant Events Calendar practice
 - 10 minute sitting meditation

Session 3: Gathering the scattered mind

- Theme
 - Switching from a mode of 'doing' (i.e., striving fixing) to 'being'
- Agenda
 - 5-minute 'seeing' or 'hearing' exercise
 - 30-minute sitting meditation
 - Breath and body
 - · Intense physical sensations
 - Practice & homework review
 - 3-minute breathing space
 - Mindful stretching
 - Unpleasant events calendar

Session 4: Recognizing aversion

- Theme
 - Staying present
- Agenda
 - 5-minute 'seeing' or 'hearing' exercise
 - 30- to 40-minute sitting meditation
 - Breath, body, sounds, thoughts
 - Practice & homework review
 - Defining the territory of depression
 - · Diagnostic criteria of depression
 - · Automatic Thoughts Questionnaire
 - Mindful walking

Session 5: Allowing / Letting Be

- Theme
 - Allowing things to be as they already are
- Agenda
 - 30- to 40-minute sitting meditation
 - Breath, body, sounds, thoughts
 - · Relating to one's experience
 - Practice & homework review
 - 3-minute breathing space with added instructions

Session 6: Thoughts Are Not Facts

- Theme
 - Relating differently to thoughts
- Agenda
 - 40-minute sitting meditation
 - Breath, body, sounds, thoughts
 - Noting reactions to difficulties
 - Practice & homework review
 - Moods, thoughts and alternative viewpoints exercise
 - Discuss relapse signature

45

Day of mindful practice

- · Opportunity to practice meditations consecutively
- · Entire day in silence
- · Includes eating lunch mindfully

Session 7: How Can I Best Take Care of Myself?

- Theme
 - Using skillful action to deal with lowering mood
- Agenda
 - 30- to 40-minute sitting meditation
 - Same as previous session
 - Practice & homework review
 - Explore links between activity and mood
 - Generating list of pleasure and mastery activities
 - Set up action plan for relapse

Session 8: Maintaining and Extending New Learning

- Theme
 - Linking practice to everyday life: planning for a new way of living
 - Acceptance vs. change as a response to difficulties
- Agenda
 - Body scan
 - Practice & homework review
 - Review course
 - Discuss how to maintain a practice
 - Concluding meditation

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The paradox of change vs acceptance

Inquiry: Qualities and attitudes

'Being' mode/embodied mindful presence

- · Not fixing
- Embodying the practice-bringing mindfulness to participant's experience
- · Not knowing
- · Asking permission
- Avoiding attachment to psychological explanations of their experience
- · Humility
- · Trusting the process

Process of inquiry

Three concentric circles and layers:

- Layer 1 noticing sensations, thoughts, feelings (direct experience within self)
- Layer 2 dialoguing (placing the direct noticing in a personal context of understanding)
- Layer 3 *linking* to the aim of the program (placing the learning in layers 1 and 2 in a wider context of understanding)
- MBCT places more emphasis on this third layer of linking experience to a context of understanding

Inquiry

this is not articulated in this way within MBSR

Inquiry: Practical issues

- · No need to cover everything
- · Equal interest in pleasant and unpleasant experiences
- · Balancing curriculum vs. what arises
- · Changing focus over the program
- · Trusting what emerges

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Importance of teacher's mindfulness practice

- · General principle guiding MBCT teacher training
 - efficacy of the therapy is dependent on the teacher's degree of experience with, and embodiment of, mindfulness
- "The quality of a mindfulness-based class is only as good as the instructor and their understanding of what is required to deliver a program that is both:
 - Rooted in a depth of mindfulness practice
 - Integrated with the skills and understandings relevant to the particular context in which the teaching is offered"

(Crane et al., 2012)

Developing a mindfulness practice

- · Local sitting groups
- · Local meditation retreats
- Yoga classes
 - Informed by insight-based mindfulness practice
- · Recorded meditations/dharma talks
 - dharmaseed.org
- · Online meditation instructions
 - bit.ly/11AtdFa
- Online meditation groups (with precise instructions!)
 - 30daysofmindfulness.com/courses

Developing a mindfulness practice

- · Online MBCT program
 - Mindful Noggin
 - http://www.mindfulnoggin.com/
- · Online MBSR Programs
 - · Sounds true
 - http://www.soundstrue.com/shop/The-MBSR-Online-Course/4470.pd
 - Insight Meditation Society Correspondence Course
 - http://www.dharma.org

Guidelines for MBCT Instructor Training

(Segal, Williams and Teasdale, 2nd edition, 2013)

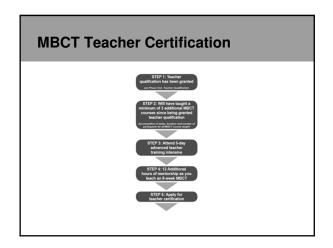
- · Daily mindfulness meditation practice
 - Including silent residential retreats (7-10 days)
- Completion of in-depth mindfulness based teacher training program, duration at least 12 months, including:
 - Three 8 week groups (as participant, then trainee, then co-facilitator)
 - Workshops on theoretical and practical aspects of teaching MBCT
- Ongoing MBCT supervision
- Via group, video or in-person
- Professional qualification and experience in leading CBT/IPT/behavioural groups for MDE

UCSD Mindfulness-Based Training Institute

- MBCT Teacher Qualification
 - Basic level of training
 - Qualification to teach MBCT
- · MBCT Teacher Certification
 - Demonstration of competency/best practice



MBCT Teacher Qualification STEP 1. Prerequisites for Set Will Teaching for section of Set Will Teacher for section of secti



5-day MBCT Professional Training

- Canada
 - Hollyhock, Cortes Island, BC; Mark Lau & Andrea Grabovac (http://www.hollyhock.ca/cms/) – August 28-Sept. 2, 2016
 - Ecology Retreat Centre, Ontario; Zindel Segal & Patricia Rockman (http://www.mindfulnessstudies.com)
- United States
 - Omega Institute of Holistic Studies in Rhinebeck, New York;
 Zindel Segal & Susan Woods (http://www.eomega.org/) July 10-15, 2016
 - UCSD Center for Mindfulness, San Diego, California; Zindel Segal, Susan Woods & Sarah Bowen (http://mindfulness.ucsd.edu/mbct5day.htm) - February 12-17, 2017



"Break your heart no longer. **Each time you judge yourself, you break your heart.**You stop feeding on the love that is the wellspring of your vitality."

~ Adapted from Swami Kripalvanandaji (Bapuji) by Yanai Postelnik, July 3, 2012

Contact Info

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