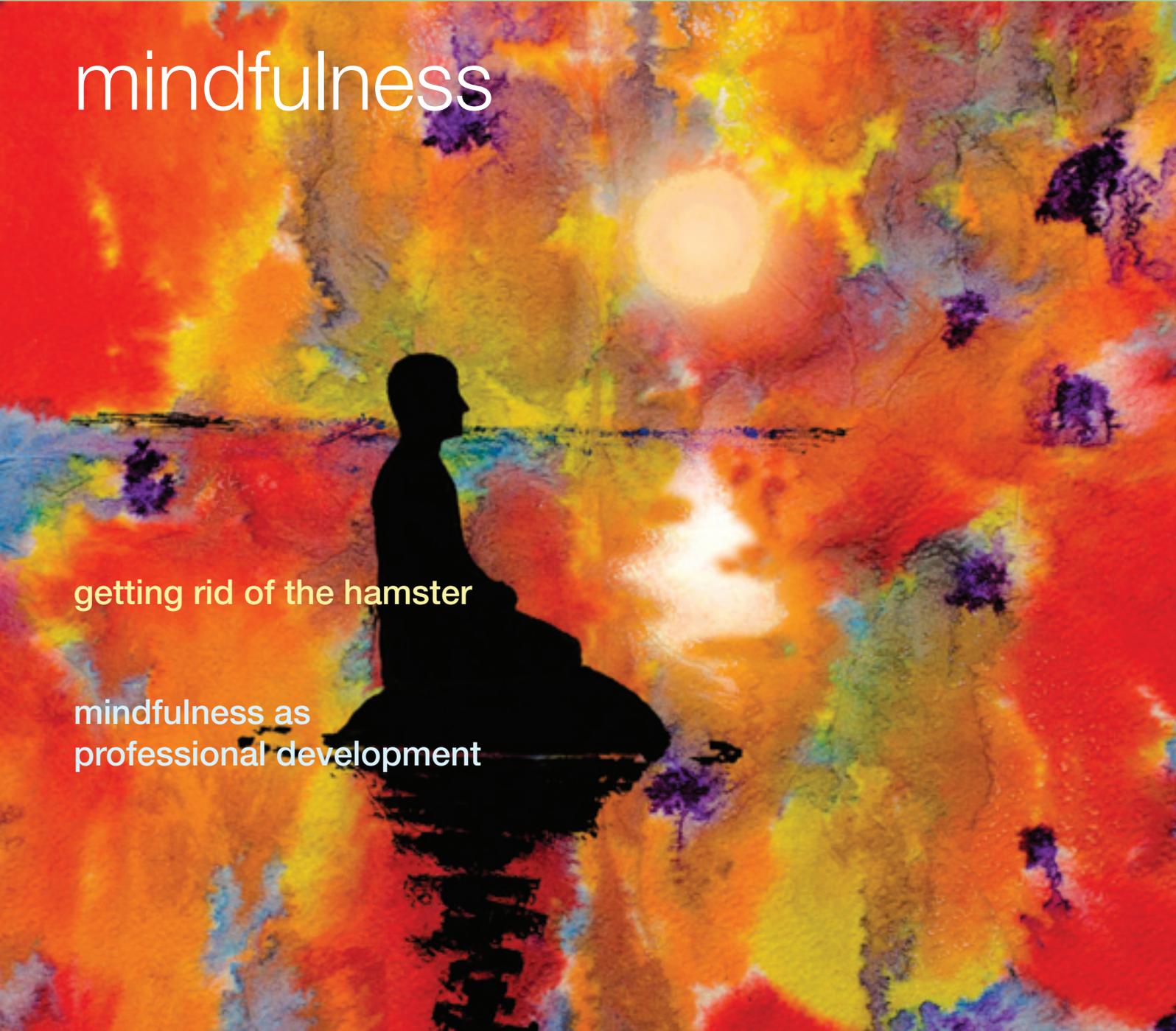


visions

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mindfulness

getting rid of the hamster

mindfulness as
professional development

visions

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I enjoyed reading the recent Body Image issue; there was so much that I connected to on a personal level. Learning to accept our bodies is a difficult journey but it is made possible by the inspiring people who shared their stories in this issue. There is much to be said about breaking the silence of eating disorders and helping to end the stigma that surrounds it by sharing our experiences and advocating that it is okay to accept our bodies as they are.

The Canadian Mental Health Association (CMHA) in Kelowna has been running the Accepting our Bodies support group for a year and a half and many of the concepts shared in the articles are things we discuss within the group. The main focus of the group is promoting body acceptance and also awareness and mindfulness around our thoughts, feeling and struggles regarding food and body. It is a safe space for participants to share and receive support as well as give support to others as well. The group has a good balance of peer support, discussion and education.

I would like to say thank you to the editor for opening the door for these conversations to be had. And for everyone who submitted an article and shared their story, it takes amazing courage and helps so many people who are living in silence.

— Jayme Pereira, Kelowna

editor's message

When I first learned the practice of mindfulness, I found it nothing short of liberating... *and* irritating. I'll explain the irritating part first. I participated in a 20-minute guided meditation every week of my mindfulness-based cognitive therapy group. We had to lie down without fidgeting and practice various mindfulness techniques. All fine except that I have restless legs syndrome, so if I don't move for 10–15 minutes, it pretty much guarantees that my leg will involuntarily spasm—a lot. It doesn't exactly hurt, but boy is it irritating. Now, I understand that a guided meditation doesn't have to be pleasant and I got very good at accepting discomfort, but suffice it to say I never did a long meditation after that group ended.

Yet I did take something very powerful away from that group that I *do* use often. I had taken enough cognitive-behavioural therapy (CBT) to know how to identify and challenge negative thoughts, but for me, mindfulness brought into focus what CBT glossed over: that most times noticing and letting be is enough. Mindfulness taught me how to notice a bad thought and then watch it drift on by like driftwood. No challenging, just observing. This technique became even more powerful when I applied it to panic attacks. I suffered from panic disorder for 15 years in my youth. Exposure therapy helped immensely (thank you CBT), but what also really helped was learning to *just do nothing* when a (rare) panic attack returned. No rushing for paper bags or tranquilizers, no shoving of heads between knees. No, doing nothing was and is the best remedy to get through a panic attack. Ok, it's not exactly "nothing"; it's a really active kind of nothing: noticing and being totally curious about what's happening but not controlling or "fixing" in any way. There is something so freeing in that aspect of mindfulness.

But it's not easy. There's a line in a Netflix series theme song that sums it up perfectly: "Taking steps is easy / Standing still is hard."¹ For me, *being* is harder than *doing*. I'm good at being busy, at directing, at helping. Just being with myself like a friend walking down a road by my side—that takes patience, compassion and curiosity. Thankfully, those are muscles I want to build. So if mindfulness rubs you the wrong way, try it from another angle. It's more than worth a second look.



Sarah Hamid-Balma

Sarah is Visions Editor and Director of Mental Health Promotion at the Canadian Mental Health Association's BC Division

Mindfulness Meditation

A SERVICE PROVIDER PERSPECTIVE

Mark A. Lau, PhD, RPsych

I was first introduced to mindfulness in 1995, when I joined a research team in Toronto to evaluate whether a new mindfulness-based group intervention, mindfulness-based cognitive therapy (MBCT), would be helpful to reduce the risk of depressive relapse.



Mark is a Registered Psychologist at the Vancouver CBT Centre and a Clinical Associate Professor of Psychiatry at the University of British Columbia. Dr. Lau has over 20 years of experience providing clinical services and professional training in mindfulness-based cognitive therapy (MBCT) and cognitive-behavioural therapy (CBT). He is an Associate Editor of the journal Mindfulness. For more information on Dr. Lau, visit www.vancouvercbt.ca/dr_lau.html

Up until that point in my career, I had seen the benefits for some of my clients in being more present, that is, being more aware of their present-moment experience. But I did not know a way to systematically teach my clients how to be more present, or mindful. I was also not aware of any research on whether mindfulness would be helpful in reducing the risk of depressive relapse.

Since the mid-nineties, there has been an explosion of popular and scientific interest in mindfulness and mindfulness meditation practice. Mindfulness-based interventions (MBIs) were developed to assist

individuals to systematically cultivate mindfulness. Importantly, MBIs have emerged as a promising way to improve well-being and reduce psychological symptoms associated with both physical and mental health problems, in a way that puts the individual in charge of his or her own self-care. The surge in interest in mindfulness has led policy makers in some countries to evaluate whether MBIs may be helpful in addressing challenges in a wide range of areas (such as health, mental health and education).

What is mindfulness?

“Mindfulness” refers both to a concept

and to the practice of cultivating mindfulness. Mindfulness has been described by well-known mindfulness teacher Jon Kabat-Zinn as a non-judgemental, present-centred awareness in which each thought, feeling and sensation that one notices in oneself is acknowledged and accepted *as it is*.¹

To introduce you to mindfulness, let's try a little exercise. Take a moment and check in where your mind is now. You may find that you are focusing your attention on reading this article. However, some of you may find that your mind has wandered somewhere else. Perhaps it drifted back to something that happened to you earlier in the day. Or perhaps it has jumped ahead to something that might be happening after you read this article. Perhaps your mind is making comments about this article. If you find that your mind has wandered, you are in good company. A study out of Harvard shows that people's minds wandered about 47% of the time across a wide range of activities.² In other words, a human mind is a wandering mind.

What we just did with this exercise was to practise mindfulness, which is simply to remember to check in on our present-moment experience. This can often prove to be a little more challenging in everyday life, but the principle of the exercise is the same. When we more systematically engage in mindfulness meditation, part of what we are doing is checking in on our present-moment experience, non-judgementally, more frequently and intentionally than we might otherwise do.

Cultivating mindfulness may be one way to help us better deal with our wandering mind and improve our well-being.

Why practise mindfulness?

Research from the same Harvard study suggests that when our mind wanders off to unpleasant, neutral or even pleasant topics, we are not as happy as we are when our mind hasn't wandered—that is, when we are present with what we are doing in the moment. This suggests that a wandering mind is an unhappy mind. Where our minds go can affect our feelings, behaviours and physical sensations—even our other thoughts. Cultivating mindfulness may be one way to help us better deal with our wandering mind and improve our well-being. At the same time, there is a growing body of research showing that practising mindfulness can reduce stress and improve well-being.³

How can I cultivate mindfulness?

In 1979, Jon Kabat-Zinn developed mindfulness-based stress reduction (MBSR) by extracting key mindfulness practices from Buddhist meditation practices while leaving out the religious aspects of these traditions. In this way, he made mindfulness techniques more accessible to the Western world by creating a secular version of mindfulness. MBSR was designed to help individuals with serious medical illnesses and/or untreatable chronic pain by aiding them to systematically cultivate

mindfulness in order to improve the quality of their lives and reduce their suffering. MBSR is an eight-session group program, typically offered in weekly two- to three-hour sessions, along with an all-day retreat. The program focuses on training through guided mindfulness exercises.

MBSR has since given birth to several offspring, including mindfulness-based cognitive therapy (MBCT),⁴ intended to reduce the risk of depressive relapse. MBCT, which follows a format similar to that of MBSR, is recommended for the treatment of recurrent depression in Canada and internationally, including in the United States, the United Kingdom and Australia. Several other group mindfulness-based interventions have since been developed, including but not limited to programs to promote mindful eating awareness in order to help those with disordered eating patterns, relapse prevention training to prevent relapse of substance use disorders following rehabilitation, mental fitness training to reduce stress and trauma in military personnel, and programs to improve maternal well-being during and after pregnancy.

Other interventions include SMART in Education/Mindfulness-Based

Emotional Balance, Cool Minds™ (for adolescents), A Still Quiet Place (for children of all ages), mindfulness-based elder care, mindfulness-based art therapy for cancer patients, Mindful Leadership™, Mindful Schools, MindUP™, Mindfulness without Borders, and trauma-sensitive MBSR for women with post-traumatic stress disorder. While these various interventions differ with respect to their target populations and the problems being addressed, they all have at their core systematic training in mindfulness meditation.

Psychological treatments have also been developed based on the principles of mindfulness. These include, for example, acceptance and commitment therapy (ACT) and dialectical behaviour therapy (DBT). These interventions differ from those mentioned above in that cultivating mindfulness through guided meditations represents only a small part. These interventions also include, for example, behaviour-change and acceptance strategies in addition to mindfulness strategies to improve emotional regulation and increase psychological flexibility. Finally, Mindfulness- and Acceptance-based Group Therapy (MAGT) represents an integration of group-based mindfulness interventions and ACT for social anxiety disorder.⁵

Do mindfulness-based interventions help?

Over the past 30 years, research has shown that MBIs have proved versatile in treating a wide range of physical illnesses and psychological disorders, reducing stress and improving psychological well-being.



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If you find that you are rushing through life without really noticing what is happening in the moment, practising mindfulness may be useful for you.

For example, there is good evidence for mindfulness-based interventions in the treatment of anxiety and depression.⁶ MBIs have also been shown to be helpful for a wide range of other issues, including substance abuse, eating disorders and binge eating, insomnia, chronic pain, psoriasis, type 2 diabetes, fibromyalgia, rheumatoid arthritis, attention-deficit/hyperactivity disorder, HIV, cancer and heart disease.⁷

Mindfulness-based interventions have several other benefits in addition to their versatility. First, they have lower dropout rates than other psychological interventions, attesting to their broader acceptability. Also, reports of side effects are uncommon. For example,

in a recent review of the efficacy of MBCT in preventing depressive relapse, there was no difference in side effects reported by those using MBCT and those in the control groups.⁸ Finally, group mindfulness-based interventions are cost-effective, with MBCT, for example, requiring five facilitator hours per group participant.⁹

If you find that you are rushing through life without really noticing what is happening in the moment, or even if you would just like to improve your sense of well-being, practising mindfulness may be useful for you. If you would simply like to find out more about what mindfulness is, I hope you find what you are looking for in this comprehensive issue on mindfulness. ▾

Using Mindfulness to Overcome Anxiety

A REVIEW OF THE EVIDENCE

Justine Cooke

Stress is a common factor in the modern world, triggered, in part, by the demands of work and family life, the constant bombardment of information that we receive from social media and e-mail, and financial uncertainty.

Justine is a writer, editor and researcher with 20 years of experience writing and developing content for diverse clients, including AnxietyBC

This article was reviewed for content by Dr. Melanie Badali, a Board Member of AnxietyBC



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Many of us have begun introducing meditation or mindfulness activities into our wellness regimen to try to reduce our stress and anxiety.

Since the terms “meditation” and “mindfulness” are often used interchangeably by the general population, it’s helpful to understand their history and what they mean in a general sense. The secular practice of mindfulness was introduced partly through the work of Dr. Jon Kabat-Zinn, who launched his mindfulness-based stress reduction (MBSR) program at the University of Massachusetts Medical School in the 1970s.¹ Kabat-Zinn indicates

that mindfulness can be cultivated through formal meditation, but that formal meditation is not the only way to achieve mindfulness. He describes mindfulness in his book *Full Catastrophe Living* as “moment-to-moment awareness. It is cultivated by purposefully paying attention to things we ordinarily never give a moment’s thought to.”² Key components of practising mindfulness, according to Kabat-Zinn, are focusing attention on your breathing, noticing your environment and what is happening in your body and recognizing that your thoughts and emotions are not a part of you.

The history of meditation is ancient, pre-dating mindfulness by thousands of years. It has roots in religion—particularly Buddhism and Taoism, where the focus of meditation is on spiritual growth and transcending the emotions. In the Western world, where meditation has been adopted and adapted in much the same way that yoga was, the term refers to many practices, of which mindfulness is only one. When practitioners today refer to “mindfulness meditation,” they are usually describing the basic practice of sitting comfortably, focusing on breathing and bringing one’s attention to the present moment.

There are many other mindfulness techniques. In addition to Kabat-Zinn’s MBSR, researchers also refer to mindfulness and acceptance-based interventions (MABI) and mindfulness-based cognitive therapy (MBCT).

Mindfulness practice is an empirically supported intervention for many disorders because it reduces physical stress, such as pain, as well as mental stress. Scientific confirmation of the positive effects of this type of practice has reached critical mass only in the past 10 years. Until recently in Western society, the idea of meditation was closely linked in people’s minds to Eastern religions and practices. Now, in part because of growing scientific interest, meditation and mindfulness have moved into the mainstream. Mindfulness programs are even sprouting up in the corporate world, with Apple, Ford, Google and Target integrating them into their company wellness initiatives. Schools in the US and Canada are also experimenting with mindfulness techniques in the classroom.

The following is a quick overview of the most interesting and relevant recent research on how anxiety is affected by mindfulness practices (variously referred to as “meditation” and “mindfulness meditation” in the studies themselves).

In an extensive meta-study, researchers at Johns Hopkins sifted through almost 19,000 mindfulness meditation studies to identify those with sufficient rigour to be scientifically convincing. Only 47 of these studies met researchers’ criteria for a well-designed study. Researchers included only those studies of adult programs where meditation with a teacher was the sole foundation and made up the majority of the intervention. But researchers excluded, for example, studies where self-selection biases could exist—that is, where participants had a previous bias towards mindfulness meditation.

Researchers found that “mindfulness meditation programs,” specifically, can reduce the negative dimensions of psychological stress, including anxiety, across a broad range of clinical conditions. They concluded that over two to six months, the effects were clinically small but “comparable to what would be expected from the use of an anti-depressant in a primary care population.”³

In 2011, researchers at Harvard found that just eight weeks of MBSR by participants decreased brain cell volume in the amygdala, which is the part of the brain responsible for anxiety, fear and stress. Participants were all psychologically healthy adults seeking stress reduction who had taken no more than 10 meditation classes in their lifetime and none in the past six

months. According to the researchers, the results suggest that MBSR helps the brain to process in areas related to individual self-reference, perspectives and the regulation of emotion.⁴

It seems that MBSR may reduce our tendency to automatically and compulsively react to events in our life. MBSR, therefore, may be helpful for individuals suffering not only from generalized anxiety disorder but also social anxiety disorder (SAD). People with SAD tend to have problems with emotional regulation⁵ and often experience distorted self-views. A study comparing the benefits of MBSR to aerobic exercise in people with SAD found that meditation was associated with decreases in symptom severity and an increased ability to regulate negative self-talk.⁶

Studies have also shown that meditation re-wires the connections between the medial prefrontal cortex, the part of the brain that processes information about oneself, and the parts of the brain that control sensation and fear. Someone practising meditation is often better able to ignore whatever sensations might otherwise have caused anxiety. The neural pathways that link to those upsetting sensations are weakened.⁷

Another study⁸ conducted at Yale University offers insight into the possible neural mechanisms of meditation. Researchers found that meditation decreases activity in the default mode network (DMN), also known as the “monkey mind,” so named because it is most active when our minds swing quickly from

CONTINUED ON PAGE 35

Is Mindfulness Useful or Dangerous for Individuals with Psychosis?

Tania Lecomte, PhD, RPsych, and Alicia Spidel, MA, PhD Candidate

Mindfulness and cognitive-behavioural therapies such as acceptance and commitment therapy (ACT),¹ compassionate mind training,² and mindfulness-based cognitive therapy (MBCT)³ all share a common goal—that of helping individuals live with negative experiences or emotions by staying with those experiences or emotions instead of trying to avoid them.

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To be mindful refers to being in the present moment while being aware of what is going on in our minds, bodies and emotions. Mindfulness can be practised in many ways, such as being contemplative while taking a walk, breathing calmly during negative emotions such as sadness or anger, imagining a happy place when one is stressed out (a self-compassion technique) or meditating, to name a few.

Are mindfulness-based treatments dangerous?

For a long time, practising meditation—one of the strategies used in mindfulness-based interventions—

was considered dangerous for people with mental illness, especially individuals with psychosis (that is, people who have experienced temporary loss of contact with reality, often involving odd beliefs and hearing voices). Clinicians believed that meditation could trigger a psychotic episode by creating a mental state in which the person was no longer connected to reality and would let his or her mind take over. This belief was not entirely unfounded. In fact, unguided meditation practices can be harmful for people with a diagnosis of a psychotic disorder and have indeed

been documented as worsening the psychotic symptoms of some individuals.⁴ Yet not all mindfulness practice includes meditation, and mindfulness interventions are being recommended more commonly for people with psychosis, as can be seen by the number of publications on the subject in recent years.

What does this mean?

Although few rigorous studies to date have investigated the impact of mindfulness interventions for psychosis,⁵ the results seem to suggest that this type of treatment might be useful when it is carefully adapted to the needs of people with psychosis. Mindfulness may work by helping the individual to better cope with difficult emotions and symptoms, such as sadness (depression) and fear (anxiety), and with the high levels of stress that the individual with psychosis often experiences daily.

How mindfulness-based interventions work

Unlike cognitive-behavioural therapy for psychosis, which has shown to help diminish psychotic symptoms,⁶ mindfulness interventions appear to help people with psychosis to get out of their head and be more present in the moment. Mindfulness treatments do not aim to decrease the occurrence or severity of the symptoms of psychosis, but by helping to reduce the distress people experience, many of these treatments help indirectly to alleviate psychotic symptoms as well. It might seem less of a priority to offer a treatment that does not have a direct or strong effect on an individual's psychotic symptoms (such as hallucinations, or hearing voices, and delusions,

odd beliefs). Yet individuals with psychosis often experience difficulty regulating their emotions,⁷ which can leave them feeling overwhelmed and overstressed and vulnerable to severe symptoms of depression and anxiety, as well as drug and alcohol problems. The relative success of mindfulness-based treatments suggests that these strategies may help to improve the overall mental well-being of individuals with psychosis.

Most mindfulness treatments for psychosis aim to help the individual incorporate the following into his or her daily routine:

- Acceptance (“Okay, so I am feeling this way, but it will pass.”)
- Taking a step back (“What is going on? Why am I feeling this way?”)
- Compassion (“I have to stop being so hard on myself; I can be nicer to myself.”)
- Mindfulness (“I am aware in the here and now.”)

Important adaptations to mindfulness practice

Over the past several years, mindfulness-based treatments have been adapted for people with psychosis in order to improve the impact of the techniques for this group of individuals and to avoid harm. For example, mindfulness meditation for people with psychosis needs to be focused on real-life awareness and physical cues (for example, a focus on breathing, or a focus on muscle relaxation). Meditation practices that focus on more esoteric philosophies (cosmic energy, the third eye, the body's chakras and so on) may encourage a negative response in individuals with psychosis. Mindfulness

meditation practices should also be brief and clinician-guided. Almost all reported cases of meditation-induced psychosis took place during meditation retreats where people meditated for several hours each day.⁴

It is also important to remember that mindfulness practice need not involve meditation. For instance, in the course of our research, a young man with psychosis who reported practising mindfulness primarily while he walked (by focusing on his senses and his environment instead of his thoughts) also reported being able to have his first conversation with his parents in years. He explained that since he had begun practising mindfulness he was not as obsessed with his own thoughts and was more available and interested in other people.

Another thing to keep in mind when adapting mindfulness strategies is that people with psychotic disorders do not always understand the idiomatic language common to most contemporary mindfulness teaching. Some mindfulness-based treatments, for instance, use various metaphors (for example, “You are the bus driver of your life and the passengers are your thoughts and emotions”). This type of language is not always helpful to individuals with psychosis, who frequently have a concrete way of thinking and may not grasp the intended meaning.

In the context of our own studies investigating the impact of a specific mindfulness therapy for people with early psychosis who have also experienced trauma or who also

suffer from social anxiety, we have had participants understand mindful eating activities (where individuals learn to focus on their senses instead of their thoughts while eating) as a lifestyle lesson (“It is important to eat slowly”). In some cases, simple adaptations can help ensure that the individual’s mindfulness practice is personally meaningful. Participants in one of our current studies found it easier to practise when they had an audio recording of the therapist guiding them in using mindfulness strategies in practice sessions at home. We have also found that, for people with psychosis without severe social anxiety, learning mindfulness strategies in a group format is greatly appreciated and offers clear

benefits—in terms of participants being more active, less depressed and less anxious.⁸ Individuals with psychosis and a history of trauma have also been found to benefit from ACT (a specific therapy involving mindfulness) in a group format.⁹

More studies are needed to determine the clinical impact, especially the long-term effects, of mindfulness treatments for individuals with psychosis. We also need to investigate who is most likely to benefit from these treatments. This research is increasingly important as mindfulness treatments are becoming more popular, in part because they are non-invasive and based on well-accepted values (non-judgement and

compassion, for example), and in part because the treatments are brief. In fact, most mindfulness treatments for psychosis are fewer than ten sessions. Mindfulness treatments may also prove more effective when offered along with other treatments, such as cognitive-behavioural therapy, and when offered alongside a recovery treatment plan that focuses on the individual’s needs and goals in terms of physical health, mental health and vocational and social recovery. Although mindfulness treatments are not yet widely accessible, their increasing popularity will likely lead to their being offered by more clinicians in a wider variety of settings in the near future. ▽



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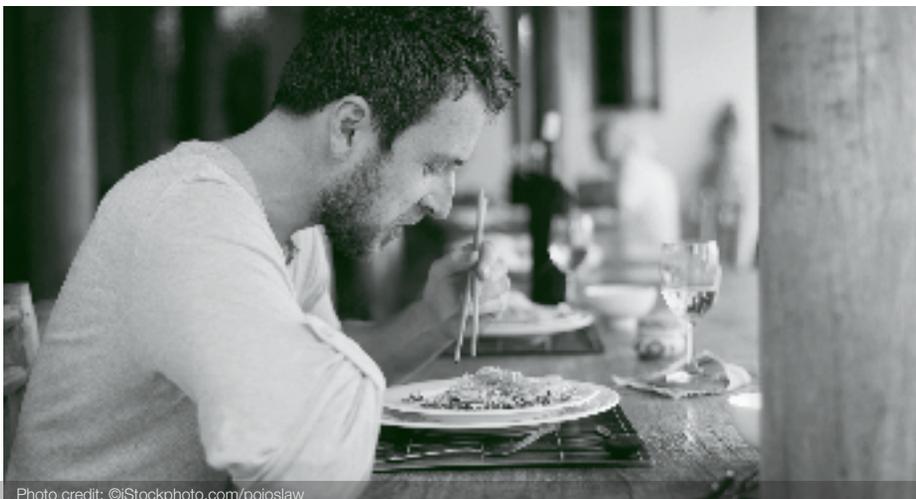
   

HIRING!

Mindfulness—Practising Here and Now

Mark Sherman, MD CM, CCFP

Mindfulness is everywhere these days—mindfulness in education, mindful parenting, mindfulness in the workplace, mindful eating, and mindfulness in medicine are but a few examples of the breadth in interest and relevance of mindfulness in our society.



Dr. Sherman is a Vancouver Island family physician and Executive Director of the BC Association for Living Mindfully (bcalm.ca), dedicated to education and research on mindfulness in daily life. He is also co-creator of the Art of Living Mindfully, a publicly funded stress management course for people with various health challenges

Photo credit: ©iStockphoto.com/pojoslaw

The muscles of mindfulness

The famous yoga teacher Patabhi Jois is widely credited with the maxim “1% theory, 99% practice.” While mindfulness and meditation remain accessible to anyone, they also require a measure of effort to develop.

The various regions of the brain, with their associated neural connections and chemistry, correspond to different areas of function, just like the muscles of the body. If we lift weights, the muscles we use will grow and become stronger. Similarly, if we use certain brain “muscles” frequently, these parts of the brain develop strength and skill.

We can observe on MRIs of the brain how the frequently used parts of the

brain increase in size. A 2007 study of mathematicians showed that the area of the brain associated with mathematics was largest in those who had studied the longest.¹ Another study of London taxi drivers showed that the area of the brain associated with visual spatial mapping and orientation increased in size the longer an individual had been driving cabs.² A 2005 study at Massachusetts General Hospital showed that people who meditate regularly have a larger prefrontal cortex—the area of the brain associated with concentration, choice and compassion.³

If we practise worry, we become skilled at worrying. If we practise anger, fear or self-judgement, then we develop these capacities as well,

consciously or unconsciously, intentionally or not. The brain does not judge one capability to be better or worse than another. Each simply serves a different function.

If we practise kindness, self-care, generosity, compassion, hope or mindfulness, then our brain becomes more adept and capable in these functions. We can then access these capabilities more easily.

Mindful choice

“Between stimulus and response there is a space. In this space is our power to choose our response. In our response lies our power and freedom.”

—Viktor Frankl

With practice, we can improve our ability to choose our responses. We begin by inviting an attitude of curiosity, non-judgement, acceptance and compassion as we meet each moment. We take a deep breath and turn our attention to what is here and now—the sensation of a cool breeze against our face, the sadness or fear we feel after an argument or the release of tension in our body when we are close to our beloved.

Even when we experience more challenging emotions, we can bring a sense of mindfulness to the event. For example, if we experience anger frequently, then this emotion may come out easily. We do not need to judge ourselves. Instead, can we mindfully explore how anger feels in the body and mind? *Where* do we feel anger? How does our speech and behaviour change?

As we drop into this moment with our awareness, our “power

to choose” becomes available to us. Autopilot, fight-or-flight reactivity, is replaced with mindful response.

In the light of present-moment awareness, we may see that our anger is really about being afraid, or perhaps about not being heard. Once we understand this, we can choose how to proceed.

Practice

The following exercises are easy to practise as part of your daily routine. Invite them into your life with curiosity, openness and commitment, and see what unfolds.

Relaxation breath

The relaxation breath, also known as yoga breathing, is an effective tool to help release tension in the body and mind and gently bring our attention to what is here and now. It is often practised by breathing in through the nose and then slowly out through the mouth; however, you can also breathe in and out through the mouth or nose only. Either way, maximize the air entering and leaving your body while keeping the breath gentle.

Begin the relaxation breath by allowing your belly to expand first, gently and fully, on the inhalation. Continue breathing in by expanding the chest until the inspiration is full. As you exhale, release the chest first and then the abdomen until the exhalation is complete.

As you breathe in, notice any tension or resistance present in the mind or body. As you breathe out, release and soften this tension in whatever way you can: drop the shoulders, soften the jaw, unfurrow the brow, release tightness in the chest, and so on.

Repeat the relaxation breath at least three to five times.

The relaxation breath can be practised anywhere, whenever you feel tension rising, or when you are feeling upset, overwhelmed or affected in a negative way by an event or interaction. It is often useful to first remove yourself from the situation that is provoking you, but the relaxation breath can also be practised in the midst of a challenge in order to settle the body and bring more mindfulness to the moment.

Three-minute breathing space

Traditionally offered in mindfulness-based cognitive therapy (MBCT), the three-minute breathing space is almost like a mini-meditation. It can be done anywhere: formally as a daily sitting practice or informally as you move through your day.

Step 1

Begin with three to five relaxation breaths as above, maximizing the air entering and leaving your body. Once you have completed these, allow your breath to take on its own rate and rhythm, and perhaps allow your eyes to gently close. Invite your attention to notice what is here and now—in the body, in the mind and in the heart. What sensations do you notice? Are there sounds present in your surroundings? Do you have strong thoughts or feelings? Are they pleasant or unpleasant? Allow whatever is here and now to be just as it is.

Step 2

Now gather your attention, noticing the movement of the breath in the body. Follow the breath along its

entire movement. If your attention moves to thoughts of future or past, or sensation or sound, simply notice this and then return to the breath. Can you notice the beginning, middle and end of each inhalation and exhalation, and the brief space between the out-breath and the in-breath? Be curious.

Step 3

Begin to broaden the attention again, allowing the breath to drift into the background and inviting a more spacious awareness to the whole body and your environment. Notice the sounds in your surroundings. Notice the touch points of your body against the floor or chair. Let there be a gentleness in your noticing. When you are ready, open your eyes.

Using mindfulness

With practice, we learn to stay here and now with ourselves and with others, whatever blessings or challenges are before us. We are wakeful, we gain the capacity to turn off the autopilot in our lives and be present, alive as each moment unfolds.

At its core, mindfulness is the practice of living fully. By inviting our attention back to this breath, this step and this moment, we see our environment with new eyes and learn to love ourselves and those around us with new awareness. ▼



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mindfulness myths and facts

As the popularity of mindfulness increases, misconceptions can arise as to what mindfulness is and what it might offer. Some of the most common myths about mindfulness are addressed below.

Myth: People who practise mindfulness and meditation are running away from reality.

Fact: Mindfulness is about acknowledging and accepting what is happening in the present moment with compassion and gentleness.

Myth: Being mindful and meditating are about cultivating a trance-like state or having a blank mind.

Fact: Mindfulness is actually a very wakeful and alert state of consciousness. Meditation is a formal practice of mindfulness (focusing on the breath, sounds, an object, etc.).

Myth: Meditation is about relaxing the body and the mind.

Fact: Meditation is not specifically about relaxation (although relaxation may be a result of the formal practice of meditation).

Myth: You must be spiritual or practice an Eastern religion (like Buddhism) to use mindfulness or meditation.

Fact: Mindfulness and meditation are tools one can use to be more present and wakeful in life. While associated with some spiritual traditions, mindfulness and meditation can be used by anyone.

Myth: Mindfulness is difficult to achieve and beyond my capabilities.

Fact: Mindfulness is not something you find in a book, a course, or a podcast (although these may inspire an interest in mindfulness). Mindfulness is as intimate and accessible as breathing. At its essence, mindfulness is about practising *here* and *now*.

Allowing Life In MINDFULNESS AS AN ALTERNATIVE TO ALCOHOL

Maureen, BA, MPA

I've been a worrier and prone to anxiety for as long as I can remember. Both my late mother and my sister have been diagnosed with several anxiety disorders, so I expect there's both nature and nurture at play.

Maureen lives in Victoria and works in the area of employee health promotion, including involvement in mindfulness meditation programming in the workplace. Last year she completed a diploma at McMaster University in addiction education



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By most definitions, I'm also a highly sensitive person: I have strong internal reactions to a range of situations, the emotions of others and even environmental stimuli such as noises and textures.

Despite some family adversity in my late teens and early twenties—my mother's depression and agoraphobia and my father's cancer diagnosis (all of which were ultimately treated)—I held fast to the belief that my family was somehow protected. Perhaps this

firm, almost magical belief stemmed from the fact that our family health problems *had* been so successfully treated. My mother's terminal lung cancer diagnosis in 1992 changed all that. She was 59, otherwise in good physical health, and a non-smoker. My family and I were blindsided and devastated. I had no tools to deal with my overwhelming anxiety and anticipatory grief, and I clearly remember thinking, *The only way I can get through this is with alcohol*. Up to that point I'd been a fairly light social

drinker. I could generally take it or leave it. But in an instant, I became a daily, high-risk drinker—having many drinks each evening, often alone.

I drank through my mother's dying and death and then just kept going. What had started as a short-term strategy for dealing with acute grief and loss gained momentum and became a habit that cocooned me and reliably took the edge off my persistent day-to-day worries. I've always loved the title of Caroline Knapp's memoir about her own struggles with alcohol, *Drinking: A love story*,¹ as it so eloquently captures the dependency, longing and overriding focus that alcohol can command. Like Knapp, I was a high-functioning drinker: I never missed work, I graduated top of my graduate class and I always fulfilled my basic social responsibilities.

Then, in 2007, after 15 years of drinking to numb myself and cope with loss and anxiety, I quit drinking as suddenly as I'd started. The decision came in a moment of clarity, when I realized my alcohol abuse was not sustainable. I was becoming increasingly anxious about my health as well as my ability to be a reliable caregiver for my father. Upon reflection, I see that moment of clarity was several years in the making, during which I weighed the pros and cons of change, unsuccessfully tried out moderation and read about the possibilities of recovery.

Putting down the bottle, though, was only the first step on a much longer road to recovery. While I'd stopped drinking, my worry and anxiety

Alcohol had provided me with a protective second skin. Without it, I often felt raw and in need of a soothing balm.

remained. They manifested in various life-impacting symptoms, including insomnia, persistent tension, hypervigilance (being constantly on the lookout for the next threat or stress) and over-control. I remember standing in the shower in early January 2008, having just survived my first alcohol-free Christmas season. I was exhausted from navigating a host of holiday stressors—including the inevitable family mini-dramas—without the protective layer of alcohol. I was proud of myself for making it through, but I knew I needed more tools for the long haul.

And so began the search for those tools. I attended mutual aid group sessions, signed up for addiction education courses, read about calming the anxious mind and dabbled in self-help-delivered cognitive-behavioural therapy. These efforts, together with the simple experience of walking through life one day at a time without alcohol, strengthened my recovery muscles. Yet I still struggled with an inability to fully settle, as well as an uncomfortable sense of being too exposed to life's elements. Alcohol had provided me with a protective second skin. Without it, I often felt raw and in need of a soothing balm.

In 2012, I kept bumping into the concept of mindfulness and its related skills. I wanted to learn more, so I

attended an introductory mindfulness meditation course at work. I was struck by how absent I was in my own life. This felt particularly ironic given that I'd assumed sobriety would automatically make me more present. Soon after the course was finished, my father was diagnosed with end-stage congestive heart and kidney failure and died after three very stressful months of struggle. During this time, I proactively sought out grief counselling and remained sober. However, in the aftermath, as I took on multiple executor duties and coped with an unexpected medical issue of my own, my tension, agitation and anxiety escalated.

Several months after my father died, I had the opportunity to register for an eight-week mindfulness-based stress reduction (MBSR) program. I felt the time was right to explore the concept of mindfulness further. Like my experience in the earlier introductory workshop, practising meditation made me realize how often my mind was elsewhere—usually in the future—and how unaware I was of my own body and what it was sensing. At the same time, I became more aware of how uncomfortable I was sitting with certain thoughts and feelings. I am well-practised in

CONTINUED ON PAGE 35

Moulding Mindfulness

HOW TO MAXIMIZE THE PRACTICE OF MINDFULNESS FOR BIPOLAR DISORDER WELLNESS

Jeanne-Michelle Lavigne

I was first introduced to the concept and practice of mindfulness when I was in high school, not as part of the school curriculum but as a supplement to my treatment for bipolar disorder and anxiety.

Jeanne-Michelle is 24 years old and pursuing a BA in psychology from the University of Victoria. She is a co-researcher with the Bipolar Youth Action Project and a passionate advocate for mental health initiatives and living with mental illness. She has a strong interest in supporting vulnerable populations through volunteerism and community involvement



Jeanne-Michelle Lavigne

Throughout high school, I experienced rapid mood cycling and constant racing thoughts, which made it difficult to concentrate and be fully present in school and other areas of my life. My school counsellors and my psychologists suggested mindfulness in the hope that it would help to prevent unmanageable mood states.

At the beginning of counselling sessions, the counsellor would lead me in creating a soothing mental image that enabled me to relax and open my mind to learning mindfulness techniques. I enjoyed these brief, quiet vacations from the loud and unforgiving experiences I was enduring.

However, after years of practising various mindfulness strategies, such as body scans, mindful breathing and gratitude exercises, I began to feel as if the process was contrived and not very helpful. I felt pressure to *look as if* mindfulness practice was working, even when I felt it wasn't. For example, often I was too depressed or too manic to commit to therapy but found myself *acting* like the mindfulness strategies were helping me in order to please my therapist. I frequently felt put on the spot, too intimidated to admit that the practice wasn't working for me. It didn't help that during my counselling sessions the therapist would often maintain direct eye contact, which made me feel emotionally vulnerable, awkward and nervous.

I was never able to successfully replicate and practise the exercises at home on my own. This increased my anxiety and made the experience even more intolerable. By the end of high school, I had come to see mindfulness practice as a tedious, somewhat patronizing process—one that I didn't have much choice about. In hindsight, I see that the problem was the manner in which mindfulness was introduced to me, not the practice of mindfulness itself.

It wasn't until I took responsibility for my own wellness strategies in university that I realized I could make mindfulness practice something that could work for me. As mindfulness is often a self-directed method of therapy, I couldn't rely on someone else to increase my understanding. I was the only person who could take control of my learning.

For many people, mindfulness can seem like an overwhelming process. But as a process, mindfulness practice takes dedication, time and effort. The benefits of mindfulness practice aren't immediate, and mindfulness practice can be difficult to maintain, especially when negative symptoms like racing thoughts, restlessness and suicidal ideation are relentless and actively affect your cognitive and emotional state.

For me, one of the most challenging aspects of practising mindfulness for bipolar disorder is the focus on being totally aware of one's mental state. I had begun learning mindfulness techniques pre-emptively, in order to help alleviate the intensity of my bipolar episodes, but at times I was still experiencing challenging mental states.

If I was in the middle of one of these episodes, or experiencing any number of negative, bipolar symptoms (such as irritability or agitation), the last thing I wanted to do was be more aware of the mental state I was trying to ignore. At first, the concept of practising mindfulness in this context was absolutely frightening.

Thankfully, through online resources and personal trial and error, I discovered several different mindfulness strategies that work well for me, given my distinct needs and limitations (in addition to BPD, I struggle with anxiety, learning disabilities and various family issues that affect how consistent, motivated and mentally present I can be at any given time). I realized that focusing on something external was the best way for me to obtain the benefits of mindfulness without becoming overwhelmed by my own thoughts.

I find being alone in nature to be incredibly enjoyable, whether I am doing something active or simply sitting on a beach listening to the sound of waves on the shore. It is much easier to practise mindfulness techniques within this sort of environment. I focus on external things—the beauty of a particular area, even the details of a single tree or flower—instead of on internal cues. In this type of mindfulness practice, the goal is to focus on the details of something external very intently, like the curves of a flower petal or the sound of crashing waves, without allowing my thoughts to wander.

In the beginning, I struggled to stay calm and maintain my focus. Reminding myself that mindfulness is

a difficult, ongoing process has made it much easier. I allowed myself to learn the process organically, without judging myself or my abilities. I made my mindfulness practice the time I set aside in my life to engage in self-care and become more in tune with the beauty of the outside world.

My advice for someone pursuing mindfulness practice as part of a wellness routine is to choose a mindfulness strategy that is simple, convenient and personally meaningful: find something that speaks to you. This will make it easier to maintain the practice. It will make your experience more enjoyable over the long term, and the techniques will be easier to master.

For instance, you could begin your mindfulness practice by exploring the mindfulness meditation videos on YouTube, which are very watchable. I often access the guided meditations or nature sound videos before an exam or to help me fall asleep. Another mindfulness strategy is to focus your awareness on very basic daily processes such as breathing and eating. This is a great way to become acquainted with the practice of mindfulness: it's free, convenient and always accessible.

The most important thing to remember is that there's no perfect, right way to be mindful. If we get caught up in the idea of practising mindfulness perfectly, this inhibits our ability to focus on the present moment. The true beauty of mindfulness is that it creates a space in your mind that is free of judgement and criticism. With practice, this space can become a defence against negative

or harmful thoughts and challenging mood states.

It is also important to remember that there are several limitations to practising mindfulness. First, despite the current hype around mindfulness, it is not a cure-all therapy. Although there are many positive benefits of mindfulness as a stand-alone practice, it is often supplemented with medication and other therapies (such as cognitive-behavioural therapy, or CBT). Second, approaching mindfulness with expectations that are too high may result in disappointment and a resulting reluctance to continue, especially when one doesn't see immediate benefits. In some cases, this kind of experience can even perpetuate anxious thoughts and feelings of inadequacy (along the lines of "I must be doing this wrong" or "I'm not good enough").

It is not necessary to have *all* the information about mindfulness before you start, but it's important to consider the pros and cons of incorporating mindfulness practices into your life. You may need to determine whether coming to terms with negative thoughts and emotions through increased awareness is a safe and beneficial process for you. Mindfulness may not work for everyone. However, by exploring different mindfulness options and trying new mindfulness practices, you can mould mindfulness to your lifestyle. Self-directed therapies like mindfulness can help you build control over your own wellness strategies and help alleviate the negative symptoms that create barriers to your well-being. ▽

the bipolar youth action project

Wellness and mindfulness strategies for people with bipolar disorder

The Bipolar Youth Action Project was a research collaboration between youth co-researchers with bipolar disorder, the Collaborative Research Team to study psychosocial issues in Bipolar Disorder (CREST.BD) and the Bipolar Disorder Association of British Columbia. As a peer researcher with the project (which was funded by the Victoria Foundation), I helped to uncover wellness strategies among young people with bipolar disorder and gain insight into their daily self-care. Together, we shed light on numerous strategies and supports, including the mindfulness practices youth were engaging in for general and in-the-moment mood regulation. Among the many variations of mindfulness practice, meditation and nature appreciation were said to be helpful, as were yoga and other grounding exercises. Participants also commented on the use of CBT techniques in identifying and easing irrational thoughts.

Many participants recognized the capacity of mindfulness strategies to shift their state of mind toward a more positive outlook and to increase their awareness of their inner thought processes. In turn, this allowed them to better recognize depressive and manic mood states and to develop effective in-the-moment coping strategies.

After two years of collaboration, the Bipolar Youth Action Project developed a knowledge database of wellness strategies for youth living with bipolar disorder. The strategies included a wide range of biopsychosocial aspects, from mindfulness practices to diet and exercise and social supports. This knowledge can be used to better inform young people and their service providers about mental health treatment options.

You can find the Bipolar Youth Action Project's video on mindfulness strategies at www.crestbd.ca/2016/03/29/bipolar-youth-action-project-mindfulness-video/

related resources



For more information on CREST.BD, visit www.crestbd.ca.

The Bipolar Disorder Society of British Columbia website is bipolarsociety.ca.

For more information on wellness and bipolar disorder, visit the Bipolar Wellness Centre website, at www.bdwellness.com.

Another great resource is the Bipolar Babes Project at www.bipolarbabes.com.

In 2017, CREST.BD will be launching an international study of new psychological interventions for bipolar disorder, including mindfulness and psychoeducation. You can find out more about this study at www.crestbd.ca/research/research-areas/psychosocial-interventions.

Getting Rid of the Hamster

A CLINICIAN'S JOURNEY LEARNING MINDFULNESS

Susan,* MA, RPsych

When we are anxious, it can feel as if we have a hamster running on a wheel in our brain. Our thoughts go round and round and the worries are never-ending.



Susan is from South Africa and has been in Canada for 13 years. She has 23 years of experience as a Psychologist and works in rural British Columbia, where there are few resources. She supports clients with a wide variety of problems; training in mindfulness was a valuable addition to her toolkit

**pseudonym*

We cannot seem to find an answer to our problems or to calm our disordered mind. We feel overwhelmed by daily chores, work, school—even life itself.

As if that weren't enough, the new therapy skills that our counsellor gives us to practise at home just do not seem to make sense. Why would the person who is supposed to help us add even more to our to-do list?

But the fact that many of my clients feel just like this—as if they have an over-zealous hamster in their brain and no time or energy to order their

thoughts—may be the reason they find mindfulness practice so helpful. It is not difficult to do, it does not feel like homework, and practising mindfulness can be done anywhere and at any time it is needed.

In 2009, I was sent by my employer to Vancouver for training in dialectic behaviour therapy (DBT) for borderline personality disorder (BPD). I was nominated to attend the course at the last minute and I did not have a chance to do the required reading before the five-day training began. So I had no opportunity to prepare myself for what was to come,

and the content of the course took me completely by surprise.

I grew up in a very religious (primarily Christian) country. Going to church on Sundays was the norm in my community. When I moved to Canada, it came as a shock to realize that, in Canada, freedom of religion means that you also have the choice to not attend church on Sunday—the choice, for example, to spend the day on the lake fishing instead. In fact, rather than being judged as sinful, such a choice was often seen as praiseworthy because you were choosing to spend your Sunday in a peaceful, natural environment.

But in 2009, I was still getting used to this Canadian perspective. Imagine my shock when I arrived at the DBT training centre in Vancouver and realized that we were expected to learn meditation techniques—what I then considered to be religious Eastern practices—and then to teach these techniques to our clients! It took me a bit of time to see that mindfulness practice, while similar in some aspects to Eastern meditation, is different in very particular ways.

What is mindfulness? Marsha Linehan writes that “mindfulness skills are psychological and behavioral versions of meditation practices from Eastern spiritual training ... drawn from the practice of Zen, but the skills are compatible with most Western contemplative and Eastern meditation practices.”¹ Although the training program was focused on techniques to use with clients with BPD, everyone in the training class realized that the skills could be useful for all our clients. And unlike some types of

meditation, mindfulness practice does not need to take hours.

Yet even though I could understand the theory of mindfulness and could see the applicability of the techniques we learned in the training sessions, it took time and a lot of practice on my part to really appreciate how mindfulness could benefit not only my clients but also me.

Luckily, we had several monthly follow-up DBT team meetings via conference call, and every meeting started with a mindfulness exercise. Practising mindfulness with my colleagues on the phone helped me to understand how it works and to improve my skills. We took turns leading the session every month, and although I had to use the manual in the beginning as a guide, I was eventually able to lead the exercise without a script. This also taught me that one is never too old to learn new skills, and one is never so educated that one cannot learn to accept and appreciate new values.

In my line of work, when a client is depressed or anxious, the go-to for many counsellors and psychologists is often cognitive-behavioural therapy (CBT). In CBT, clients learn how to challenge their negative thinking and to change negative feelings and negative behaviours in order to feel less depressed or anxious. Cognitive-behavioural therapy asks clients to do something positive and active to help themselves feel better.

In mindfulness practice, on the other hand, clients are asked simply to expand their awareness of the present, to really live or be “in the moment.”

Mindfulness does not make worry or anxious thoughts go away, but it enables the individual to recognize worry and anxiety without analyzing or engaging in them. One of the key skills in mindfulness practice is being able to recognize thoughts as they enter the mind and then let them go without examining them.

Often, it is helpful to think of a visual metaphor to help practise this skill. For example, if a hamster on a wheel is representative of the mind re-cycling anxious thoughts, then clouds moving across a clear sky or water running over the pebbles in a creek bed can act as a visual metaphor for thoughts that enter our awareness but move on without engaging our mind. I often tell clients to choose whatever visual metaphor works best for them. I then encourage clients to practise their mindfulness exercises using this visual metaphor for a few minutes each day.

In the beginning of my own mindfulness practice, I found it hard to sit still and let my thoughts go. But as I practised the skills with my DBT group, I began to incorporate them into my daily routine.

Recently, my life has taken a series of unexpected turns, and I find myself facing challenges I hadn't anticipated. I am the primary caregiver for my ailing partner, and my extended family is not able to join me in Canada. I have an isolated, very stressful job, with no close colleagues with whom to discuss my clients' serious mental health issues. But I

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Mental Health & Substance Use Alcohol and Drug Clinician

Merritt ~ Kamloops ~ Kelowna ~ Penticton ~ Vernon ~ Nelson ~ Cranbrook

An exciting new initiative is currently underway at Interior Health (IH) in the Southern Interior of British Columbia. 73 substance use treatment beds are on their way to communities throughout IH. The new beds are part of IH's plan to meet the Province's 500 Substance Use Spaces Initiative and will support and enhance existing substance use treatment services across IH.

We are hiring Master's degree prepared Alcohol and Drug Clinicians with at least two years of mental health and substance use experience to join our team as we expand substance use treatment services across IH.

The Alcohol and Drug Clinician ensures that persons experiencing substance use problems/disorders or concurrent substance use and mental health problems have access to timely, responsive, evidence-based treatment and clinical supports across the continuum of available services.

Qualifications:

- Master's degree from an accredited educational institution in an Allied Health, Behavioural, or Social Science field relevant to the position.
- Two years' recent related experience in an alcohol and drug treatment environment or an equivalent combination of education, training and experience.
- Current valid BC driver's license.

We Offer:

- Ability to play a strong role in developing the position
- Extended health and dental benefits package
- Comprehensive pension plan
- Multidisciplinary team environment
- Generous employer paid vacation entitlement
- Relocation allowance for qualified positions



Interior Health
Every person matters.

Apply at Jobs.InteriorHealth.ca
to Competition #896255

careers@interiorhealth.ca



Waking Up to Clarity, Wisdom and Gratitude

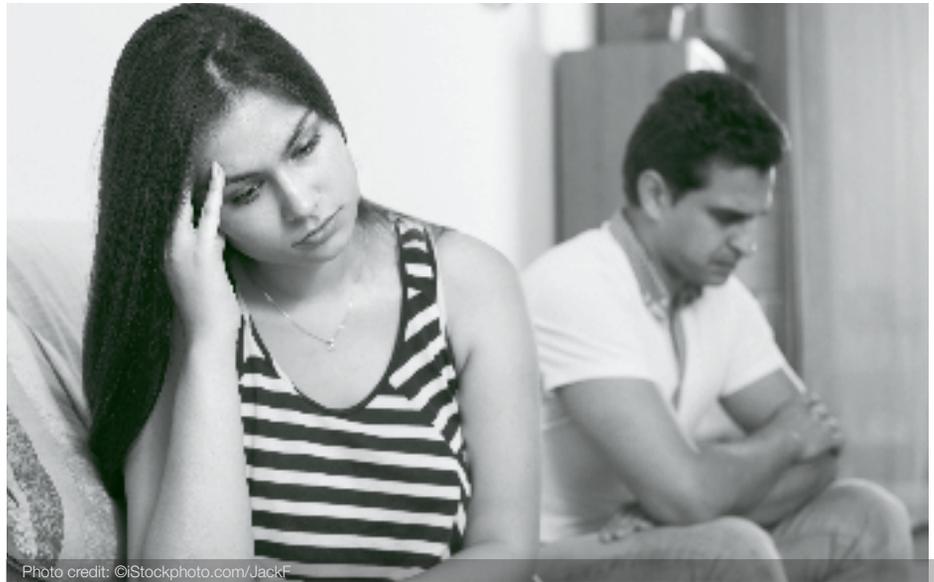
HOW MINDFULNESS PRACTICE SAVED ME FROM MYSELF

Yeshe,* RN (retired)

I was raised to be a “nice girl” and had a naturally open, compassionate heart. Both of these aspects of my personality made nursing—particularly nursing children with cancer—a good career choice.

Yeshe, a retired pediatric nurse and practising Buddhist, uses her nursing background and experience with mental health to support families in the mental health system. She knows the impact meditation can have and advocates mindfulness practice in her work, aware that helping others is the best cure for our own suffering

**pseudonym (Yeshe is a Tibetan term meaning wisdom)*



But the same two traits also made me vulnerable to confusion and delusion about the true nature of compassion.

I was married for years to a man who was emotionally, verbally and financially abusive. When he was diagnosed with depression, I attributed his abusive behaviours to his mental illness. I was critical of myself for not being compassionate enough. I tried to support him—as he was unable to work and went on disability leave, began antidepressants and underwent many other medical treatments—but things just got worse. His rage was a coping mechanism; perhaps it made him feel alive and energized.

His rage became so great that I was afraid to come home after work. At home I felt like I was walking on egg shells. Living in this situation, my son and I both struggled with anxiety and complex PTSD. In his early twenties, my son moved across the country to the west coast in order to escape the family drama. I missed him terribly, but I was glad he was not in the quagmire.

One day at work, a trivial matter resulted in my complete mental and emotional meltdown. At the time, I blamed my collapse on workplace harassment and other work stresses. In hindsight, I realize that I was avoiding certain truths about my

personal life. It was the cumulative stress of my home life that was the real problem.

Today, well healed and with the wisdom of time, I can look back and view my lack of insight not as a failing but as a blessing. It started me on my path to recovery, which began with my taking long-term disability leave from work, beginning medication and seeking out a counsellor. This gave me the stability and confidence to take on the task of looking within. I realized that my husband had only ever wanted a pill to fix his problems. He blamed others for his unhappiness. Once antidepressant medication and other medical interventions were offered, he showed no interest in trying any deeper, more personal healing. He seemed incapable of doing any work to change his thought patterns. I began to suspect that this was the missing link—that this was why he continued to suffer.

I've always been a spiritual person. My work, where I was surrounded with children and families who were experiencing death and dying, really was intimate, spiritual work. I saw how important spirituality was in coping with the most difficult experiences of life. I knew that to truly, permanently recover I needed spiritual guidance.

I started reading and came across a book published by Shambhala Publications: Pema Chödrön's *When Things Fall Apart*. Chödrön writes, "[W]hat we habitually regard as obstacles are not really our enemies, but rather our friends ... Whether we experience what happens to

The idea is to watch the thoughts and give them some space before you act on them. Eventually you begin to respond from a place of choice.

us as obstacle and enemy or as teacher and friend depends entirely on our perception of reality. It depends on our relationship with ourselves."¹ These words led me to a local Shambhala Centre, where I took many of the centre's programs on meditation and mind training. From then on, no matter what was happening at home, I made a point of going to the centre three times a week to meditate and learn. I knew intuitively that I had to transform my negative experiences into positive energy—I had to do a bit of spiritual alchemy, let's say.

What I learned about mindfulness meditation has become invaluable to me. For example, I learned that meditators don't empty their mind of thoughts. The idea is to watch the thoughts and give them some space before you act on them. Eventually you begin to respond from a place of choice instead of simply reacting to thoughts or emotions.

After a particularly difficult week at home, I had a moment of profound clarity. That week, my husband had screamed for 13 hours in one day—while I cried under the covers. Later, despite his protests, I went to the meditation centre. There we had a teaching on the difference between "idiot compassion,"² the desire to

avoid conflict, and true compassion, the desire to free others from suffering. I really meditated on this. I went deep within. It became clear to me that allowing him to abuse me was actually doing him more harm than good. My desire to help him was hurting both of us.

When I went home that evening and my husband started to rage again, I woke up. I realized that the time to leave was right then and there, and I did so, without any plan at all. I packed the biggest suitcase I could and walked out the door.

Financially, I lost everything. I was still on long-term disability leave, I was paying rent, and I was paying the mortgage on the house that my husband was now living in alone. I had to go to a food bank because I didn't have enough money for groceries. Eventually I filed for bankruptcy. I walked into the bank in tears and said, "I can't afford the mortgage on my home anymore. Here are the keys." I don't think the bank staff knew what to do with me. These experiences were humiliating, but they also opened my eyes to the challenges faced by others every day. Nowadays, I like to say that I lost everything, but in losing it, I found myself—my genuine self. That is what mindfulness practice did for me.

Mindfulness training taught me that when we recognize that we are angry, we are able to transform that anger into wisdom. We need to give our anger space, to look deeply at it and then choose our actions carefully. Acting out of anger and not wisdom is poisonous.

Mindfulness practice gave me the ability to let go of my anger at my husband. One of the ways I did this was with a daily mindful gratitude practice. Instead of feeling anger about a past event, I actively assess what I am grateful for *right now*. For example, I'm grateful that I had the wisdom to get out of a bad marriage. I'm grateful that I have a son. I'm grateful that my husband showed me by example what happens when we don't do the work of personal healing.

I worked hard to not be drawn into typically human "woe is me" thoughts. That was empowering. I accepted responsibility for my role in our life together and I decided to be grateful for what I had learned, particularly for the fact that it was his illness and actions that led me to mindfulness practice in the first place.

As I continued my mindfulness practice, I began to make other changes as well. Though I loved pediatric nursing, I realized that going back to my old work environment would not be good for my health. I made the difficult decision to retire from nursing and move to the west coast to be closer to my son and to make a fresh start.

Sometimes I still get triggered (for example, conflict still causes me anxiety), but it happens less and less often. I can always return to the present by focusing on my breath. I can take a walk and feel my feet touch the ground with each step, listen to the sounds in my environment, and see the beauty that surrounds me. The more I practise being right here, right now, the simpler it becomes.

But being mindful does require practice. Several months ago, I realized I was not coping as well as I had been. Overall, life had become less stressful, so I wasn't practising regularly. When a stressor came up, I became increasingly anxious, focusing on what I call my woodpecker thoughts, which hammer endlessly

at my brain when I'm worried and not living in the present. Now I make a point of starting my day with my meditation practice. It makes a remarkable difference to my state of mind, providing me with clarity and a sense of calm.

Another great benefit of mindfulness is that I can set a good example for others, including my son. Now, if I am stressed, he will say to me, "Go meditate on that, Mom. You will figure out what is best to do." He has started adding mindfulness practice to his own life, and has begun talking about his anxieties so that he doesn't take them home to his young family.

As I travel on my life journey, I hope to be a beacon of hope to those who struggle with anxiety, grief, anger, depression, abuse or any other challenges that humans regularly face. We may not be able to change our circumstances, but we *can* change our behaviour: we can respond rather than react to difficulties. This will make our lives more manageable even in very stressful times, and it will help us gain the wisdom and clarity to deal with the struggles of life. ▽

CONTINUED FROM PAGE 22

cannot bring these stresses home, because my time at home needs to be focused on providing care where it is needed.

Ironically, mindfulness—a practice that at first seemed so foreign to me, so far removed from my personal experience—has become my life raft. I use mindfulness techniques to centre myself while I am biking

home after a busy, stressful day in the office, or when I am travelling from one appointment to the next. Mindfulness enables me to remain calm, to be focused on the present and to set aside sadness or anxiety about the past and the future. Most important, mindfulness enables me to be present, to live each moment with complete awareness and acceptance. ▽

related resources

The following websites are helpful mindfulness resources:

dbtselfhelp.com/html/instant_mindfulness.html

www.pocketmindfulness.com/just-1-minute-could-save-your-sanity

“Get Your Motor Running, Head Out on the Highway”¹

A MINDFULNESS JOURNEY

Alexandra Hillman

When I was 33 years old, I lost my job. I didn’t see it coming and I was devastated. I struggled with feelings of loss and abandonment. After six months of running on empty, I crashed.



Alexandra is looking for adventure and whatever comes her way. She is a bipolar 2, borderline-personality research junkie. She thanks the Mood Disorders Association of BC for its support. She hates talking about herself in the third person but will do so for more writing gigs. She can be contacted at ficklexcanada@me.com

Alexandra Hillman

I was admitted to the hospital, where I was diagnosed with bipolar disorder 2 and borderline personality disorder.

After I was discharged, I became a hermit. I had never been a hermit before. I was the life of the party, the glue that held the family together, the friend who always returned a call or text, the little engine that could. But that changed after I left the hospital. I started to purposely cut myself, I stayed in bed for 18 hours each day, and I was bombarded with suicidal thoughts. The doctor who discharged

me prescribed a course of medication and recommended talk therapy. But I was frustrated that the medication wasn’t working fast enough. My thoughts continued to race and my emotions were all over the place. I was desperate to find something that would help—anything that would calm my mind and, well, fix me.

When I was booking a follow-up appointment with my psychiatrist, I stumbled upon a poster for a course on mindfulness-based cognitive therapy, offered by the Mood

Disorders Association of BC. I asked my psychiatrist if it might help, even simply as an addition to my daily pill-popping regime. He thought the course could alleviate some of my rushing thoughts, help me learn how to categorize these thoughts as simply thoughts and then move past them.

I was skeptical. To me it just sounded like a bunch of bulls**t meditation—something I have never been able to do because I have never been calm. But I was seeking a support group: I wanted to find someone—anyone—like me, who wasn't a member of some online depression forum. I was also trying to build a routine, to get myself out from under the covers of my bed. I decided I had nothing to lose.

Upon entering the classroom, I saw that every other participant looked as skeptical as I felt. I also saw expressions of sadness, anxiety, pain—feelings I recognized. When the instructor had us begin meditating, I heard myself breathing with the same hurried breaths as everyone around me—I instinctively felt a sense of kinship with the other class members.

Within minutes, my preconceived ideas about the nature of mindfulness began to change. Mindfulness is not just meditating, it isn't religious, and it doesn't have to include yoga. Mindfulness enables us to recognize our own thoughts and feelings; it helps us to avoid getting stuck on autopilot, always having the same responses to events that typically trigger certain behaviours.

The word "autopilot" really spoke to me. One of the fears I had about my



Alexandra Hillman

Mindfulness won't diminish the pain, but it gives us the tools to decrease our suffering.

new medication was that it would turn me into a self-driving car—never getting into an accident, never getting lost. I had been feeling detached from reality, often to the point where I felt I was living in a dream. On one hand, the thought of living in a dream world was comforting; on the other hand, I was worried that by taking the medication I would lose something of myself.

After the first class, after we had breathed into each muscle and into each limb, I felt calm, like I'd just taken a "happy pill." But I didn't feel numb. Instead, I felt at ease.

How did that happen? How did simply breathing into my body

alleviate the feeling of a seatbelt restraint collapsing my lungs?

With the first guided meditation, I was able to tune in to my body with just my breath, rather than obsessing about my emotional and physical roadblocks. I entered a state of awareness—something I'd never experienced before. I was shocked I could do it—just by learning about the practice, then following a guided meditation.

Our homework after that first class was to bring that sense of awareness to routine activities: walking the dog, unloading the dishwasher, doing a load of laundry, eating a snack. All of these activities can be done

mindfully—focusing completely on the task at hand. To do that, we must become aware of where our attention lies and then refocus on the actions we are performing. Let go of the distracting thoughts and focus our awareness on the present moment.

I was amazed. By practising mindfulness every night as the course instructor suggested, I began to wake up—to enjoy the simple life experiences I had previously thought were cumbersome. I began to walk my dogs mindfully. I began to enjoy food in a new way, and tending my garden. I felt I was refuelling myself and living more in the present moment.

Over the next few weeks of the course, I learned to appreciate sounds and sights all over again, as if they were new to me. I was no longer driving through life automatically. I was breathing into my body and exhaling out into the world. I let go of judgement, expectations. It was therapeutic: exactly what I needed to begin revving up my engine.

The best part of the course was that I wasn't learning mindfulness techniques on my own. I was a member of a small group, each one of us facing our own challenges. Some were able to grasp the meditation portion of the first few weeks and build on that; some got caught in their internal traffic; others kept breaking down. But we were in it together, driving towards something bigger than our illness.

Even when we practise mindfulness, there are times when we become stuck, when it feels like we've

crashed, and pain is unavoidable. Mindfulness won't diminish the pain, but it gives us the tools to decrease our suffering. By developing a certain amount of flexibility, mindfully choosing where to place our attention and breath, we can experience pain without getting caught up in additional suffering, without becoming imprisoned in its wreckage. When we drive a car, we watch the traffic, read the billboard signs, notice the hitchhiker on the side of the road—but these things do not (or should not!) distract us from the task of driving. In the same way, painful life events should not distract us from practising mindfulness.

Having the support of like-minded people helps immensely, especially when they share experiences of their own that trigger uncomfortable or unpleasant feelings in you. This gives you an opportunity to practise mindfulness techniques within a group setting, and it can enable you to recognize triggers that you might not have recognized if you were on your own. When you recognize those feelings, thoughts and emotions, try to become aware of any physical discomfort. We can send our awareness to any part of our body by

breathing into it on the in-breath and breathing out from it on the out-breath.

I learned from the course that I could practise mindfulness whenever I like, just by tuning in to my breath. I no longer need guided mindfulness meditations. I can do them on my own, at any time. I can sip my coffee mindfully and enjoy it again. My taste buds are back. My scenery is full of colour. What were once roadblocks for me have turned into speed bumps—and sometimes there aren't any speed bumps at all and I'm just looking down an open road.

Three months after the course, my doctors said my mood disorder had taken a back seat. I no longer have suicidal thoughts. My brain has been re-wired to let those thoughts go. When thoughts of self-harm come, I breathe them out. Or, I sit with them: let them come—then wave them goodbye.

If you are preoccupied with your own thoughts and can't seem to let them go, I recommend taking this course or one like it. It won't fix you, but it will give you the tools you need to get you up and running again. ▽

related resource



Visit www.mdabc.net to learn more about the Mood Disorders Association of BC's therapy programs, including mindfulness-based cognitive therapy.

Mindfulness as Professional Development

smartUBC™

Karen Ragoonaden, PhD

smartUBC (Stress Management and Resiliency Techniques) is a mindfulness-based professional development initiative that includes courses in education, social work and nursing.

Dr. Ragoonaden is Chair of the smartUBC curriculum and certification committee. Based in Kelowna, she is committed to providing educational leadership in research, teaching, curriculum design and innovation, and to mindfulness-based initiatives in the areas of education and health. Her recent work focuses on mindful teaching and learning

For more information on smartUBC certification and curriculum, contact Karen at karen.ragoonaden@ubc.ca

For more information on smartUBC courses (smartEducation, smartNursing, smartSocial Work), contact Deena Boeck at deena.boeck@ubc.ca



Photo credit: ©iStockphoto.com/Steve Debenport

Resilience, that is, the ability to respond positively to challenges, is recognized as being crucial to success in personal and professional contexts.¹ The smartEducation curriculum, administered by smartUBC, is intended for professionals in education (teachers, principals, counsellors and so on). Following the evidence-based model of the original smartEducation curriculum, other UBC departments offer similar mindfulness-based programs for professionals. The latest extension of the smartUBC initiative, smartNursing, is currently being offered in the Faculty of Health and Social Development of UBC's Okanagan campus as part of a first-year course on relational pedagogy.

Teaching and learning self-awareness and resilience

The smartUBC programs support the development of self-care techniques, sustainable practices relating to kindness, compassion and forgiveness, in order to cultivate personal and professional resilience. The programs are non-religious and non-sectarian and are delivered by smartUBC-accredited facilitators. Attention, intention and authenticity as pathways to well-being are also core foundations of the program curricula.

By emphasizing effective mindfulness strategies, which can be used in challenging situations where strong emotions and heated discussions

emerge, the smartUBC courses aim to reduce participants' stress in their professional and personal lives by fostering a greater understanding of emotional and physiological reactions. The 20-hour course consists of eight two-hour experiential sessions (practices and interactive discussions) and one four-hour silent retreat.

One of the core components of the smartUBC initiative is the conscious cultivation of silence. Silence has many benefits for both mind and body. Silence helps to settle the emotions and thoughts that are activated within us when we engage in talking and listening. As we calm our intellectual and emotional engagement, our bodies begin to relax. In sustained silence, our senses become more acute. We are able to tune in to quieter thoughts and an expanded awareness of our self and our environment.

This sort of mindfulness, and focused mindfulness activities, are important elements of the resiliency techniques taught in the smartUBC programs. Meditation, emotional awareness, self-regulation and movement are also all integral components. Weekly sessions involve guided practices, sharing circles and mindful listening, as well as brief overviews of emotion theory and pro-social behaviour (like helping and sharing). Participants are encouraged to develop sustainable daily mindful habits with the goal to improve personal, emotional, mental and physical health. For example, breathing awareness exercises, mindful walking and mindful eating can be used in the workplace in an informal manner.

The benefits of mindfulness

Supporting the mental health of professionals is important—not only for individuals but also for the wider community. Mindfulness protocols are highly regarded as a non-invasive health intervention tool with evidence-based success. The smartUBC programs provide accessible curricula that support well-being in numerous contexts.

Recently, neuroscience has offered compelling evidence that mindfulness practices in professional contexts can have many positive outcomes. Studies show that mindfulness training develops one's concentration, attention, executive function (planning, decision-making and impulse control), emotional balance, social behaviour and compassionate action. It also promotes all aspects of well-being. The regular practice of mindfulness in the workplace has the potential to revitalize one's purpose, improve one's achievement and foster positive interpersonal communication and relationships. Research studies

focusing on the impact of the original smartEducation curriculum suggest that practising mindfulness decreases occupational stress and compassion burnout, or apathy towards one's fellow human beings.^{2,3}

In our modern, hyper-connected, hyper-paced professional contexts, where burnout, competition and anxiety abound, the smartUBC programs offer an antidote to the frenetic pace of contemporary life. By encouraging the exploration of individual pathways using guided practices, the programs help participants develop practical mindfulness techniques that can be employed in everyday personal and professional situations. In this way, the mindfulness courses equip individuals to address the challenge of being mindful and non-judgemental, and of being present in the moment. If you are interested in enrolling in a smartUBC course or in becoming a smartUBC facilitator, please visit the smartUBC website at smartubc.ca. ▾

participant responses

"This course reminded me that I can take care of myself too, and still be a hard-working, valuable and caring colleague."

"I hoped I would learn ways to incorporate mindfulness, relaxation and meditation in my workplace. I had no idea it would help me personally."

"It surpassed every expectation I could have had. I got more from this course than any course I have ever taken. It allowed me to learn about me and that, as a health care provider, is the most important learning you could ever do."

"I now approach my day with greater confidence."

"Transformational!"

Giving Mindfulness a C.H.A.N.C.E. SCHOOL PROGRAM A SUCCESSFUL ANTIDOTE TO ANXIETY FOR ALTERNATE EDUCATION STUDENTS

Justine Cooke

At C.H.A.N.C.E. Shxwetilthet Alternate School in Chilliwack, British Columbia, many of the students, who attend between Grades 7 and 9, face socio-economic and other issues that make it challenging for them to be positioned for learning.

Justine is a writer, editor and researcher with 20 years of experience writing and developing content for diverse clients, including AnxietyBC



Photo credit: ©iStockphoto.com/Pamela Moore

These include homelessness and poverty, substance abuse and other addictions, sexual exploitation, chronic health challenges such as fetal alcohol spectrum disorder and ADHD, and suicidal ideation. In the school, 73% of the student population self-identifies as First Nations.

Almost two years ago, one of the school's counsellors, Cathy Preibisch, attended a conference and heard AnxietyBC's Dr. Kristin Buhr speak about how mindfulness techniques could help with anxiety.¹ Cathy immediately knew that these techniques had the potential to

help the students at her school. The school partnered with AnxietyBC, which helped the school develop a curriculum of mindfulness activities for anxiety.

A school counsellor's perspective

Cathy shared her experiences and learning with us:

"At C.H.A.N.C.E. Shxwetilthet, there are many kids who were not attending at regular school due to their social anxiety. The anxiety arises from the hurdles and traumas they face in their lives, including bullying. It can manifest through

acting out; being in constant fight, flight or freeze mode; or just isolating themselves in their room with video games. A big part of our job is getting them to attend school and to feel comfortable enough to stay there.

“We embraced mindfulness as a staff before introducing it to students. Dr. Buhr and Stephanie Gold came out to present to our staff and do workshops on anxiety, how to manage it and how substance use can affect it. As a staff, we participated in mindful colouring, breathing exercises and a sharing circle before we introduced it to our students, so that we could experience what it’s like. Dr. Buhr and Stephanie also led five student workshops over the course of the year. They made them interesting, fun and exciting by using media and keeping it engaging.

“As a result, we have really changed the environment of the school and the shape of our day. Instead of coming in and eating breakfast and then immediately beginning schoolwork, we have a morning circle in which each youth communicates how they are feeling, on a scale from one to 10. This allows staff to identify who may need space or support. They really like the sharing circle. When students are feeling anxious, they can go to the Chill Out Room, which is painted soft blue and has a water feature. They can colour, play music or just take a break.

“The techniques the students learn are those developed by AnxietyBC through their conferences on resources for youth with anxiety. They include different types of



Photo credit: ©Stockphoto.com/Sean McBride

mindful breathing, grounding techniques, muscle tense-and-release and guided imagery, including those on the MindShift app.

“We have many success stories, including one student who had a lot of anxiety around getting needles. He was very proud to tell us that he had used mindful breathing to get through his most recent round of blood work. We have had other children practise their mindful breathing in bullying situations. One student had terrible anxiety around riding the school bus. Now, this formerly isolated child is riding the bus, participating and making connections with others. Another student recently said, “I’m feeling a lot of anxiety so I’m not going to go on the field trip—I would be more comfortable staying here.” The fact that the student was self-aware and confident in expressing and acting on their feelings is a huge step.

“A really important piece has been the involvement of parents, who are either being taught by their kids or learning the techniques on Parent Night. Recently, AnxietyBC ran a workshop, and afterwards one parent said, “Now I feel like I’m not alone,” and the room broke into spontaneous

applause. The AnxietyBC partnership has been incredibly helpful for all of us.”

A teacher’s perspective

Mike Beauchene has been a teacher at C.H.A.N.C.E. Shxwetilthet for 10 years. He shared his impressions of AnxietyBC’s pilot program for children and youth in the alternate education system:

“This is all new for me, and I couldn’t have done this without help. Our whole team decided that this approach would be the best for our students.

“I have a challenging class, with serious academic and neurological deficits. In terms of outcomes, I don’t think it’s realistic to see scores going up, but I have seen attendance rise dramatically to around 75%. Now the kids can articulate to me that they need a brain break, and then come back and be engaged. These are tools they never had before. The fact that my class is set up to be more Zen-like, with varied seating arrangements and comfortable furniture, is all part of the strategy.

“I believe this type of curriculum should be embedded in kindergarten

so that by the time they get to Grade 8 they are fluent in the vocabulary. The attitude of my generation about anxiety was to suck it up. Now parents recognize that these are tools that we can all use in our lives.”

Student perspectives

Richard and Cori, students at C.H.A.N.C.E. Shxwetetilthet, told us what they think about the mindfulness techniques they have learned.

Richard: “I feel that they have been very useful because without it we might have gotten into some trouble, you know? I especially like the colour breathing, where you breathe in a colour and breathe out another one. And the grounding exercises where you notice five things you can see, hear and touch.”

Cori: “I do the colour breathing when I feel super stressed out, and I calm myself down ‘til I feel warm and fuzzy inside. I can do it in my day-to-day life and nobody is going to notice.”

Richard: “Yes, mindfulness is very flexible. You can do it at a job, or home. I will be able to use it for anything in my life.”

Despite the undeniable challenges they face every day, the staff at C.H.A.N.C.E. Shxwetetilthet Alternate School have made progress with students by introducing mindfulness to the curriculum. In doing so, they hope to provide a foundation for resilience and health that will sustain their students as adults. ▼

breathr — a mindfulness app for youth



Paul Irving, BC Children’s Hospital

Practising mindfulness isn’t always an easy sell—especially for today’s youth, who are often plugged in to their phones and other digital devices and not really thinking about how mindfulness might benefit them in their daily lives. Unfamiliar concepts like meditation and mindful breathing can scare youth away from trying something new. Not long ago, I was one of those young people, skeptical about how mindfulness could help me with my depression and anxiety, and seeing meditation as something that required years of practice.

If this sounds familiar, then Breathr can help! Breathr is a new, free mindfulness app for youth, developed by the Mental Health Literacy team at BC Children’s Hospital. Breathr gives you the tools to learn about mindfulness at your own pace and incorporate it into your life in whatever way works best for you. The app provides everything from simple breathing practice to guided meditations, everyday exercises and custom meditations once you become more comfortable with the practice of mindfulness. Breathr has a ton to offer: there are quick breathing exercises for those moments when you feel stressed or overwhelmed, as well as longer meditations to help build compassion and mindful thinking. There’s also an information section so you can pair your practice exercises with readings on how mindfulness can impact your daily life.

The goal of Breathr is to make mindfulness easy and fun to integrate into your daily routine. It doesn’t matter how much time you have—one minute or 20—there’s an exercise or meditation for you. It doesn’t have to be a strict routine or a rigorous program. Whether it’s a simple breathing exercise each morning, or a guided meditation before bed, mindfulness is a flexible tool that can become a regular part of your day, however and whenever you need it most. Each of us is different: having the time and space to explore how mindfulness can work for you is important. Breathr can provide that.

In hindsight, I wish I had discovered mindfulness earlier. With Breathr, a practice that once seemed abstract has now become a part of my daily routine, and I see the benefits in every aspect of my life. I was lucky enough to be one of the many youth who helped to shape Breathr as it was being developed, making it the youth-friendly guide to mindfulness that we all knew was needed.

For more information on how to incorporate the benefits of mindfulness into your life and how to download the Breathr app, visit keltymentalhealth.ca/breathr.

A REVIEW OF THE EVIDENCE—CONTINUED FROM PAGE 9

thought to thought. In the study, the main nodes of the DMN were found to be relatively deactivated in experienced meditators. Furthermore, the regions of the brain associated with self-monitoring and cognitive control were more connected in people who practised meditation.

Meditation and other mindfulness-based therapies have caught the attention of the public and researchers because they offer a relatively side-effect-free antidote to the frenetic challenges of our daily lives. There are some reservations, however: there is still insufficient research on the possible adverse effects of meditation and mindfulness, including, say

some researchers, the potential for meditation to worsen symptoms of anxiety and other mental disorders in some individuals.⁹

Yet while mindfulness practice cannot be considered a cure-all for the various forms of anxiety that many of us experience, the research does show that, for most people, quieting one's

mind, even if only for a few minutes a day, can lead to decreased stress and anxiety, greater self-control and a lessened tendency to take things personally. We may not be able to control what happens in the outside world, but we now know that we have some control over how we react to it—and that the tools to do this are within ourselves. ▾

related resource



Check out AnxietyBC's free MindShift app: www.anxietybc.com/resources/mindshift-app. The Chill-Out Tools section includes mindfulness strategies. The audio files are meant to help reduce stress and anxiety.

ALLOWING LIFE IN—CONTINUED FROM PAGE 17

avoiding emotions that cause me discomfort; I wanted to jump out of my skin and bolt instead of staying with unpleasant feelings until they (inevitably) passed.

One of the many benefits of the structured, rigorous MBSR program is that it prepares you to continue a regular mindfulness meditation practice after the program is over. This certainly worked for me. It's been almost three years now and I still try to sit every day, even if it's only for 10 minutes. Mindfulness gives me easily accessible skills that allow me to become aware again of my body, use breathing to calm myself, focus on the present and quiet the incessant chatter of my "monkey mind" as it swings from one thought to another, and be compassionate

with myself (which is always a work in progress). Mindfulness has also given me a way to cope with my father's death that is very different from how I dealt with my mother's death. I am able to meet my grief, actually feel it in my body, sit with it while the wave of sadness washes briefly over me, confident that it will not drown me in its wake.

As my teacher often reminded us, mindfulness is simple, but it's not easy. I still struggle with the practice of mindfulness (both as a formal meditation and as an informal, daily awareness) and self-compassion, particularly when I'm under stress or dealing with uncomfortable emotions—which, ironically, is when I could benefit from meditation the most. I've also discovered that

mindfulness doesn't "fix" anxiety, worry or grief. Instead, it helps me relate to these states differently: with awareness, acceptance, more objectivity and some confidence that this, too, will pass.

In times of emotional discomfort, I occasionally fantasize about how easily alcohol could soothe the situation. But ultimately, I know where this superficial and short-lived solution would lead. I continue to believe that doing the harder work of mindfulness offers me a healthier, more sustainable way of dealing with life's inevitable challenges. At times, the impulse to avoid or numb difficult emotions is still strong, but mindfulness has given me greater confidence that I can allow life in and sit with it as it is. ▾

resources

Mindfulness Wellness Module

From the BC Partners (the group behind *Visions Journal*), learn about the features and benefits of mindfulness and see how you can get started at www.heretohelp.bc.ca/wellness-modules

BCALM (British Columbia Association for Living Mindfully)

BCALM provides education, research, and advocacy around the benefits of mindfulness in schools, workplaces, and doctor's offices. Check out the Resources section of their website for a list of some mindfulness retreats and organizations around BC, as well as workbook resources. See www.bcalm.ca

Mindfulness-informed psychotherapies

To find psychologists who practice mindfulness-informed treatments like dialectical behaviour therapy, cognitive-behavioural therapy, and acceptance and commitment therapy, visit the BC Psychological Association of BC at www.psychologists.bc.ca

Coping Using Mindfulness

The BC Crisis Centre has a directory of resources for those who would like to learn to use mindfulness to manage intense or difficult experiences. You'll find guided audio sessions as well as recommended apps and other resources. Visit www.crisiscentre.bc.ca/mindfulness

MindShift

A free app developed by AnxietyBC for young people who want to manage anxiety well. (Note: it can also benefit adults). The Chill-Out Tools section includes mindfulness strategies. Visit www.anxietybc.com/resources/mindshift-app

Breathr

An app for young people who would like to learn mindfulness skills and start their own practice. Breathr was developed by the Mental Health Literacy team at BC Children's Hospital. Visit www.keltymentalhealth.ca/breathr. For more mindfulness resources, visit www.keltymentalhealth.ca/healthy-living/mindfulness

Mindfulness for Teens

For teens who would like to learn more about mindfulness, try quick mindfulness activities, and build skills with guided sessions, visit www.mindfulnessforteens.com

Audio for Relaxation & Meditation

McGill University's Counselling and Mental Health Services has a number of guided mindfulness sessions, including sessions specifically for students. Visit www.mcgill.ca/counselling/self-help/audio-video

smartUBC (Stress Management and Resiliency Techniques)

smartUBC is a not-for-profit unit of the University of British Columbia that delivers mindfulness training in several workplace sectors including education and health care. For more information, see smartubc.ca

 This list is not comprehensive and does not necessarily imply endorsement of all the content available in these resources.

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