

Using Mindfulness in Therapeutic Situations

Dr Ceri Woodrow

Helping people to be
the best they can be

What is Mindfulness?

- Staying in the moment
- Being aware of what your mind is doing
- Refocusing your mind
- Present in the moment (non-judgementally, curiously)
- Observe ourselves

Mindfulness Exercise

Breathing



Mindfulness Therapies

- Developed therapeutically by Dr Jon Kabat-Zinn and used in the West to promote wellbeing
- Mindfulness-Based Stress Reduction improves mental health (Fjorback et al., 2011)
- Mindfulness-Based Cognitive Therapy prevents depressive relapse (Fjorback et al., 2011)

Therapeutic Basis

- Therapeutically it connects to acceptance rather than change
- Teaches focus and increase of cognitive control
- Changes focus of thoughts to the present



Mindfulness-Based Stress Reduction (MBSR)

- Jon Kabat-Zinn (1994)
- Developed for stress reduction of varied patient groups from chronic pain to anxiety and heart problems but is now wide-spread for all forms of stress
- Aims to reduce prolonged stress to aid mental well-being using meditation, body scan exercises and gentle yoga

MBSR

- Structured group programme
- Eight weekly 2-2.5 hour sessions plus full day retreat between week 6 & 7
- Expectation that people incorporate these skills into everyday life
- Well documented beneficial effects on stress reduction and well-being (Hofmann, 2010)

MBSR Evidence

- It has been shown to reduce anxiety levels by 58% and stress by 40%.
- Individuals with “problematic” levels of stress found a significant improvement in perceived levels of stress with MBSR (Krusche et al, 2013).
- Changes in mindfulness “precede changes in perceived stress” (Baer et al, 2012).

Mindfulness-Based Cognitive Therapy (MBCT)

- Adapted from MBSR
- Developed by Segal, Williams and Teasdale in the 1990s (book: 2002)
- Used for people with recurrent major depression while in remission (NICE recommended)
- Aims to prevent relapse (not treat)

Helping people to be
the best they can be

MBCT

- It uses techniques such as meditation, breathing exercises and stretching, alongside elements of cognitive therapy to help break the negative thought patterns often seen in recurrent depression.
- Focus is on the 'here and now' rather than worrying about the past or future

MBCT

- 85% MBSR with elements of Cognitive Behaviour Therapy (CBT)
- Eight weekly 2hour sessions
- Increased focus on thoughts
- Identification of physiological responses
- Learn to notice rumination

MBCT Evidence

- MBCT halved the rate of depressive relapse in patients with three or more past episodes (Teasdale, Segal & Williams, 2000)
- Reduced risk of relapse of recurrent depression by 43% on average (Mark et al, 2014).

Mindfulness in ASD

- Research shows that depression and anxiety disorders are the most common psychiatric concerns in autism spectrum disorders (ASD).
- Spek, van Ham & Nyklíček (2013) conducted a Randomised Control Trial: 9-week MBT-AS training or a wait-list control group
- Results showed a significant reduction in depression, anxiety and rumination in the intervention group

Mindfulness in ASD

- Continuing research...
- Sizoo & Kuipir 2017. Mindfulness and cognitive behavioural therapies are both promising treatment methods for reducing comorbid anxiety and depression in adults with ASD.
- Conner et. al., 2018. Significant improvement in emotion regulation impairments and related concerns for adults with ASD
- Conner & White 2018. Of nine participants (adults with ASD), seven demonstrated improvement in at least one of the following domains; impulse control, access to ER strategies, and emotional acceptance.

Mindfulness within ID

- Soles of the feet (Singh, 2003)
- Singh and colleagues in the USA have adapted and extensively applied the 'Meditation on the Soles of the Feet' (SoF) technique

Soles of the Feet

- Aims to assist PwID to divert their attention away from various affect producing thoughts, events or situations to an emotionally neutral part of the body; the soles of their feet
- This enables people to calm down, and then make a choice about how to react to the thought, event or situation that triggered the affect

Mindfulness Exercise

Soles of my Feet



Script – soles of my feet

- I can use this if I feel angry, anxious or sad. Staff can help me.
- Sit up straight and relax your shoulders. Put both of your feet flat on the floor. You can close your eyes if you want to.
- You might notice angry, anxious or sad thoughts in your mind. Your body might feel angry, anxious or sad too.
- Now start to think only about the soles of your feet.
- Notice how your shoes feel covering your feet if you are wearing them. Notice how your socks or slippers feel on your feet if you are wearing them. If your feet are on the floor, notice what they feel like on the floor.
- Now that you are only thinking about the soles of your feet, slowly start to wiggle your toes. Notice what your feet feel like in your shoes or socks as you wiggle your toes.
- Wiggle your toes and move your feet around.
- Think about what your feet feel like. Maybe they feel warm. Maybe they feel cold. Maybe you can feel some tingling in your feet. Maybe your shoes or socks feel soft on your feet. Maybe they feel rough. Keep thinking about the soles of your feet until you feel calm.
- Soon, you might start thinking about something else. That's ok. Notice what you think about. Then, only think about the soles of your feet again. Whenever you start thinking about something else, try to just think about the soles of your feet.
- Keep thinking about the soles of your feet until you feel calm.

Soles of the Feet Case Example

- Original paper - Singh et al., (2003)
- 27 year old man with diagnoses of LD, psychosis and conduct disorder, high level verbal and physical aggression, in an inpatient setting, institutionalised several times from aged 7, placed with foster carers, placements 'always broke down', reputation on wards as 'difficult', refused community placements, multiple injuries to peers, various therapy approaches 'failed'

Soles of the Feet Case Example

- Intervention
- Taught SoF technique to increase his mindfulness of external and internal environments (exactly same as just experienced)
- 30 minute role play and practice sessions twice a day for 5 days

Soles of the Feet Case Example

- Results:
- Significant reduction of incidents, aggression, PRN, injuries to self and others
- Significant increase in community activities

Case Example 2

- **Singh et al., (2011)**
- SoF approach was also used to enable three adolescents diagnosed with Asperger's Syndrome self-control their aggression
- **Outcomes:** Physical aggression decreased progressively whilst they were mastering the technique
- No aggressive behaviour during a long term follow up of 4 years.

Further Evidence SoF

- Further case examples given by Singh - see reference section (Singh, 2003, 2006, 2008, 2011a, 2011b, 2011c)

Adapted in an A&T Unit

- Assessment and Treatment Unit for People with ID. Most people have a moderate or severe ID and ASD
- Group based on SoF
- Some people unable to utilise group
- Mindful exercises - focusing the mind
- Therapeutic opportunities for all inpatients

Adaptations for Inpatients

- To encourage self-regulation of emotions and self-soothing
- Aims:
 - 1) To develop a mindfulness group for service users on the unit.
 - 2) To implement a pilot group and utilise service user feedback from this group to provide recommendations for future groups

Adaptations for Inpatients

Method

- Scoping interviews with MDT to gain views
- Pilot mindfulness group - 20 sessions
- Feedback gained from MDT and service users on impact of the pilot group

Adaptations for Inpatients

Results

- Enthusiasm about group from staff
- Patients said "I like the group... it's calm in there", "I think I could use this again if staff help me", "I tried to think about my feet when I felt angry..... I'm going to keep trying this".

Adaptations for Inpatients

Results

- Patients requested a larger variety of sensory activities, and additional support from staff to practice between sessions
- They wanted the group to be held more often
- Two people requested an adaptation to the script (hands not feet)

Support for Support

- Parents of people with Id and with autism report higher levels of stress.
- As society asks carers to provide support, we need to ensure that we help carers remain emotionally and mentally well
- Many studies have looked at mindfulness in relation to reducing stress of parents with children of all ages (with ID or ASD)

Mindfulness for Families

- Lunskey et al 2017: evaluated two community based interventions for parents of adults with autism spectrum disorder and other developmental disabilities.
- Parents in the mindfulness group reported significant reductions in psychological distress, while parents in the support and information group did not.
- Reduced levels of distress in the mindfulness group were maintained at 20 weeks follow-up.

Mindfulness for Families

- Ridderinkhof et al., 2018.
- A combined mindfulness-based program for children and their parents (MYmind) was beneficial for adolescents with autism spectrum disorder (ASD).
- Parents reported improved emotional and behavioural functioning, improved parenting, and increased mindful awareness on all occasions.

Mindfulness for Families

- Singh et al., 2019
- Evaluated whether Mindfulness-Based Positive Behavioural Support would reduce stress levels of mothers of adolescents with ASD (n = 47) or with ID (n = 45) and reduce aggression, disruption, and low compliance behaviours of their children.
- The results suggest that MBPBS was equally beneficial for mothers of adolescents with ASD or ID and helped with the behaviours of the children

Mindfulness Exercise

Mindful Body Scan



For Inpatient Staff

- Also helpful for carers so we adapted for inpatient staff
- Limited time
- Changing shift patterns
- 5 minutes exercises

Staff Mindfulness

Measures

- WEBWBS - Warwick-Edinburgh Mental Well-Being Scale (Tennent et al, 2007)
- Higher scores indicate an increase in well-being

Staff Mindfulness

- AMBI - Abbreviated Maslach Burnout Inventory (McClafferty, H. 2014)

Three subscales:

- emotional exhaustion (lower scores indicate a decrease in emotional exhaustion and burnout)
- Depersonalisation (lower scores indicate a decrease in depersonalisation and burnout)
- Personal Accomplishment (higher scores indicate a decrease in burnout and an increase in personal accomplishment)

Staff Mindfulness

- All staff completed the pre-measures
- 18 mindfulness sessions
- Staff who attended one or more of these sessions then completed post-measures.
- Anonymous (honest but pre- post- can't be matched)

Staff Mindfulness

- Trends are all in the expected direction
- Significant difference in pre and post WEMWBS means at $p < .10$ (1 tailed) using an independent t-test

Staff Mindfulness

- 'Helpful'
- 'I use it when I'm stressed'
- 'It gets easier when you do it more'
- 'Positive way to start the day'
- 'I was using it to calm down in the car yesterday'

Staff Mindful Lunch

- Wirral Community Learning Disability Team (Dr Jo Jury)
- One lunch-time a week had space to eat away from desks and engage in mindfulness exercises
- Very well received
- Being written up

References

- Baer, R.A., Carmody, J., Hunsinger, M. (2012) Weekly Change in Mindfulness and Perceived Stress in a Mindfulness-Based Stress Reduction Programme. *Journal of Clinical Psychology*, 68(7), 755-765.
- Bull, S. & Cullingham, N. (2017) Introducing Mindfulness to an Inpatient Unit. University of Manchester Poster.
- Chapman, M., Hare, D., Caton, S., Donalds, D., McInnis, E. & Mitchell, D. (2013) The use of mindfulness with people with intellectual disabilities: a systematic review and narrative analysis, *Mindfulness*, 1-12. doi: 10.1007/s12671-013-0197-7
- Conner, C.M., & White, S.W. (2018) Brief Report: Feasibility and preliminary efficacy of individual mindfulness therapy for adults with autism spectrum disorder, *Journal of Autism and Developmental Disorders*, 48(1), 290-300.
- Conner, C.M., White, S.W., Beck, K.B., Golt, J., Smith, I.C. & Mazefsky, C.A. (2018) Improving emotional regulation ability in autism: The emotional awareness and skills enhancement (EASE) programme, *Autism: The International Journal of Research and Practice*, p. 1362361318810709

References

- Fjorback, L.O., Arendt, E., Fink, P. & Walach, H. (2011) *Acta Psychiatrica Scandinavica*. 124:102-119
- Harris, R. (2006) *Embracing you demons: an overview of Acceptance and Commitment Therapy*. *Psychotherapy in Australia*, 12(4): 2–8.
- Hofmann, S. G., Sawyer, A. T., Witt, A. A., & Oh, D. (2010). The Effect of Mindfulness-Based Therapy on Anxiety and Depression: A Meta-Analytic Review. *Journal of Consulting and Clinical Psychology*, 78(2), 169–183. <http://doi.org/10.1037/a0018555>
- Kabat-Zinn, J. (1994) *Wherever you go there you are*. US: Hyperion
- Krusche, A., Cyhlarova E., Williams J.M.G. (2013) Mindfulness Online: An Evaluation of The Feasibility of a Web-Based Mindfulness Course For, Stress, Anxiety and Depression. *British Medical Journal*, October 2013(3), BMJ Open

References

- Linehan, M.M. (1993). *Cognitive-behavioural treatment of borderline personality disorder*. New York: Guildford Press
- Linehan, M.. (1993). *Skills training manual for treating borderline personality disorder*. New York: Guildford Press
- Lunsy, Y., Hastings, R., Weiss, J.A., Palucka, A., Hutton, S. & White, K. (2017) [Comparative effects of mindfulness and support and information group interventions for parents of adults with autism spectrum disorder and other developmental disabilities.](#) *Journal of Autism and Developmental Disorders*, 47(6), p.1769-1779
- Mark, J., et al (2014) Mindfulness-Based Cognitive Therapy for Preventing Relapse in Recurrent Depression: A Randomized Dismantling Trial. *Journal of Consulting and Clinical Psychology*: 82(2): 275–286

References

- McClafferty, H. (2014). Abbreviated Maslach Burnout Inventory. *Physician Health and Well Being: The Art and Science of Self-Care in Medicine*, Oct 2014
- Ridderinkhof, A., De Bruin, E., Blom, R. & Bögels, S.M. (2018) [Mindfulness-based program for children with autism spectrum disorder and their parents: direct and long-term improvements.](#) *Mindfulness* 9(3) 773-791.
- Segal, Z.V., Williams, J.M.G., & Teasdale, J.D. (2002). *Mindfulness-based cognitive therapy for depression: a new approach to preventing relapse*. New York: Guildford Press
- Singh, N.N., Wahler, W., Adkins, A.D. & Myers, R.E. (2003). Soles of the Feet: a mindfulness-based self-control intervention for aggression by an individual with mild mental retardation and mental illness. *Research in Developmental Disabilities*. 24, 158-169.

References

- Singh, N., Lancioni, G., Winton, A., Curtis, W., Wahler, R., Sabaawi, M., Singh, J., McAleavey, K. (2006). Mindful staff increase learning and reduce aggression in adults with developmental disabilities. *Research in Developmental Disabilities*. 27 , 545–558.
- Singh, N., Lancioni, G., Winton, A., Singh, A., Adkins, A. & Singh, J. (2008). Clinical and benefit–cost outcomes of teaching a mindfulness-based procedure to adult offenders with intellectual disabilities. *Behaviour Modification*, 32, 622-637.
- Singh, N. N., Lancioni, G. E., Singh, A. D. A., Winton, A. S. W., Singh, A. N. A., & Singh, J. (2011). Adolescents with Asperger syndrome can use a mindfulness-based strategy to control their aggressive behaviour. *Research in Autism Spectrum Disorders*. 5, 1103–1109.

References

- Singh, N.N., Lancioni, G.E., Winton, A.S.W., Singh, J., Singh, A. N.A. & Singh, D.A. (2011). Peer with intellectual disabilities as a mindfulness-based anger and aggression management therapist. *Research in Developmental Disabilities*. 32, 2690-2696.
- Singh, N., Singh, G., Lancioni, G., Winton, A., Singh, A., Adkins, A. & Singh, J. (2011). Can adult offenders with intellectual disabilities use mindfulness-based procedures to control their deviant sexual arousal? *Psychology, Crime & Law*, 17, 165-179.
- Singh, N.N., Lancioni, G.E., Karazsia, B.T., Myers, R.E., Hwang, Y.S. & Anālayo, B. (2019) [Effects of mindfulness-based positive behaviour support \(MBPBS\) training are equally beneficial for mothers and their children with autism spectrum disorder or with intellectual disabilities.](#) *Frontiers in Psychology*, 10, 385 – 391
- Sizoo, B.B., & Kuiper, E. (2017). [Cognitive behavioural therapy and mindfulness based stress reduction may be equally effective in reducing anxiety and depression in adults with autism spectrum disorders.](#) *Research in Developmental Disabilities*, 64. 47-55

References

- Spek, A.A., Van Ham, N.C., & Nyklíček, I. (2013) [Mindfulness-based therapy in adults with an autism spectrum disorder: a randomized controlled trial](#). *Research in Developmental Disabilities*, 34 (1), 246-253
- Tennant, R., Hiller, L., Fishwick, R., Platt, S., Joseph, S., Weich, S., ... Stewart-Brown, S. (2007). The Warwick-Edinburgh Mental Well-being Scale (WEMWBS): development and UK validation. *Health and Quality of Life Outcomes*, 5, 63. <http://doi.org/10.1186/1477-7525-5-63>
- Welford, M. (2016). *Compassion Focused Therapy for Dummies*. Wiley