



A Taste of Mindfulness & the Mindfulness Based Stress Reduction (MBSR) Program

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Bridgepoint Active Healthcare, Proactive Pelvic Health Centre, Markham Psychologists

+ Outline

- How Did I Get Here?
- What is Mindfulness?
- *(Practice)*
- Mindfulness Based Stress Reduction (MBSR) & other Mindfulness Based Interventions (MBIs)
- *(Practice)*
- Scientific Research
- Mindfulness & Acquired Brain Injury (ABI)
- *(Practice)*
- Resources

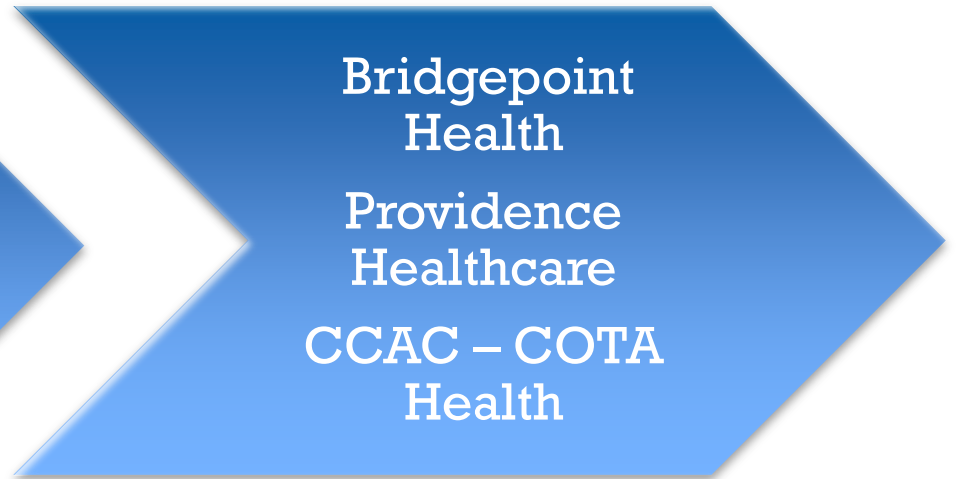
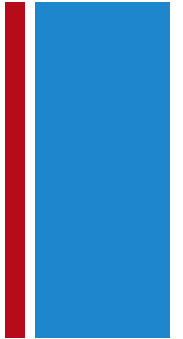


Disclosures



- I am affiliated with the University of Toronto & Bridgepoint Active Healthcare – both member organizations of the Toronto ABI Network
- I will be receiving financial compensation from the Toronto ABI Network for this workshop
- All of my professional trainings in mindfulness have been through the Centre for Mindfulness Oasis Institute at the University of Massachusetts Medical School
- While I will be presenting the MBSR program & sharing views of fellow researchers & clinicians, I have no financial or non-financial relationships to disclose

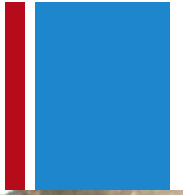
+ How Did I Get Here?



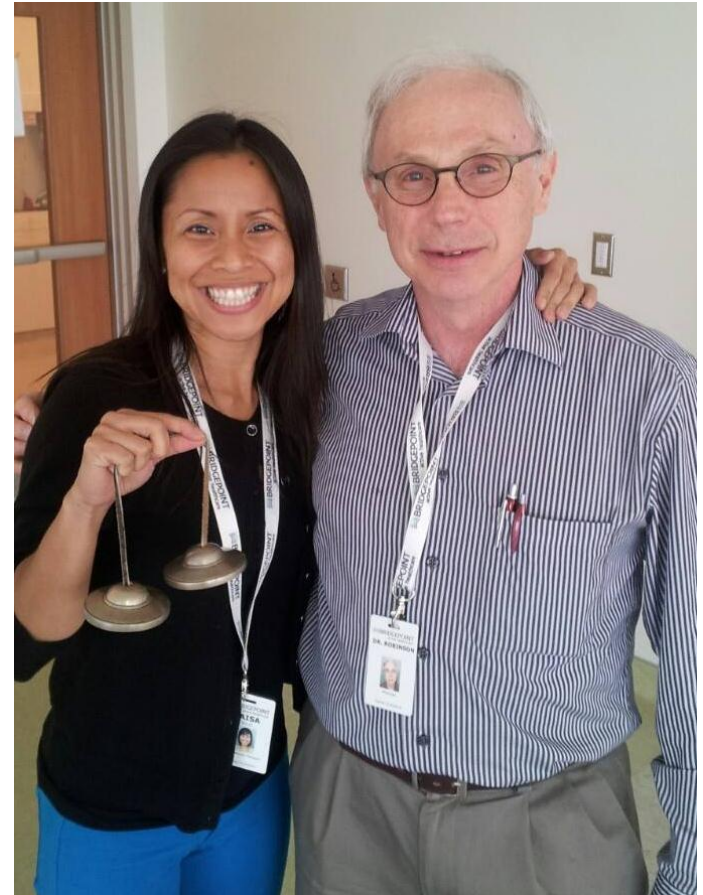
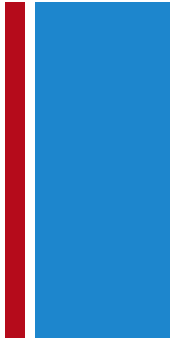
+ How Did I Get Here?



+ How Did I Get Here?



+ How Did I Get Here?



+ Ongoing Rehab...



The Mindful Revolution is Here!



Bringing mindfulness to the school curriculum

More and more kids across Canada are learning meditation techniques. Not everyone thinks it's a good use of time.

Kate Lunau

June 15, 2014



Photograph by Cole Garside

Edition: U.S. ▾

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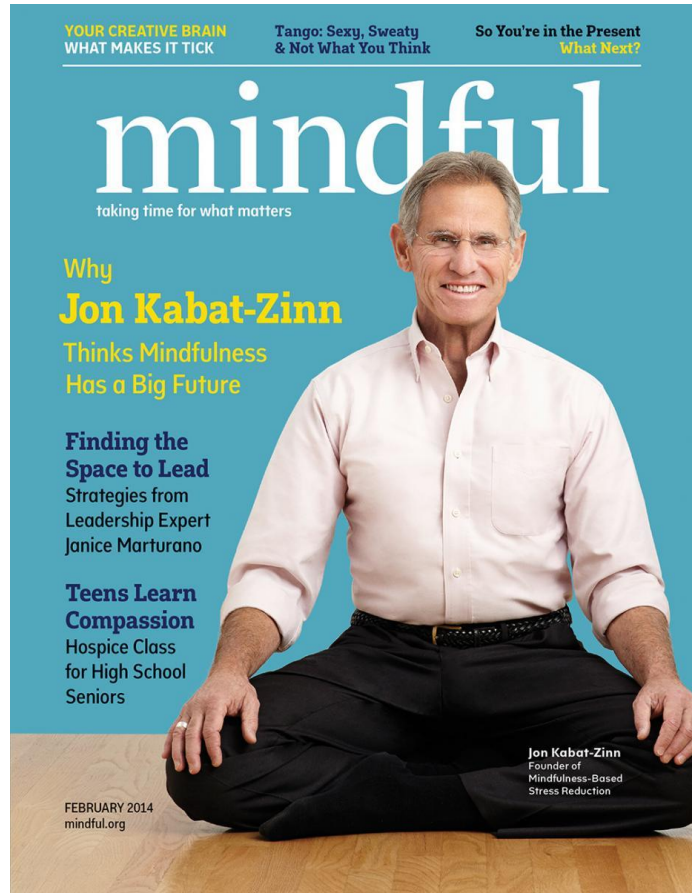
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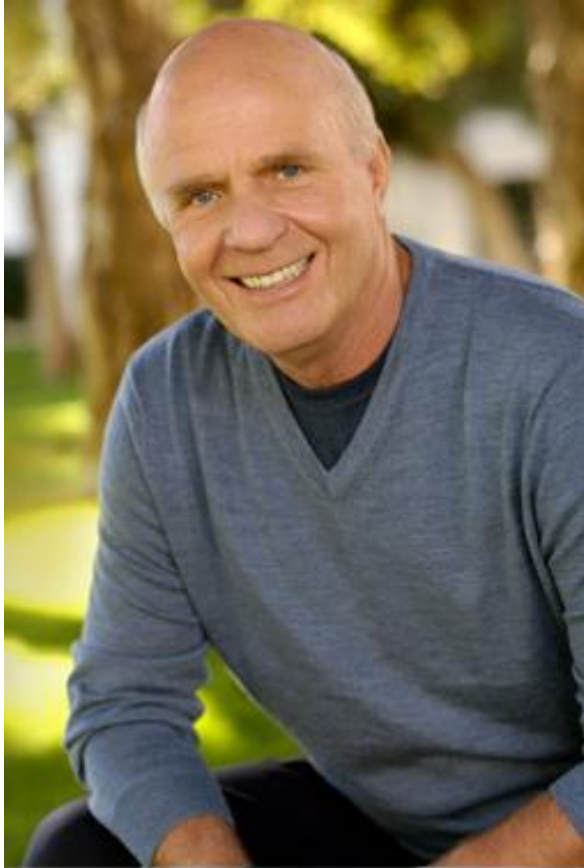
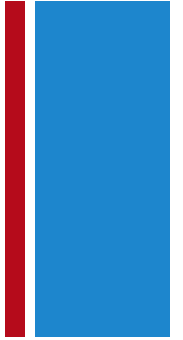


+ What is Mindfulness?



**“The intentional cultivation
of moment to moment
non-judgmental
awareness.”**

Jon Kabat-Zinn



*“We are not human doings,
we are human **BEINGS!**”*

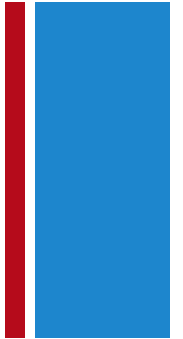
Wayne Dyer



mind-body connections

Automatic Habitual Stress Reactivity





Greater Awareness

Broader Perspectives

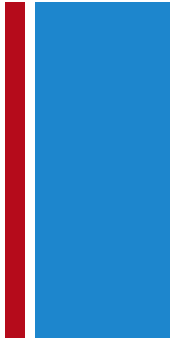
Mindful Mediated Responses

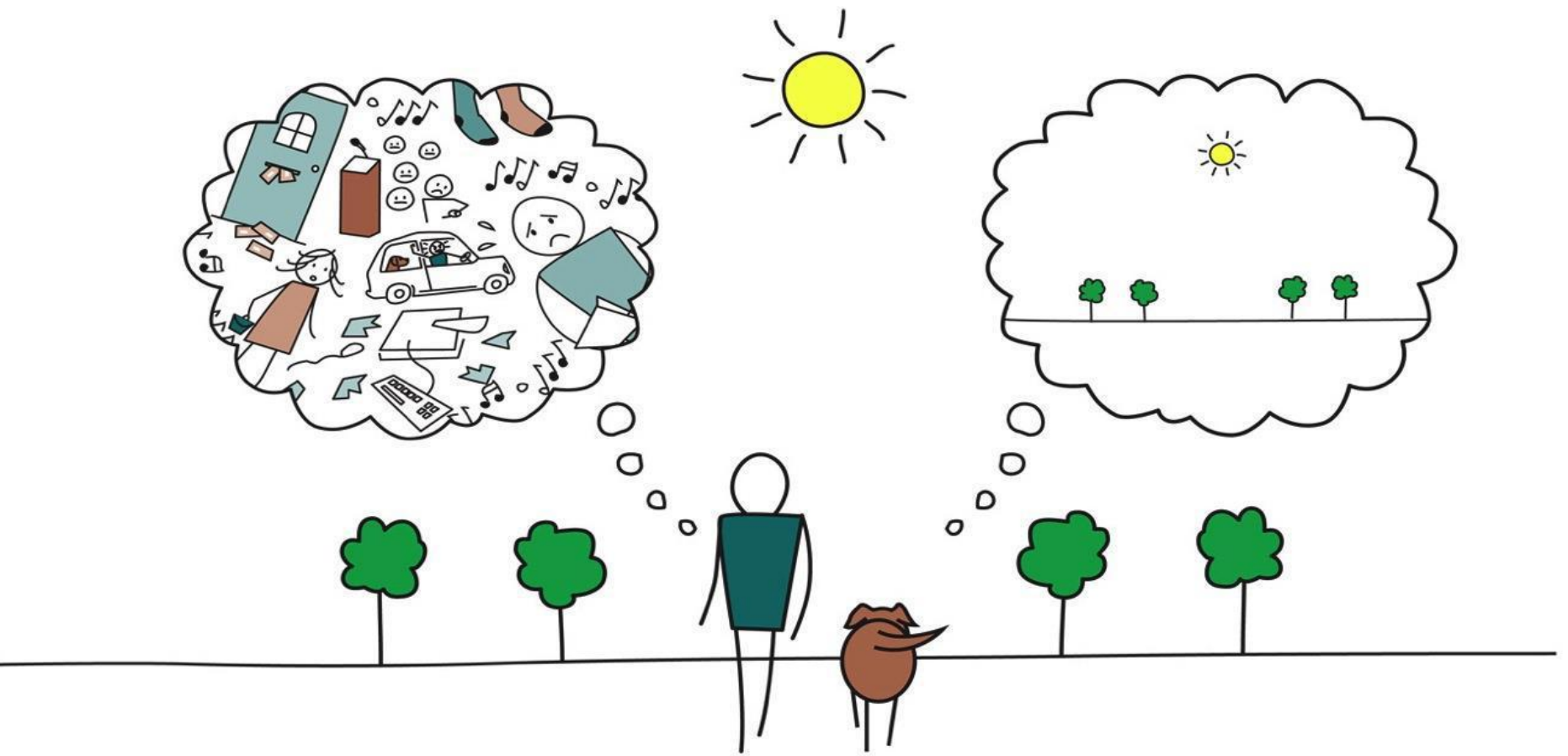
+ *“Between stimulus & response there’s a SPACE, in that space lies our POWER to CHOOSE our RESPONSE, in our response lies our GROWTH & our FREEDOM.”*

Viktor Frankl



+ Let's Practise: Sitting Meditation

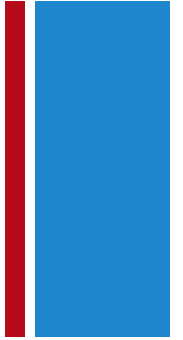




Mind Full, or Mindful?



How is Mindfulness Cultivated?

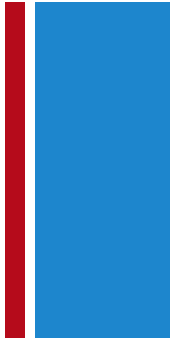


- Like any other habit, mindfulness is cultivated through **DAILY PRACTICE.**

- 2 Types of Practice:

- Formal
- Informal

+ Mindfulness Based Stress Reduction (MBSR)



The **8 week** MBSR curriculum was developed by **Jon Kabat Zinn** in 1979 at the University of Massachusetts Medical Centre, Centre for Mindfulness.

Supported by **over 30 years of scientific research** with tools proven to be effective in **reducing physical & psychological suffering** while building our own capacities for greater balance, health & wellbeing.

+ Program consists of:

- 8 weekly sessions 2.5-3hrs long
- 1 all day retreat (on a weekend)
- Guided instruction in mindfulness practice:
 - Body scan, sitting mediation, mindful movement, eating meditation, visual meditation, mountain meditation, lake meditation, & loving kindness meditation
- Facilitated activities & group discussions aimed at enhancing awareness in daily living
- Daily home practice assignments



Course Materials:

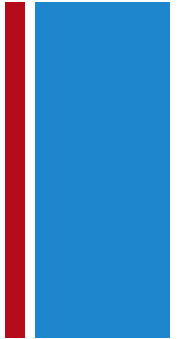
- Audio CDs for body scan, sitting meditation & mindful movement
- Home Practice Manual
- Text: “Full Catastrophe Living”



+

Foundational Attitudes Cultivated:

- Patience
- Trust
- Non-judging
- Acceptance
- Non-Striving
- Letting Go



Elements of the MBSR Curriculum:

- The role of perception in our daily experiences

**Experience =
Situational + Perspective (interpretation)**

- The mind-body connection
- Automatic habitual stress reactions vs mindful mediated responses
- Mindfulness in every day living i.e., mindful communication & mindful consumption
- Cultivation of self-care

Exclusion Criteria



- Active **substance dependence** including those new to recovery if less than 1 year
- Inadequate comprehension of the **English language**
- **Psychological issues:** suicidality, psychosis (not treatable with medication), PTSD, Depression (clinical) major psychiatric diagnosis (if it interferes with group participation) & social anxiety (difficulty with being in a group/classroom situation)
- **Inability to commit** to attending weekly sessions
- **Inclusion considerations:**
 - Ability to participate in & tolerate length of sessions
 - Ability to do weekly homework

+ MBSR has been proven as an effective treatment for:

- Work, Family & Financial Stress
- Heart Disease & High Blood Pressure
- Cancer
- Headaches
- Fibromyalgia
- Gastro-Intestinal Distress
- Asthma
- Chronic Illness & Pain
- Grief
- Depression
- Eating Disturbances
- Anxiety & Panic Attacks
- Post Traumatic Stress Disorder
- Skin Disorders
- Fatigue & Sleep Problems

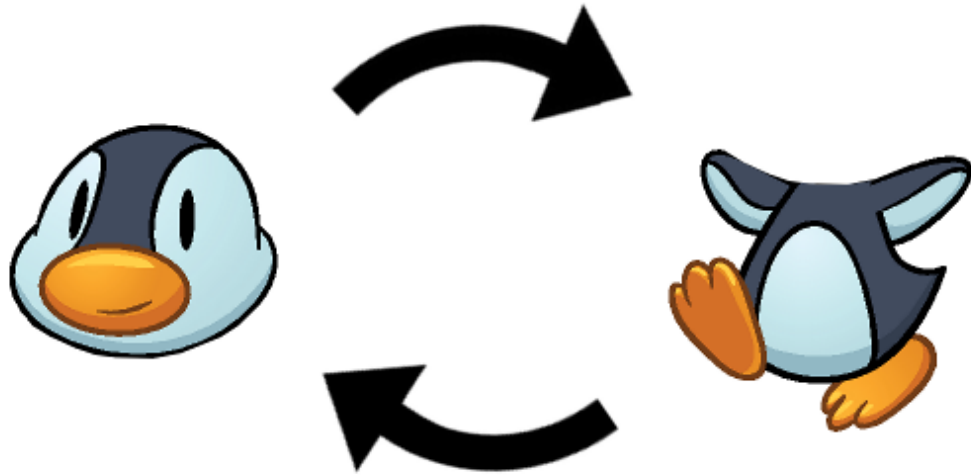
Training Pathway for MBSR Teachers



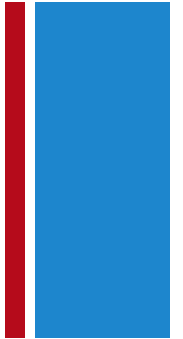
Through the OASIS Institute at the Centre for Mindfulness –

1. Take the MBSR course or 5 day Mindfulness Tools Program + online MBSR course
2. Silent Meditation Retreat #1
3. Practicum in MBSR (8 wks or 9 day intensive) + 7 day Professional Residential Training
4. Preliminary Teaching + Silent Meditation Retreat #2
5. 8 day Teacher Development Intensive
6. Deepen teaching experience of MBSR + Teacher Supervision + Silent Meditation Retreats #3 & #4 + Post Supervision Reflection & Assessment
7. Submission of Teaching Materials for Certification Review

+ Let's Practise: The Body Scan



+ Other Mindfulness Based Interventions (MBIs):



■ **Mindfulness Based Cognitive Therapy (MBCT)**

- Drs. Zindel Segal, John Teasdale, Mark Williams
- Original purpose – prevent depressive relapse
- Customized for mood and anxiety symptoms

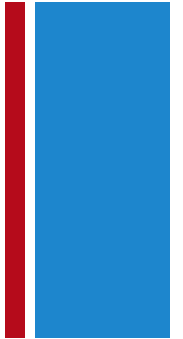
■ **Mindfulness Based Chronic Pain Management (MBCPM)**

- The Neuro Nova Centre - Dr. Jackie Gardner-Nix
- 13 week chronic pain management group

■ **Mindful Art for Brain Injury**

- Ameer Le OT Reg (Ont) – Community Head Injury Resources Services (CHIRS)

+ Other MBIs Contd.:



■ **Mindfulness Based Relapse Prevention (MBRP)**

- Dr. Sarah Bowen Dr. Alan Marlatt
- Customized for addictions, aim of preventing relapse

■ **Mindful Self Compassion (MSC)**

- Kristen Neff & Chris Germer

■ **Mindfulness Oriented Recovery Enhancement (MORE)**

- Eric Garland PhD LcSW
- Combines Mindfulness training + CBT + Positive Psychology (much focus on attentional control, positive reappraisal & savouring)
- Successfully used for chronic pain & opioid misuse & substance abuse



Mindfulness Research Guide

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About Mindfulness

Mindfulness is a quality of human consciousness characterized by an accepting awareness of and enhanced attention to the constant stream of lived experience. Being mindful increases engagement with the present moment and allows for a clearer understanding of how thoughts and emotions can impact our health and quality of life. Mindfulness can be cultivated through meditation practice. Mindfulness meditation practices have been formalized in programs such as Mindfulness-Based Stress Reduction (MBSR), Mindfulness-Based Cognitive Therapy (MBCT), and Mindfulness-Based Relapse Prevention (MBRP) as well as other programs. Although mindfulness is an inherent human capacity that has been examined introspectively for millennia, scientific interest in mindfulness is burgeoning in the fields of medicine, psychology, social work, and business, as well as other areas. Click [HERE](#) to read more about mindfulness.

Read reviews of MRG [here](#).

Purpose of MRG

Mindfulness Research Guide is a comprehensive electronic resource and publication database that provides information to researchers, practitioners, and the general public on:

1. The scientific study of mindfulness, including:
 - o a database of research publications
 - o measurement tools to assess mindfulness
 - o the evidence base for mindfulness interventions
 - o centers conducting mindfulness research

Mindfulness Research Monthly



MRG publishes *Mindfulness Research Monthly (MRM)*, a monthly bulletin that aims to build awareness of and inform the latest scientific advances in mindfulness.

Editor: David S. Black, Ph.D.

Founded: 01/2010

www.mindfulexperience.org

Mindfulness & Cognitive Functioning



- Heightened state of presence & improved awareness
- Improved sustained attention
- Decreased mind wandering
- Improved working memory
- Improved memory retrieval
- Improved cognitive flexibility & mental control
- Enhanced learning

(Chamber et al 2008, Reid 2011, Jha 2007, Lutz 2009; Jha 2010, Farab et al 2007; Brewer et al., 2011; Goldin et al., 2012)

Mindfulness & Psychological Functioning

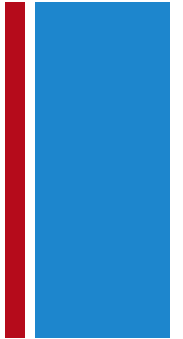
- Improved Emotional intelligence
 - Improved Emotional Regulation
 - Increased Non-reactivity/Reduced emotional reactivity
- Increased Re-appraisal
- Improved body awareness
- Detachment from identification with a static sense of self & changes in self-perspectives
 - i.e., modification of distorted or exaggerated self-view
- Decreased stress, anxiety, depression & PTSD

(Teasdale 2002; Ramel 2004; Goldin 2009 & 2010, Britta et al., 2011, Frewen 2008; Farb 2007 & 2010)

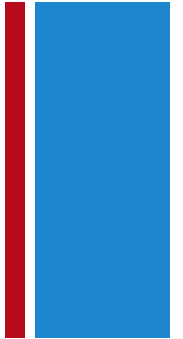
+ Mindfulness & Pain

- Decreased pain catastrophizing
- Increased re-interpretation of pain sensations
- Increased positive re-appraisal of pain
- Increased non-reactivity
- Decreased pain attentional bias
- Decreased pain sensitivity
- Decrease opioid craving and misuse
- **DECREASE in PAIN RELATED FUNCTIONAL INTERFERENCE!**

(Kabat-Zinn 1982, Kabat-Zinn et al., 1985, Garland (in press 2014))



+ Mindfulness & the Workplace



- Job Performance
- Job Satisfaction
- Self- Management & Leadership Efficacy
- Communication & Decision Making
- Negotiation skills
- Compassion & Ethical Conduct
- Employee Wellness, Resilience & Thriving

Grepmaier et al., (2008) Reb, Narayanan & Chaturvedi (2012), Grandy & Holton (2013), Holton, J., Wasylikiw, L., & Azar R. Pilot (2014) Irving, Park & Dobkin (2012), Reb, Narayanan & Ho (2013), Ruedy & Schweitzer (2010), Jha et al, (2010), Beach et al (2013) & Hafenbrack et al (2013)

+ Neuroplasticity

- Changes in the Autonomic Nervous System

- Changes in the Neuron

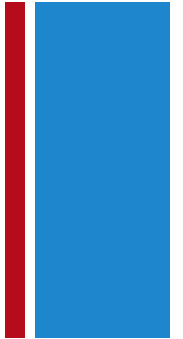
- i.e., pain related work by N. Pearson:

- Increase in pain threshold
- Decrease in conduction velocity

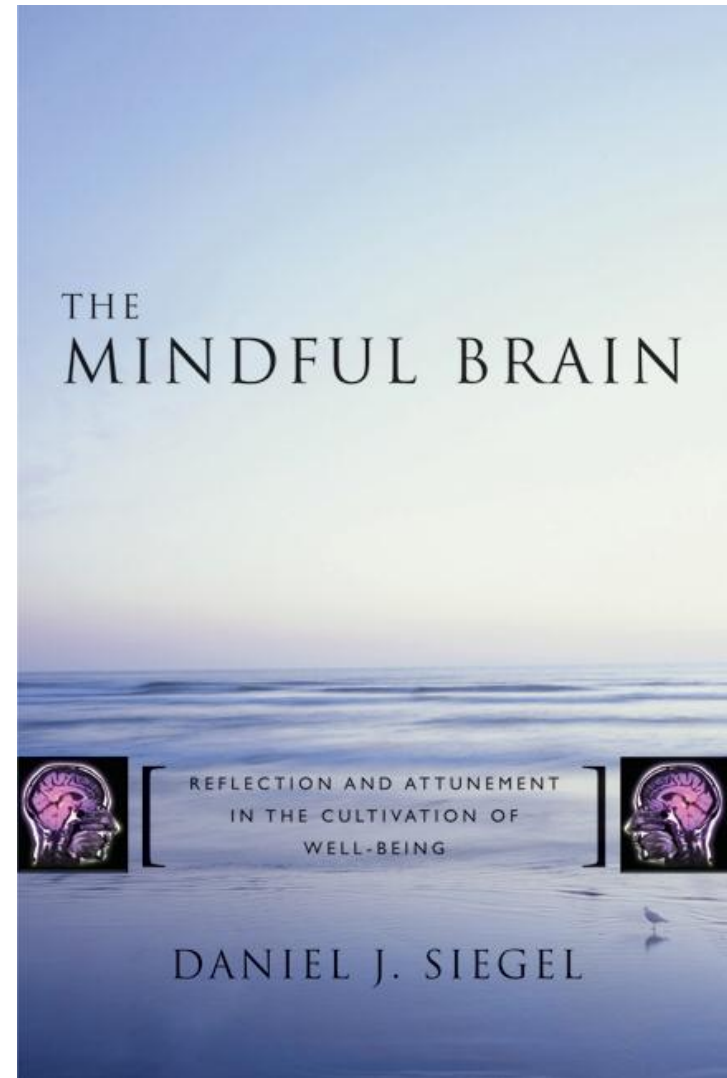
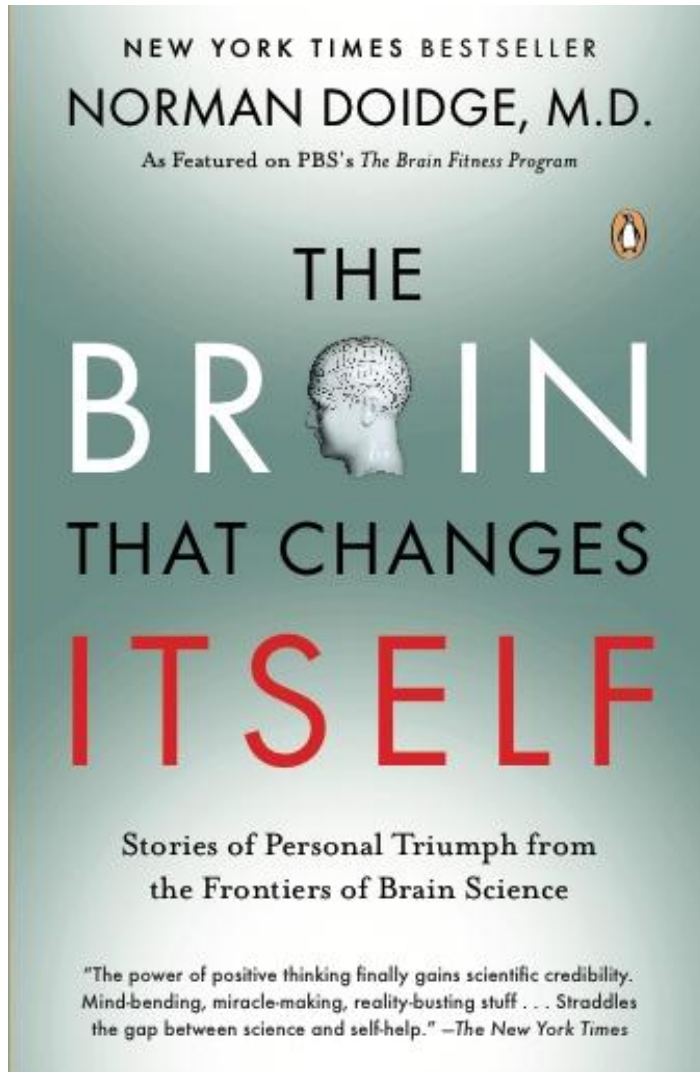
- Changes in the Brain

- Increase in activity & brain size in areas for:

- Attention (anterior cingulate cortex), emotional regulation (dorsalPFC, ventro-medial PFC, hippocampus, amygdala), higher order cognition, interoception, body awareness (insula, temporo-parietal junction), memory extinction & perception of self (medial PFC, posterior cingulate cortex, insula, temporo-parietal junction) & self-reference/“ego” (pre-cingulate cortex)
 - Creswell et al., 2007; Hoizel et al., 2009 & 2011

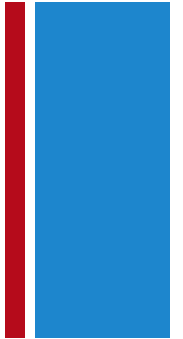


Neuroplasticity





What about Mindfulness for ABI?



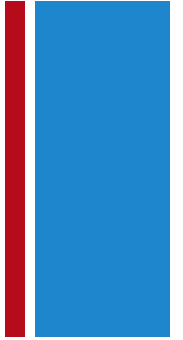
McMillan et al:

- 2002 RCT:
 - Implemented a **brief MBI** to train attentional problems
 - 5 x 45 min sessions of supervised practice using audio tapes
 - Daily independent practice with audio tape
 - 4 weeks
- Results:
 - Results showed **no significant effects** on several aspects of attention
- Conclusion:
 - “***Brief exposure to mindfulness*** meditation cannot be recommended as a treatment technique for TBI cases.”

+ What about Mindfulness for ABI?

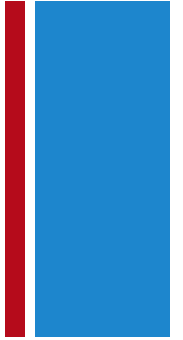
M. Bedard & M. Felteau et al:

- 2003 Pilot:
 - 12-week intervention primarily focused on MBSR
 - Results showed statistically & clinically significant improvements in health status & depression symptoms
- 2005:
 - Improvements from 2003 study were maintained at 1-year follow-up
- 2012 Pilot:
 - 8-week intervention based on MBCT
 - Results also showed improvements in health status & depression symptoms
- However, while Bedard & colleagues' results were promising they lacked control groups



“I see similar challenges with my ABI clients because they can be extremely focused on a particular issue and unable to redirect their thoughts or they do not have the insight to recognize the anxiety / depression. Our clients difficulties with attention and concentration also pose barriers to being taught MBSR.”

**Nicole Galeotalanza of Tri-Star Health
Management Group Inc**



*“Given the fact that our clients within the acquired brain injury (ABI) population are trying to manage with a myriad of impairments including **cognitive, psychosocial and physical issues**, participation in structured training sessions can be difficult. Any one of these issues, let alone a combination of these issues can make **it challenging to initiate and attend sessions** on set days and times, **engage in sessions** for longer durations, **recall details** following each training session to be able to practice and learn, and therefore be able to obtain maximal results from mindfulness training.”*

Kellie Radley Reg. OT (Ont.)
Radley Rehab

Cognitive Changes:

Confusion & disorientation
Inattention & distractibility
Perseveration
Lack of Awareness of Deficits
Memory – long and short term
Difficulty learning new things
Impaired planning, organizing & sequencing of information
Difficulty in abstract reasoning & judgment
Lack of initiation/Motivation
Impaired executive functioning
Difficulty understanding cause & effect
Impaired visual-spatial perception
Impaired safety awareness
Difficulty dealing with change
Impaired problem solving
Impaired comprehension of speech
Impaired spoken language output
Mental fatigue

Behavioural & Psychosocial Changes:

Emotional lability
Agitation / Hostility
Outbursts
Impulsivity
Denial
Apathy
Excessive talking
Excessive daytime drowsiness
Overly self-centred behaviour
Immaturity
Impaired self-management and self-correction of behaviour
Sad or depressed mood
Mood swings
Paranoid or suspicious thoughts
Increased anxiety and fear
Altered sexual behaviour
Impatience
Irritability
Over dependency
Personality changes

Physical Changes:

Chronic pain (including headaches)
Impaired bowel/bladder control
Balance & coordination problems
Weakness or paralysis of limbs
Increased/decreased muscle tone
Inability to plan & carry out movements
Decreased endurance & quick fatigue
Decreased gag reflex & swallowing problems
Headaches & increased pain threshold
Visual impairments
Light &/or sound sensitivity
Hearing impairments
Reduced strength
Seizures
Changes in appetite & weight
Change & variation in body temperature
Sleep dysfunction

Mindfulness Research & ABI:



J Head Trauma Rehabil

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Mindfulness-Based Cognitive Therapy Reduces Symptoms of Depression in People With a Traumatic Brain Injury: Results From a Randomized Controlled Trial

*Michel Bédard, PhD; Melissa Felteau, MAEd; Shawn Marshall, MD; Nora Cullen, MD;
Carrie Gibbons, MPH; Sacha Dubois, MPH; Hillary Maxwell, MPH;
Dwight Mazmanian, PhD; Bruce Weaver, MSc; Laura Rees, PhD; Rolf Gainer, PhD;
Rupert Klein, PhD; Amy Moustgaard, PhD*

Objective: We sought to determine if we could reduce symptoms of depression in individuals with a traumatic

Training Clinicians to Deliver a Mindfulness Intervention

Carrie Gibbons • Melissa Felteau • Nora Cullen •
Shawn Marshall • Sacha Dubois • Hillary Maxwell •
Dwight Mazmanian • Bruce Weaver • Laura Rees •
Rolf Gainer • Rupert Klein • Amy Moustgaard •
Michel Bédard

Published online: 10 November 2012

© Springer Science+Business Media New York 2012

Abstract Mindfulness-based cognitive therapy (MBCT) is a relatively new therapeutic approach that is rooted in mindfulness-based stress reduction and cognitive behavioral therapy. Leading MBCT requires a radically different meth-

od of a personal meditation practice. It culminated with trialing the intervention with “healthy” participants (e.g., friends, family, colleagues). Sessions from six facilitators were recorded and assessed by an external reviewer experi-

Both these articles available on:

<http://www.traumaticbraininjury.net/resources/>

Intervention Modifications:



- Number of **treatment sessions expanded** from 8 to 10 wks
- Weekly **sessions reduced** to 1.5hrs
- Daily meditation home **practice reduced** to 20-23mins
- In-session meditations practices were shortened & included frequent reviews
- Use of **simplified language**
- Use of **repetition & visual aides** to reinforce concepts

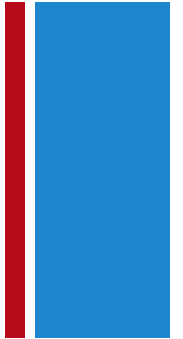
Intervention Modifications Contd.



- More attention was paid to fostering learning conditions to encourage an environment of **trust & non-judgement**
- Connections between learning activities were made more explicit
 - i.e., participants recorded their observations & questions on “*new learning*” forms to encourage deeper reflection on usual modes of behavior & habits of mind in day-to-day activities.
- Participants were supplied with handouts from each session & received the book *The Mindful Way through Depression: Freeing Yourself from Chronic Unhappiness*.
 - Participants were not required to read it but were instructed to use the accompanying CD to guide meditations.

+ Treatment Focus:

- The Elements from MBSR + the manual for MBCT by D. Segal & colleagues
- Topics included:
 - Meditation techniques
 - Breathing exercises
 - Gentle yoga
 - Awareness of thoughts & feelings
 - Acceptance
 - Staying in the present



Results:



■ Primary Outcome Measures:

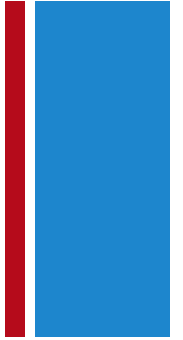
- Beck Depression Inventory-II (BDI-II)

■ Results:

- Greater reduction in BDI-II scores for the intervention group (6.63, $n = 38$) than the control group (2.13, $n = 38$, $P = .029$)
 - A medium effect size was observed (Cohen $d = 0.56$).
- The improvement in BDI-II scores was maintained at the 3-month follow-up
- Small effect sizes were observed for the secondary measures:
 - PHLMS-Acceptance & TMS-Decentering subscales



Conclusion:



Mindfulness-based cognitive therapy can be modified for individuals with TBI for the reduction of symptoms of depression as measured by BDI-II & maintained at 3month follow up.

Mindfulness Research & ABI (contd):



J Head Trauma Rehabil

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A Pilot Study Examining the Effect of Mindfulness-Based Stress Reduction on Symptoms of Chronic Mild Traumatic Brain Injury/Postconcussive Syndrome

Joanne Azulay, PhD; Colette M. Smart, PhD; Tasha Mott, PhD; Keith D. Cicerone, PhD

Objective: To evaluate the effectiveness of the mindfulness-based stress reduction (MBSR) program tailored to individuals with mild traumatic brain injury (mTBI). **Design:** A convenience sample recruited from clinical referrals over a 2-year period completed outcome measures pre- and posttreatment intervention. **Setting:** Post-acute brain injury rehabilitation center within a suburban medical facility. **Participants:** Twenty-two individuals with mTBI and a time postinjury more than 7 months. Eleven participants were men and 11 were women, ranging in age from 18 to 62 years. **Intervention:** A 10-week group (with weekly 2-hour sessions) modeled after the MBSR program of

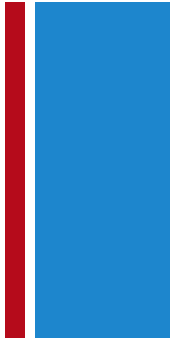
+ Intervention Modifications:



- Number of **treatment sessions expanded** from 8 to 10wks
- **Group sizes reduced** to an average of 6 vs 25
- **Tailored Treatment:**
 - Increased amount of modeling of more sophisticated techniques
 - Repetition of procedures & ideas
 - Assignments provided in writing
 - Provision of homework log

+ Treatment Focus:

- Enhancement of **attentional skills**
- Increasing **awareness** of internal & external experiences
 - In regards to these experiences, cultivating:
 - **Perspective of ACCEPTANCE**
 - **Non-judgemental ATTITUDE**



Results:



Main Outcome Measures:

- Perceived Quality of Life Scale, Perceived Self-Efficacy Scale, Neurobehavioral Symptom Inventory

Results:

Clinically meaningful improvements on measures of:

- **Quality of life** (Cohen $d = 0.43$)
- **Perceived Self-efficacy** (Cohen $d = 0.50$)

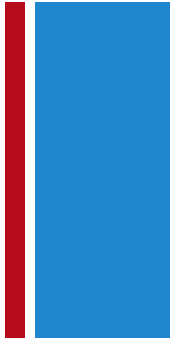
Smaller but still significant effects on measures of:

- Central executive aspects of
 - working memory &
 - regulation of attention.

Participants reported more positive problem-solving orientation after the intervention.



Conclusion:



*“The MBSR program **CAN be adapted** for participants with Mild TBI.*

*Improved performance on measures associated with **improved quality of life & self-efficacy** may be related to treatment directed at improving **awareness & acceptance**, thereby minimizing the catastrophic assessment of symptoms associated with mTBI & chronic disability.”*

J. Azulay (2013)

Mindfulness for ABI: Implications



- Often, more than 8 group sessions are required
- Consider 1.5hr weekly group sessions or 1-1.5hr individual sessions
- Keep group size small
 - i.e., 4-6 people
- Arrange several joint sessions with other team members
 - i.e., rehabilitation therapist
- Highly consider the appropriateness of timing
- Focus treatment on fostering the **experience** of Trust, Nonjudgement & Acceptance

Mindfulness for ABI: Implications



Use MBI curriculum as a guide to **create tailored instruction & homework assignment:**

- Provide shorter medication practices both in weekly sessions & daily home practice
 - i.e., 20-30mins
- Provide frequent reviews post practice & increased amount of modeling of more sophisticated techniques
- Use simplified language & make connections between learning activities more explicit
- Repetition of procedures/ideas & use of visual aides
- Assignments provided in writing
- Provision of homework log

Patient Feedback:



■ Background:

- 60yo male w/mTBI: suffered from depression, anxiety, mood swings, anger & pain. Participated in 16 1-on-1 tailored mindfulness sessions based on MBSR

■ Strengths:

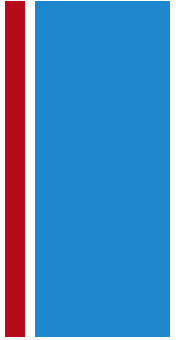
- Family support, motivated, able to attend & engage in 1.5hr sessions, independently used his cell phone to manage schedule, welcomed joint sessions w/rehab therapist (who continued to implement mindfulness)

■ Feedback:

- *“I appreciate how each session is tailored to what I am going through each week. This requires the teacher be **flexible, open & creative.**”*
- *“The teacher must be **open minded to other ideas.** For instance, I’m glad we got to do tai chi instead of just yoga.”*
- *“It helps when the teacher **customizes their point to my way of thinking.** I need to hear things in my own words”*
- *“I found the weekly **personalized recordings** on my phone most beneficial.”*
- *“It helps when the teacher is **passionate** about mindfulness & believes in it because it helps me to feel trust & feel motivated.”*

+

Let's Practise: Mindful Movement



Interested in living more mindfully?

- **Take an 8 week course** ie) MBSR or MBCT
 - Note: UMass now has an online MBSR course
- **Join a community:**
 - Toronto.shambala.org – Toronto Shambala Centre
 - Satipanna.com – Satipanna Insight Meditation Centre
 - Nmcto.org - Open Heart Mindfulness Community
 - Truepeacetoronto.ca – True Peace Toronto
- **Try a meditation retreat**
- **Practice daily**
 - Formal & Informal



Online Mindfulness Resources:



- **Centre for Mindfulness in Medicine, Health Care & Society – University of Massachusetts Medical School**
 - umassmed.edu/cfm/Stress-Reduction
- **Mindfulness Research Guide (MRG):**
 - mindfulexperience.org
- **Mindfulnet.org:**
 - Provides links to research, teachers, books, & events
- **Mindful.org:**
 - Features stories, news, instructions, & commentary about mindfulness, awareness, kindness, & compassion
- **MindfulnessToronto.net:**
 - Online listing of mindfulness courses
 - Members meet monthly at Mount Sinai



Online Mindfulness Resources:

■ **Mindfulnessclinic.ca**

- Free audio online & informative newsletters
- Weekly “eat meet sit” & bi monthly 1-day retreats

■ **Centre for Mindfulness Studies:**

- mindfulnessstudies.com
- Toronto based centre offering mindfulness therapies & training

■ **NRIO:**

- traumaticbraininjury.net/resources

■ **Tarabrach.com & Audiodharma.org:**

- Free audio

■ **Jaisa Sulit's Blog**

- memoirsofajaisa.wordpress.com

Educational Videos on



- **Stress: Portrait of a Killer – National Geographic:**
 - A 1hr documentary based on the work of Robert Sapolsky – neuroendocrinologist & author of *“Why Zebras Don’t Get Ulcers”*

- **Dealing with Stress – BBC Explorations:**
 - 6 Part video series

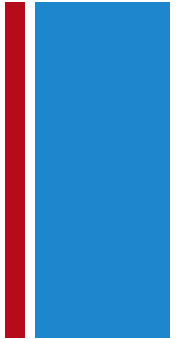
“There’s an App for that...”

- Headspace
- Mindfulness Daily
- Calm
- Simply Being
- The Mindfulness App
- Meditation Helper
- ZaZen
- Buddhify
- Meditate
- Mindfulness Meditation
- Breath2Relax
- Omzana



+ Books & CDs:

- **Full Catastrophe Living:** Kabat-Zinn
- **Mindfulness for Beginners + CD:** Kabat-Zinn
- **The Mindful Way Workbook + CD:** Teasdale, Williams, Segal
- **The Mindful Way Through Depression + CD:** Teasdale, Williams, Segal & Kabat-Zinn
- **The Mindful Way Through Anxiety + CD:** Orsillo & Roemer
- **Real Happiness – The Power of Meditation + CD:** Salzberg
- **The Brain that Changes Itself:** Doidge
- **The Mindful Brain:** Segal



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Let's Practise: Breathing Coping Space

1. Bring awareness to body sensations, thoughts & emotions
2. Focus on breath
3. Expand awareness to sense of body as a whole
4. Action Step:
 - Ask yourself:
 1. *“What do I need for myself right now?”*
 2. *“How can I best take care of my needs right now?”*
 3. *“How can I nourish my body &/or mind?”*

Take home message:

- Mindfulness is not just about being aware of your state of mind & body, but also your state of **heart!**
- Mindfulness is about developing **trust** in your inner sources for strength, wisdom & compassion.



Self-Awareness

Self-Care

Health & Resiliency

Increased Capacity to Serve Others



Thank
You