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"Becoming who you are": the experience of mindfulness in UK therapists and Greek counselling trainees

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Abstract

This doctoral document has its roots in my experience of working as a trainer in counselling programmes in Greece while at the same time exploring mindfulness theory and practice in my personal and professional life. Drawing on these two parallels, I launched an investigation on the experience of mindfulness in therapists and trainees. Mindfulness-based interventions have attracted a lot of scientific interest. Yet, little is yet known about how mindfulness is actually experienced by therapists and its meaning for those who practice it (Bruce et al 2010; Davis & Hayes, 2011). The doctoral research sought to explore this "meaning" through two distinct but interlinked projects. Project 1 involves the interpretative-phenomenological inquiry into the experience of mindfulness in seasoned therapist practitioners in the UK. Five practitioners, three clinical psychologists and two psychotherapists were interviewed on their experience of mindfulness practice and its impact on their personal and professional lives. Themes that emerged included facilitating a different way of relating to oneself, wholeness and the importance of the body, spiritual needs, interconnectedness and belonging; they also included difficulties with practice such as experiences of mental health problems and the therapists' own expectations of practice. There was also a theme around the potential benefits of incorporating mindfulness in therapy training. The findings of Project 1 suggested that mindfulness facilitates mostly personal growth which affects the professional role of the participants regardless of the therapeutic models they use.

Based on these findings, Project 2 investigated how mindfulness was experienced by counselling trainees in Greece where the approach remains largely unknown. Project 2 involved 10 trainees who were near completion of their training in integrative counselling and who attended a Mindfulness-based Stress Reduction (MBSR) programme (Kabat-Zinn, 1990). There was a mindful inquiry into their experience by facilitating focus groups interviews (2 groups of 5 members each). The experience of the counselling journey, the intra and inter personal challenges encountered and the impact of an MBSR programme during their training were discussed. In particular, the findings indicate that what the trainees found most useful was the facilitation of a different relationship to themselves which echoes the "mindfulness attitudes" proposed by Kabat-Zinn (2004) and which

cultivated a greater sense of "wholeness". Particular attention is given to the experience of both therapists (Project 1) and trainees (Project 2) that mindfulness can facilitate a greater integration of the personal and professional selves, which is theorized to be vital for sound clinical practice (Mace 2008) and echoes J.Kabat-Zinn's (2011) invitation "to have there be no separation between one's practice and one's life" (p.295).

In parallel to Projects 1 and 2 a heuristic inquiry into my own experience of mindfulness is presented, using mindful meditation and drawing as means of exploring the tacit dimension. The results of this exploration vis-à-vis the findings of the two projects are discussed. Finally, drawing on all investigations (Projects 1, 2 and heuristic inquiry) a discussion regarding how mindfulness could be incorporated in integrative counseling training in order to facilitate a more holistic approach to developing a professional identity is presented. At the same time, risk factors and areas needing further exploration and clarification regarding this integration are explored.

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Introduction

From the very beginning, this doctoral project involved an inquiry into the interaction and points of convergence between two spheres of interest: on the one hand, the emerging mindfulness-based theories in psychotherapy and on the other hand, the struggles of trainee counsellors with developing a professional identity. When I entered the programme I happened to be working as a counselling trainer in Greece, being in close contact with issues arising from how we choose to train people to help others. At the same time, I was intuitively drawn to mindfulness theory and practice as I will explain further on in this chapter. Both of these spheres of interest have been thrown into an orbit around one another upon entering the doctoral course. I also became aware that they both existed against the backdrop   of my preoccupation with the social, cultural and political influences on mental health professions.

In Chapter 1, the introductory chapter to the doctorate, I aim to offer an overview of the development of these points of interest and how they formed the core of my doctoral project. I will also discuss the impact I am hoping to make in the field.

In Chapter 2 I will offer a joint Literature Review for projects 1 and 2 in order to outline the field of research activity within which they both take place.

In Chapter 3 I will present the joint Introduction and Project Rationale for Projects 1 and 2 in order to highlight the grounds that justify the research inquiry.

Chapter 4 will present the Methods and Methodology for Project 1, will introduce the sample and will discuss ethical issues.

In Chapter 5 I will present the Results for Project 1 and will proceed to discuss the content of the themes that have emerged from the analysis of the interviews as well as the process of arriving at these higher order themes.

In Chapter 6 I will reflect on Project 1 findings in Discussion and will examine them vis-a-vis the current research literature and my own reflections.

Chapter 7 will present the Methods and Methodology for Project 2, will introduce the research participants and will include a discussion of ethical issues.

Chapter 8   will present the Results for Project 2 and illustrate the themes that have emerged from the focus group analysis.

In Chapter 9 I will discuss the Project 2 results in relation to the literature. Furthermore, I will draw on the findings of both Projects 1 and 2 and the Heuristic inquiry to present conclusions and directions also draw on conclusion regarding future research directions. Chapter 10 will present the heuristic inquiry into my own experience of mindfulness and the material (diary entries, poems, my own and other people's drawings) that has been involved in this process. It is included as a separate chapter overrunning both projects.

Finally the impact and products of the projects will be presented.

The Epilogue will present concluding reflections and thoughts on the process the doctoral journey and my role within it.

Chapter 1: Doctoral Project Overview

Project Overview

This doctoral project is a Large Project of 360 units to satisfy the requirements of the Doctorate in Psychotherapy by Professional Studies offered by Metanoia Institute and Middlesex University. The document comprises of two different but interlinked projects, referred from here onwards as project 1 and project 2. I seek to bring together two fields of interest: mindfulness theory and practice and the experience of counselling trainees. As I have noted in my Learning Agreement:

"1. Project 1 (180 credits) will aim to explore the personal and professional experience of therapists who have integrated mindfulness into their way of working

2. Project 2 (180 credits) will investigate the training experience of graduate counselling students to identify ways in which mindfulness could be used in counselling programmes" (Koliris, 2009). I have explained the intention behind the projects as:

"My proposition is that Mindfulness is already being used by experienced therapists because it cultivates a holistic way of being professionally and personally; I am suggesting that if this is the case, then Mindfulness could be creatively integrated into counselling training programmes in order to facilitate the development of a holistic professional identity in students" (Ibid).

Below I discuss the emergence of my research interest within the doctoral programme at Metanoia Institute, but first I wish to place my own self as a therapist-researcher in this process.

My own presence as a therapist-researcher

I would like to begin by making a special mention of my particular viewpoint as it has been shaped by the social and cultural spheres I have inhabited.

I am Greek, middle-class, female. I consider myself a "hybrid" of cultures: I was raised within a Greek middle class liberal environment. I was educated at university level and trained as a counselling psychologist in England and was influenced by the values instilled in me by the British educational system. My early working experiences took place within the "cultures"

of English hospitals and universities for 9 years. Then I returned to my home country wishing to contribute to the development of mental health awareness and services. I have been living and working in Greece for the past 8 years.

Being a woman and trying to advocate change in my particular culture which –for various historical, political and cultural reasons- has not been open to diversity, has been very frustrating at times. Since returning to live in Greece I have worked in environments mostly managed by men, employing mostly women as their staff. Asserting myself and promoting new ideas has not always been welcome and often has been sabotaged – not least by other women themselves. The dynamics have often been both very challenging and very interesting. A part of my energy is devoted to addressing the issue of what it means to be part of such a culture: I have taught Counselling at Master's level -a module called "Working with diversity" involving exploratory work on identity awareness with my students in Greece. I have also talked about the dialectics between culture, identity and therapy in Greece in conferences (e.g. 42nd conference on Psychotherapeutic Research, Society for Psychotherapy Research, Bern Switzerland June 2011; 4th Pan-Hellenic Clinical and Health Psychology conference, Athens Greece, November 2010). Part of my scientist-practitioner preoccupations is about the cultural and political influences upon our profession and their consequences. My bias is that how we view our profession and how we train people to do it is a political act and its consequences go beyond the therapy room. Furthermore, I am aware that being an "agent of change" under such circumstances is not a task to be undertaken lightly.

I also see being a woman in the more personal terms of the woman-line in my family, especially on my maternal side as it is the only one I have known in my life (my paternal grandparents died before I was born). I come from a family of strong women all of whom have had their own careers in teaching (grandmother), medicine (aunts) and architecture (mother and sister). I have noted in my diary:

> "...I see myself as an extension of the women that have been before me and I see how we have emerged from each other...the woman-line goes back to my great-grandmother and my grandmother on my maternal side [...] Drawing on this one line, I wonder if we are nothing but newer versions of each other, one woman evolving through the eras I wonder what would emerge if I saw us as one person going

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through spirals of challenge and transformation through time rather than three women of separate generations?

[...] It is not accidental it seems to me, that the professions we [the women in my family] chose reflect the process of this inter-generational development: my (refugee) great-grandmother fled from Turkey to safety with her only surviving child. My grandmother became a teacher at a time when women of her generation were mostly housewives. She sought to be independent but also to fit in, be respected and acknowledged by people in this new land; she lay down the groundwork. My mother as an architect sought to build upon this ground her own version of independence and individuality but also, as a youth of the 60s sought more freedom from social conventions. I, by becoming a psychologist, have more or less consciously wandered back into my own inner home, guided by a profound need to truly make myself "at home", explore, understand and inhabit my being with awareness and love: Safety, Adaptation, Individuality, Awareness. Time will tell how the line continues...." (August, 2010).

As it often happens, art can encapsulate meanings more accurately than words and thus I find that the intergenerational process that I am trying to describe has been portrayed by the Spanish painter Valls Dino (1959-) where the bodies of three women are at the same time the body of one:

[5]
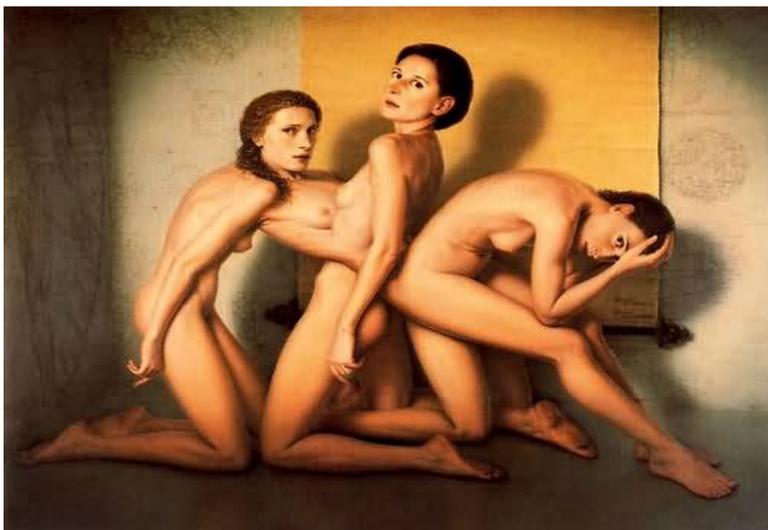
The use of imagery in my research process is described in Chapter 10 where I present the heuristic inquiry into my own experience.

The emergence of my research interest

As is often the case, I came to the doctoral programme with a professional identity already informed by a number of personal and professional experiences and interlinked fields of interest within the area of counselling and psychotherapy. This was the result of a longstanding process whereby the more I felt secure within my role the more I reflected critically on the philosophy and the practice of my profession in the context of the place, time and culture. I sought to develop further in a way that matched my felt experience of what it means to be a therapist and to do therapy with other people. This need is characteristic of a recognisable phase in therapist development: the practitioner actively explores their profession and seeks to develop new understandings not of how they fit the professional role (which is a concern at earlier stages of professional development) but how the profession fits them (Rønnestad & Skovholt, 2003). So, developmentally speaking I had reached this point of reflection, personalisation and "itchiness" introducing some changes in the respective environments and cultural contexts I worked in. But to expose this thinking out to the public sphere and take a stand is another matter altogether; this is what the programme asked of me and it felt like a quite a tall order: to take my own process of inquiry and insight out of the therapy room, out of the small sphere of informal talks with colleagues and put it "out there" and make a contribution.

In one of the first seminars we attended during our first year in the programme Prof. Derek Portwood invited us to reflect on our pre-understanding, what we brought with us; the forces that had inspired and shaped us; the personal and professional narrative of our paths thus far; to reflect and take stock of these "roots", then to engage in social interaction and demonstration; and to move into post-understanding, a phase where previous knowledge has been worked upon and transformed into new ground. His ideas suggested to me that before we could progress onto a new understanding it was imperative that we located

where our roots lay. In other words we were what we brought with us, and that would inevitably influence our interests and the lens through which we looked into the world, without meaning that all this could not be transformed into something different in the future. In fact that is what I think he meant by "pre-understanding": to be aware of where you stand before you take a step further.

Furthermore, he asked: is your idea "of value"? Does it offer something to the scientific community, to the professionals, to our collective knowledge? So he placed a very pragmatic angle on my exploration: the final project not only needs to be valid, but also of value. While this proposition matched my own beliefs around how part of our professional identities include being agents of change within the wider social and cultural sphere, I nevertheless felt daunted by having to pull my weight behind my ideas.

The reflective space in the first year of the programme which took the shape of Reflection of Previous Professional Learning (RPPL) and Recognition and Accreditation of Learning (RAL) papers, as well as my research diary, helped ground my thinking around the pre-understanding I was bringing along. Through this process I started becoming clear about what I wanted to investigate and how I was hoping to impact the field. The development of the rationale is presented in Chapter 3.

I want to make a special note to the *way* the programme at Metanoia seemed to propose that I as a practitioner-researcher reach those goals. Early on in the programme I wrote in my notebook:

"I begin to realise that there is a shift that is being suggested in the course from a "doing" mode (traditional academic research/ external knowledge) to a "being" mode (using self as a tool of research and reference/ internal knowledge). I feel excited by this prospect as it instinctively feels "right" for me. I feel that I have made the right choice to be on this course –a choice that justifies the time, effort and cost involved. On the other hand, I suspect that it will take a while for me to fully grasp how to be in this new mode, as I almost need to re-train myself or "detox" from the basic doctrines of all academic education that I have had so far! It pretty much feels like exploring new territory and I recognize that this is a paradox! How can working with myself feel like new territory? After all, I am familiar with working with myself in terms of my therapy work with clients, in supervision or in personal therapy. And yet somehow, working with myself has been left aside my academic/ research oriented

learning –or rather, to be more precise, it has not been left out as such but been "objectified" *and "rationalised". The result is a fragmented self. So, in this respect what we are doing on* *the course feels holistic and "natural" to me –I am seeing myself as a whole in all of my* *manifestations/roles. We are encouraged to think, sense, feel, imagine in a way that keeps* *an open dialogue between our inner and outer world. To me, it also means allowing a more* *creative and playful side of myself to emerge and be included in the process."* (January 2009)

I felt that the "how" -the process and the philosophy of me as a researcher-practitioner- is as important, if not more, as the product, the content of my research project. I also felt that there was an exciting common ground in the holistic viewing of experience advocated both by mindfulness theory and the doctoral programme.

My interest in mindfulness-based interventions: from trainee to professional to working with trainees

I have documented extensively in my Recognition and Accreditation of Learning (RAL4) and Review of Personal and Professional Learning (RPPL) papers my personal and professional paths and the forces that shaped them. I started training as a counselling psychologist in 1997. Insofar as the discipline's culture went at the time, my role involved becoming familiar and conversing with different therapeutic approaches, a "creative cross-fertilisation" (Clarkson, 1996) that indicated a flexibility in thought and action in terms of responding to the difficulties of varied populations. The psychology background emphasised the role of the scientist-practitioner who is steeped in a culture of inquiry aiming to support their practice with hard research evidence and versatility in terms of working in various contexts. This was further encouraged by another culture, that of the British National Health System, where most of my practice took place, which emphasised the provision of brief, targeted, evidence-based interventions. These early influences provided me with a valuable inquiring stance based on research to support the effectiveness of my work.

On the other hand, it placed the emphasis on "doing good and doing well" whereby my personal stance and process of growth, intuitive sense, cognitive, emotional and bodily understandings of my roles within and with-out the therapy room, character, culture etc was compartmentalised as something to be addressed in personal therapy and supervision.

Different parts of my new found identity were being taken care of in different contexts, but there was no coherent felt narrative of me as a person, in relation to myself, my roots, my training, my new identity and ultimately to working with clients. The focus remained a cerebral exercise on learning to "do" well: understanding the theory, applying it appropriately and refining my skills. All these skills have proved very useful in their own right but at the same time limited my scope of being to "doing". The more complex business of "being" as a therapist was left in the margins. Part of my research interest therefore stemmed from my own experience as a trainee and novice counsellor and the hunch that there was something being left out that was stunting my development.

My exploration of mindfulness was a way to fill a need that was not being addressed elsewhere; the need to be truly integrative, to be able to construct a holistic identity for myself that could encompass the different aspects of my own self and the roles I inhabit. Yet, it emerged not cerebrally but intuitively; not cognitively but bodily: at some point soon after becoming chartered, I gravitated towards yoga and meditation in my personal life. When mindfulness literature started to appear it described something that my body and spirit were already familiar with. Yoga is often seen as a form of meditation in itself especially in Mindfulness-based Stress Reduction programmes (Cullen, 2011). In addition, mindfulness theory talks about the body as an interconnected but also independent system to that of the mind and as such another powerful source of knowledge and healing.

Through practising yoga and meditation I noticed that the effects were beneficial not only on a bodily level but also on a mind level. For example, I noticed becoming more focused and better at setting aside ruminations and worries. I developed an awareness of and patience towards my stamina and physical limitations and stopped striving to "do it better" or "reach a goal faster": during practice I felt more acceptance of and synchronicity with my body and more tolerance towards that which I could not change. It is quite possible that all this seeped into my wider life and influenced my way of being in general as a person and as a therapist, but it was not done on a conscious and integrated level. What I lacked was the narrative that could provide the explanation of what I already knew in terms of a felt sense. It was interesting therefore to see that my experience was mirrored by some of the participants therapists in my research (project 1) who were practising meditation before or during their training but, lacking the way to bridge the two in an overt and acknowledged way, kept their personal practice and their professional role as two separate areas.

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When literature on mindfulness-based approaches started emerging, they provided the "critical thinker" in me with the theoretical context I needed. For example, the first book I read on mindfulness was "The Miracle of Mindfulness" by Buddhist scholar Thich Nhat Hanh (1991); my analytical/psychologist mind struggled to work around how such simple prepositions actually worked but my intuitive sense told me that I already knew what this was about. In fact, it has been suggested that Mindfulness is a quality we naturally possess as humans and that it seems that in some people it is a dispositional trait even if they have never meditated (Kabat-Zinn 2003; Brown and Ryan 2003). I discuss the theoretical underpinnings of Mindfulness in the Literature Review chapter.

So what did make intuitive sense? The ideas that drew my attention were the suggestion of a non-dualistic stance towards explaining inner and outer phenomena. Furthermore, a stance that advocated non-striving as an agent of change; that claimed that non-judgmental and compassionate observation of one's own self could go a long way in dealing with difficulty; finally a stance that questioned the assumptions one makes about their self, world, and the others and juxtaposes the freshness of the "beginner's mind" (Kabat-Zinn, 2004).

Mindfulness theory also discussed the distinction between functioning in a "doing mode" versus functioning in a "being mode" (Segal et al 2002); while both modes are vital for everyday functioning, it seems that at least in our Western societies we use the "doing mode" (or the left side of our brain) much more extensively than the "being mode" (right side of the brain) (Schultz, 1998). The approach seemed to suggest a re-dressing of the balance between the two, and even sometimes finding the balance when this is tipped over by reacting to the world in an automatic, mindless way.

My preoccupation with mindfulness and the "doing/being" mode was further fuelled when in parallel process to all this I re-engaged with personal therapy. I was lucky enough to work with a wise therapist who, although she would not describe herself as mindfulness practitioner –having trained decades back in person-centred therapy-, her mode of work embodied many of the core aspects of mindfulness described above. I went in, as many clients do, desperately wishing change to happen; she taught me to stay, look, feel, be; to have patience, tolerance and compassion when looking into my own "river of life" and how when this happens, the stones that seem to be stuck at the bottom become softer and you can pick them up and look at them and mould them into something else. I experienced

change while seemingly standing still. Therefore, long before I started investigating mindfulness, my researcher-practitioner self had already immersed herself and was preoccupied with experiential evidence that hinted towards another way of working through life's experiences.

Soon I started going to mindfulness/meditation seminars and workshops. A Greek colleague working in London, Dr. M.Iliopoulou who had already trained in mindfulness engaged me in a lively dialogue around the theory and its applications. Then a short while later she asked me to be a co-facilitator in a mindfulness seminar she wanted to give in Athens. Soon mindfulness was not just a personal interest but something I was actively involved in, professionally. We started giving seminars in Athens in 2007, through which emerged the Athens Mindfulness Centre.

In parallel to that, in 2007 I was asked by a group of other colleagues in Athens to help give shape to and teach on a new counselling training programme. It was the meeting of these two parallel lines of interest that gave rise to my need to research mindfulness further.

I have noted in length in my research diary how my research question emerged from my experience as a counselling trainer. I began to feel my students' anxiety to grasp the essence of "how to be a good counsellor". I recognised echoes of my own struggles with the demands of the role. Their anxiety about how to learn the theory and the techniques and make people "get better" reminded me of the dichotomy that existed in my own training between my felt experience and my conceptualisation of a "good therapist": the dichotomy between the "being mode" and the "doing mode". I began to wonder how we could develop our students' way of being in the multiple roles they inhabited in and out of the programme (academic student; practice intern; supervisee; therapy client; parent, daughter/son, employee, lover, etc): how to shape a holistic sense of identity that would help them be more "present" as a "whole" and less "fragmented" in their lives.

This concern has been echoed along the way from different people; one of the latest occurrences has been during a discussion in the conference of Psychotherapeutic Research (Bern, Switzerland, 2011) when Leslie Greenberg openly wondered "if anyone really trains counsellors at 'being present'" (for his important work on therapeutic presence –which is also discussed later in this document- see Greenberg & Geller's newly published book Therapeutic Presence: A Mindful Approach to Effective Therapy, APA: 2011). I began to wonder how, now that I had the responsibility of training people, I could help them towards

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developing a more present, integrated, felt identity within their role as counsellors. So using this starting point of curiosity, I wished to investigate if mindfulness could help students in counselling develop a more holistic professional identity. In order to do that, I decided to turn first to the mental health professionals who, having trained in different theoretical models, had incorporated mindfulness in their work, and to explore their experience. I wished to explore why mindfulness "made sense" to experienced professionals thus unravelling and clarifying some of the essence of the approach; I wanted to give the floor to their voice to describe the curiosity, challenges, risks, benefits and thoughts/experiences about the effects on their personal life and on integration of mindfulness practice and clinical work. I furthermore wanted to look into my own experience from a research point of view and ask myself what mindfulness meant for me and how I experienced it.

My inquiry therefore, came from an experiential point of view; as a practitioner-researcher I started asking myself the following questions: "why do I find this useful? What is it about it that grasped my attention?", "what do other colleagues think?" "does it make sense to them the way it makes to me or have they found other kinds of "sense making" with regards to the application of mindfulness to their life and work?". I furthermore envisaged that whatever it was that had "made sense" to seasoned professionals, would probably be of help to novice trainees. These were the preliminary seeds of what later became my research questions and hypotheses.

Conclusion

Having outlined the path of my research question from its emergence to its formulation and through my personal perspectives in my exploration, I will now proceed to the next chapter in order to discuss an overview of the literature on mindfulness with regards to my research topic.

However, as a final thought in this introductory section, I want revisit my intention. I have discussed my experiences as a trainee and professional and how this has sown the seeds of embarking on this project. I hope I have outlined my interest and bias in seeing the culture of counselling training and services as something affected by various forces –social, cultural, historical. My thinking and energy behind this project therefore is my own way of engaging in the dialogue of what constitutes "good practice" of our profession, and specifically,

wondering if becoming more mindful of what, how and why we do what we do can make us better professionals.   Going back to Prof.Portwood's ideas, he talked about how we can bring together criticality, creativity and caring in our projects. I hope that my projects will bring together my own creativity and my criticality towards my research interests -that remains to be seen. Most of all though, I believe that firmly at the heart of my project is my own "caring voice" about our stance in the world as professionals and how we can inhabit our roles more fully and with better service to those we are supposed to help.

Chapter 2: Literature Review Projects 1 and 2

Introduction

In the previous section I have told the story of how the vision of my doctoral project took shape through different and interweaving influences in my personal and professional life. In this chapter I will focus on the wider sphere of the research findings and debates on mindfulness within which my own research project is located. I aim to offer an overview of the research literature for both projects, as they are interlinked on the theme of cultivating "how to be, fully, in the present" as individuals and as professionals helping others. I will begin by discussing what is mindfulness, how it works and the points of convergence and divergence with western psychotherapy. I will then discuss studies on mindfulness and therapist/trainee wellbeing and highlight their relation to my own research inquiry.

What is Mindfulness?

Mindfulness seems to be an omnipresent word nowadays especially in the UK, as mindfulness theory and mindfulness-based interventions (MBIs) have seen a significant increase in recent years. The research generated has –perhaps understandably- focused primarily on operationalising mindfulness terminology and practice (Bishop, et al. 2004; Baer R., 2003).This has included various applications of different therapy protocols and programmes such as   Dialectical Behaviour Therapy (Linehan, 1993), Acceptance and Commitment Therapy (Hayes, 1999), Mindfulness-Based Stress Reduction (Kabat-Zinn, 1982) and Mindfulness-Based Cognitive Therapy (Teasdale 2002). It has also aimed at identifying positive Mindfulness intervention outcomes for different populations. Current research in this area spans a very wide spectrum from chronic pain (Morone et al. 2008), cancer (Carlson et al. 2001; Witek-Janusek et al. 2008), depression (Teasdale, 1995) to psychiatric conditions such as psychosis (Chadwick 2005) and bipolar disorder (Chadwick 2011) to name but a few. Furthermore, research studies such as that of Coffrey et al (2010) have been preoccupied with refining our understanding of the relationship between mindfulness that have and wellbeing and what might be the underlying mechanisms involved.

The results, albeit tentative, seem to hold a promise that another way of alleviating pain and difficulty is possible, a way that involves embracing rather than getting rid of the difficulty. It is understandable that amidst all the enthusiasm but also in order to draw out the significant differences from other theoretical approaches important questions started emerging such as "what exactly is mindfulness?" and "how does it work?". The need to define "what we mean" by the term has been well documented in the research literature (Baer 2003; Bishop, 2004; Coffrey et al 2010) and researchers have pointed out that despite its prevalence, a consensus over its core essence is very much still "work in progress" (Dimijian S & Linehan, 2003; Cullen, 2010).

Jon Kabat-Zinn through his work at the University of Massachusetts Medical School has been an instrumental figure on bringing the benefits of mindfulness to the attention of the scientific community and to the public awareness in general. This was done primarily through his Mindfulness-based Stress Reduction programme (Kabat-Zinn, 2004) which has since stood as a blueprint for the development of other mindfulness-based interventions (McCown et al, 2010). His often-quoted definition of mindfulness as "...the awareness that emerges through paying attention on purpose, in the present moment and non-judgmentally to the unfolding experience moment to moment" (Kabat-Zinn 2003, p.145) alludes to the quality of being "deliberately" present in our lives in a non-judgmental way and the consequences this has on wellbeing. Shapiro et al (2006), elaborating on this definition of mindfulness, has proposed 3 axioms that run through it: a) intention (I), b) attention (A) and c) attitude (A). These three are interwoven constructs that define the way in which one approaches their mindfulness practice, engages their attention and cultivates an open, curious and compassionate stance towards whatever each moment brings to awareness. I would add that the "attitude" through which the present is approached, although hierarchically not more important than the other two, is crucial because it determines the way that we approach our practice. I wish to argue that especially in Western societies where achievement and competitiveness are an integral part of the overall culture, relying on "intention" and "attention" alone is not enough; cultivating a compassionate stance to identify the "how" of mindful practice (the way it is done) is essential. My own experience of meditation as it has been recorded in my research diary has led me to believe that incorporating a "heart" element to the definition of mindfulness is

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not only helpful but also necessary. I wish to explore this idea further through the Project 1 and 2 studies.

Brown et al (2003) bring attention to mindfulness' capacity to cultivate a different kind of awareness: "mindfulness captures a quality of consciousness that is characterized by clarity and vividness of current experience and functioning and thus stands in contrast to the mindless, less "awake" states of habitual or automatic functioning that may be chronic for many individuals" (Brown et al, p.823). This quality of consciousness is a major component of not responding in a reactive way in the "here and now" and as Germer (2005) adds "it is a way of reacting to *all* experience –positive, negative and neutral- such that our level of suffering is reduced and our sense of well-being increases" (pp4).

<u>Dimensions and mechanisms of Mindfulness</u>

A significant body of research has been generated in order to elucidate the components of the concept and the ways it is expected to interact with individual experience. There have been two strands of investigation: on the one hand on a scientific level attempts have been made to distil the defining characteristics of a concept which until that point existed mainly in a philosophical sphere; on the other hand, on the practical therapeutic level there have been efforts to identify in what way mindfulness-based approaches (MBIs) could be employed and how they might differ from the theoretical and practical frameworks that practitioners have already been using in their professional field. So a need for a clearer definition and for differentiation has been proposed.

As Shapiro and al (2006) put it:

> "Investigating questions concerning the mechanisms of action underlying mindfulness-based interventions will require two different but complementary lines of inquiry. Dismantle studies are necessary in order to separate and compare the various active ingredients of mindfulness-based interventions such as social support, relaxation and cognitive-behavioural elements. A second line of inquiry is examining the central construct of mindfulness itself to determine if the development of

"mindfulness" is what actually leads to positive changes that have been observed" (p.2)

An example of "dismantling mindfulness" is offered by Brown & Ryan (2004) whose study proposed that mindfulness is distinguished from both awareness and attention although it contains both processes. It involves the observation of thoughts and emotions from the standpoint of an inner observer within the mind that can reflect upon the individual's experiencing. This bare relating to experiencing means that the quality of mindfulness is free from biases, distortions and "traps" of cognition and metacognition (Glenberg, Wilkinson and Epstein 1982 in Brown and Ryan, 2004). It also means that this inner observer can acknowledge when the individual is following patterns of thought and/or emotion that involve an automatic and habitual reacting to the world, thus perpetuating suffering; consequently, this acknowledgment can create a reflective space between the event and the reaction and allows the individual to choose consciously if and how to extricate themselves from these patterns. The realisation of the subjectivity and impermanence of inner and outer phenomena also brings about change as it helps the individual to cultivate a life stance that involves a less reactive way of relating to experience (Brown and Ryan, 2004).

The creation of this inner freedom leads to the cultivation of a conscious responding rather than reacting to the world. It is therefore a more tuned-in mode of being, a better synchronisation with one's inner and outer experiencing that leads to a more balanced life. Furthermore, the cultivation of a stance of curiosity and acceptance towards different phenomena changes the way these are routinely experienced (Bishop 2004); so just approaching experience with a different intention brings change in and of itself. The suggestion is that the cultivation of an inner observer assists in having better awareness and control over the way we respond to internal and external events. Studies exploring the question of "how" this is expected to happen, i.e. what are the mechanisms underlying the practice of mindfulness which bring about such changes are discussed below.

The mechanisms of mindfulness involve changes mainly in three important ways: by increasing insight and emotional regulation, decreasing cognitive rumination and cultivating non-attachment. Emotional regulation refers to the ability to tolerate negative affect and

reducing (automatic) reactivity to that which is unpleasant, thus being better able to cope with difficult emotions. Cognitive rumination is especially associated with depression and refers to the mind's tendency to go over and over thoughts and memories especially when they are negative and painful and the ability to reduce these effects through mindfulness practice. Non-attachment refers to recognising the transient nature of internal and external events, thus reducing psychological distress associated with focusing too much on goals and desires and ruminating when those goals cannot be attained (Baer, 2006; Brown et al 2007; Jain et al 2007; Nolen-Hoeksema, 2000; Ryan & Deci, 2000).

I tend to agree more with Coffey et al (2010) who suggest that the main mechanisms of mindfulness are present-centred attention and acceptance of experience with the latter being more important for mental health than the former; they also propose that the other dimensions (emotional regulation, non-attachment and decreased rumination) can be best seen as results instead of mechanisms of mindfulness.

The IAA model discussed above by Shapiro et al (2006) proposes that the development of an inner observer who does not cut off nor becomes overwhelmed by experiencing, leads to the meta-mechanism called "re-perceiving"; they further added four additional mechanisms -which again seem like the results of a mindful stance- and which are: a) self-regulation, b) values clarification, c) cognitive, emotional and behavioural flexibility and d) exposure (Ibid).

There seems to be an apparent lack of clarity between dimensions and outcomes of mindfulness and such a concern has been echoed by some researchers who have pointed out that it is difficult to tease them apart (Bishop, 2004; Brown, 2004). According to my own anecdotal experience from co-facilitating Mindfulness-based stress reduction workshops, participants have mentioned how in meditation exercises it was the suggestion to "return the attention to the awareness of the breath *with kindness*" that they have found most helpful. This is a dimension which I wish to investigate in terms of the experience of seasoned therapists in this Project.

Useful as these findings may be for furthering our understanding, I wonder if we are tapping onto a quality that is more of a stance of life and wonder how precisely we can identify its main constructs. Here I am reminded of the Masterclass on phenomenology given by Prof.

E.Spinelli at Metanoia Institute[1]. He gave the example of the difficulties encountered by physicists who study the nature of light. As they have found, the light can be quite idiosyncratic: it can sometimes be a wave and others a particle, while classic physics tell us that these states are mutually exclusive. Mindfulness seems to me a construct as simple and as complex as light. As with light, you know when it is there, the felt sense of it is very clear. However, once we begin to analyse the phenomenon, its nature becomes elusive. This leads me to wonder about our epistemology: we learn through dissection, observation and compartmentalisation in order to avoid assumptions and bias. As valuable as this method is, I wonder whether it involves an inherent danger of losing the complexity of the wholeness of a phenomenon when it is reduced to its individual parts. Furthermore, I wonder whether it isn't the case that often a phenomenon is more than the sum of its parts because it is the result of the unique interaction of these elements at a given time. I have often found words cannot capture and do justice to the essence of the phenomenon as I have experienced it. And yet define it we must, as one of the main questions being considered has been how mindfulness-based interventions converge or diverge from what is already known in psychotherapy. I present this line of inquiry in the next section.

<u>Eastern philosophy meets Western psychotherapy</u>

So far I have been exploring what mindfulness is and how it works. In this section I aim to explore different readings of mindfulness, suggesting that it might be a wide-encompassing term containing different understandings; then I will discuss the concept of mindfulness within the field of psychotherapy and different therapeutic traditions.

One point of convergence in the discussion on mindfulness is that, generally speaking, the term seems to encompass various understandings. For example, the use of the term in Buddhist teachings is wider and at the same time considerably different in its implications than the corresponding term used in secular programmes. Dorjee (2010) warned that the Buddhist concepts of mindfulness can differ significantly from the secular mindfulness exercised in programmes such as the MBSR. In a Buddhist context, mindfulness is only a part of an general ethical system of right living: within the particular belief system, mindfulness is defined as right attention, clear comprehension (awareness not being

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[1] Prof.E.Spinelli "Inter-relatedness and phenomenological research" masterclass, Metanoia Institute, November 2009.

clouded by moods or emotions), heedfulness (learning from past experiences about which patterns lead to suffering and which to happiness) as well as compassion, lovingkindness, sympathetic joy and equanimity (Cullen, 2011). The author suggests that out of all the buddhist schools and practices, the vipasana school was the one introduced to the west as it cultivated the quality of mindfulness but relied less heavily on ritual, Buddhist philosphy and the centrality of student-teacher relationship (Ibid).   One logical conclusion of this divergence could be that mindfulness practitioners who have been trained in predominately Buddhist contexts could have similarities but also differences with practitioners who have been trained in secular mindfulness programmes; how that then translates into the therapist's view of their role and its impact on their professional work would be an interesting exploration.

The potential "transferability" of mindfulness to the west has sparked scientific interest, generating research and training programmes. I believe there is an interesting debate there regarding the universality or cultural relativity of values and ideas. It informs whether we see mindfulness as a quality that is universal and therefore can be cultivated across different contexts or as an inseparable part of a cultural system –Buddhist philosophy- from which it cannot and should not be extricated. Dorjee writes: "while mindfulness developed in Western psychological context can result in very valuable, both therapeutically and developmentally, understanding […] , "insight" and "wisdom awareness" in Buddhism entail answers to much deeper questions about the nature of the observer, inner and outer phenomena, and the unchanging aspect of consciousness" (Dorjee, 2010, p.156).
The proponents of mindfulness' universality include the voices of practitioners who propose that mindfulness is a quality that is not exclusively Buddhist nor is it new idea in psychotherapy and that elements of it exist in older traditions such as psychoanalysis (Mace, 2007), Gestalt and Cognitive-Behavioural therapy (Brown & Ryan, 2004) and Person-Centred therapy (Rogers 1951); I discuss these propositions further down. Another strand of mindfulness' universality involves the awareness of it being very plainly and obviously "commonsensical, evidence-based, and ordinary, and ultimately a legitimate element of mainstream medical care" as Jon Kabat-Zinn (2011, p.282) writes. He has been labouring on introducing mindfulness to western audiences without running the risk of it being seen as "Buddhist" or "new age"; he comments that "This was something of an ongoing challenge,

given that the entire curriculum is based on relatively (for novices) intensive training and practice of meditation and yoga, and meditation and yoga pretty much defined one element of the 'New Age'" (p.282).

With regards to mindfulness and psychotherapy, a key question seems to be whether mindfulness an overarching quality which is employed in different ways in already established therapeutic traditions or is it distinctly different? On a philosophical level, we know that ideas can crop up in diverse places under different names; for example, Shapiro (2006) offers interesting food for thought when she underlines that the importance of the quality of awareness –an active component of mindfulness- has been discussed by different therapeutic and spiritual traditions:

> "Refinement of awareness may therefore be a central process mediating the therapeutic benefits both of meditations and of psychotherapies and may also be a necessary precondition for a further important meditative process: *disidentification* [...] The result is said to be the ability to observe all experiences with imperturbable calm and equanimity, in a state of mind variously described as "transcendental consciousness" (TM), "mind–body drop" (mind–body disidentification—Zen), *Xujing* (calm stillness—Taoism), "divine *apatheia*" (Christian contemplation) or equanimous "witnessing" (yoga) (Feuerstein, 1996; Goleman,1988; Schumacher & Woerner, 1989) (page 232).

Accordingly, my own cultural understanding of mindfulness includes the ancient Greek concept of "measure" as encapsulated in the ancient Greek "always act with measure" – which used to be one of the noble propositions inscribed on the columns of god Apollo's temple in Delphi. This does not imply some sort of "self-discipline", but the notion that all animate beings have an innate sense of balance, an instinct of measure and the observation of this measure is connected with wellness in life. An ancient Greek poet called Archelochos who lived in 7th cent BC wrote "*My heart [...] be joyful in life's joys and sorrowful in sorrows but with measure; be aware of the rhythm that governs humans*" (in Sakellarakis 2010, p.21 –my translation). The ancient Greek sense of measure included awareness of personal, social and universal balance. It carried the implication that we are all part of the universe

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and that everything in the microcosm and the macrocosm is interconnected: "[The ancient Greeks considered] us humans as a particle, an atom of eternity, an element of a whole which can never be lost" (Ferry, 2010, p38). J.Kabat-Zinn noted this bridge between ancient Greek thinking and mindful meditation when he wrote that mindfulness is a "process of perceiving directly the right inward measure of one's own being through careful, non-judgmental self observation" (Kabat-Zinn, 2004 p.163).

In psychotherapeutic practice the interest in the qualities mindfulness brings has been traced back chronologically and found to exist in a preliminary form in psychoanalytic writings. In her paper on psychotherapeutic attention, Speeth (1982) provides a very interesting discussion on how the quality of attention advocated by Freud bears a lot of resemblance to the equanimus hovering of the therapist's attention proposed by mindfulness. Andersen (2005) also brought into attention that Erich Fromm wrote about the common ground between Zen and psychoanalysis and suggested that the practice of Zen could perhaps address more effectively the self-alienation and emptiness felt by individuals in modern societies. Bruce et al (2010) point to the similarity between mindfulness and Bion's instructions of therapeutically engaging with the client in a way that suspends all of the therapists' memories and desires. The parallels between mindfulness and (psychodynamic) psychotherapy are also highlighted by Mace (2008) when she writes that:

> "Psychodynamic approaches have understood the analyst's attention in just such terms, seeing it as a mental process that needed careful tending. A tradition can be traced from Freud's insistence on 'evenly hovering attention' […] through Bion's strictures on keeping attention 'unsaturated' […] to Karen Horney's descriptions of attention as the heart of therapeutic technique. While emphasising the importance of the receptivity of the analyst's attention, Horney went on to link therapeutic progress to modulation of the patient's own attention" (p.131).

Martin (1997) suggests that the propositions of mindfulness have been contained albeit tacitly in western psychotherapies and as such, mindfulness might be present in both psychodynamic and cognitive-behavioural schools of thought. He goes on to describe how this quality can be employed by the two psychotherapeutic traditions in different ways:

"(there are two forms of mindfulness)... *an open* attentional form facilitates insight and appears prominent within the psychodynamic orientation. *A focused* attentional form facilitates action and is thought to play a central role in the cognitive-behavioral orientation." (Martin, 1997 pp.300). It seems to me that this argument is very important because it treats mindfulness as a versatile quality which can be present within different ways of working. Siegel et al (2009) discussing the essence of "therapeutic mindfulness" (referring to mindfulness adapted to western psychotherapy as opposed to the Buddhist practice of mindfulness) define it as "awareness, of present experience, with acceptance" (p19.) which echo the qualities of compassion and acceptance that are considered quite central the person-centred therapy. Furthermore, transpersonal psychology has also explored the possible link between psychotherapy and meditative practices (e.g. Epstein, 1988; Rowan, 1993).

However, differences do exist -for example in the person-centred paradigm self-empathy emerges primarily *through* the therapeutic relationship while in meditation it comes from the felt realisation of an existential/ontological non-separation. Thus Andersen (2005) writes:

> "In meditation, I would also argue that the antidote to disowned or fragmented experience begins with self-directed empathy. However, *the self-directed empathy in meditation is not internalized from relationships as much as it is born out of the capacity for compassion in the midst of impossible suffering*; that is, when every defence is seen as a dead-end street and when the meditator recognizes the impossibility of disowning, repairing, or even transcending unwanted thoughts and feelings, effort in meditation ends and empathy begins.". (Andersen, 2005, pp 494, my italics).

Also, the mindfulness-based therapies (MBCT, DBT, ACT) have clear protocols which differentiate them from other approaches. On the other hand, I am wondering whether there could be a ground between these two polarities whereby mindfulness could possibly be construed as an important and active ingredient of psychotherapy which serves as a reminder of the importance of the quality of therapist's presence.

Mace (2008) discusses this idea thus:

"Whether we look at the theory or the practice of psychotherapy, it does seem there is something about mindfulness that challenges established boundaries both within and between the cognitive-behavioural and psychodynamic traditions. It also challenges ideas about what is important for therapies to work. Traditionally, the therapist's contribution is divided between factors, such as offering a safe and secure setting, that are seen as non-specific or generic, and others, such as asking patients to complete self-monitoring diaries, or identifying and interpreting the function of psychological defences, that are specific to a given therapeutic school. *Paying attention to a patient, if it is considered at all, has been classed among the non-specific factors* […] the most mindful way to understand what is going on will be by paying very close attention, moment by moment, to all the events in a therapeutic session" (page, 132 -my italics).

Despite its polemic tone, Mace puts forth the suggestion that it might be the case that when therapy becomes preoccupied with symptom relief and focuses on "doing to" the client rather than "being with" the client, then the essence of therapy is compromised; conversely, therapist mindfulness (regardless of the therapeutic approach used, I would argue) safeguards this "being" in the therapy room.

This "being with" of mindfulness-based interventions is cultivated through a tool which is not common in most western psychotherapies and that is meditation. Usually, in programmes such as MBSR and MBCT a variety of practices is introduced including sitting meditation, meditation with movement (e.g. walking meditation or hatha yoga exercises) and body awareness meditation (body scan exercises) (Cullen, 2010). The employment of meditation in psychotherapy can take three forms which are seen as points along a continuum rather than separate stances: a) the therapist him/herself might use mindful meditation for their own personal benefit b) the therapist might engage in mindfulness-inspired psychotherapy, transferring into the therapeutic relationship their own insights cultivated in their mindfulness practice and c) mindfulness-based therapy which involves the explicit teaching of the client of mindfulness theory and practice (Siegel et al, 2009). Researchers such as Geller (2003) have written extensively about the interface between psychotherapy and mindfulness meditation, and how meditation can enrich therapeutic

practice. In particular, she has examined the convergence and divergence of the two in particular as related to experiential psychotherapies (Focussing and Process-Experiential Therapy). She proposes that meditation and psychotherapy might have different yet complementary purposes:

> "While experiential psychotherapies are basically oriented towards clarifying clients' own experience and *self-integration* […] mindfulness meditation focuses on our internal barriers of letting the world into us, in order to achieve greater connectedness with others and be of *service to others*. The development of a more expansive and inclusive perception of the world is the foundation for compassionate action and service, which is the aim of meditation and spiritual practice in general […] A difference between the approaches revolves around the role of self in emotional health. Experiential psychotherapy helps people connect to the self and gain a clear and healthy sense of identity and autonomy, and to value and accept their self-experience and needs (Gendlin, 1996; Greenberg *et al.*, 1993). In contrast, the meditative approach emphasizes that true inner freedom and liberation come from the realization that there is no such entity as the self (Killackey, 1998)" (Geller, 2003, p.265-267).

Geller emphasises a difference in philosophy between psychotherapy and meditation which I find interesting; I wonder how it can be bridged and what are the risks involved. It is a point to take into account in my exploration.

On the other hand, it is thought that meditation practice can produce neuroplasticity, which involves the capacity for the structure and functioning of the brain to be shaped by experience (Schwartz et al 2002). Research on the effects of meditation after MBSR training has shown that "between-session plasticity", i.e. the ability of the brain cells to retain their new positions, has been quite high (Sanes & Donohue, 2000). Other studies have slowly began to emerge, indicating that the practice of meditation can have an impact on various brain functions, such as the ability to regulate attention and brain function (Bishop, 2004; Brown & Ryan, 2003) including the improvement of neurocognitive impairments in individuals with ADHD (Zylowska, 2007).

Siegel (2007) explains how the effects of mindfulness meditation can affect brain neuroplasticity thus:

> "When individuals refine the ways in which they see the fabric of the mind itself it becomes possible to intentionally alter the flow of mental experience. In this way, seeing the mind with more depth and clarity of focus would allow the mind the regulation of the flow of energy and information to be transformed. For example, if we can disengage old habits of neural firing from creating their automatic and engrained emotional reactions, such as depression or anxiety, we can reduce mental suffering and enhance the growth in our internal world toward mental health. This shift in the focus of attention the way we use the mind to channel the flow of energy and information through the various circuits of the brain changes the pattern of activity in the brain." (p.259)

It is obvious why this could be important in psychotherapy although researchers should compare and contrast these findings in relation to neuroplasticity measures in "standard" therapy. It has been argued elsewhere that meditation goes beyond the level of daily experience because it taps into another level of consciousness and functioning (Zen, Vipassana, Qi-gong, yoga and other forms of meditation have been suggested to be beneficial in this respect):

> "Western systems are almost exclusively drawn from, centred on, and conceptualized in the usual waking state of consciousness. By contrast, meditative cultures, psychologies, and philosophies tend to be both multistate (polyphasic) and multistage (drawing on and investigating multiple states and adult developmental stages, including post-conventional stages)" (Walsh & Shapiro 2006, pp231).

Mindfulness therefore comes from a "polyphasic" culture as suggested above and proposes the cultivation of a stance of life *through* the practice of meditation. However, as I have mentioned above, there exist different meditative traditions which vary amongst them both in terms of philosophy and practice (Barber, 2012); I am aware that the inclusion of meditative practice in therapeutic work is an area that needs to be carefully clarified through research and practice in terms of the "how" (e.g. what kind of meditation, for how

long), "why" (what are the expected results), "to whom" (to what populations is it addressed) and by whom (what are the qualities/credentials of the teacher-therapists). I hope to return to this point through the research inquiries in the following chapters.

Walsh & Shapiro (2006) however, believe that an integration of psychological and meditative traditions is not only possible but potentially very enriching and could be characterised by three distinct stages:

> "The first is one of mutual enrichment via *pluralism and accommodation,* moving from, to use Piagetian terms, assimilation (forcing novel ideas into preformed conceptual categories) to accommodation (expanding and enriching conceptual categories). The second is an *integrative* stage in which the process of mutual enrichment, both theoretical and therapeutic, becomes increasingly systematic. The third stage is *integral* (Wilber, 2000) as the processes of mutual enrichment and integration lead to, and are conducted within, an increasingly comprehensive, coherent, and holistic conceptual framework, adequate to both meditative and psychological traditions" (pp228).

In conclusion, mindfulness has received a lot of research attention but clarifying its essence and usefulness in therapy is still work in progress. In terms of its usefulness I believe that what we might be exploring here is not a dualistic "either/or" question that suggests perhaps artificial polarities between therapeutic approaches, but an "as well as …" that explores the middle ground. Under this light, mindfulness could be construed as a quality informing a stance of life that might be both familiar to practising therapists and new in the sense of requiring meditation practice.

<u>Mindfulness, well being and therapists</u>

Outcome research on mindfulness has explored the association between mindfulness and well-being. The results show that mindfulness is associated with improving well-being in two distinct ways: firstly by increasing one's capacity for self-regulation, relying less on habitual and automatic responding to situations (Brown et al, 2007); secondly, by enhancing

calmness and balance of mind even in difficult and painful situations (Goldstein & Kornfield, 2001 in Josefsson, 2010).

If mindfulness is indeed a helpful and important "stance" that improves wellbeing, a logical next step in research inquiry could be to inquire if and how mindfulness practice could support the wellbeing of those whose work is the wellbeing of others: therapists. Hicks and Bien (2008) have found promising results when they studied health care providers who employed mindfulness in their practice: they had better therapeutic alliance and greater capacity for empathy and unconditional positive regard. Stauffer (2008) and Turner (2009) have supported that positive treatment outcomes could be assigned to "...the development of the health care providers' own attention and affect regulation, acceptance and non-judging of patient experiences, comfort with facing difficult experiences, decreased reactivity to negative events, increased capability for empathic responding, increased metacognitive awareness" (in Escuriex & Labbe, 2011, pp.243). May & O'Donovan (2007) in a quantitative study of Australian therapists found that they reported higher wellbeing, higher job satisfaction and less burnout as a result of the mindful attention and non-judgmental awareness cultivated during meditation.

However, in my view the most important point about these and other similar findings is that the participants did not improve their practice because they were taught a new technique, but because *mindfulness altered their relationship to their own experience*. For example, Swan (2004) investigating the experience of mindfulness practice in clinical psychologists who were also seasoned mindfulness practitioners found that the practice had a transformational effect on the therapists; this in turn influenced their professional stance, seeking more to meet their client's experience with acceptance than to actively pursue change. The author suggests a paradigm shift in terms of clinical psychology training towards a more reflective scientist-practitioner model and suggests that mindfulness could play an important role in this process. His research further suggests that it is the experiential component of mindfulness practice that can be a vehicle of reflective practice, an idea that I believe is worth pursuing. Whilst the particular study aimed to "investigate whether a personal mindfulness practice makes a therapist more effective" (p.22) and what might be the potential advantages and disadvantages for the therapeutic practice, I am more

interested in probing more closely the "transformational" experience on a personal level reported by participants in this study and elsewhere.

Exploring the role of mindfulness within training programmes, Coffrey, Hartman, Fredrikson (2010) on undergraduate students investigating the relationship between mindfulness and mental health, confirmed that mindfulness cultivates clarity of one's internal life, management of negative emotions and non-attachment (in terms of avoiding rumination and destructive patterns) –all associated with wellbeing. Interestingly, they have also found that attendance to the present moment can nevertheless increase distress, because by turning our attention to it we become more aware of it; at the same time though, mindfulness practice can also help the individual manage their internal life better, because by becoming aware of the distress the individual might be in a better place to attend to it in a way that is more caring for their own self.

 The potential of mindfulness practice to increase awareness of negative emotions resonates with my own anecdotal experience in co-facilitating Mindfulness-based stress reduction programmes. In a recent seminar, during a meditation exercise involving body-scan, a participant became aware of pain in her feet due to wearing high heels all day. During the reflection time that followed the meditation exercise, she reported annoyance with becoming aware of the pain: "my feet were not hurting until I was asked to turn my attention to them"; a discussion ensued around how we tend to handle negative and unpleasant experiences once we become aware of them, taking in the reflections of other members. Through this process it transpired that once she had become aware of her discomfort she had the *choice* of how to respond to it in a conscious (non-habitual/non-impulsive), deliberate and caring way. As a result she decided to remove her shoes for the remainder of the day and next day she turned up in her running shoes. Taking it a step further in my own interpretation, I wondered about our "automatic responding" to the demands of our sociocultural world; I would be curious to find out whether the uncomfortable high heels represented for this woman –a Greek psychiatrist- a way of asserting her power and professionalism in a male-dominated profession rife with bias against female professionals. I wonder whether we often get into the stiff context of roles, bending and twisting a part of our inner needs in order to fit into that which is appropriate.

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Becoming aware of when, why and how we do that gives us back the choice. I would assume that for this woman it was important both to realise that she does have a choice of how to respond to her need and to feel safe and respected enough in order to let herself exist more freely.

Struggling with discomfort and stress has also been known to colour the experience of many trainee therapists. Andersen (2005) points out that "for overworked graduate (counselling) students experiencing the stress that the initial study of psychopathology often engenders, the self-directed empathy of meditation practice might improve the efficacy of clinical training while helping students integrate the emergence of disowned or fragmented experience". (pp499). Maris (2009) has recorded quite eloquently her internal struggles with her counselling course (which are common to most trainees) when she decided to enrol to the mind-body programme which included mindfulness training. The description of her experience highlights the consequences of mindfulness training *in her sense of self*:

> "I was surprised that my supervisors were evaluating my work more positively, using words like "calm," "connected," "safe" to describe my presence with my clients; words like "new alive quality" and "willingness to take risks." What had changed? Clearly, the first thing that had changed was my relationship with myself. Mindfulness practice enabled me to experience the present reality, both internal and external, from a kind of participant/observer stance. I noticed I was having thoughts and feelings. My thoughts and feelings were no longer just having me. A space was created in which it was possible to respond rather than to react". (pp233).

The mind-body programme that Maris attended included yoga, qui-gong, meditation and tai-chi (Christopher et al 2006). Christopher and Maris (2010) studying the effects of the programme on counselling students suggested various ways in which mindfulness training affected them: the results showed increased awareness and acceptance of the trainees' own experiences; increased sense of wellbeing and compassion towards others; sensitivity to the messages "flowing in" from the body all the time such as need for rest, hydration, movement as well as noticing the body before it became ill and attending to its needs. In terms of psychological effects they experienced reduction in reactivity and an increase in reflexivity; they became more aware of the voice of the "inner critic" and began to release

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the illusion of control by allowing a "following" of the self rather than controlling. There was also a change in interpersonal relationships – trainees became more aware of their projections and reactivity/repeated patterns of behaviour in personal relationships; they developed the ability to be "present" with others and more authentic in their interactions. In their professional life they noticed that they spent less time worrying about what they are going to do, and were better able to be aware of their own fear and tension and tolerate that. As a result they were better able to create "welcoming, holding environments" for clients' difficulty. Moreover, these findings were true for people who had finished the course 4.5yrs earlier. Amongst all these promising results what I found most interesting is that overall it was the *experiential* knowledge of mindfulness practice that helped the students deal with the challenges of training.

Shapiro, Brown & Biegel (2007) in their study on the effects of a Mindfulness-Based Stress Reduction (MBSR) programme on mental health trainees and their ability for self-care, they found that they reported less stress, better ability to regulate emotional states, a decline in rumination, increase in compassion for self and clients. They went on to suggest that self-care through Mindfulness could be a valuable addition to mental health training programmes. Other research has focused on the effects of mindfulness on health professionals, such as doctors and nurses, reporting a greater "healing presence" as a result (Epstein 2003a; 2003b; McDonough-Means et al 2004 in Gehart & McCollum) and reduced burn-out rates amongst nurses (Cohen-Katz, 2005 in Ibid). Therapeutic presence was also found to be enhanced in therapists using meditation in a qualitative study exploring the subjective experience of therapists (Geller & Greenberg, 2002).

On the other hand, recent study by Escuriex & Labbe (2011) reviewing the research literature on the benefits of mindfulness on health care providers has concluded that while overall mindfulness *is* thought to have a positive impact on practitioner's sense of self and psychosocial functioning, there is not enough evidence at present to conclude that practitioners –and mental health professionals in particular- benefit from being trained in mindfulness because not enough research has been carried out in the field. In addition, one dimension which they highlight that has not been adequately explored is studying the experience of seasoned therapists and not just trainees.

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There is therefore a relative scarcity of research on MBIs wellbeing and mental health professionals, making studies such as the above some of the few to have investigated this strand. It is obvious that under the umbrella of mindfulness-based interventions many different practices could exist, and more research is needed in order to elucidate *what* kind of mindfulness training produces *what* results in *which* populations. Ludwig & Kabat-Zinn (2008) support that "the lack of consensus about working definitions of mindfulness and other meditative practices impedes comparative studies" in terms of mindfulness research (p.1352). Christopher et al (2010) conclude that mindfulness-based research offers little in the way of identifying and understanding the impact that mindfulness has on helping professionals. It is a dimension worth exploring if we assume that the wellbeing of people helping other people is of paramount importance.

In conclusion, mindfulness research findings to date seems to suggest that mindfulness could be very useful for mental health professionals because it instigates changes on a personal level which in turn brings positive changes to their work. As a result, an area that is being actively explored at present is how to include mindfulness theory and practice in counselling training. However, it is also agreed that there needs to be further research on the experience of therapists who use mindfulness and that this research needs to be qualitative in order to illuminate the intricate dimensions of individual experience. All of the above have led me to want to investigate within the qualitative tradition how seasoned therapists have experienced mindfulness in their personal and professional fields, i.e. how the mindful practice has impacted their "being" within the different spheres of their life and to see how their experience could be helpful in terms of conceptualising the interface between mindfulness practice and integrative counselling training here in Greece. I will proceed therefore to discuss the rationale of my doctoral project.

Chapter 3: Rationale of Projects 1 and 2

In this section I will present the rationale for projects 1 and 2. In particular I will discuss the rationale behind Project 1, which involves the need for a more in depth understanding of the experience of mindfulness for the therapists who practice it. The rationale for project 2 will outline the reasoning behind exploring the experience of counselling trainees in Greece of a Mindfulness-based Stress Reduction programme (Kabat-ZInn, 2004).

Project 1: Rationale

Mindfulness and mental health professionals

It is interesting that the propositions of mindfulness describe that which I have been trained to do and have been familiar with as a counselling psychologist: to be aware of my experiencing, be curious, exercise emotional regulation, try and meet intra- or inter-personal difficulties openly, genuinely and empathically. Personal therapy, supervision, seminars and workshops have been facilitating my professional journey for many years and have all been immensely valuable, albeit "necessary but not sufficient" in developing a sense of holistic "being" in my personal and professional roles. At the same time, interest in mindfulness in the UK has been mushrooming making it into an often-quoted banner, while in Greece it has remained relatively unknown or met with considerable scepticism due to the meditation techniques employed. I found that I had to balance out these two polarities in my own self: on the one hand my faith in something that felt beneficial on different levels and on the other hand my inner sceptic, asking "so what" and "why is this so important".

As noted in the Literature Review, a central hypothesis that exists in mindfulness literature is that it promotes wellbeing (Carmody & Baer, 2007). Psychological wellbeing can be construed as "realising one's true potential in terms of wisdom, compassion and creativity" (Wallace & Shapiro, 2006 p.691), which to me seems to be at the very core of the therapeutic profession. If as it is often said we can only take our clients as far in their self awareness and actualisation as we ourselves have gone, then cultivating this kind of "wellbeingness" within ourselves becomes crucial for our beneficial practice; in other words,

cultivating the "being with" ourselves facilitates the "being with" with other people in our personal and professional lives. If we as therapists cannot give "permission" to ourselves to do that, how can we guide our clients down this path? The importance of this process is best captured, in my opinion by C.Trungpa, in J.Welwood's "Awakening the Heart: east/west approaches to psychotherapy and the healing relationship" (1985) when he writes that: "the basic work of the health professional in general and of psychotherapists in particular is to become full human beings and to inspire full human-beingness in other people who feel starved about their lives" (Trungpa, 1985). I have been very curious about this idea of "full human-beingness" which I intuitively felt is vital for the helping professions and wondered if mindfulness could cultivate such a stance. This is a strand that Project 1 aims to investigate.

Most research on the experience of mindfulness by mental health professionals has been done on trainees, although there is some research indicating that mindfulness can be very beneficial for therapists both on a personal and a professional level (Bien, 2006; Epstein 1999). In my review of the literature I have been surprised to find very little in terms of studies qualitatively exploring the experience of mindfulness in seasoned therapists.

Yet, taking into account that the "first generations" of Mindfulness-based or inspired therapists involved practitioners who had already trained and worked using different theoretical models, like myself or older colleagues, I wished to explore what it was in mindfulness theory and practice that intuitively "made sense" to colleagues and how this "making sense" was experienced. Furthermore, taking into account that our understanding of Mindfulness theory and interventions is being developed as we speak, it would be logical to assume that those experienced practitioners drawn to it would have initially at least come across it in less "institutionalised"/academic ways than younger generations of therapists who have at their disposal the training programmes developed in the meantime and wished to explore these more or less conventional paths.

I need to point out that my interest in exploring mindfulness vis-a-vis the experience of psychotherapists has not been in terms of proving the how this approach could be useful addition for therapists' existing repertoire. I am aware that at the time of writing there are various esteemed programmes offering mindfulness-based therapy training.

I have been more interested in if and how mindfulness helps therapists "come to their own", in other words, if the mechanisms of mindfulness described in the previous section

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could provide an element that helps therapists have a more integrated personal "voice" in their work. In this respect, I agree with Rønnestad & Skovholt (2003) when they state that:

> "Given the enormous effort of many psychotherapy researchers to minimise the effect of the individual counsellor/therapist, when studying a specific intervention it may be surprising that variation in outcome *across* methods is smaller than variation in outcome *within* methods. From critical inquiries into a large body of research on the relative effect on counselling/therapy methods (Wampold, 2001) the conclusion is that it makes a bigger difference *who the therapist* is than the method that is used" (p.6 my italics).

I am interested therefore to see how mindfulness has interacted with "who the therapist is" and whether it has helped clarify this question that in my view occurs in most practitioners during their personal and professional development.

Finally, I am interested in exploring the particular challenges and doubts that professionals faced in their Mindfulness practice – the experiences not usually reported; since proposing that idea in my LA, this area of research has been identified in literature as one of the most interesting and underdeveloped ones in Mindfulness research (Sears S.R, 2011). For me, it falls within the area of exploration of the experience of mindfulness and I believe it is as important –if not more- than outlining the value of the approach because it helps us define its scope, limitations and risks.

I aim therefore to launch an exploration along two different strands: my own experience as a therapist (see Heuristic Inquiry section in this chapter) and the experience of other therapists practising mindfulness. For this purpose I aim to interview therapists who have had at least a decade of experience in working psychotherapeutically and who have been using mindfulness on a personal and/or a professional level. I then plan to analyse the interview data using interpretative phenomenological analysis. I also plan to record my own thoughts, images, sensations, hunches, intuitions which rise to the surface by engaging into a heuristic inquiry of my own experience of mindfulness.

The details of the sample, method and methodology can be found in Chapter 4.

The research questions for Project 1 included in my LA document read as follows:

Research questions: therapists' Lived experience of Mindfulness (Koliris, 2009)

1. What does Mindfulness mean to the therapist? How does it feel to be mindful in their daily lives?

What is their felt experience? Does Mindfulness influence a therapist's personal sense of self and if so, how?

2. How do therapists understand the term "full human-beingness" and how does it relate to their lived experience?

3. Does it affect their professional role and how? Do they use specific techniques in therapy or

Mindfulness informs their general stance but not the tools they use?

4. What are the aspects of Mindfulness that the therapist finds helpful?

5. At which point in their personal and professional path did the therapist turn to Mindfulness? How has their journey so far led them to that point? What was their training/background?

6. How does the therapist feel that their clients respond to Mindfulness?

And:

7. What are the difficulties and risks in Mindfulness practice that the therapist has encountered?

Question 7 was introduced since the LA and following further consideration and refinement. This line of questioning about difficulties or risks therapists may have encountered in their mindfulness practice was included in order to counteract the potential effect of both my and the participant's positive bias towards Mindfulness and to create the opportunity to hear about the aspects of mindfulness that the participating therapists struggled with. The addition of this dimension was thought to render the exploration more complete.

Project 2 Rationale

In a study on trainee therapists, Skovholt & Rønnestad, (2003), in whose work I refer extensively as I believe that they have provided an accurate depiction of the challenges faced by trainees, found that overall: "many students are admitted to graduate school in the counselling and therapy professions because they excel at mastering the intellectual content in academic classes. However, this skill set does not translate directly into the complexity of practice" (pp 46).

They define the major challenges trainees meet as: acute performance anxiety and fear, scrutiny by professional gatekeepers, porous or rigid emotional boundaries, fragile and incomplete practitioner self, inadequate conceptual maps, glamorised expectations and acute need of positive mentors (Ibid).

As I have already discussed in the Introduction to Projects 1 and 2 and have recorded in detail in my Research Diary, the idea behind this project emerged from my interaction with trainee counsellors and the stress they felt in that role. I felt that they experienced a sense of fragmentation, which could be related to the "incomplete practitioner self" that Skovholt & Rønnestad (2003) describe in terms of shifting between various moods such as "...enthusiasm, insecurity, elation, fear, relief, frustration, delight, despair, pride and shame. The novice self is fragile and therefore highly reactive to negative feedback. Metaphorically expressed, there is not much muscle and the immunology system is stressed" (p.50).

I remember quite well how in my own training days I too had experienced a dichotomy between who I was and who I should be, and the resulting sense of fragmentation of self. To follow the above analogy, it was as if I was working out to develop different sets of muscles when I had difficulty placing where my heart was! I therefore feel that if trainees could be helped to view their role and their developmental process not as something separate from who they already are (a new self that has to be "achieved") but the acknowledgment and evolution of the existing self then I feel that not only the training experience would be less stressful but their sense of their emerging role would be more robust and resilient. I have wondered therefore if mindfulness could be a vehicle of "self integration" that could help counselling trainees develop in their personal and professional spheres.

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While there are programmes offering mindfulness training to practitioners, there are no integrative counselling training programmes to my knowledge (at least in Greece) that have incorporated mindfulness to their curriculum *not as an added ingredient but as a quality that facilitates the whole learning of how to be a therapist.*

Furthermore, as mindfulness is still relatively unknown in Greece there are no studies to date that describe the experience of Greek counselling students; this in itself is an interesting topic: how students relate to something new when there is no context within which to frame the experience. Nowadays in the UK mindfulness is an area actively explored and debated amongst mental health practitioners. This situation might place UK students in a position of possibly already carrying some pre-understanding of what mindfulness is; in addition this pre-understanding might involve positive or negative connotations: "it is good for you" or "it is just the 'new fashion' in mental health". The omnipresence of mindfulness and the momentum mindfulness-based interventions (MBIs) have built carry positive and negative aspects. Either way, it could be argued that we are talking about a saturated context whereby mindfulness is already "known" creating expectations or assumptions. In Greece however, since mindfulness is not known to most people, there are no comparisons to be made and therefore from this point of view, Greek students have a "beginner's mind" that can relate to the experience in a more direct way.

In addition, I believe that on top of the training stressors outlined above and in the Literature Review (Chapter 2) the reality of counselling in Greece presents trainees with further challenges and complications. My hypothesis is that mindfulness can play a very important role in meeting these difficulties. In order therefore to place this study within the sociocultural context, I will proceed to give a brief overview of counselling training in Greece.

Counselling in Greece

The profession of the counsellor is relatively new in Greece and up to the present it has no legal status (as for example for the profession of the psychologist); as a result there is no official practicing license or organisational membership that qualifies an individual to practice counselling. Although counsellors and psychotherapists trained abroad or in private organisations in Greece have been active professionally since the 1960s-70s, the Hellenic

Association for Counselling (HAC) did not get established until 1994. HAC abides to a code of ethics closely related to the European ones, but effectively does not have the authority to impose it on its members or to safeguard good practice.

Most individuals who wish to train as counsellors study either in private institutions in Greece or abroad (or in the very recently established Masters in Counselling Psychology at the State-run University of Athens), but since there is no standard training framework the requirements vary greatly from one place to another. Having worked as a trainer in two different private institutions, one example that comes to mind is that one programme required a minimum of 40 hours personal therapy while another did not deem therapy at all necessary during training. Through anecdotal discussions with other colleagues, I have come to realise that other dimensions such as theory and skills training, ethical practice and internship can also be widely varied: some programmes send their students to pre-selected organisations, others leave it up to the student to find a placement while others count the student's own private work or their observation of "sessions" by other professionals (sometimes even psychiatrists) as trainee practice hours.

Once in placement, it is most likely that the trainee will have to work with people –social workers, doctors, nurses, administration- who have a quite different or vague conceptualisation of the role of the counsellor and accordingly of workplace ethics. It is often a considerable challenge placed on the shoulders of trainees to step into organisations with no previous knowledge of counselling and have not only to educate others about their role but more significantly, to negotiate their ethical practice. In my anecdotal experience, a code of ethics is seldom employed by most organisations offering placements since they are often unaware of it. It befalls the student therefore to strike a delicate balance between being a welcomed visitor within their placement organisation and introducing "new" ideas and practices. It is not surprising that most students are reluctant to do so and suffer a lot of stress as a result –as my experience as a trainer and supervisor has shown me.

It would require a long chapter to outline the peculiarities and shortcomings of counselling practice in Greece. I would metaphorically describe it as setting someone up for an expedition with a map that does not mention the dangers ahead (code of ethics), a toolbox with miscellaneous objects (theoretical and skills training), unfriendly indigenous tribes (placement organisations) and no one validating their competence at the other end (professional license). Being a witness to the struggle of students to make it safely across

such a difficult terrain, has propelled me to inquire further about the use of mindfulness for Greek students.

The questions therefore that I have set out to explore in Project 2 with Greek trainees are:

- What has been your felt experience of the training course?
- How have you experienced/felt/envisaged the development of your professional identity? What has been helpful in this process? What has been unhelpful?
- When have you felt more "yourself"/whole in your internship placement? What happened? How did you know?
- How to you understand the term "full human-beingness"?
- How do you see your counselling identity co-existing or conflicting with your other existing roles?
- If you were to design a counselling course what would you include and why?
- How did your mindfulness experience/practice affect your personal life (awareness of self, relationship with others, development)? Were there any negative consequences?
- Do you see it as a potential part of a training course (why yes/no)? (Koliris, 2009)

<mark>**The process of generating the research questions for Projects 1 & 2**</mark>

Before I proceed to discuss the Methods and Methodology for each Project, I would like to offer a few words on the process of generating the research questions. Creswell (2007) suggests that most of the times qualitative research begins with an overarching question which is further elaborated upon by sub-questions. As it follows from the presentation of the project(s) rationale so far, the overarching question could be: "how do therapists and trainees experience mindfulness, what meaning do they ascribe to their experience and how is it related to wellbeing and 'full-human beingness'"?

The process of distillation that culminated in reaching this question and the sub-questions outlined above   involved identifying initial "topics of inquiry" –which contained the preliminary seeds of the research questions- and placing them within several contexts:

The first context was my own experience: as a counselling trainer I identified the questions that started emerging once I began to informally introduce mindfulness to my students and from running MBSR groups in Greece. On a personal level, I noted questions related to my own experience of mindfulness practice and engaged my critical friend and mindfulness

colleague into such a dialogue. Both of these preliminary lines of inquiry are documented in my Research Diary.

Moving from the anecdotal experiences of my students and myself, I sought to place the potential research questions within the context of the current literature on mindfulness and to what was being investigated by other researchers: what questions were they asking? What did the accounts of the research participants say about further questions to be asked? Also, and equally importantly, what was that –in my opinion- was not addressed but could be significant, i.e the questions not being asked which could be relevant? (see Literature Review Chapter).

In parallel, I aimed to place my research questions into the context of the doctorate; in particular, to use my fellow candidates/colleagues as a sounding board for testing my research ideas vis-à-vis their own expertise and interests, taking into account that my research project had to be not only valid but "of value" (see Introduction Chapter on Professor Portwood's conceptualisation of the doctoral research process). This investigation took place in the Research Challenges class and in Professional Knowledge Seminars during Years 1 &2 of the programme; it involved rendering my own thinking visible to colleagues and accepting feedback on how clear, interesting and important my questions were to seasoned practitioner-researchers from a different socio-cultural background (i.e. did they make sense and were they relevant to colleagues in the UK)? Furthermore, I engaged in similar informal discussions with colleagues from Greece (see Project Signatories) in order to ensure that my research questions were clear and relevant within my own cultural and professional context too. I also discussed several rough sketches of the research questions with my Academic Adviser and Academic Consultant. This interactive spiral of placing threads of inquiry "out there" for discussion and feedback led to several re-workings of the questions and resulted in crystallising their essence. The process of making my inquiry public had an additional benefit, that of having pointed out to me what might have been my own biases and potential blind-spots and what questions other people felt that would be worth pursuing. The final product therefore was the result of a series of interactions, discussions and challenges.

Heuristic Inquiry

In parallel with Projects 1 and 2 I will be carrying out my own exploration of how I experience mindfulness and its impact on my life. I will aim to bring together the entries in my research diary regarding my "mindfulness experiences" (personal mindfulness practice; experience of a meditation retreat; co-facilitating MBSR or other mindfulness seminars etc) and the tacit dimension. Inviting the exploration of other levels of my experience through non-linguistic means, I will attempt to formulate what my own experience tells me about what mindfulness is. Heuristic inquiry forms a stand-alone chapter in this document (Chapter 10).

Finally, I see my quest as bringing together different strands: the tradition of psychotherapy and helping other people; the spirituality of meditation; and the political decision making about how therapists should be trained. Moreover it has a philosophical angle as it attempts to discuss our process of "becoming" as human beings and how this is best facilitated and enriched. In Greek philosopher Aristotle's writings, a psyche ("soul" in modern Greek but also "butterfly" in ancient Greek) makes the journey of transformation from caterpillar (ground bound) to butterfly (air-borne). I am hoping that this exploration will say something about this journey of transformation and the experience of psychic freedom.

Project 1 & 2 Quality Assurance

In qualitative studies when quality assurance is built into the research design it ensures that the evidence presented is credible and trustworthy. The credibility factor refers to how accurately the evidence reflects the subject of the study. Trustworthiness on the other hand reflects the extent to which the research conclusions are supported by the evidence (Guion et al. 2011). Qualitative researchers have been using a variety of ways to make sure that their research findings are "true" and "certain" (for example see Creswell's 2007 summary on perspectives and terms used in qualitative validation, pp202-203). Although the choice of validation measures can vary, purposive sampling, multiple coding and triangulation are used widely (Barbour 2001). Creswell and Miller (2000) helpfully suggest that: "the choice of validity procedures is governed by two perspectives: *the lens* researchers choose to validate

their studies and researchers' *paradigm assumptions*" (p. 124, my italics).

Different lenses through which the data can be viewed are researcher reflexivity, participant inclusion and external reviewers (Ibid); I discuss the lenses employed in Projects 1 & 2 below. Paradigm assumptions refer to the researcher's biases, assumptions and worldview (Ibid). I have tried to render my own pre-understandings, biases, assumptions and worldviews visible to the reader throughout the doctoral document; however, a more detailed discussion on how they inform my epistemology and methodology is presented in the Project 1 Methods and Methodology chapter which follows. In this study a number of lenses/strategies are employed: purposive sampling, process disclosure, triangulation, participant feedback, researcher reflexivity, thick and rich descriptions and multiple coding. Below I discuss how each method is used within the Project(s).

The rationale for using **purposive sampling** for both projects is discussed in Chapter 4 Methods and Methodology (see Sample section) with regards to the selection of participants where I have presented the arguments in favour of choosing purposive sampling for both projects. As this procedure influences the findings presented, i.e. the study of a particular group of people yields particular results, it is within the realm of a research study's quality assurance for the researcher to discuss those limitations (Patton, 1999); these will be presented at the end of each Discussion chapter under a relevant section (Limitations of Research).

The **public disclosure of processes** followed by the researcher is also a way of ensuring research validity (Anfara et al 2002); some examples of such disclosure include a discussion of how the interview questions were generated (see earlier section in this Chapter); the presentation of several extracts from the data to show the step by step emergence of themes; the inclusion of the researcher's own reflexivity etc. Throughout this project care has been taken so that the research procedures ranging from question generation and sample selection to data categorisation and interpretation are made transparent for the reader.

Triangulation is considered a solid quality assurance method and has been widely used. From a mindful inquiry point of view, it clearly places the researcher at the centre of the study "weaving together and describing the results from each point of the triangle" (Bentz & Shapiro, 1998, p.89). There can be different kinds of triangulation, e.g. triangulation of data

gathering methods, of different sources of data, or of various data analysts (Patton, 1999).

In this research project (Projects 1 &2 and Heuristic Inquiry) I aim at triangulation of data (Creswell & Miller, 2000) by using different kinds of participants -in this case therapists, trainees and my own self.

Gathering different types of data gives the researcher a "detective" role of "gathering evidence" from various sources, including those that disconfirm initial hypotheses and interpretations (Creswell, 2007). In the case of my own study of mindfulness, having noticed that most mindfulness literature seems to focus primarily on mindfulness' benefits (see Literature Review chapter), I will deliberately venture to include the examination of negative or difficult mindfulness experiences in the participating therapists and trainees (as explained in Projects 1 & 2 Rationale Chapter). I will furthermore note the differentiations between this study's themes and those presented in the literature. I will then present the themes in the Discussion chapter by dividing them into "Converging" (with findings already known through literature) and "Diverging" (which may be unique to this inquiry). I further aim to employ the same approach of identifying "confirming and "disconfirming" experiences when investigating my own mindfulness experience (see Chapter 10).

Researcher reflexivity is another means through which quality assurance is sought. To this end, the acknowledgment of the researcher's idiosyncratic lens and its interaction with the data is very important. Altheide and Johnson (1994) describe this process as a kind of "validity-as-reflexive-accounting" (p. 489) which illuminates how "the researchers, the topic, and the sense-making process interact" (in Creswell & Miller, p.125). Reflexivity can be weaved into the research project by the researcher's disclosure of assumptions, beliefs, and biases. There can be different ways which a researcher may employ in order to incorporate a reflexive angle into the research narrative. It may include using a separate section in the research study to discuss the role of the researcher, writing an epilogue to the research process, "bracketing out" their role in research by providing accounts of personal experiences, or employing an interpretive commentary throughout the discussion of the study's results (Moustakas, 1994 in Creswell & Miller 2000). In this document I have discussed my individual lenses as a researcher-practitioner and my active interest in mindfulness practice in the Introduction (Chapter 2) and have included my own reflexive account in Chapter 10 the heuristic inquiry into my own experience of mindfulness. Furthermore, aim to "bracket out" and discuss my own role especially in Project 2 where I

will be working with focus groups of Greek counselling students with whom I have a pre-existing relationship. The doctoral document ends with an epilogue in which I reflect into the research journey and the challenges encountered.

Thick and rich descriptions are employed in qualitative research to convey the vividness and multimodality of human interactions. In this study, I intend to represent my interactions with participants as vividly as possible by using interview extracts to highlight themes in the Results chapters; additionally, I will indicate the use gestures and of colouring of the voice in the transcribed text; I will provide an account of my own "felt sense" of being with each interviewee/focus group; I will also try -when depicting the focus group interactions- to convey the use of images, metaphors and emotions by each group; finally, I will attempt to place their words within the cultural context of counselling training in Greece.

Finally in Project 1 two additional measures have been taken:

Participant feedback: there are different ways of employing participant feedback, one of which is giving participant access to the raw data (Creswell & Miller, 2000) in order to get feedback on their accuracy. All participants will be sent the transcribed document of their interview to correct and/or comment upon. In the case of participants asking for a copy of the finished thesis, this will be provided to them once it is completed (applying to the participants of both Projects).

Multiple coding: A counselling psychologist colleague in Greece with substantial qualitative research background will be sent extracts of the interviews and coding and will read through them in order to ensure that the coding and themes reflect the raw material of the interviews and that my interpretation depicts the meanings conveyed with a good degree of accuracy.

In conclusion, I will try to ensure that the findings of the research projects are "true and credible" in a variety of ways. However, I am also aware of warnings issued by authors such as Barbour (2001) in terms of reducing the quality assurance process into a a "checklist approach", whereby steps are followed mechanically and used uncritically. Furthermore, Mc Leod (2011) wonders if there can ever be a univocal agreement on how much "reflexive self-disclosure" is sufficient on the therapist-researcher's part or how authentically has an author conveyed their "personal perspective" or how much of "situating the sample" (describing the participants and their life circumstances) and "grounding the data in

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examples" is deemed satisfactory? He concludes that in the end, when all quality assurance checks have been put in place, "the *personal* qualities of the researcher, his or her integrity, courage, honesty and commitment to the task of inquiry, actually make a difference" in terms of resonating with the readers (p.280).

Although the practitioner "reflexivity Holy Grail" might be hard to find, I do hope to make visible throughout this document how the participants in the project(s) interact with where I am coming from and how it informs our co-creation of a story. In the end, as Richardson & St.Pierre (2005) suggest, the process of building validity into a research project is not unlike a process of "crystallisation"; crystals are constructs which are not static but instead "...grow, change and are altered but are not amorphous. Crystals are prisms that reflect externalities and refract within themselves (...) what we see depends on our angle of response" (p.963).

Chapter 4: Project 1 Methods and Methodology

In this chapter I will present the rationale of the proposed methodology and method, the research design, the process of constructing and refining the interview questions, the participants, the interviews, and the data gathering and analysis.

The chapter is divided into two parts. In the first part I present the interpretative-phenomenological exploration of therapists' lived experience of mindfulness. In the second part I present the heuristic exploration of my own experience of mindfulness.

Throughout the chapter I refer to the work of John McLeod on research methods. Since I was a student and throughout my career, I have felt that his analysis of the philosophical, historical and political strands underlying research has reflected my own convictions and preoccupations regarding the ways we use to explore our experience.

Part 1: An interpretative-phenomenological exploration of therapists' lived experience of mindfulness

Rationale of proposed methodology

I have argued in the introduction chapter that the subject matter of my research would be usefully served by a qualitative methodology. In this chapter I will discuss in more detail why make this claim and how I envisage the shape and form of this qualitative investigation.

I admit that I am not a qualitative methods "natural". My research training as a counselling psychologist was predominately quantitative. Yet, when it came to thinking about which philosophy of methods and what type of methodology better suited my exploration I instinctively turned to qualitative methods. There are a few reasons for that: first, even when I was engaging in quantitative methodology I could see how despite its advantages it left me wanting a deeper understanding of the subject under study (as discussed in my RAL paper); secondly, I saw it as a challenge to move beyond my comfort zone and attempt an exploration that would better illuminate the heart of my investigation and not just suit my own training, preconceptions and skills; thirdly, as an experienced professional I have found

myself being increasingly preoccupied with clarifying my understanding the subjective than making general claims of the objective.

Taking all this into account I approached the focus of my research wondering which philosophical and methodological approach I could employ in order to illuminate it. As I have already discussed elsewhere (LA, Koliris 2009) the focus of this project has been on discovering the subjective experience of therapists who have incorporated Mindfulness in their personal lives and often in their work. Through the work done for the RAL paper and the Research methods module I began to clarify the roots of my own epistemological inquiry. I identified it as following social constructivism in terms of giving room to the different truths being offered by the professionals.

Social constructivism "draws attention to the fact that human experience, including perception, is mediated historically, culturally and linguistically" (Willig, 2001, pp 13); therefore both myself as a researcher and the participants of the study as well as the subject matter of the study, Mindfulness theory and practice, are part of a wider cultural, historical and social momentum that places the observer and the observed in a dynamic dialogue with each other, be it in Psychology, Physics (quantum theory) or other sciences. It could be argued that this momentum is the result of the wider post-modern approach to knowledge whereby "the certainty of our knowledge is less a matter of interaction with a non-human reality than a matter of conversation between persons. Knowledge is inter-relational" (Kvale, 2009 pp21).

Accordingly, the chosen methodology is qualitative as it possesses the "ability to capture the complexity of the subject matter and elicit richness of material from the participants" (Mc Leod, 1999). The epistemology of qualitative methods and phenomenology in particular offers an interesting parallel to the Mindfulness theory and practice where the focus is on constructed realities. "Objective truth", if it even exists, is given little attention as there is an invitation to connect with the internal and personal knowledge of the world rather than the external knowledge that emerges from sources outside one's experience.

Another principle of the Mindfulness theory and practice that offers an interesting parallel to the methodology is that in order for the practitioner to be able to use the theory and the techniques in clinical work, they need to immerse themselves into Mindfulness meditation

for a substantial time; the practitioner needs to have a felt rather than an external academic knowledge of the theory –in other words approach knowledge from within rather than be the passive recipient of external facts. Of course research studies and theoretical background continue to be of great importance but they do not substitute the main means of accessing the knowledge of the subject which is experiential. As discussed below, IPA methodology which is the method that will be used to analyse the research data, places the researcher's own experience of that which is studied right in the heart of the exploration.

I have written in my RAL and LA papers about my background in positivist -quantitative research, which is a tradition I have been trained in and become familiar with. While I do appreciate the strengths of positivist research –epistemologically speaking, it has introduced the concepts of systematic and empirical observations, scientific rigour, control and transparency in the research process and a warning against ideological bias (Kvale, 2009), I felt that there was a potential richness of material in my research topic that asked for different tools in order to be brought to light and made sense of. My exploration of research methods echoed that of another researcher who commented that "my understanding of research has moved from a mechanical (how-to-apply-the-appropriate-techniques-to-the-subject-matter) to a creative (how-can-I-find-out?) mode" (Willig, 2001, p.8).

Still, I am also aware of the relative scepticism in the wider psychotherapeutic research community towards qualitative explorations. I agree with Etherington (2004, p.49) when she writes that "it is only in comparatively recent times that research communities have begun to accept that qualitative research may be rigorously valid when the researcher's process is transparent and used as part of the data".

Rationale of proposed method

Interpretative Phenomenological Analysis has been chosen to analyse the research data as it aims at capturing individual "sense-making" of the world. IPA is said to have originated from the work of E.Husserl, a philosopher and mathematician who rejected scientific positivism and proposed that knowledge stems from experience thus setting the ground for the emergence of phenomenology (Fade, 2004). Therefore, the lived experience of participants became the object under study in order to explore internal and external phenomena. However, the approach goes beyond simply describing the individual experience. IPA also seeks to understand the sense the participants make of their world, and the researcher

engages in a form of interpretation of what the participant offers. Therefore, the IPA analysis highlights the dialectical aspect of inquiry in that reality is co-constructed between researcher and participant; this joint construction of the world proposes two levels of interpretation, one concerned with the meaning an individual makes of their world and another with the meaning the researcher makes of the individual making sense of their world (Smith & Osborn, 2007). The researcher is a conscious part of the process of "creating a reality" instead of being carefully removed from the process. Therefore, "IPA is phenomenological in that it seeks an insider perspective on the lived experiences of individuals, and interpretative in that it acknowledges the researcher's personal beliefs and standpoint and embraces the view that understanding requires interpretation" (Fade, 2004, pp.648). For me, it was both these facets of the theory that appealed with regards to my project. Not only was I seeking to illuminate the participants' lived experience, but also I would be interpreting their interpretations of their experience; it could be argued that this is not unlike what we do in therapy, in an effort to create a common understanding that takes us beyond the initial understanding that both therapist and client have of the latter's lived experience (McLeod, 2011). It also brought an honesty in the endeavour, admitting in advance that I, as a researcher, was unavoidably a part of that which was being studied.

IPA theory as discussed above offers an interesting parallel to Mindfulness theory and practice in that they both seek to understand individual experience and accept that the observer will not only inevitably influence that which is being observed, but is part of the co-constructed "reality". Finally, both approaches propose a stance of "openness and wonderment in relation to the phenomenon" (McLeod, 2011, pp89) and consider whatever comes into consciousness as equally valid, without seeking to distinguish between "important" and "less-important" phenomena and meanings (Ibid).

Finally, McLeod suggests that "phenomenology is similar to some forms of meditation" (pp25) in terms of integrating a spiritual way of "knowing". I would also like to add that like in phenomenology, mindful meditation is a way of approaching the subjective experience by trying to acknowledge the inevitable presence of the self and then by bracketing off expectations, preconceptions and desires in order to illuminate the essence of moment to moment experiencing.

Thus I felt that there was an interesting compatibility between the philosophy and method of IPA and mindfulness as two modes of inquiry into human experience. However, having said that, McLeod (2011) warns that one of the dangers of phenomenological research is that it comprises to a large extend of one-off studies. The reasons he offers could be the relative marginalisation of phenomenological research in North America; the hypothesis that students carrying out research avoid that which has been done before because they fear they will be accused of replicating and not generating personal investigative knowledge; and finally that over-emphasis on the phenomenon itself rather than the context of the phenomenon might deter further investigation.

In this study I make no claims of exhaustively studying the lived experience of mindfulness by therapists. Instead, I see my work as a continuation of the investigation of mindfulness amongst trainees and practitioners (as discussed in the literature review chapter). Furthermore, I am hoping to add to the existing exploration of the approach and its significance by inviting the voice of this experience to be heard. I am hoping that there will be other phenomenological studies of therapists in different contexts that will enrich our collective knowledge. For a presentation of other methods considered, see Appendix C.

Research design and sample

The research project involved carrying out semi-structured one to one interviews with therapists who have incorporated Mindfulness in their personal and/or professional domain. In particular, I wished to explore their lived experience of Mindfulness since most of the current literature has been concerned with either cognitively conceptualising "what mindfulness is" or examining its effects on different populations –as has been discussed in the Introduction chapter of this paper- but little attention has been given to the reasons why experienced therapists turn towards it and how they experience the interaction of Mindfulness theory and practice with their professional roles. In order to approach the question of how to bring forth the dimensions of lived experience, I employed the tools used in my role as a therapist. First, my own experience through careful and attuned observation as a practitioner-researcher who places themselves within the field of study, approaching internal and external phenomena with an open inquisitive spirit (Barber, 2006); secondly by referring to the current literature as a guide; and thirdly by placing the product

of my experiential and academic inquiry to the critique and commentary of other professionals –here the community at Metanoia including my peers and co-candidates, lecturers, invited speakers as well as my supervisor and academic consultant provided a "sounding board" for testing my ideas

<u>Refining interview questions</u>

The initial research questions are described in Chapter 3, (Rationale for Projects 1 &2: Project 1 Rationale).

Smith & Osborn (2003), suggest some helpful steps in preparing for a semi-structured interview:

- Identifying broad issues the researcher wants the interview to cover

- Placing issues in logical order and/or in order of sensitivity (not starting with questions which potentially probe for more personal/sensitive information)

- Thinking of some questions and probes that may be of help during the interview.

In this study I decided to let my own questions rise naturally but at the same time declare my intention –through the list of topics of exploration- to research specific aspects of the participant's experience; it is methodologically acknowledged that the researcher will have identified "areas of exploration" before the commencement of the interviews (Smith, 2003). During the process of refinement the researcher is warned that "you may well find that in the course of constructing your (interview) schedule, your first draft questions are too explicit. With redrafting, these become gentler and less loaded but sufficient to let the respondents know what the area of interest is and recognize that they have something to say about it" (Smith & Osbourne, 2007 pp.9). Therefore, the initial set of questions was filtered a few times before taking their final shape and were "road-tested" by running a "test interview" with the participating clinical psychologist (this is described below under 'Participants'. The_aim was to create more "open" questions in order to invite as much freedom as possible in answering them.

 For example, while an initial research question was "How do therapists understand the term "full human-beingness" and how does it relate to their lived experience?" in the actual

interview the question became "*You describe a journey of discovery and integration and to me it sounds like work in progress. I was wondering what the impact has been to you of this journey on a personal and a professional level?* (Interview with Participant 3)"

Below I provide a summary of how the general research questions were integrated into more general "topics for exploration" and some examples of the actual questions that emerged during the interviews using the pre-defined topics to guide me in the conversation ; this allowed for a) adjustment to the personality and conversational style of each therapist, b) flexibility in the interviewing so that if something unexpected emerged as it did a few times –an idea, a comment or an experience pointing towards a new field of exploration- I could follow it and c) spaciousness for the interviewee to reflect upon their experience with as much freedom as possible; therefore many topics were covered just by allowing the conversation to flow and without needing to pose specific questions. Having a list of pre-defined questions or list of themes is discouraged in idiographic case-study approach in IPA (the approach in small samples of 10 or less participants/ cases) in order not to limit the material that emerges in the interview or impose that which is important for the interviewer (Fade, 2004). To illustrate this process I give examples in the table below:

Table 1. Refining Interview Questions: examples

Broad/Initial Research questions	Topics for exploration	Examples of questions used in interviews
How do therapists understand the term "full human-beingness" and how does it relate to their lived experience?	Feelings and thoughts about integration of Mindfulness on a personal level Future directions for personal development	"Would you say this [Mindfulness practice] has (had) an impact on your relationship with yourself?" (Interview P5, p.5: line 97) "I am curious about what is this missing ingredient that mindfulness offers and makes us very excited about it?" (Interview P4, p.8: line 185)
3. Does it affect their professional role and how? Do they use specific techniques in therapy or Mindfulness informs	Integration of Mindfulness into therapy work	"what was it that propelled you towards this idea that meditation could potentially be beneficial in training and what were the advantages and the risks that you had to take into consideration?" (Interview P5, p.2: 41)

their general stance but not the tools they use?		"I was wondering if you could reflect on what aspects of mindfulness you have found more useful in your work or what aspects of mindfulness your clients have found more useful" (Interview P4, p.5: 107)
At which point in their personal and professional path did the therapist turn to Mindfulness? How has their journey so far led them to that point? What was their training/background?	Coming into contact with Mindfulness Initial experiences of Mindfulness	"I would like to start by discussing with you the story and the origins of your own mindfulness practice: how it started, how it evolved and how you feel it has informed your presence as a person and as a therapist" (Interview P3, p.1:1) "I am interested in what were the qualities that mindfulness brought in your body of knowledge and experience which was already there...?" (Interview P4, p.3:65)
What are the difficulties and risks in Mindfulness practice that the therapist has encountered?	Risks of Mindfulness on a professional level Difficulties with Mindfulness encountered on a personal level	"I would like to discuss with you a little bit if you see any challenges in using Mindfulness practice either with clients – for example one question that I have in my mind is "is it suitable to anyone?" (Interview P2, p.5:45) "Was that challenging? Coming from a clinical/psychological point of view to find yourself working so much with the body and maybe even at times bypassing the mind?" (Interview P3, p.4:19)

Participants

A group of 6 therapists was purposively selected and invited to take part in the study. As there are no mindfulness-informed therapists in Greece, I turned to professionals in the U.K by asking different colleagues about possible nominees. Once I started drafting a list of names I chose the participants on the basis of meeting the criteria outlined below. I approached 9 professionals in total; one was not suitable in terms of experience but was helpful in terms of running a test interview. Three professionals could not be available for interviewing due to professional obligations. This purposive sample was in accordance to the chosen research method as in IPA it is logical to assume that the people selected to take

part in the study will be people for whom the research question is significant and meaningful (Smith & Osborn, 2007); in that sense, the participants were deliberately selected because of their interest in Mindfulness approaches and their active exploration of its clinical/psychotherapeutic applications. Furthermore, in order to facilitate a discussion regarding the added benefits of Mindfulness in their therapy work, it was decided to include professionals with a significant experience of working therapeutically (from 10 years onwards) using at least for some or for the whole part of their career therapeutic approaches different to Mindfulness so as to be able to reflect more clearly on why they veered towards Mindfulness. There was also a deliberate effort to invite people from different theoretical backgrounds in order to get as much variety as possible both in terms of previous experience and of understanding and incorporating Mindfulness theory and practice in their personal and professional life.

In particular, the sample of the study, as described in the Learning Agreement (Koliris, 2009) was based on:

- experienced professionals (therapists, psychologists or counsellors with at least 10+ years of practice; belonging to professional bodies)
- have trained and have had work experience in using theoretical approaches other than mindfulness
- currently using mindfulness either for personal or professional reasons (are completing/have completed professional training of have had significant experience of mindfulness retreats, seminars, workshops etc).

Out of the participating therapists 5 took part in the actual project and 1 interview, with the participant with the least experience, served as a "test" in order to try out the process and smooth out possible interviewing problems. Three of the participants were British and two were of other European descent (German and Greek). In terms of professional identity, 3 participants identified themselves as clinical psychologists and 2 as psychotherapists.

Comment [M1]: Condition: maintaining participant anonymity. Table of participant profiles erased.

<u>Pre-interviewing</u>

Participants were approached with an invitation to participate in the research; they were sent a brief profile of myself, my work and the topic of my research initially and if they expressed interest they were further sent a copy of my Learning Agreement document. Upon agreeing to participate they were given further information on the process. Before the interview, a consent form was given to be signed (see Appendix A) confirming anonymity and the right to withdraw at any stage.

<u>Interviewing</u>

The interviews lasted between 50minutes-1.15 minutes and where either carried out face to face or using video-conferencing via computer. The latter method was used to circumvent practical difficulties i.e. that all of the interviewees live and work in the UK while I am based in Greece. Where possible physical presence interviewing was sought but this was not always the case. Consequently, 3 interviews (participants 1, 2 and 3) were carried out face-to-face and two (participants 4 and 5) by using video-calls; the face-to-face interviews had a more organic feel for me although not when people were interviewed at work (P2, P3); there seemed to be a difference in the flow of and the focus upon the conversation even though these were face-to-face interviews. When participants were interviewed in their personal time (participants 1,4,5) I felt that even when I was worried about the technical aspects of the video-call, that we were able to go into the flow of the conversation more easily.

While it is recommended to make notes of non-verbal communication (Fade, 2004) as well as recording the verbal one, I deliberately chose not to take notes during the interview. I felt that this way my awareness of the moment-by moment unfolding of the dialogue, picking up that which was happening in the "here and now" of the interview was more important than risking cutting myself off from the process by jotting things down. However, when I felt that there was important non-verbal communication taking place in the room, I made a verbal reference to it. For example, in the case of a therapist who used their hands to depict a dancing movement while describing the therapeutic contact, I commented:

[56]

13. Researcher: "It *feels like a dance the way you describe it and I know movement cannot be described on tape but the use of your hands while you are talking about this process is very much a movement of how you move in synchronisation and in relation to somebody else?*

14. P3*: It feels this way and I think the other thing that comes to mind and I think this has been an amazing experience is the experience of using the body*". (p.3)

Furthermore, while following the flow of conversation with my fellow therapists and in accordance to the spirit of co-constructing meaning together with them, I tested out my own thoughts and ideas in interviews with them; as if to say "here's what I have been thinking, what do you think about it?" thus placing myself within the field of inquiry rather than being outside-looking-in.

For example:

95. *R: ...also I think –and that's my personal thought so feel free to comment on it-...*

96. *P4: yes, please...!*

97. *R: (laughter) eh...I think that for me it* (Mindfulness practice) *also brings a... or it makes space for an integration of different roles*

98. *P4: yes.*

99. *R: ...and different aspects of myself...and I'm thinking that it is very easy sometimes to feel quite fragmented and feel like "this is me in my professional role", "this is me in my personal relationship", "this is me in my role as a...whatever, as a teacher, a sister or a friend"*

100. *P4: yeah*

101. *R: ...and mindfulness brings back this awareness that well...yes that all these aspects are <u>me</u>, are different versions of <u>me</u> and there are not different roles, different compartments that I go in and out of...*

102. *P4: yes, I really...I really like that, the way you put it, it's very integrative, mindfulness, in that sense, isn't it...*

(Interview with Participant 4, p.4)

As another researcher (Rapley 2004) comments on this process: "during the interview, I often try to raise some of the themes I've been thinking through either by asking interviewees specific questions about them or sometimes telling them about my thoughts and letting them comment on them. Or to put in another way, interview interactions are inherently spaces in which both speakers are constantly 'doing analysis', both speakers are engaged (and collaborating) in 'making meaning' and 'producing knowledge... I then rethink about the trajectory of the research, refine the kinds of themes and ideas I want to think through with the interviewees and go and interview someone else'" (in Silverman, 2008 p.147).

Using this knowledge that emerged and the new thoughts and ideas offered, I redressed and refined the topics for exploration in my mind and used them to feed into the way the next interview happened. For example, having unexpectedly come across and explored the relational aspect of Mindfulness practice in earlier interviews, I consciously sought to address it with Participant 5 once I felt she hinted towards it:

> 115. *R: ...but you said earlier...-at the back of my mind I'm thinking what you said earlier about enjoying the retreats and the group work- and I was thinking if that is something that is important: to be able to be mindful but to somehow have a relational aspect to it?*
> 116. *P5: Yes.*
>
> 117. *R: ...not to be completely on your own but to have...*
>
> 118. *P5: Yes.*
>
> 119. *R: Uhm...*
>
> 120. *P5: Well, Thich Nhat Khan's community is called "the order of inter-being"*
>
> 121. *R: Uhm...*[…]
>
> 124. *P5: and once you...can have these spiritual conversations with people, at different times, without having to explain, or run the risk of people criticising or judging or saying "well pull yourself together" or "not that again" what you get is that very particular kind of spiritual friendship...which is a...it's a very beautiful thing*

(Interview with Participant 5, p.6)

Gathering and analysing data

The interviews were recorded and then transcribed verbatim; a psychology student was recruited on a voluntary basis to carry out the main task of transcribing while I re-read the written text several times and listened to the tapes to make sure it was correct. All interviewees were sent the final copy of their transcribed interview with an invitation to check if the transcription was faithful to their words and add any further comments should they wish to. The help of a second researcher, a counselling psychologist with experience in IPA research was employed at the stage of data analysis in order to read through the material and ensure the strength of my interpretations and their grounding in the data.

An important initial step involved reading and re-reading the text, becoming familiar with both the content of ideas, concepts and comments offered and the process, the language, the tone, the feelings, the colouration of the content that interweaved the communication. Observing my own reactions to the tapes and the text also provided another level of commentary –some thoughts recorded in my research diary are presented below specify where.

I then started on the process of grouping the data together in terms of the research questions what therapists had to say about e.g. their initial contact with Mindfulness or its integration with therapeutic work etc. Extracts of the text were highlighted and the main ideas that appeared to be there were written down next to the highlighted text. However, the process of analysis remained open to both the topics originally included in the initial questions for exploration and to those which were not included but emerged from the interviews; some of these new topics appeared only a couple of times and were noted, while others appeared more frequently suggesting a potentially important subject for most of the participants. An example of the former category was when two of the participants mentioned different kinds of meditation and meditation "goals" and the need to differentiate amongst these methods and purposes (both participants were active Buddhists); an example of the latter were the themes of shared experience, spiritual needs and cultural aspects in Mindfulness meditation.

When the process of reading the text, making note of important experiences, ideas and feelings was repeated several times for each interview, some initial themes started emerging; by the end of this phase of this process, I had created a table which listed the main "topic for exploration" that was discussed, extracts of the interviewee's comments that deemed important and my own notes regarding their reply.

Table 3: Example of analysing interview data

Research question	Interview extract	Themes
Feelings and thoughts about integration on a personal level	*"the qualities mindfulness...the kind of underlying principles of mindful inquiry help <u>enormously</u> to keep...you know...to keep checking myself around...when I begin to fall into judgment...just my intent...in my work is very well supported by my mindfulness practice but I also know that mindfulness practice for me has been for me <u>personally</u> one of the most effective ways in which I can manage my own...stress...and anxiety levels that my own predicaments that I bring as a person and uh...the kinds of issues that I am working on myself..."* *(P4, p.3:68-72)*	➢ Mindfulness helps awareness of intent/avoid judgment –use it as self-check (self-care; keep oneself fit for practice by cultivating awareness of own judgment) ➢ Helps with managing own stress & anxiety that stem from the "human condition" ➢ Helps with working on own issues (provides a framework within which this exploration happens?)

When similar tables were created for each individual participant, I created a table which depicted the main themes across participants (see Appendix E). The next step was to begin to notice the convergence and divergence of themes across the participants. I started grouping converging ideas, comments and experiences together and brainstorm about their common denominator which would bring me to a higher order of theme. The overall process and the emerging themes are presented in the Results. Finally, the preliminary themes for each interview as well as the themes across participants were sent to a second researcher in order to check the validity of my interpretation of the data.

Part 2: A heuristic exploration of my own mindfulness experience

<u>Rationale for proposed method</u>

Douglas and Moustakas claim that while "phenomenology ends with the essence of the experience; heuristic retains the essence of the person in the experience" (Moustakas, 1985, p43 in McLeod, 2011, p206).

When writing about my choice of heuristic inquiry in my LA document I explained the rationale behind it as a need to delve deeper into my own involvement with the subject matter under study. I wrote: "heuristic inquiry provides the opportunity to bring into the picture my own experiencing of the approach as I am not researching Mindfulness from an outsider's point of view but I am immersed in it". (Koliris, 2009, pp.11).

I have been recording my own experiential line of inquiry in terms of how mindfulness feels to me, how I understand it on a cognitive, bodily, emotional, spiritual level through my involvement in it as a meditator, a tutor and a therapist. So bringing in this voice into my research narrative offers more than simply acknowledging my presence as a researcher. My own process of discovery unfolds in parallel with the processes of the research participants in terms of trying to understand the nature of that which we are experiencing and its ongoing interplay with who we are. In addition, heuristic inquiry proposes a different process of approaching knowledge of various phenomena. It focuses more intensely on the non-rational, felt, tacit, intuitive; in so far as I have been talking about holistic therapist identity throughout this project, I feel that this "wholeness" should be reflected in the way we examine how we arrive at what we know. Braud & Anderson correctly in my opinion point out that: "Many of the most significant and exciting life events and extraordinary experiences - moments of clarity, illumination, and healing - have been systematically excluded from conventional research." (1998, p.3 in Hiles, D 2001).

Incorporating therefore my own heuristic inquiry with the therapists' phenomenological exploration seems to me to be allowing the viewing of mindfulness from different perspectives and with different tools.

Heuristic inquiry is the method interested in a total experiencing of a phenomenon which can be in the form of "tacit knowing, images, dreams, hunches, ideas that come between sleeping and waking, intuition, out-of-body experiences, synchronicity and exceptional human experiences (Braud & Anderson, 1998 in Etherington, p.50). Moustakas (1990) claimed that only the experiencing persons, by looking at their own experience can actually describe its texture. It is the immersion in the texture and the process of the individual experiencing of the world that is highlighted by this method. Heuristic inquiry aims at bringing to the foreground the researcher's personal experiences of a phenomenon and exploring its dimensions as they arise. Theorists as diverse as Sigmund Freud, Carl Jung and Wilhelm Wundt have also sought to systematically study their own experiencing, although later on it became largely overlooked in favour of positivist epistemology and research (McLeod 2011).

Finally, Etherington (2004) highlighted the limitations of the approach in terms of its inward focus to the exclusion of the social and cultural context and suggests that it is used in combination with other methods of inquiry, as is the case in this project.

The process of heuristic inquiry

As I mentioned above, I became very interested in the idea of including my own inner sources of "knowing" in my research. Heuristic inquiry invites the cultivation of such processes throughout the stages of heuristic exploration.

These stages involve an initial engagement with the focus of the inquiry, immersion in the experience, incubation of various tacit understandings to shift and settle, illumination involving the emergence of new understandings, explication which invites the critical view to the new findings, creative synthesis and validation which communicates the product of the inquiry to others.

Moustakas (1990) proposed six processes that connect with an internal frame of reference of the researcher. The research journey is connected with the personal experience of the researcher; in fact, it is important that the researcher identifies the focus of the research as stemming from a significant personal experience, which in turn triggers a the desire to understand it and explore it; a potential research journey begins to emerge, and becomes

the focus of inquiry. Identifying with the focus of inquiry involves "(becoming) one with what one is seeking to know" (Moustakas, 1990, p. 16).

The second process is the action of self-dialogue; the researcher dwells in the personal experience of the phenomenon to clarify and expand thinking. This process relies on cultivating self awareness and an ability to uncover the various aspects of the phenomenon under study; this is achieved by participating in an internal dialogue with the experience, its emotions, actions, patterns etc thus uncovering meanings that remained hidden so far. Moustakas (1990) states, "…self-dialogue is the critical beginning; the recognition that if one is going to be able to discover the constituents and qualities that make up an experience, one must begin with oneself."

As the inquiry develops, such self-knowledge enables the researcher to develop the ability and skill to understand through the eyes and voices of others. The third process, tacit knowing, refers to the kind of knowledge we possess and which we have without fully understanding how it has come to exist. It is a kind of knowledge deeply embedded in ourselves and it is not easy to tease it apart and "know how we have come to know". Tacit knowing informs hunches and vague, formless insights that characterize heuristic discovery (Bridgen, 2007). The fourth process is intuition, which creates a bridge between the explicit and the tacit: "while the tacit is pure mystery in its focal nature—ineffable and unspecifiable—in the intuitive process one draws on clues; one senses a pattern or underlying condition that enables one to imagine and then characterize the reality, state of mind, or condition" (Moustakas, 1990, p.23).

Intuition makes possible the perceiving of things as wholes. For example, one can view a tree from many angles, sides, front, and back; but one cannot see a whole tree. The whole tree must be intuited from the clues that are provided by careful observation, experience, and connecting the part and subtleties of the tree into patterns and relationships that ultimately enable an intuitive knowing of the tree as a whole (Scott, 2003).The fifth process is the process of indwelling, whereby the researcher seeks to become deeply introspective and reflective; the aim is to gradually reveal important dimensions of the meaning of the experience. This process might take a considerable amount of time since the researcher can only hope that by creating the time and space for indwelling to occur, such connections between phenomena will begin to rise. In heuristic inquiry indwelling is seen as an essential process, particularly in the elucidation of the parameters and details of the experience

(Scott, 2003).Finally, focusing is described as moving 'inward, drawing on information from the deeper, wiser self' that is held in a 'felt sense' within the body that involves 'whole brain knowing', connecting our left and right hemispheres and leading to a sense of release that accompanies a new understanding of something that was previously unclear. (Etherington, 2004). During this process the researcher works to distil and fore-ground the important knowing of the research experience.

Focusing invites the clearing of an inward space to enable one to tap into thoughts and feelings that are essential to clarifying a question, getting a handle on the question, elucidating its constituents, making contact with core themes, and explicating the themes. Focusing facilitates a relaxed and receptive state, enables perceptions and senses to achieve more definitive clarification, taps into the essence of what matters, and sets aside peripheral qualities or feelings (Scott, 2003). To summarise, tacit knowledge, intuition and observed phenomena can be tapped into and enhanced by indwelling, self-dialogue and focusing. The heuristic inquiry is presented in Chapter 10.

Chapter 5: Project 1 Results

In this chapter I will present the results of the Project 1 study: the chapter focuses on re-presenting the voice of therapists. It discusses the therapist interviews and presents the main themes that emerged from the interpretative phenomenological exploration; in this part I take a step back and allow the vibrancy of the therapists' experience to come through. Finally, I discuss my reflections on the interviewing experience with UK therapists.

A phenomenological inquiry of therapists' lived experience of mindfulness

Below I present a table which summarises the main themes and subthemes which emerged from the interpretative phenomenological inquiry into the therapists' experience of mindfulness. I then proceed to discuss each main theme in detail and provide examples of the participants' responses. At the end of each theme analysis I provide a brief summary of the findings. The themes presented below follow the initial "topics of exploration" (see Chapter 4: Methods) and are condensed versions of the original ones (for example, "initial experience of Mindfulness" was shared between "Felt benefits on a personal level", "Felt benefits on a professional level" and "personal difficulties with the approach"). Also, new topics that were not included in my list but did emerge across participants were included (for example "spiritual needs" or "relational Aspect").

Main Themes: an overview

The resulting themes are presented in the following table:

Table 1: Summary of themes and subthemes

Encountering Newness	Personal felt benefits	Professional felt benefits	Difficulties and risks
• Dichotomy between professional training & personal experience	• Compassionate awareness • Wholeness • Acceptance • Spirituality • Shared experience	• Coping with difficulty in therapy • Inviting inquiry and awareness in therapy • Integrating the body experience • Integrating mindfulness into professional training	• Challenges in meditation practice • Cultural values and beliefs • Mental health problems

I then submerged myself once more into the list themes and used different colour codes on paper to mark themes/ideas that appeared to me to have something in common. After all the text was covered in different colour, I grouped together the ideas of same colour and brainstormed about the meanings that they seemed to have. I found that I had to let the results "rest" for a while and then revisit them to see if the categories still made sense or if something new appeared. This process was particularly relevant for broad categories such as "felt benefits" which included a wide range of ideas and experiences –presented above; it also resulted in emitting the "encountering newness" theme since it was included overtly or covertly in the other thematic categories. There, in order to arrive at the 4 sub-themes presented below I followed the process of immersion into the data, reflection, extrication and re-engagement in order to extract higher order themes.

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Main themes: extracts and analysis

In this section I will proceed to discuss each main theme category that emerged and offer illustrative remarks from the therapist interviews. At the end of each theme I provide a small summary of the main points raised by the therapists.

1. **Personal felt benefits: Compassionate Awareness, Wholeness, Acceptance, Spirituality, Shared Experience**

All therapists talked about the benefits that they have felt on a personal level through their Mindfulness practice; I grouped these experiences into 5 distinct categories.

a. **Compassionate awareness**:

Under this heading I have grouped experiences that revolved around an increased awareness of one's cognitive, emotional and body and reactions and the facilitation of the ability to meet these phenomena with understanding and patience. Concepts that were offered by the therapists were: "a true knowing of one's self", the ability "to see one's own patterns of responding to the world more clearly" including "patterns that caused difficulty", "addressing one's own stress", "an increased awareness of difficulty as expressed on the body" and the "cultivation of attributes that allow to address "unhealthy" patterns (calmness, clarity, sense of balance)"; also, there is an "understanding the mind" through an experiential, non-academic (non-linguistic) point of view.

> P5: *"I think once you understand your own psychology, your own wounded-ness, your own suffering and what you do that perpetuates that...there's a combination that is hugely beneficial [...] so when I am just about to react to something, to say something and I just have a moment's awareness of "oh, so that's <u>that</u> again...<u>that's that</u>"..."* (p.5:92-94)

[67]

P3: *"At a personal level [integration of mindfulness in daily life has brought], this sense of increased awareness: recognising the times that I will turn a blind eye on things and being able to make this more of a conscious process and to be able to clarify my intentions for what I chose to pay attention to".* (p.3:12)

Awareness of the felt body experience during difficulty was also discussed:

P5: "[Mindfulness practice] *Can bring me in touch with difficulty...it's an opportunity to notice the body's habitual defences, what happens at moments of difficulty and engage in a process of discovery and realisation"* (p.6: 106-107)

P1: *"I think my practice of mindfulness brings me a calmness, a sense of spaciousness and joy which allows a different way of being in the world relating to myself and others, I see things more clearly so I can see when I'm doing things that lead to suffering to myself and even though I might not always be able to extricate myself from that I'm getting better at that"* (p.10: 107)(p.8:89).

Summary of "Compassionate awareness": coming in contact with mindfulness practice, the participants found that there was a space in which to explore with greater clarity and understanding whatever was experienced; this facilitated a deeper learning of oneself, not only of cognitive phenomena but of bodily messages too (the importance of the body will be discussed further on) and a cultivation of the capacity to meet these phenomena with compassion.

b. **Sense of Wholeness**:

A strong feature in the participants' comments on their experience of Mindfulness had to do with practice providing a sense of "grounded-ness" which was discovered to be quite valuable; participants talked about their experience using words such as "a grounding force", also referred to as "anchoring" or a sense of "centred-ness" and "wholeness"; this sense in turn brought into their consciousness a felt sense of "spaciousness", "freedom"," "calmness" and a "building up of a sense of self". These

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experiences were grouped together as they seemed to refer to getting in touch with a deeper sense of self, a "coming back into" one's self, rediscovering the self's gravity centre and through that to establish a sense of inner calmness, freedom and being "whole".

P1: *"the mindfulness practice itself (gives me) a whole range of benefits such as calmness, clarity, sense of balance and groundedness"* (p.7:77)

P2: *"the most important thing for me is wondering about my own experience and I think mindfulness... I find very grounding"* (p.3:32)

P3: *"I experienced something very different in the practice, something very holding, something very nurturing, this sense of being whole for the first time, that I was able to connect with"* (p.2:4)

P5: *"having the practice anchor in me and going on retreats...it's a very wonderful companion to one's life"* (p.5:84)

Another participant talked about the experience of wholeness in the sense of bridging the mind and body split:

P4: *"I _was very ill and then had this sense that there was something that I needed to do something good for my body...certainly in my work one of the fascinations that I've had is about this mind-body split, and what I love about mindfulness techniques is that it includes the body"* (p.164-166)

Summary of "Sense of Wholeness": participants' reported a sense of "wholeness" and of finding one's "centre" within themselves, as an experiential knowledge that emerged from their practice. This in turn was seen as providing a sense of stability and being in-tune-with their internal world. An important part of this "wholeness" involved the incorporation of the body experience as a separate system which stood in its own right.

c. **Nurturing Acceptance**:

One other element that therapists found useful on a personal level had to do with experiences of Mindfulness practice providing a holding and nurturing framework, "a place of acceptance", a place to hold a difficulty with compassion, whether this difficulty arose from personal or professional life or from the training:

> P2: *"being able to bring a sense of acceptance to experience …to all experience…in myself and other people; maybe a sense of honesty or finding a way of being with things that aren't easy to be with"* (p.3:28)

> P1: *"Essentially mindfulness is "keep calm knowing change" something about the steadiness, the knowingness of constant flux   not being entangled in it [...] and there is something about another phrase I like a lot and comes to mind is "being without anxiety about non-perfection" knowing there are certain things that are unsatisfactory mindfulness helps to see that and it gives a sort of freedom...for myself and also for the people I work with because that is what I tell them too (laughter)"* (p.10:107)

Therapists also talked about the emergence of an accepting and compassionate way to relate to oneself, a place to check and nurture the self and its needs and raised the issue of the ethos of the approach, the values that have informed who they are:

> P4: "(Mindfulness) *keeps me in the right frame of mind, through practice...is like a self-hygiene, a self-regulatory practice, the ethos_of mindfulness keeps me in the right spirit... often what (it) involves is a more compassionate mind"* (p.9:194-196)

> P2: *"there were a few quite difficult situations in my clinical training so I could see it was very helpful I think probably [mindfulness practice] provided me more with a sense of my values as a psychologist than anything I got from the trainings..."* (p.3:24-26)

Summary of "Nurturing Acceptance": Learning to accept difficulty instead of fighting it and cultivating compassion towards it has been of great help for the participants in the study. The invitation of Mindfulness practice to observe and tolerate difficult phenomena instead of habitually or impulsively trying to move away from them or struggling to resolve them was seen as valuable. The difficulty of training was mentioned by all three clinical

psychologists and how their personal practice helped them through that either by providing a way to tolerate stress and difficulty or by building a sense of self and core values which gave them better stability through the challenges of the training programme.

d. Looking after spiritual needs

Most of the participants, although not directly asked, mentioned mindfulness practice as providing a space for their spiritual needs which seemed to be quite important both for them as individuals and as therapists.

P2: *"I see mindfulness as being part of my spiritual life as it were...rather than just part of my work or a way of coping with work"* (p.2:22)

P5: *"if you have a training which doesn't acknowledge the human capacity to be present with suffering, if you have a training that doesn't have a spiritual dimension if you like, then what you are doing in your work is in a way either problem solving or ego psychology"* (p.2:44)

Interestingly, one therapist with a strong Christian-Orthodox faith, felt initially challenged by the Buddhist implications behind Mindfulness:

P3: *"I think that was in the first year ... religion came into it as well, so there was a sense of fear in terms of "Ok, there is this advice to read all these mindfulness things but these are Buddhist things and I'm not a Buddhist. So will that challenge my faith?" So I think, part of me probably back then was aware that there was going to be a spiritual journey in addition to an experiential one, a professional one, a personal one […] it turned out to be that it was Buddhist language that connected me to Christianity as opposed to the Christian writings that provided me with a sense of grounding to go into these Buddhist ideas."* (p.2:8-10)

Summary of "Spiritual needs" theme: Therapist spirituality is something that emerged as a key element in the interviews. Those participants directly involved in Buddhist practice considered the ethical framework of Buddhist teachings as an integral part of their self. In fact, some openly wondered if secularly-practiced Mindfulness, one that does not refer to

an ethical way of being as described by Buddhist teachings, isn't something that detracts from the overall philosophy of the approach. Others like P3, found through meditation and Buddhist philosophy a new way to relate to her own religion.

e. The importance of shared experience

Again, this was a theme that emerged from the interviews without being part of the initial interview questions. Practising Mindfulness in relation to someone else was mentioned by all of the participants either in terms of their own practice or in relation to the experience of their clients (see next section).

> P1: *"I was part of a community, we practiced together and there was an ethical framework and shared values and I was thinking about how there are certain ways of seeing things and understanding my experience which all came together with mindfulness practice."* (p.3:38)

> P5: *"going on retreats... [is] very nourishing, it's very helpful to be a part of a group or people who are all practicing...we don't know much about each other... socially, or in any other way and it is wonderfully relieving and freeing"* (p.5:84)

Another participant mentioned having a "reference person"/mentor that guided her through her first steps was something that she valued a lot:

> P3: *"I remember approaching the lecturer and saying "[...] I am very interested to practice that by myself. Can I borrow this and the materials?" […] I remember him saying that it is important to have somebody to link and to talk to... the idea of having a mentor through that [exploration]"* (p.1:2)

Summary of "Shared experience": The experience of the participants indicated that mindfulness practice that happens within a relationship provides both safety and support as the kinds of experiences –internal or external- that fall into one's awareness when meditating might not always be pleasant or easy to deal with. The majority of the participants mentioned having their own "meditation communities", places where they can

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share their experiences, explore, learn, connect, get a sense of belonging from and establish continuity of practice.

2. **Professional felt benefits**

The participants also explored the benefits they have felt in their professional roles either by incorporating Mindfulness in their conceptualisation of their role, or by actively using it as an intervention with clients and trainees. Since the scope of this research project has to do with how Mindfulness interacts with therapist identity, I chose to focus on how Mindfulness was experienced by the participants in their professional role.

The therapists' comments have been grouped into 3 themes around how Mindfulness has helped cope when difficulty arises in the therapeutic work; how it brings a spirit of curiosity and inquiry into the "here and now" of the therapeutic process; and how it incorporates the importance of the felt experience of the body into an understanding of the wholeness of one's self.

a. Coping with difficulty in therapy: embodying mindfulness, meeting expectations with awareness, finding stability amongst stress, developing empathic understanding

Difficulty in therapy can arise from a number of factors such as working with very distressed clients or clients who have very little possibility of change; in addition and in relation to that, the expectation on the therapist to "help" can often be very difficult to contain and respond to. It seemed to me that the ways of responding to these challenges that the therapists described could be grouped into four dimensions:

Embodying mindfulness in the session:

> P4: *"Often I think [...] that maybe the therapy at that point doesn't <u>demand</u> anything of the client but more <u>holds</u> the client in a way that is calm, and safe and kind...and I think that that doesn't mean I am passive but it means I take on*

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more of the mindfulness as practice for me as the therapist that I can genuinely generate security and calmness and kindness, authentically, not just putting it on because I think that is required but being it, and so I become in that moment more attentive to the client in their distress but without being pulled in and under by it. (pp.10-11: 230-236)

Meeting expectations with awareness:

P3: "*I need to be mindful of the desire to be helpful and I suppose both mindfulness gives us a framework to understand and think about this because we are health professionals because we want to be helpful, but that's also a trap [...]* I feel that being mindful allows us to also look after ourselves at times like that..." (p.6:40).

Finding stability amongst stressful experiences

P2: "*I found [Mindfulness practice] quite helpful in coping with the stresses of training in Psychology and also the stresses of clinical work*" (p.2:22)

P4 "*I always needed mindfulness to stabilise myself, to be calm in myself, when I was with people who were very distressed indeed or in a psychotic state or whatever, so I think mindfulness foremost is a way to ground me as a therapist, to stay calm and balanced both in body and mind...*" (p.3:74)

Developing empathic tolerance and understanding

Finally, Mindfulness can help the therapist respond more empathically to the client's difficulty:

P2: "*I think one of the ideas I have taken from mindfulness in my work has been the way the mind can...tends to turn away from difficult stuff and just that kind of encouragement to try and be with things that are a bit more awkward or unresolved or painful or difficult in a kindly way... I guess that's [...] how I've been trying to make sense out of my clients' struggle with it as well*" (p.4:38)

Summary of "Coping with Difficulty in therapy"

I found that "coping with difficulty" included four sub-themes: embodying mindfulness in the session, meeting expectations with awareness, finding stability amongst stressful experiences and developing empathic tolerance and understanding; they indicated how mindfulness practice was employed by the participants in order to deal with that which they found challenging within the therapy session.

b. Inviting inquiry and awareness into the therapeutic relationship

Following on with the theme of professional felt benefits, the next group of experiences involved the use of an open and inquisitive mind and a quality of awareness: participants commented on how the spirit of inquiry, openness and empathic curiosity that mindfulness practice cultivates, have informed their therapeutic work. This seemed to work on different levels: cultivating an awareness of their own reactions and judgments and a greater felt awareness of the "here and now" of the therapy hour; holding and inquiring about their own uncertainty; inviting playfulness and experimentation where appropriate; being "connected" while at the same time maintaining the distance required in order to be able to look at the "bigger picture".

> P4: *"I think many traditions in psychotherapy have inquiry as one of their core principles...so I think that there is a close interrelatedness between inquiry and mindfulness in that...mindfulness is an ongoing inquiry into one's experience really and an inquiry with an openness and curiosity...an inquiry <u>even</u> to the kinds of judgments or beliefs...that we hold [as therapists]"* (p.3:56-58)

Another therapist refers to the awareness of the "therapeutic dance" the constant movement of therapist and client in-relation-to each other which can introduce not only inquiry and empathy but also playfulness and creativity:

> P3: *" [The] sense of being able to manage closeness and distance from my own emotions, from the clients' emotions and to be able to be at ease with that: with coming closer, with experiencing emotional intensity, distancing a bit, knowing when am I leading, when am I following, why am I leading; and also "to be" - in terms of the sense of not knowing, not knowing if I'm leading [...]to be able to see*

the biggest perspective, not to be lost in the intensity of the emotions and lose the clarity of thinking […].. And at times when there isn't so much distress in the room this can also feel, in the therapeutic relationship, can also feel playful and something very creative to work with. I think the easiest way that I can describe it, that's not mindfulness, this idea of therapeutic dance. I think that there is a playfulness in that in terms of "Where am I stepping into? Where are you stepping? And are we in harmony? Are we doing a dance here?" (p.3:12)

<u>Summary of "Inviting inquiry and awareness":</u> bringing inquiry into the therapeutic relationship (having an awareness that active exploration happens both within oneself and in relation to the other) is reminiscent of the concept of the scientist-practitioner, a practitioner that keeps moving in and out of the rich fabric of the therapeutic encounter, inviting openness, freedom and playfulness.

c. Integrating the body experience:

An important theme in terms of what the therapists found useful in their work, was the inclusion of the body dimension, as discussed in mindfulness theory and practice:

P2: *"for me Mindfulness is very much about being with the experience of the body… in clinical psychology we often use relaxation training but that's more about making a bit of a change to one's experience while Mindfulness more distinctively is around inviting people to be with their experience as it I think that's quite clinically helpful because usually people feel that they need to do something different...it does help to promote that kind of feeling of "I can do this because there isn't anything to do differently than what is there already"* (p.5:44)

P3: *"The intention, the aim is to get in touch with this wholeness in us in a way that takes the body with it and doesn't have to keep the body separate […] why should everything start with the mind? […]I believe that the two work together and I think that the same way thoughts are a vehicle for accessing very creative*

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change, I think the same way the body is another vehicle by itself and in another way, emotions are as well and I think again that this is quite liberating [...] I think I've learned to trust more the language of the body and what can happen with interventions that touch this aspect of things, how they affect thoughts and emotions so I suppose it's freed me up!" (p.2-3: 15-16)

P4: *"for many clients just learning to become mindful of their own bodies again...just learning to observe the different sensations...learning...something about the level of tension...or anxiety...or fatigue...that the body carries and how to <u>attend</u> to it mindfully rather than reacting against it...pushing against it...rejecting it or whatever the normal reactive responses might be...and I found that <u>incredibly</u> helpful."* (p.5:108)

<u>Summary of "Integrating the body experience"</u>: the benefits of including the body dimension seemed to be providing a way of cultivating acceptance of the physical experience while disengaging the individual from the worry that "they have to do something different"; also, it provides a connection with another system of the organism that can introduce "creative change" which that participant (P3) found liberating in terms of not having always to work through the mind. In addition, learning to respond to one's bodily needs with greater awareness and less reactivity was also found to be very helpful.

d. Integration of mindfulness theory and practice in therapy training

Finally, as a result of the professional benefits that the participating therapists saw in their practice, they discussed the benefits of a possible integration of mindfulness in therapy training:

P4: *"I hold the opinion very passionately that mindfulness should be an element of every class of all psychotherapists' training...because it's a training of the mind, a training of really understanding the nature of inquiry to our experience without judging it"* (p.13-14:264)

P3: *"based on the experience of people who come for their final placement with us, I think that it is really helpful for them to use [mindfulness] experientially as well as having the opportunity to use it with clients especially at a time when it feels like an ending, of having had different experiences and learned different things, it allows us to step back from it all rethink about...where we are at and how can we use these approaches [...]it provides a synthesis and a way of being with all this knowledge, that creates a space between the knowledge and us and it gives us a sense of I would say clarity?"* (p.8:80)

P5: *"I'd like to see more provision for the John Kabat-Zinn course, the 8 week MBSR course for example, or for therapists to be trained in mindfulness approaches working with patients either as an auxiliary to taking antidepressants or maybe to not have to take so many antidepressants"* (p.8:148).

Summary of "Integrating mindfulness": Mindfulness theory and practice was thought to be a potentially very valuable addition to psychotherapy training in terms of cultivating a spirit of inquiry and non-judgment, helping trainees loosen their attachment to the specific theoretical ideas they prefer and instead progress to a level of synthesis of all their theoretical and practical experiences, cultivate reflection and tolerance towards frustration and finally providing service users with an alternative to antidepressant medication.

3. **Difficulties and Risks in Mindfulness Practice**

A large part of the interviews was devoted to the difficulties that participants have found in terms of their personal practice or risks they have encountered; again, in terms of the scope of this research, the focus is on the therapist's own experience and not on the experience of their clients (which was also discussed). Identified areas of difficulty were: difficulties with systematic meditation practice; the temptation to see Mindfulness practice as a "cure for

everything"; the socio-cultural values of the environment they live in; and experienced mental health problems.

a. Challenges in meditation practice: stillness, discipline and the judgmental self

Meditation practice, the invitation "not to do anything", brought a challenge for the therapists:

> P3: *"I am still amazed when clients come back and say "Oh! It was so relaxing". I personally struggled: I struggled with the stillness, I struggled with the staying in my body, staying focused for so long"* (p.1:4)

> P4: *"what's challenging, is "keep practising" (laughter)... I notice that my ego is constantly trying to undermine this, going "ah.." you know "so many things to do" and I'm very curious and interested in this resistance and I think to myself sometimes, it's the ego's resistance to mindfulness"* (p.10:216)

Sometimes a therapist's own expectations get in the way of the experience, judging it in terms of how "good" or "deep" it is; if the use of mindful meditation is "legitimate"; or risk "imposing" it on others:

> P1: *"I used to beat myself up for not practising more and not being a "good meditator" and "I got to work harder at it"...I went to that for many years...I think I'm not so bothered about it now (laughter)"* (p.8:87)

> P2: *"I often find that if I am in meditation and I am having critical thoughts about where meditation is going that there is a sense of "yes, I should be doing this"...a sense of "I should be doing this more"..."* (p.8:74)

> P1: *"(in practice)...we repeat...we tend to practice meditations...mindfulness...in the way that that we have been conditioned...our patterns have been conditioned by our upbringing so the patterns I was talking about –striving- I have personally repeated in my mindfulness practice, overzealous, over-acting, pushing it too far, and that has caused problems a lot of unnecessary suffering"* (p.10:109)

P3 identified two different challenges:

"I often wonder, what does that mean about my professional identity […] because I need to be able to justify why as a trained psychologist I'm looking into that and where is my evidence." (p.4:20)

and

"It is very easy when you believe in something to actually share (a client's) desire to find something helpful" (p.6:38)

a challenge also shared by P4:

P4: *"I'll tell you one challenge I deal with constantly, I believe so passionately in mindfulness that I tell people "this is the thing!" (laughter)* (p.11:238)

Sometimes through difficulty emerges a new awareness:

P1: *" I had many years of mindfulness practice that were a bit barren and a bit hard work and for me personally it was a real revelation to be taught that meditation should be fun (laughter) and that you should enjoy it […] it should be something that you do with a light heart!"* (p.8:89)

Summary of "Challenges in mindfulness practice": challenges on a personal level included struggling with "doing nothing, systematically"; whilst on a professional level challenges involved dealing with one's own expectations and fears regarding meditation's "legitimacy" –especially for those participants who were clinical psychologists- and risking impulsively imposing it on others (such as clients).

b. Cultural values and beliefs

Mindfulness practice stems from the Buddhist tradition; the not-always-easy interface between such an Eastern tradition and the Western values/way of life has been echoed in the concerns and the difficulties faced by the therapists:

P3: *"how can we be mindful living very busy lives and having to meet so many demands and in spaces that do not really allow us to do that..?"* (p.5:36)

P4: *"I think we are so fast driven, there are so many values that are false values, the grandiosity that is part of our culture in so many ways and narcissism that is so prevalent...and maybe this is a desperate attempt for the human mind to become realigned again with the natural values of life"* (p.12:250)

P5: *We live in a very very un-mindful world! [...]everyone's going very fast, there is more and more demands on you there's less and less heart contact, I think it's very difficult, I think it's very frightening. And maybe that's why mindfulness is of growing interest [...] I think the difficulty is, is it something you can do over the weekend? You can't just learn in and apply it on top of your training...* (p.7:126)

P1: *because I come from a Buddhist tradition and I'm rooted in that I sometimes wonder about how people make sense of mindfulness because for me it's very much a part of a wider system of thought... it's one aspect of it...one organ of the body...which works together with other organs and to take it out [...] and to introduce it without those aspects of the system...I sometimes wonder how that's done* (p.4:50)

Summary of "Cultural values and beliefs": under this theme I have grouped the ideas offered by the participants around their experience of mindfulness in the context of the western world. Some have been concerned with what happens when you take Mindfulness out of its Buddhist philosophy and the values of the Buddhist "8-fold path" and treat it as an isolated entity or when you treat it "as something to learn over the weekend"; other concerns involve how conducive the Western kind of life and values are to Mindfulness theory and practice, pointing out that the contexts through which we move are quite "un-mindful" themselves. At the same time however, another participant suggests that it is precisely this "unmindfulness" and the unhealthy values of Western cultures that might be the reason behind the public's interest for the approach.

c. Mental health problems

Finally, an important difficulty that some participants mentioned was their experience of mental health problems in relation to meditation, specifically psychotic-like symptoms while meditating; this is something interesting that needs to be explored in its own right. One of the interviewees put it down to the kind of meditation practiced, i.e. Buddhist concentration meditation that has as a goal the deconstruction of the sense of self and the intensity one can throw oneself at the task of meditating:

P1: *"my cousin was a Buddhist monk in [name of Asian country] and he became psychotic and committed suicide [...] I know from my own experience that I have become manic and psychotic on retreats and it's not that uncommon a thing to happen I think when you practice intensively [...] (meditation can) actually deconstruct (the sense of self) and some forms of practice are deliberately designed to do that to help people to see through self and let go of attachments to the idea of self [...]it's part of a process which is ultimately healthy and healing but there could be complications if someone doesn't have adequate support..."* (p.5:67)

P2: *"I actually got a good personal friend who has had several psychotic episodes and he uses Mindfulness a lot in his personal practice and he gets on well with it, so I don't want to be too cautious (about people with mental health problems using mindfulness meditation) but I'd have been happy to work with that person (a client with a history of psychosis) on a one-to-one basis but I'd be a bit concerned in a group context"* (p.5:48)

Summary of "Mental health problems": it was intriguing that two participants talked about experiencing psychotic symptoms and meditation; one participant talked about the experience of mental health problems as a result of practice and explained it in terms of the kind of meditation used and the intensity of the practice; another participant talked about people with mental health problems using meditation which he feels is a good idea if done with appropriate care regarding the way it is practiced.

I discuss a review of these findings and my own reflections on them vis-a-vis the current literature in the next chapter.

Reflections on the interviewing process

Reflecting back on the interviewing experience, I could see that the personality and expression of each participant and their interaction with mine made each experience the interview unique; when playing back the interviews I noticed that my levels of anxiety waxed and waned according to who I was speaking to and how I perceived my own competence at interviewing them. Interviewing participant 1 was like entering a reflective and quiet space –I imagined being together by a silver lake, I could take in the surroundings with no hurry and at the same time I did not wish to disturb the peacefulness of the process by asking "difficult" questions. Participant 2 took me to a more cerebral level by introducing a thoughtfulness about the clarity of concepts and a reservation towards declaring mindfulness as the "final solution" as he called it –I felt we were on top of a mountain looking down at the world, detached from everything; my analytical mind liked that, but my felt experience carried some tension. Participant 3 talked me through her personal process of what it meant to become a mindfulness therapist and I imagined myself walking side by side with her through a forest, taking notice of the twists and turns of our path; with participant 4's liveliness I felt I was rolling in the grass, I did not want it to end! Finally with Participant 5 came across as discussing an interesting topic with an expert, a lecturer who had spent considerable time not only experiencing the practice but also conceptualising and refining how it can be communicated to others in a structured way.

Chapter 6: Project 1 Discussion

My exploration of mindfulness started from a question: how do I experience it and why do I find it useful? Bruce & Davies (2005) and Bruce et al (2010) identified a lack in the literature in terms of exploring the lived experience of mindfulness and its meaning for those who practice it. As discussed in the Literature Review chapter, much has been written in terms of the underlying mechanisms of mindfulness as well as of outcome studies but we know little about the actual experience of those who are involved in it.

The phenomenological inquiry into therapists' experience of mindfulness has intended to bring out the dimensions of how these professionals engaged with mindfulness in their personal and professional life and what it meant for them. In the following pages I will be discussing the themes that emerged in relation to the literature on mindfulness; I will identify themes that fall within what has already been identified in literature as effects of mindfulness practice and discuss new or divergent themes in relation to the existing literature. Finally, I will discuss this study's limitations and future research directions. I will discuss the wider implications of mindfulness in relation to psychotherapy in Chapter 10 where I will reflect on the findings of both projects within the wider sphere of psychotherapy theory and practice.

Before I proceed to discuss the results, I would like to point out that the participants in this study had encountered mindfulness practice before it became "mainstream". For some, meditation practice pre-existed their professional training, while others came across it during their professional careers. Most of the therapists talked of an initially "awkward" co-existence between their mindfulness meditative practice and their training. For the clinical psychologist participants, the difficulty arose from mindfulness practice not being acknowledged at the time as a "valid" paradigm because there was very little if no research evidence available; there was a lack of a "language" that could translate their personal experience into knowledge which they could comfortably integrate with their professional identity.

Participant 1 discussed this incongruence: *"I think it was quite uncomfortable actually (laughter) it ...I can remember two important parts of my life* [meditation practice and

clinical work] *were not really integrated and I think that that was one of the reasons why I wanted to do my thesis about that area, if I wanted to integrate them within myself and to talk to other people about their experience of trying to integrate their meditation practice and therapeutic practice.."*

This finding is also highlighted by Swan (2004) whose research on clinical psychologists' experience of mindfulness included issues of legitimacy regarding mindfulness in therapy; he writes that it is for this reason that "until recently most participants kept their mindfulness practice and professional practice strictly apart" (p.68)

Most of the therapists who experienced that incongruence also felt the need to address it by turning to ways of "bridging the gap": carrying out research (P1), doing further training in related approaches (P2,P3) or developing their own modules/training protocols (P4, P5); this was a creative response to difficulty and reminded me of Rønnestad and Skovholt's (2003) findings regarding therapist professional development, whereby seasoned practitioners were characterised by the "higher order integration of the professional self and personal self" (pp 27).

Taking this background into account, I will proceed to discuss the convergence and divergence of this study's findings with the literature on mindfulness research.

1. **Converging themes**

Mindfulness as facilitating a different relationship to Self

Germer (2004) says that "mindfulness has to be experienced to be known" (pp.27). The results show that first and foremost participants considered how mindfulness has impacted their relation to themselves and their inner lives, thus not treating it as a therapeutic technique but as a personal life stance.

The themes of the interviews revolved around the experience of mindfulness as impacting the participants' sense of self and by extension of their professional role. I think this is a very significant finding because it points out to what could be in my view mindfulness' most important contribution to psychotherapeutic work: the facilitation of a stance towards

oneself that allows for greater inner freedom, compassion and interconnectedness; these were three qualities which surfaced in the interviews. Certainly this finding agrees with the current literature which has highlighted the relationship between mindfulness practice and the way mental health practitioners and trainees view themselves (see Literature Review).

The participants talked about two simultaneous experiences: first, about a kind of "waking up", becoming aware of how their own mind and body *together* and *separately* responded to the world and gaining an understanding of this function; and secondly, a way of meeting this awareness and understanding non-judgmentally, with kindness. Participants reflected that their mindfulness practice cultivated "*a true knowing of one's self*" and the ability "*to see one's own patterns of responding to the world more clearly*" including "*patterns that caused difficulty*" (see Results).

Participant 5 mentioned that: "[Mindfulness practice] *Can bring me in touch with difficulty...it's an opportunity to notice the body's habitual defences, what happens at moments of difficulty and engage in a process of discovery and realisation*".

For the therapists in this study, a mindful stance inevitably travelled into the therapy room by informing the therapist's presence towards their client and helping them meet the client with empathy and patience; they reflected that mindfulness cultivates the capacity not be overwhelmed by a client's intense emotions or experiences but to be "alongside it", as a compassionate witness. Furthermore, participants found that it can offer a different way to respond to that which does not involve directly "changing the client" but "being with the client", which is in line with the literature mentioned above regarding therapist presence (for example: Swan, 2004; May & O'Donovan, 2007; Geller 2011; Gehart& Mc Collum 2010).

Participant 2 comments thus on this experience:

> "*being able to bring a sense of acceptance to experience ...to all experience...in myself and other people; maybe a sense of honesty or finding a way of being with things that aren't easy to be with*"

Therefore, both the therapists' practice and the literature points to the importance of exercising mindfulness awareness with compassion *within* the difficulty that may arise, which involves staying with and acknowledging difficult emotions and needs. This, as it is

discussed in the Results section, included *primarily* the awareness of the participants' own harmful or unhelpful patterns in their personal lives and the invitation to see how they could step back from being overwhelmed by them.

Compassion, acceptance and awareness might sound obvious especially when referring to professionals who are trained to empathise and support other people in their difficulty. It is argued however that there might be a gap between therapeutic theory and training: Gehart & McCollum (2010) for example, support that most training programmes focus on mainly on content i.e. how the therapist *communicates* presence or empathy, but not on the *felt* experience of how it is to be aware, accepting or compassionate within oneself. They believe that this difficulty exists because "presence" as a life stance is more of a way of being and less of a way of doing and therefore it is harder to formally integrate it into training curricula. I would also add that often the therapists' working environments can be quite "mindless", focusing almost exclusively on objectifying what the therapist "does". Swan (2004) similarly identifies a lack in clinical psychology training of an experiential model of reflective practice.

Obviously mindfulness theory is neither new nor alone in advocating the importance of presence in psychotherapy; it offers however a clear, *experiential* way of consciously cultivating this presence, meditation. The use of meditation is unique in MBIs and is based on Eastern traditions which tap into forms of consciousness other than the usual state of "wakefulness" known in the West (Didonna, 2009). Germer (2004) explains the constant interaction of mindful meditation's three qualities which cannot be separate from one another:

"1. Awareness, 2. Of present experience, 3. With acceptance [...] the presence of one aspect of mindfulness does not automatically imply the presence of others [...] For example, awareness may be absorbed in the past, such as in blind rage about a perceived injustice. Awareness may also be present without acceptance, such as in disowned shame. Likewise, acceptance can exist without awareness, as in premature forgiveness; while present-centeredness without awareness may exist in a moment of intoxication. All components of

mindfulness –awareness, present-centredness and acceptance- are required for a moment of full mindfulness" (p26).

I discuss further the interface between mindfulness, psychotherapy and training at the end of Project 2 Discussion. However, it has to be pointed out that these findings refer first and foremost to the personal experience of the therapists regardless of whether they actively sought to integrate it into their work.

Another finding relating to a different way of experiencing oneself was the sense of "*wholeness*". Participants described mindful practice as "a *grounding force*", an "*anchoring*", a sense of "*centred-ness*"; this sense in turn brought into awareness a felt sense of "*spaciousness*", "*freedom*", "*calmness*" and a "*building up of a sense of self*". Participant 3 commented that she experienced this wholeness as something very nurturing ("*this sense of being whole for the first time" see Results*).

Gehart & Collum (2010) have reported similar findings in their qualitative research of trainee therapists. They called this dimension "centredness". I chose the term "wholeness" because to me it sounded like an integrative process that involved a returning to and anchoring oneself in the present thus allowing for a reconstruction of self ("building up a sense of self": P1) with spaciousness and freedom. Part of this wholeness was the awareness of the body which is discussed below.

<u>Wholeness and the importance of the body</u>

In this study, participants noted the vital role what the body plays in their experience of "wholeness". There was an awareness of the body as a separate system through which they perceive and respond to the world; a system that is non-rational and non-linguistic which can be separate from the mind and also inform the mind about how to conceptualise and respond to different circumstances. For example, P3 offered her thinking around how the body can be seen as separate but not less important that the mind:

> "*can we be with body in itself and can we be informed only by the body [...] or can we work only with body and would that work affect the mind and would that work affect*

emotions? And I think before engaging in mindfulness practice I would say "no" and now I would say "yes" (See Results).

Participant 4 offered another dimension in bringing in the body awareness:

"*in my work one of the fascinations that I've had is about this mind-body split, and what I love about mindfulness techniques is that it <u>includes</u> the body […] and has an understanding that unless you can bridge this a little bit more is much much harder [...] I also wanted to say, Maria, that I think for us as psychotherapists, because there is such a need for empathic attunement to the client... of course the body is very much the mediator for that*".

The link she makes between awareness of the body and empathic attunement is echoed in Germer (2009); he points out to the relationship between mindful practice as encompassing all levels of experience (physical, mental, emotional, relational and spiritual) and the cultivation of self-compassion; it is theorised that self-compassion is the basis on which compassion towards others is build. Weiss (2009) comment that ultimately it is the therapist' stance that can influence the therapeutic work: *"treatment plans, psychopathological concepts, and ideas about a desirable outcome can counteract mindfulness. Because therapists model attitudes towards healing, their own intuitive relationships to those concepts have great impact. Research has shown that the therapists' attitude can determine the success of therapy and that an accepting, empathic style seems to be the one that works best"* (p.9).

 This study confirmed these results in finding that the therapists' personal use of mindfulness extended into the therapy room in order to inform their empathic tolerance and understanding; furthermore participants mentioned using it as a stabilising (anchoring) force when working with very distressed clients; as a means of becoming aware of their own and their clients' expectations during the session; and embodying mindfulness for the client.

The therapists' experience discussed so far have been along the lines of the relevant literature on the benefits of mindfulness (Kabat-Zinn, 2004; Germer et al. 2005) and has reflected the findings of other studies which have highlighted the "transformative potential of mindfulness practices for mental health professionals" (Shapiro et al 2007; Grepmair et al. 2007). Also, the above results are in line with the findings of Christopher et al (2010) who

found that mindfulness practice amongst trainee therapists resulted in increased awareness and acceptance which in turn facilitated a sense of increased wellbeing and compassion towards others.

2. Divergence and new directions

In this section I will present the themes that were not so much drastically different from those existing in literature, but rather emphasised dimensions currently under-researched, and the implications this might have.

The therapist's spiritual needs and the cultural context of practice

Several issues emerged here: to begin with, that the therapists expressed spiritual needs which needed addressing and attending to; they referred to mindfulness practice as a space for the therapists' own spirituality, regardless of religion. The spirituality of therapists is an issue that is often overlooked at least according to West (2004) who mentioned that in the quest for an "objective" and "scientific" practice, the issue of therapist spirituality has often been overlooked. Mace (2008) comments that often mindfulness is used as a means of a personal spiritual practice and Swan (2004) suggests that its inclusion in clinical work addresses issues of spirituality. Siegel et al (2009) writing about the reasons why mindfulness has become popular includes the reason of a spiritual need being met: "One explanation is that the young people who were spiritual seekers and meditators in the 1960s and 1970s are now senior clinical researchers and practitioners in the mental health field..." (p.24).

A second theme was that those therapists who were Buddhist (P1 and P2) found it frustrating and potentially harmful to detract the concept of mindfulness from its roots within the noble 8-fold path of Buddhist philosophy. They felt that secularly-practiced Mindfulness, one that does not refer to an ethical way of living as prescribed by Buddhist teachings, does not convey the full meaning and intention behind the practice of mindfulness. This concern, about seeing mindfulness as separate from its Buddhist roots has been discussed in literature (Kelly 2008; Kang & Whittingham 2010) and there is a valid

[90]

argument put forth that mindfulness is only part of a whole philosophical system that dictates a way of being through specific ethical rules. To ignore that is to extract the very essence of mindfulness from its core. This is an issue that requires further exploration, from those practitioners also involved in Buddhist practice, in terms of what it means to transfer a spiritual/philosophical value from one cultural environment to another. I am aware that at the time of writing there has been a lively discussion going on both in the literature and on the internet (e.g. at the time of writing I have been following a discussion thread on an online Mindfulness interest group on the topic of "*why do some people equate Mindfulness interventions as having originated with the Buddha*"[2]). On the other hand, it could be argued –as in the Literature Review chapter- that secular, "therapeutic" mindfulness is an overarching quality, which could be explored in its own right within the general philosophical and ethical practice of therapy. The issue of mindfulness within and without a Buddhist context is an area that is currently being debated. However, a potential "risk" which Buddhist scholars have underlined and which I believe deserves attention involves the implementation of western logic upon eastern thought with reductionist results:

"scientists need to embrace new approaches for studying mindfulness, and merely linear, additive models that sum putative markers related to mindfulness will not suffice" (Grossman & Van Dam, 2011, p.220).

A third theme that emerged was that, at least according to the experience of one participant, secular mindfulness practice might help people belonging to other religious faiths to engage in practice and meet their spiritual needs without feeling that their own belief system is under threat. The account of Participant 3 presented in the Results section is particularly revealing; she actively sought to explore how the Buddhist-influenced theory related to her own religion, and found a new connection to her orthodox Christian faith *through* mindfulness theory and practice.

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[2] University of California, San Diego (UCSD) Center for Mindfulness:
http://www.linkedin.com/groups/MindfulnessBased-Interventions-UCSD-Center-Mindfulness-3703348?home=&gid=3703348&trk=anet_ug_hm

Finally, an issue raised by the participants has been how mindfulness can fit into a western-type of living. If seen through a Buddhist context, where there is a clear division between wholesome and unwholesome living (Kang & Whittingham, 2010), then mindfulness practice may or may not be understandable/applicable in a western cultural context where the ethos of living is different, although this does not mean that an ethical way of living is not sought by people in western cultures. A concern was the therapists' experience of living in "mindless" spaces and it was suggested by at least one participant that perhaps current interest in mindfulness *is* in fact because of what we lack as a western society: about addressing the stress, mindlessness and alienation of life in western urban environments. I would add that in these environments a grounding, spiritual, inter-personal practice does much more than to combat stress. It provides a sense of context and belonging, promotes solidarity and leads people back to re-aligning with themselves. Finally it allows a space for the expression of spiritual and existential needs. I believe however that there is no straightforward answer to the issue of mindfulness and cultural context. I believe that what has been supported so far with regards to the mindfulness practice – that first and foremost it is a practice that the therapist needs to be engaged in their personal lives and not only a therapeutic technique- applies here too: that mindfulness practice, even when secular, still carries an "ethical living" philosophy and as such it would be reductionist to only treat it as a meditation practice that happens alongside "mindless living". How then is mindfulness practice integrated within the individual's life context is a dimension which I believe is worth exploring through research.

Mindfulness in relation to others: interconnectedness and belonging.

As mentioned in the Results section nearly all participants commended on the value of having "communities" they tap into for meditation and support. Participant 5 described her experience thus: "*we don't know much about each other... socially, or in any other way and it is wonderfully relieving and freeing*". It is about community practice based on a shared ethos. So even though meditation is a solitary activity, what has been proposed in the interviews is that it works better when done within an interpersonal framework. It could be overall ethical context that is helpful as Participant 1 offers: "*I was part of a community, we*

practiced together and there was an ethical framework and shared values". It could also be the protective "safety net", mentorship and guidance towards this new relating to one's own self and experience provided by more experienced meditators as Participant 3 has suggested.

To the best of my knowledge the research on trainee and health professional's experience of mindfulness does not say much on this issue, although mindfulness theory literature, such as J.Kabat-Zinn's "Full Catastrophe Living" (2004) emphasises the point of interconnectedness. Elsewhere in mindfulness literature the concept of "inter-being" (Germer, 2005) is discussed in its function as a reminder that we are deeply and unavoidably connected with each other, the world and with the microscopic and macroscopic universes. This seems to me as an ecological and ultimately a political statement. It is about moving from being-in-the-world in an automatic, mind-less state, to being with the self in order to cultivate awareness and compassion to opening up again to a new way of being-with-the-world.

The interconnectedness that results from "being with the world" implies an intra-personal and an inter-personal attunement that leads to having greater empathy towards the self and others. The inclusion of this dimension as an acknowledged therapist need is important.

Difficulties in mindfulness practice

Part of the research involved exploring the participants' difficulties with mindfulness practice as I found little on the subject when reviewing the literature. The main areas of difficulty reported were mental health problems experienced during meditation (in retreats) and therapists' own expectations.

Mental health problems and meditation: "you have to be somebody before you can be nobody"

The phrase above belongs to Engler (1993) whose warning towards the dangers of meditation I discuss below. I consider this a very important aspect as it has been little researched (Irving, 2009). However, this concern has been identified in literature:

"Meditation practice can lead to adverse effects. Patients who decompensate when emotional controls are loosened should generally not do formal meditation. For example, destabilising traumatic memories, including body memories, may rise to the surface or mild states of depersonalisation could trigger panic attacks" (Germer et al, 2005 pp128).

Shapiro (1992) found that 62.9% of experienced meditators reported at least one adverse experience related to participating in a meditation retreat. It is also mentioned that some participants felt that although the experience was negative, its overall effects where positive (Ibid). This was reflected by the experience of Participants 1 and 2 (see Results).

Experiencing mental health problems during meditation practice was mentioned by at least one other participant (P1) in this study. I believe it highlights an important area of further research, i.e. to clarify the differences and in particular *the intention* behind secular mindfulness practice and Buddhist meditation practice. It seems that the latter deliberately seeks to deconstruct the Ego as an illusion that leads to suffering while the former is based more squarely on cultivating awareness and acceptance thus strengthening and expanding the Ego instead. Certainly, there are different intentions between various practices of meditation. For example:

> "The Abhidharma (nb. higher teaching of Buddhism) identifies two types of meditation, one aimed at the attainment of calm and one aimed at the development of insight (Bodhi, 1999). While much meditation in the western world has tended to emphasize the former, traditional Buddhist meditation also has a strong focus on the latter. The Abhidharma outlines different meditation subjects for each type of meditation and provides suggestions about the suitability of certain meditations for certain people, recommending, for example, that meditation on the 'mindfulness of

breathing' (which is a common feature of introductory meditation courses in the western world) is best suited to individuals with a discursive temperament or with delusion (i.e., lack of wisdom)" (Kelly, 2008, pp11).

My own experience from a Buddhist meditation retreat led to a lot of thinking around the issue of the intention behind the meditation practice (as recorded in my research diary and is presented in Chapter 10, "Heuristic Research") and I feel it makes a great difference in terms of how meditation and its consequences are experienced by participants. It also raises cross-cultural issues around concepts of what is considered as "healthy development". I was interested to find the experience of other authors echo my own in terms of the "rift" between meditative and therapeutic agendas. Welwood (1980) writing on the differences between psychotherapy and meditation offered that "the aim of psychotherapy is self-integration, while the aim of meditation is self-transcendence" (in Geller, 2003, p.261).

Andersen (2005), writing about the benefits and risks of meditation warns that: "meditation from this perspective (ego development) would be contraindicated for *persons struggling with poorly developed internal representations of self and other or for those who have difficulty maintaining the integrity and coherency of self"; "you have to be somebody before you can be nobody"* (Engler, 1993 in Andersen, 2005, p.486). The author later reflected that his reservations were due to working therapeutically with clients drawn to the Buddhist concept of the non-separate self "as a way to bolster narcissistic defences, avoid personal responsibility, rationalize fears of intimacy, or otherwise maintain distance from unwanted affect" (Engler 2003 in Andersen, 2005, p. 487). I believe that this concern is quite valid, as often behind the need to transcend experience is a desperate need to avoid it. That does not mean that mindful meditation is not beneficial, in fact Engler offered that meditation can help cultivate ego strength and in particular the ability to have affect tolerance and self observation. (Ibid). Epstein (1988) for example supported that Buddhist perspectives do not focus so much on the need to eliminate the Ego as much as on highlighting the fact that the 'I' is constantly changing, and cultivating an awareness of that. Epstein believed that the awareness of this ever-changing flow of the self and the world could actually facilitate a sense of Ego stability (Ibid).

However, I wonder what happens with people for whom cultivating this internal observer who "witnesses" all the other parts of Self unfold might not be possible or easy to tolerate as outlined by Engler above. Meditation is a powerful tool and the few research findings that we have seem to indicate that there should be caution towards how it is used, for how long, by whom and with what kind of available support.

Walsh & Shapiro (2006) comments on the relatively limited space that meditative texts devote to addressing the potential difficulties faced by beginner meditators or to those at risk of more severe mental health problems. Even though most difficulties involving the emergence of traumatic memories or existential anxieties are found to be transient, there have been instances involving the emergence of "...severe pathologies […] usually in practitioners with prior severe pathology who are involved in intensive retreats (Walsh & Vaughan, 1993; Wilber et al., 1986)" (in Walsh Shapiro, 2006 pp.233-234).

On the other hand, they have found that for some people these episodes are opportunities for growth (Ibid). Participant 1 in this study has discussed how for him experiencing a mental health breakdown in a meditation retreat was an important part of his healing process. Epstein (1995, 1998 in Andersen 2005) also supports that the mindfulness aspect of meditation can lead to greater ego strength and integrity.

It seems to me that perhaps we are talking about different kinds of meditative practice, which might range from spiritual/ transcendental practices to psychotherapeutic meditation and I believe that there should be further research on clarifying what kinds of meditation are used for what purposes. Concluding this section, the findings of this study have shown that more exploration is needed to further our understanding and research into the "side effects" of meditation and there should be more investigation on how different kinds of meditative traditions are used. For one, the "ego strength" of individuals participating in meditation, should be taken into account to protect more efficiently those participants who might be more vulnerable. Also, duration, kind of meditation employed and training of meditation teachers are dimensions that should be explored in relation to mental health problems.

Therapists' own expectations of mindfulness

"*It is very easy when you believe in something to actually share someone's desire to find something helpful*" (Participant 3)

The therapists' own expectations of how they should be in their role and how they should be helping their clients came into the discussion as something most had to keep in mind. It is normal for therapists to use our own inquiry into our self and what we find helpful to guide us in terms of helping our clients. As mindfulness starts with the personal level, it is something that the therapists experiences before the client and, if found beneficial, could try *with* the client. As Participant 2 rightly observes:

> "*it feels right to me to draw on one's own personal life experience (laughter) of what is actually helpful...but I suppose the only danger in that is almost thinking that the client is like us...*" (p.12:110)*.*

This is a theme that has been under-represented in the available literature, i.e. to what extent the therapists' belief in what they have found personally helpful can get in the way of seeing what is actually helpful for the client. Certainly, it is vital for the therapist to have faith in their approach but at the same time it is important to retain a flexibility towards meeting the needs of the client. I would therefore suggest that one point of caution –as it has been suggested by other authors (see Literature Review) is not to render mindfulness a technique that should be applied to everyone; instead, if the therapist is indeed mindful then they can respond creatively to the client drawing upon different resources not necessarily connected to mindfulness.

Another issue regarding therapists' expectations revolved around what it meant to be a "good mindfulness practitioner". Participant 1 reflected that it took him many years of "barren practice" before acknowledging that meditation should be done "with a light heart". This seemed to me as an important comment, hinting towards the tendency to construe meditation as something that "one has to struggle with" in order to be good at. Participants found several difficulties in their meditation practice including learning to stay still, engaging in systematic practice, confronting one's own expectations and judgments. I wonder whether there are cultural considerations present: if we are conditioned from any

early age to think in terms of achievement, then this is a part of our self that will unavoidably find its way in meditation practice.

The following extract from my discussion Participant 1 is very accurate in illuminating this risk:

> *"We repeat...we tend to practice meditations...mindfulness...in the way that that we have been conditioned...our patterns have been conditioned by our upbringing so the patterns I was talking about striving, I have personally repeated in my mindfulness practice, overzealous, over-acting, pushing it too far, and that has caused problems a lot of unnecessary suffering...*
>
> - *R: Yes*
>
> - *T: Because I haven't been able to see the very way that I practice, my attitude to my practice has been repeated...the problems I was trying to extricate myself from through the practice...*
>
> - *R: Uhm-uhm*
>
> - *T: and that's the challenge to see that...and again meditation practice is not necessarily the best way to see our own blind spots, sometimes we need somebody else, a therapeutic relationship to reflect back to us what's going on, otherwise we blindly continue..."* (p.10:110).

I think this extract sums up the complexity and challenges of mindfulness practice that resonates with me too. In our continuous quest for what constitutes "good practice" in psychotherapy it is easy to hail mindfulness as the new "panacea" as Participant 1 says, or the "final solution" in the words of Participant 2; however, mindfulness practice is nothing but another way of looking at our experience, and not necessarily the best or the ultimate way.

The other important idea that Participant 1 offers is that we do need a relational context in order to work through our senses, thoughts, feelings about ourselves. We need the reflective quality of the therapeutic encounter in order to be able to see through our own

patterns; our respective "truths" are relational, we construct our understandings of ourselves and the world through our interactions with one another.

This finding therefore implies that mindfulness practice alone is not therapy; it could however be seen as a "basis" for the therapeutic relationship. The therapeutic relationship could also safeguard against the risk to use meditation in order to avoid painful or difficult experience. I agree with Geller (2003) when she warns that:

> "...the risk in meditation is the tendency to use practice as a way of detaching from experience or avoiding important and necessary emotional work" (pp 269).

It is very easy when experiencing shameful, painful or anger-provoking emotions to want to "escape" by detaching from them. I believe that the task here is to explore ways in which mindfulness meditation can help *turn towards* and *attend* to the emotional work that needs to be done in ourselves and our clients. Mindful awareness could be used to warn when our mechanisms of avoidance spring to life and the therapeutic relationship is the holding space for this awareness to be worked through.

In conclusion, difficulties that the participating therapists have encountered in relation to mindfulness are experiencing mental health problems during prolonged meditation; confronting their own expectations of mindfulness practice both in relation to their own use of it and in relation to using it with their clients; and finally, difficulties that had to do with cultivating a meditation practice. As discussed above, I believe that this is an area that needs to be researched further in order to understand how meditation could be used in and out of the therapy room. It also needs to be borne in mind that mindfulness is only but one approach and that it will not suit the needs of every individual even if the therapist finds it personally useful. Finally, that an inter-relational context is needed in order to be able to reflect upon and work through the awareness gained during mindfulness practice.

Limitations of this study and future research directions

There were several limitations of this study. To begin with, the participants did not all have the same background and experience of mindfulness practice. This is understandable if we

take into account that when they encountered this approach for the first time there was hardly any reference to it. On the other hand, perhaps the meditation experiences of different participants led to different understandings –for example the Buddhist participants possibly practiced meditation differently from the non-Buddhist ones. Given the discussion about the importance of the kind of meditation employed that ensued from the findings, it was a limitation of this study that this dimension was not actively explored in the interviews. Dorjee (2010) for example, suggests that research should investigate the differences in attentional and emotional processing between meditators trained in MBSR (Mindfulness-based Stress Reduction) and the Insight Meditation tradition. As discussed above, research focused on teasing apart the use of different meditative practices is essential in understanding the impact on the individual people.

In addition, McCollum & Gehart (2010) have identified the need to explore the results that "different forms and dosages" of mindfulness practice can have so that the use of mindfulness is better fine-tuned, especially in therapist training programmes. Again, the extent to which each participant practiced mindfulness meditation was not actively explored in this study; I believe however that it falls within the general direction for future research outlined above.

Mace (2008) argues that even if mindfulness-based therapy is effective, it does not necessarily follow that it is beneficial in the same manner to all people. I would argue that similarly we need to investigate further how mindfulness practice has impacted different therapists depending on factors such as their years of professional experience, therapeutic approach(es) used, professional identity (clinical or counselling psychologist, psychotherapist, counsellor etc), experience and kind of personal therapy etc. This was not actively explored in this study and whilst participants had common experiences regarding the benefits of mindfulness it would have been worthwhile to explore in a deeper level the differences in their experience. It would have also been interesting to have asked participants in Project 1 if they have experimented with other art forms such as drawing, poetry, dance, creative writing etc as a means of inquiry into their experience (see my own experience on using different means in Chapter 10: heuristic inquiry) with meditation and drawing was reflected in the experience of other professionals. However by the time I had started drawing, the interviews with the therapists were already completed. I nevertheless

feel that the ways therapists choose to explore their experiences would be an interesting dimension to explore in future research.

A second limitation involved the method of "snowballing" in terms of enlisting the participants in this study. Whilst mindfulness-inspired practitioners in the UK are not a large group anyway, this method could have possibly resulted in a biased sample.

It would have been better to have interviewed all participants face-to-face and in their personal space –as I found it played a role. However, due to practical reasons some participants were interviewed over Skype and of the face-to-face interviews, some were conducted in the participant's workplace which in my view affected the degree that they felt relaxed. Finally, as interviews are but a "snapshot" of a person in time, I believe it would have been interesting to have discussed how their mindfulness experience unfolds over time across different interviews.

Qualitative research in itself determines the kind of "knowledge" that emerges. The reasons for choosing a qualitative exploration are outlined in Chapter 4; researchers such as Bruce et al (2010) have written about the need to engage in such a line of investigation: "Qualitative research could study therapists who already have a mindfulness practice to find out how they use mindfulness and how their practice helps them in their work." (p.93). On the other hand, both Ludwig & Kabat-Zinn (2008) and Hoffman et al (2010) support that most of mindfulness research has been qualitative which was not been helpful in terms of generalising findings regarding mindfulness outcome.

Conclusion

The results of this study argue that being a "good therapist" starts with being a "whole" individual and that mindfulness practice addresses this need. J.Kabat-Zinn (2011) in a thought-provoking article about the origins of the Mindfulness-based Stress Reduction programme he developed, talks about "a continued invitation to have there be no separation between one's practice and one's life" (p.295) and that this integration could provide "the foundation of *professionalism* in medicine" (Ibid). This echoes the findings of

Jennings and Skovholt (1999) who discovered that "life congruence" (the integration of therapists' personal and professional stance) led to a healthier, more balanced emotional life seemed to feed into the effectiveness of the therapists' work. And yet "life congruence" -which to me seems to be related to holistic being or "full-human beingness"- is something that appears to be under-researched.

The suggestion both in literature and in this project's findings is that much more than being another approach, mindfulness practice offers a "map" of relating to one's experience that leads to greater integration and balance. Certainly, Swan's (2004) research on the experience of mindfulness in clinical psychologists showed how a mindful way of being was perceived as a stance of life for the participants and not just a helpful skill. First and foremost, he highlighted how mindfulness practice involves a process of *personal transformation* for therapists, one that includes greater awareness and acceptance of one's self as well as of others. The results of this study also indicate a similar experience of the participants that is grounded in a different way of relating to oneself. The fact that the benefits were experienced by seasoned practitioners from different professional angles who had years of practice, attests to the approach's significance. The potential risks that surround practice, especially the use of meditation have also been identified and the need to explore it further in research has been suggested.

Another potential risk involves reducing mindfulness to a set of techniques for therapy interventions for "better and faster results". As Shapiro et al (2006) point out:

"Nevertheless, much misunderstanding remains. Contemplatives often still view Western psychology and psychotherapy as limited adjuncts to meditation practice, and psychologists usually regard meditation as just another therapeutic technique to be applied and investigated in conventional ways". (p.227).
 I am aware that such a danger exists within the current enthusiasm about mindfulness-based approaches. The "institutionalisation" of mindfulness as academic programmes of study for example, hides the danger of separating mindfulness from its natural, free, daily occurrence and making it a subject to be studied and possibly evaluated upon. I am aware that much of the western discourse has been based on dualistic thinking and I am wondering about the danger of reducing this versatile quality from a stance of life to a skill

we do "right" or "wrong" and which is "useful" or "useless". I further wonder whether mindfulness runs the risk of becoming yet another "product" (commodification being another type of western discourse) and which is a "conveyor belt" approach to quickly reproducing and distributing products –be it supermarket food supplies or ideas. In an article dating back to 1999, R. House warned against the "professionalization" and commodification of therapy: "it has been argued that the price we are paying in the course of therapy's institutional professionalization is the *loss of therapy's soul*" (pp379).

I would argue therefore that perhaps mindfulness is a way of cultivating the *therapist's soul,* and a "self-hygiene", as P4 pointed out, a stance that could possibly help retain the human contact factor in therapy regardless of the theoretical approach the therapist uses; it could be argued that mindfulness could be seen as an important trans-theoretical construct (Siegel, 2008).

Chapter 7: Project 2 Methods and Methodology

In this chapter I will present the rationale of the proposed methodology and method for Project 2. I will introduce the research design and the participants and will discuss the process of data gathering and analysis.

Although this is a separate research study, as it has already been mentioned in the introduction chapter it is organically connected to the research inquiry of Project 1; so methodologically, my background and epistemological position towards the research material remain the same. However, as this is the next spiral in an evolving line of inquiry into mindfulness I will briefly revisit the issues of methodology and epistemology in relation to this particular project before presenting the methods that will be employed. I wish without repeating the arguments vis-a-vis my chosen angles of social constructivism and qualitative methods (see Chapter 4 "Project 1 Methods and Methodology) to reconsider how they dialogue with the subject matter of this exploration.

1. Rationale of proposed methodology

Epistemology revisited

My epistemology, as also discussed in Chapter 4, is based on social constructivism i.e. the premise that truth is co-constructed amongst individuals. This is partly because of the values of my therapist self –in my practice I listen to the subjective truths of my clients and together we create another truth: one which emerges from their story seen from my eyes, being reflected back at them and reflected back to me again continuously and over a period of time; therefore, a basic axiom is that meaning is created and attributed anew with each client and each research participant in each session and each interview. Another part of my epistemological angle is influenced by my mindful stance, which allows the possibility of different truths to co-exist. This includes conceptualising mindfulness itself; my thoughts are echoed by McCown, Reibel & Micozzi (2011) when they write that defining mindfulness is a case "... within each group or dyad; teacher and participants will hold many different "working" definitions throughout their time together, moving from basic shared language to

highly nuanced tacit understandings co-constructed in practice and dialog" (p.62). I think that this comment is particularly pertinent in this study where trainee groups are facilitated in order to further examine the experience of mindfulness.

In this project I am inviting Greek trainees with little or no prior input regarding mindfulness to act as "naive observers" with "beginner's minds" towards their experience of a mindfulness programme (MBSR). In mindfulness practice one is invited to approach the experiencing of internal and external phenomena *as if* happening for the first time. This "fresh" view of each individual student is then expected to interact with those of other students, thus placing simultaneous "truths" in dialogue with one another. In this way, I am approaching this inquiry through both a social constructivism and a mindfulness angle; approaching it through a joint co-construction of meaning and at the same time acting, together with the participants a "naive investigators" creating an accepting space for knowledge to emerge. The openness and lack of assumptions of the "beginner's mind" is particularly pertinent in this study as the Greek trainees actually *are* naive observers called together to make sense out of their collective experience.

A comment on my own experience of co-constructing the truth

I stand in a position of vested interest in mindfulness; it has intuitively made sense to me and I have sought to explore and understand why I find it so fascinating that I want to spend an entire doctorate researching it. In this manner, I am part of this co-creation of truth. I am creating the space for the exploration and I am responsible for inviting participants, or rather co-researchers, into this space in order to create together a meaning out of our respective experiences. But much more than listening to how great mindfulness is, I am asking the question of *what* mindfulness is, how each one of us experiences it and what is the fabric of the collective truth we can weave together. I find this process much closer to the essence of the phenomenon itself than struggling to reach an absolute value and an operationalised definition.

This can be an elaborate but ultimately very rewarding process. I have come to realise that my excitement peaks when I have an "aha!" moment; when during an interview or a discussion or while reading an article on mindfulness light is thrown into a dimension that I had not thought about before. This is exciting. Equally exciting is to hear or read something

that will illuminate and clarify my own experience –something already lying there but not made conscious, not been given meaning to. When chancing upon a comment that does just that, I feel curious and elated. In such moments I realise the importance of the relationship with the Other in constructing the world.

I have tried to render my own process of inquiry, my expectations, comments, biases and reactions as transparent to the reader as possible first by employing my own experience as a research topic (Heuristic Inquiry) and secondly by keeping a research diary from the beginning of the doctoral programme all the way through, recording every possible occurrence that feeds into the process and the progress of my inquiry.

Qualitative methodology

It follows from the above discussion that in order to explore the texture of the experience of students a qualitative methodology is needed; I have evoked its "ability to capture the complexity of the subject matter and elicit richness of material from the participants" (Mc Leod, 1999 in Koliris, 2009, p.10) as a reason for orientating myself towards qualitative methodology in Project 1 and I believe that the same ability is called upon again here in Project 2.

In addition, qualitative methodology allows me the opportunity to place myself as a researcher into the picture and use my own experience and reflections in order to illuminate my search –how do *I* experience mindfulness; how do *I* interact with the participants in my research? How do *I* influence the "story" that is being told? I am taking for granted that this influence is part of the *sine qua non* of the research process. Furthermore, by openly inquiring into my own role in the inquiry I am pointing out where my own biases lie, what is the personal and professional experiential baggage I carry with me and which are the angles through which I look into my material. I have also rendered visible (through heuristic inquiry and research journal) my own dialogue with my subject of study, which in my view enriches rather than undermines the material.

J. McLeod (2011) in his discussion regarding the status of qualitative methods within the scientific community, comments that "the way we write about therapy is a political act" (p.248), meaning that the authoritative and impersonal language employed by quantitative randomised control trial studies –the kind of studies preferred by decision-making bodies in

order to determine what therapies are "evidence-based" for example- are in their essence a political decision and one that qualitative research seeks to counterbalance. I agree with his remarks and feel that the way we choose to do therapy research is also a political act. I have chosen to employ qualitative methods because ultimately, I find it a democratic way of approaching the subject of inquiry. There is no "more" or "less" important data, "more" or "less" important voices, no assumptions of authority; it invites open participation of different voices and treats them with equality . Participants are not just numbers, but actual people with unique experiences, and most importantly are seen as co-researchers.

 Furthermore, I believe that qualitative methods offer a more organic way of approaching research in the sense that it invites to make conscious and systematic the inquisitive stance that we all employ daily. In a Professional Knowledge seminar I attended recently at Metanoia, I came across what I thought was a very valid point: that as therapists are naturally curious and inquisitive individuals who have chosen to express their interest in the human psyche through therapy but it is equally likely that we might choose as easily another medium of inquiry, such as art, science, writing fiction etc (Adams & Bagel-Charleson, December 2011). So we are above anything else curious investigators often shy of admitting it: I have been a witness in a recent international conference (SPR, June-July 2011, Switzerland) of a long discussion about the need to convince therapists not to be afraid of research and show them that this is something they actually do in their every day working practice. I believe that qualitative methods by shedding the presumption that research is something that only highly trained and knowledgeable "experts" can do, invites therapists to make use of what is already there and create knowledge to be shared. It is an invitation I find both daunting and liberating.

2. Rationale of proposed methods

Mindful inquiry

I have discussed in Chapter 4 (Project 1 Methods) the interesting parallel between the epistemology of qualitative methods (phenomenology in particular) and mindfulness theory and practice, in terms of co-constructed realities. However, while in Project 1 mindfulness was only the subject of inquiry, in this project is, perhaps more openly, a *method of inquiry.*

Using mindfulness as a means of inquiry emerged through the heuristic exploration into my own experience (Chapter 10) I found that although mindfulness was the subject of my inquiry, it was at the same time the *lens* through which I approached my experience. In particular, I have found through my own practice that mindfulness includes certain axioms that created the basis of my inquiry:

a) it advocates an openness to one's own experience (take in everything –allow people to tell their story) b) it cultivates a non-judgmental attitude (do not differentiate between "good"/"useful" and "bad"/"useless" data), c) it allows engagement whenever possible with experience using a beginner's mind (suspend assumptions and expectations). Looking to see how my own anecdotal experience related to the theory of the approach, I turned to Bentz & Shapiro's "Mindful Inquiry in Social Sciences" (1998).

In their book, Bentz and Shapiro suggest that mindful inquiry involves the combination of 4 distinct traditions phenomenology, hermeneutics, critical social science and Buddhism. In particular:

Phenomenology: seeks to reach the essence of phenomena as they are experienced and to take them as "real" as any other phenomenon. Bentz and Shapiro point out that "phenomenology makes us stop taking for granted the things that we normally take for granted, and that is part of mindfulness" (Ibid p41).

Hermeneutics comes from the Greek verb "hermeneuein" which means "to interpret"; hermeneutic theory recognises that we all inevitably interpret our experience within our worlds and that therefore the stories we construct are influenced by the contexts we live in; "(it) involves us in perpetual asking, of anything meaningful that we study as well as of ourselves: "where are you coming from"? (Ibid p40)

Critical social science emerged as a need to explain social phenomena such as fascism and why modern societies engaged in such destructive ideologies. More than explaining and describing the phenomenon however, critical social scientists were concerned with being able to change it as well (Ibid). This is an idea that permeates my own study too; I have written in the introduction to the doctoral thesis (Chapter 1) about my belief that I, as a counselling psychologist do not only need to understand and alleviate the suffering of other people but also to act as an agent of social change on a systems level, for there is little reason in terms of helping an individual through therapy if the societal systems they live in are characterised by oppressive and corrupt practices. In an interesting timing of events, the

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beginning of project 2 research coincided with the crisis of the Greek financial, political and social system; in a way I could think of no better time to think in terms of "how does this research relate to the social reality and what kind of change does it advocate in its heart". I will return to discuss this point in the light of Project 2 results (Chapter 9).

Finally, <u>Buddhism</u> according to Bentz & Shapiro, shares the following common threads with mindful inquiry: "1. the importance of mindful thought itself; 2. tolerance and the ability to inhabit multiple perspectives; 3. the intention to alleviate suffering; 4. the notion of a clearing or openness underlying awareness" (p.39).

The way I interpret mindful inquiry is that does not refer to a particular recipe or set of techniques in terms of doing research; rather, it describes a set of values that inform the stance that I choose to have as a researcher towards what kind of knowledge I am looking for and how I am prepared to approach it. Finally, I find that critical social science and Buddhist/mindfulness principles are quite complementary together in the sense that mindfulness provides the *way* –open, aware, kind, tolerant- to the intention for social justice advocated by critical social science.

<u>Focus groups</u>

I was primarily drawn to the idea of groups as a naturally-occurring "meaning-making" space. A group has the unique characteristic of being more than a sum of its parts, and therefore I wanted to explore what meanings the interaction between different people would create out of their collective experience. Furthermore since a group can accommodate both agreement and disagreement, I was equally interested in convergence and divergence in opinion, inviting both to share the space. The main advantage of focus groups is that instead of focusing on individual voices the researcher relies on the interaction of the group to provide him/her with meanings (Kitzinger, 1995); having said that, a disadvantage of groups might be that some people that are less comfortable with speaking out might feel overwhelmed in a group or that more confident people might monopolise the discussion to the expense of others (Barbour, 2010). Conversely, more outspoken group members might "break the ice" in terms of discussing taboo topics and therefore help shyer participants to voice their opinion (Kitzinger, 1995). I believe that if the

facilitator lends an attentive ear to the flow of conversation then he/she can make sure that people are given the chance to speak and interact with one another.

I chose focus groups in particular because of its main difference with group interviews. Whereas in a group interview participants are asked the same questions and are expected to answer individually, in focus groups the importance lies within the dynamics created between different group members (Barbour, 2010). While the term has received various interpretations, I have chosen to follow the definition proposed by Kitzinger & Barbour (1999): "any group discussion might be called a focus group as long as the researcher is actively encouraging of and attentive to the group interaction" (p.20; in Barbour, 2010). In focus groups the interviewer often presents topics for exploration and then gives the floor to participants, observing where the group converges, diverges, is torn between different subgroups etc. Means of communication used daily such as teasing and humour, confrontation are also routinely observed (Kitzinger, 1995). I would also be interested in observing the flow of conversation, what questions or topics seem to engage the collective attention more than others, when the energy of the group waxes and when it wanes etc. So, the subject under study is not only the answers different members give to questions but how this is done: in other words, an observation of the choreography of the group.

3. Research design and sample

The research design involved focus groups interviews with counselling students who had previously participated in a Mindfulness-based Stress Reduction programme. Before going on to discuss the research design and sample, I will give a brief overview of the context of the counselling training programme that the participants of this study were attending.

A short introduction to the training programme

All of the participants had completed or were near completion of a 3 year Integrative Counselling training leading to the award of a Certificate in Counselling Studies, by the then named The Hellenic Association for Continuing Education (now called Athenian College), Athens Greece. The 3 year training involved a taught part (consisting of classes on CBT theory and practice; Person-centred theory and practice; personal development groups; and

classes taught from an integrative perspective, e.g. "Professional and ethical issues in the practice of counselling", "Multicultural counselling", etc). There were also requirements of personal therapy (40 hours minimum); internship (150 hours), individual supervision (1 hour per 8hours of practice) and 30 hours of in-class group supervision.

In December 2010, the increasing tensions between the team of trainers/coordinators and the school management on how the counselling training programme should be run resulted in some major changes took place which directly affected the trainees. The management, using the country's deep financial crisis as an excuse, dismantled the counselling department overnight claiming inability to pay the salaries of experienced professionals. All programme coordinator positions were cancelled, three lecturers (one of whom was myself) were let go, other trainers had their teaching hours (and pay) significantly reduced, new recently qualified trainers were hired on an hourly basis, with significantly lower rates; modules were cancelled, new ones were introduced and assessment procedures changed.

The above background is relevant in terms of understanding the emotional aftermath of this change which emerged quite strongly during the interview with Group 1 which took place in October 2011. In this group were members of cohort 1 who had either completely finished or had some delayed coursework pending before completion; and members of cohort 3 who were in the last part of their training but still attending classes and doing placements. The analysis of this interview in the light of this background as well as my own reflections as a researcher but also as someone who was involved in this crisis, are presented in the Discussion (Chapter 9).

Design and sample

In March 2011, I sent an email to the students of the school who had either completed or were near completion of their 3 year Integrative Counselling course. This preliminary email informed them that I was carrying out my doctoral research on mindfulness and asking for their voluntary participation. The email specified that if they chose to take part, they would be required to attend the MBSR programme first which was offered to them for free in return for being interviewed at a later stage on their experience. The email was sent to the members of 3 training cohorts (in total 48 students) who had either completed their training

or were near completion. Out of the 18 students that replied positively, 10 managed to come to the MBSR training and thus take part in the research.

The requirement of participation to MBSR was placed in order to make sure that a) each student had received the same input of mindfulness training and b) that the mindfulness training was based on a recognised and validated programme (MBSR) with good research evidence.

The MBSR programme was conducted on the weekends of 28-29 May and 4-5 June 2011 and the interviews took place in the autumn of 2011 (focus group 1, 21/10/11; focus group 2, 4/11/11). The interval was deliberately put in place as following the MBSR programme the participants were given meditation cds and exercises for their own practice. It seemed to me that it would be appropriate to allow for a period of time to let the experience sink in and have the chance to see for themselves how personal practice came along before interviewing them. In short, I felt I had to allow for a process of "percolation" to take place, of experimentation with meditation and even of detachment from the actual experience of the seminar.

The MBSR programme was principally facilitated by Dr. Maria Iliopoulou, clinical psychologist, mindfulness trainer and fellow co-founder of the Athens Mindfulness Centre; I acted as a co-facilitator. The students were given consent forms before the start of the programme explaining the research process and issues of confidentiality about their personal details (see Appendix A)

The sample taking part consisted of 10 counselling students (all of whom had either completed or in the process of personal therapy) .The students belonged to 3 different cohorts (3 students from cohort 1; 4 students from cohort 2; and 3 students from cohort 3). This meant that some students already knew each other and all knew that they followed the same programme even though in different cohorts. Kitzinger (1994) commented that in their study, the inclusion of people familiar with each other had the advantage of "tapping into fragments of interaction which approximated to 'naturally occurring data'" (pp.105), allowed people to comment on and relate to actual events that had happened and had all experienced and that challenging and confrontation was more natural and that the they provided information about the social context within which they operated. I believe that the same reasons hold true for my own research in the experience of trainees.

It is advised that a good number for a focus group is four and eight people (Kitzinger, 1995). Participants were assigned to 2 separate groups, consisting of 5 people each, according to their time availability –when they were able to come for the interviews.

Focus group 1 –the participants

P1 is a 33 yr old female company employee who is half-Greek half-French. She started counselling for personal development with little idea what counselling is.

P2 is a 38yr old female mother of 2 and company employee decided to enrol on the introductory short course for her own personal benefit. She found that the experience of the course has changed her as a person and that she enjoys the counselling process although she has felt it "*grandiose*" to talk about "*helping others*".

P3 is a 46yr old male and business manager who was eager to start training after he had got encouragement from both his work colleagues and his own therapist, who even told him that he was willing to "*take him on as an assistant*"[3]. He felt reluctant about studying at 43 but started forming bonds with students and tutors on the course.

P4 is a 48yr old mother of 2 who was in the ambivalent position of being a counselling trainee in the organisation she worked for (HR department); being both a trainee and employee often created a lot of confusion for her.

P5 is a 52yr old woman who works in the field of alternative therapies (energy work; shiatsu; etc) and who started counselling training in order to integrate it with her of work.

Focus group 2 participants

The participants in this group belonged largely to cohort 2 and one participant (P2) belonged to cohort 1.

P1, a 34yr old psychology graduate who is currently a student, finishing her placement hours and coursework.

P2, a 48yr old woman and single mother who works in a state hospital as an occupational therapist and also teaches occupational therapy at the state University.

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[3] This is very characteristic of the Greek culture where the personal often overrides the professional and the boundaries between what is considered ethical and unethical are often blurred.

P3, a 54yr old woman and single mother who used to own an English language private school where she taught as well. After the recent death of her father she is taking a career break and reconsidering her options.

P4, a 38yr old woman who is a private company employee

P5, a 25yr old woman who is a psychology graduate and is currently looking for work.

4. Ethical considerations

In terms of general ethical considerations in focus group research Barbour (2010), mentions that possible issues to look out for include cross-cultural considerations, informed consent, boundaries, dealing with difficult situations during the discussion, exposing participants to difficult or harmful situations, debriefing and issues regarding children. In this study, participants were voluntarily invited to participate via email so that the neutrality of the medium would make it easier to decline participation if they so wished. A consent form was given to each participant just before attending the MBSR seminar and was verbally explained as well as having it written; all subjects were assured that they could withdraw at any point if they wished to.

In terms of cross-cultural issues I believe that being Greek myself I was in a position to appreciate and deal with such issues as they arose, especially in terms of cultural norms in interactions. One example is that typically a discussion amongst Greek people -especially if they are already familiar with one another- might involve animated talk, arguing and even sometimes direct confrontation amongst members. To an outsider to the culture it might appear much more serious than the actual intention involved; often such confrontations do not imply anger and aggression but passion and involvement, however there is often a fine line between the two.

In terms of the boundaries between my past role as a trainer for the participants and a researcher in the current project and whilst I do not perceive them as unclear or

complicated, I am aware that a previous relationship *has* existed and will keep an attentive ear to the possibility of material connected to that emerging in the process.

At the time of writing my Learning Agreement there was an issue of boundaries since I was also a trainer to the participants. I had pointed out the potential conflict between my roles as a researcher and as a counselling instructor and carrying research "in my own back yard" and had thus decided to circumvent this problem by choosing only graduate students with whom I would not have a dependent relationship (Koliris, 2009).

As it turned out, by the time students were invited to participate in the research I had stopped teaching in that organisation so there was no conflict of roles. In terms of co-facilitating the MBSR programme, while the official training was carried by another professional, I was part of the programme; this however does seem to be the case in terms of mindfulness practitioners researching into trainees' experience of mindfulness (for example see Christopher & Maris, 2010).

The fact that there was no ethical conflict however did not mean that the pre-existing relationship of trainer-trainees does not have the power to influence the research. I believe that it will probably affect the students' decision to take part in the research since they already know who I am and there exists a trusting relationship that has been established before; also because I had briefly talked about mindfulness in our classes together. In that sense, there might be an already positive expectation before coming to the seminar. Possibly this pre-existing relationship could influence the initial decision, but I believe that since the main facilitating role in the MBSR training is carried out by another professional then it will not interfere much with how the experience is perceived. I also believe that the pre-existing trusting relationship would facilitate a greater openness in the later phase of exploring together the mindfulness experience.

Finally, the subject under study is not difficult, traumatic or potentially harmful, however there will be a debriefing period in the end of the interview and participants will have my contact details and my explicit permission to contact me if something comes up.

5. Gathering and analysing data

Topics for exploration

The initial research questions as they appeared in my Learning Agreement (Koliris, 2009) included the following general topics for exploration, set out to act more as a compass for the interview rather than a list of topics that had to be strictly adhered to:

- How was your experience of training?
- What were the challenges you found?
- How did your conceptualisation of the counsellor role develop?
- What helped/hindered it?
- How did you experience mindfulness? Was it relevant?

Gathering data

During the process of the interview the researcher is advised to have a "topics of exploration" guide in mind but to also retain some flexibility in following themes that might come up spontaneously (Barbour, 2010). I decided that I wanted the conversation to cover the topics mentioned above but use them as a general compass to guide the conversation not as a definite list to tick off; the exploration would remain open to different themes coming up.

At the beginning, I explained to the participants that I wished to have a discussion on their training experience, how they see their emerging counsellor role and its challenges and how all this related –or not- to their experience of the mindfulness seminar; furthermore, I told them that it would be good if they tried to address each other as the aim was to have a group investigation and not "individual interviews" (Kitzinger, 1995).

Before commencing with the interview, I asked the participants of each group if they would be comfortable with having a brief 10minute meditation; I decided upon that because I wanted to give time to both myself and to the participants to truly "arrive" at the interview, i.e. to become aware of ourselves in the present, to come back to our bodies from the busy world of the mind and even to become aware of what the mind is telling us about our experience in the here and now. Another reason behind starting with a meditation exercise

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is that I felt that as co-researchers gathered to investigate a phenomenon, we could use mindful meditation to fan out our awareness and therefore be more sensitive to different information coming up from various parts –our thoughts, our hunches, our feelings, our senses, our interaction with each other. Bentz & Shapiro (1998) allude to this quality in my view when they write that mindful inquiry includes the "awareness of self and reality and their interaction (which) is a positive value in itself and should be present in the research process" (pp6).

Upon emerging from the brief meditation there was some silence before engaging in conversation. The interview was being recorded and participants were aware of that and had all signed the informed consent forms earlier. Each interview lasted between 1.5-2 hours.

In terms of transcribing and translating the interview recordings, I enlisted the services of a Greek counselling psychologist who at present is a PsychD candidate in a UK University; being Greek but writing her own thesis in English, she was very comfortable with translating the interviews; there was also the added advantage of working with qualitative analysis interviews herself so she knew the type of document that I required. I decided that it would be better to have the transcribing/translation done by a fellow counselling psychologist and researcher, who could be more familiar with the task and more sensitive to the kind of language used than employing a professional translator who was not related to psychotherapy research. Upon receiving the translated material, I re-read it while listening again to the recordings and double-checked the accuracy of her translation. Where necessary, I made a few corrections.

However accurate a translation is, I find that there is always something that gets "lost in translation" and that often is the very soul of the language. During the analysis phase described below, I listened and re-listened the interviews (in Greek) and made notes on the audio material in order to have a more "emotionally" direct engagement with the material. I then transferred my notes onto the English verbatim text and made sure that the translation adhered to the emotional meaning rather than to a more faithful translation which however lacked the "spirit" of the phrases used.

Data Analysis

Barbour (2010) on whose work on doing focus groups research I have relied in order to organise this study, mentions that there is no right or wrong way of coding data and rightly warns against an overemphasis on codes which might reduce the essence of the material. She advises towards a set of topics for exploration in order to guide the conversation but also suggests to the researcher to listen for other themes and for codes themselves emerging from the discussion. This "in vivo coding" can take the form of "... 'soundbites' and are often related to a particularly colourful quote, perhaps from one focus group participant which nevertheless sums up a common or shared perspective" (pp. 120). I planned to lend an attentive ear to such colourful quotes or images that the group uses to describe their experience and use them as a summary of collective experiences where appropriate. Another suggestion that Barbour (2010) puts forth which I found interesting was to try and list the preliminary themes in terms of polarities or continua thus indicating that there are no "black or white" categories but themes along a broader continuum of human experience. These polarities are presented in the next chapter, Project 2 Results (Chapter 8). Apart from looking for themes, the researcher is advised to look for patterns of interaction within the group (Kitzinger, 1994) and also to take into account intra- and inter- group similarities and differences (Barbour, 2010).

Finally, she warns against expecting that the data will fall neatly into airtight categories and that it is an inherent part of the "messiness" of qualitative methods and focus group research in particular; however it "testifies to [the focus groups'] unique potential to elaborate and provide a deeper understanding of the processes that underpin the development of views and collective identities" (Ibid, p.125). In the following chapter I will discuss how all this applied to the data generated by the two focus groups of Greek counselling trainees.

Chapter 8: Project 2 Results

In this project I aimed to investigate the experience of counselling trainees in Greece. I hypothesised that their experience was going to be stressful and fragmented–more focused on how to "do" good counselling than how to "be" good counsellors. I further hypothesised that mindfulness could help in cultivating a more integrated sense of self "being" in their lives and consequently in their professional roles. I was particularly curious to discover how Greek students would relate to MBSR training as the approach is hardly known in Greece.

In this chapter I present the findings of the interviews from 2 focus groups of counselling trainees in Greece; I first reflect on the process of interviewing and my role in it. I then discuss the themes for each group individually and lastly I present the overall themes from both groups and offer my own reflections on the process of the interview. In thinking about themes, I was inspired by Barbour's (2010) suggestion of coding themes in terms of polarities or continua; I chose to utilise it as there were many themes that participants brought up which I thought could be seen as different points along a continuum or a path of development rather than individual points that either existed or did not. It also helped me to focus not only on what was being said but also on what was implied. In Appendix G I present a preliminary list of themes which were then grouped into larger categories.

1. The felt sense of the interviews and my own role

Interview with Focus Group 1 (FG1)

I experienced the interview with FG1 as an emotional rollercoaster. The interview provided the space for what felt like a collective trauma –a sudden and dramatic change in the counselling programme and faculty- to surface and I experienced the participants' anger, frustration, disappointment, anxiety and sadness. In that instance my three roles –therapist, researcher, trainer- where all present in the room. The therapist self wanted to *support:* to construct a narrative about the trauma, acknowledge its impact and make sure a healing space was found. The researcher self wanted to *investigate:* to know "why", "what", "how", to elucidate the individual hues out of the common experience and to uncover how and if

this experience had affected their sense of their role as trainee counsellors. The trainer self wanted *to explain*: how I had experienced this change as a trainer while at the same time wishing to "protect" those people who were still in training and for whom the process was not over yet. The "therapist" and the "researcher" agreed that it felt important to allow space for these reactions to be heard, as this was part of the training experience; they both became curious about investigating the group's reaction but also about the convergence and divergence of individual experience. The "therapist" precariously balanced between empathy for the participants –especially during moments of high emotion- and the awareness that she is not in the therapy room. The "trainer" struggled with the need to tell her part of the story, with feeling in part responsible for the trainees' reaction and with wanting to make an "educational" story out of this experience around how –as therapists and as people- we deal with adversity. The fact that my role as an ex-trainer was acknowledged during the interview (P2 spoke of how she considered the organisation's treatment of "us" -the trainers- as barbaric and of her anger towards that) made the "researcher" anxious about the "trainer" dominating the process. At the same time, it was important to acknowledge that my (ex)trainer self would be present in the interview and be aware of the possibility of casting an influence over the process. I reflected on these different discourses being present and interacting with each other during the interview when I read the following, which refers to the balance between teaching and researching mindfulness:

> "In the MBIs [Mindfulness-based interventions] it is not uncommon for researchers also to be teachers, as is true for us. There is enormous tension between the almost inexorable drive of the discourse of research to exclude and dominate and the indispensable permissiveness of the discourse of teaching to include and empower. In attempting to work with this duality, this paradox, there are times in which the wise choice is to close down for the sake of research, and others, when heart and mind demand to open for the most healing teaching. The crucial question as always, is 'What is the moment asking of me?'. The answer can only come through experience of the precision and kindness of mindfulness or from making 'mistakes' and learning from them" (McCown et al, 2011, pp.61)

So, although during the interviews I consciously stepped back as a therapist/trainer to allow the participants to use the space in order to explore their own experiences, there were moments where I consciously responded to the groups' questions by presenting my own point of view, as an individual and as a therapist, for example in terms of mindfulness, thus placing myself into the collective narrative (see FG1 interview pp 23-24). In other instances, my researcher, therapist and trainer selves converged in wishing to explore a particular dimension. For example, in FG1, after listening to the group's anger towards their training organisation, I put forth the following question:

"M: *Let me put it to you as a question. If that 'hard lesson' M. (P2) is talking about was a challenge for you, a difficulty and a challenge because […]...there was no alternative of not managing since you were still in training, somehow, you were invited to manage this challenge [...] What did it present you with, what came up for you as a result of this challenge on a personal level and with regard to your development as counsellors?"*

Still, my "community of selves"[4] was acutely aware of the complexities of doing research in one's own "back yard", even though both at the time of the mindfulness training and at the time of the interviews I was no longer a trainer to the participants. At the same time, knowing the context and the people provided me with a wealth of information, which I could place into the perspective of the particular training programme and the general counselling training situation in Greece. On the other hand, having a pre-existing relationship with a context and the people in it is not only an ethical issue of conflicting roles (which was not the case here) but rather an issue of *pre-existing* roles, and how they might affect the research process. Would people have discussed the issue of the "crisis" and expressed these emotions if I was an unknown researcher? Could it be the case that their responses were influenced by the fact that I had been their trainer, occupying previously a position of power? On the other hand, is it not the case that the researcher can be seen by the participants as having a de facto position of power which can influence the interview process? As such, is it not expected that my role(s) would influence the interview process anyway? I believe that it was because there was a pre-existing trusting relationship between

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[4] A term used by Professor M.Mair in his PK seminar "Searching to understand: another mode of psychological inquiry", Metanoia, February 2011. I have reflected on this idea both in my PK essay and in my research diary.

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me and the participants that they felt comfortable enough to be as open during the interview; e.g., to discuss how the challenges in the course reflected their difficulties in their self and their personal relationships.

As a researcher I have had to acknowledge that my identity *will* interact with the material that the trainee participants choose to bring up and it is part of the co-construction of our joint narrative. Becoming conscious of this, I was aware of the constant "dance" between my different roles, when they all came together to ask a question or when they fell back to the background –such as "bracketing off" my "trainer" role and allowing the "researcher" to take over and allow for the story to unfold *as if* hearing it for the first time.

Interview with FG2

Having had the experience of Focus Group 1 which involved a need to acknowledge feelings of loss, grief and anger, I started the facilitation of Focus Group 2 expecting to come across similar issues. It was quite surprising to see that FG2 did not refer to this *at all*. The obstacles and the difficulties during training that were discussed did not even allude to the "crisis" that had taken place. I deliberately decided not to introduce the subject unless it was brought up by the participants. The reason for doing so lay partly in not wishing to impose an agenda on what participants chose to talk about; also being aware of the possibility of my previous role as a trainer being "visible", I did not want to raise an issue that might allude that I was after some kind of "reassurance".

I became aware of my own assumptions that the disruption in training was felt in the same way and magnitude by everyone. It was very interesting to see that FG2 constructed a different story about their training and I set aside my own expectations to listen to what *was* actually brought into the discussion.

If I set out to explore this marked difference between FG1 and FG2 –with the background information that has been available to me- I would probably interpret it as a function of group composition. It is possible that FG1 included people (cohorts 1 and 4) who were most affected for different reasons. The members of cohort 1 were the first group to go through the training programme and having taken part in teaching and tutoring, I often felt that they were the "baby" of the training team. Like anxious first-time mothers we were much more attentive to the cohort's feedback and needs than to the needs of subsequent cohorts. This

possibly led to the creation of a more personal relationship between trainers and trainees and therefore the loss of this relationship was experienced more acutely, even though at the time of the "crisis" they had all long finished with the taught part of the course. Participants who belonged in cohort 4 were affected in a different sense: during the "crisis" they were in the middle of their training and had more immediate and practical reasons to feel disrupted. On the other hand, participants in FG2 belonged to cohort 2 in their vast majority and they had long finished with the taught part of the course but unlike cohort 1 they had experienced a less intense relationship with the trainers.

However, taking into account that interviews are often "snapshots" of people's mood, thinking and behaviour at a certain point in time, it is possible that on that particular day the collective awareness of the group was preoccupied with more "present-day" challenges; so whilst they were possibly affected by the mismanagement of their training, currently they were preoccupied with meeting other challenges.

Having discussed the experience of interviews and the presence of my roles in them, I will now proceed to discuss the study's findings.

2. Focus group themes: counselling training, challenges and mindfulness

Introduction: Counselling training challenges

The experience of training as a journey is common amongst trainees. Yet, as Alread (2006) points out, each trainee becomes acutely aware that how this journey is experienced is also a very personal process which results in "creating their own journey and telling their own story [and]…taking responsibility for what happens" (p.285). Both groups discussed the challenges they found in their training, both inner and outer. As Participant 1 in FG1 described it:

"I gradually realised that it wasn't just a training, it was a whole way of being, and that there I wasn't going to just learn some skills or anything…I was going to learn to be me and to be able to do something… [called] counselling" (Page: 1, comment: 2).

As the experiences that emerged were beyond the scope of this research, they are not included in the Results. It is important to note however that there was a context within which the MBSR programme took place, which included dealing with a disruption of studies, struggling with developing the counsellor identity dealing with one's own expectations of

self, experiencing conflict between one's own values and the counselling profession's values, reacting to diversity within the cohort of trainees and facing family and significant others during this period of change. Bearing this in mind, I will proceed to discuss each group's MBSR experience.

A) Focus Group 1 Results

"Becoming what you are": the experience of mindfulness

The title for this category was borrowed by a phrase P4 used in order to describe her experience of MBSR and encapsulates very eloquently both hers and the group's reflections. Several themes emerged during this part of a discussion and there was a felt contrast between the frustration in the room relating to the experience of training and the "containment" around the experience of mindfulness practice.

P4 spoke of the way it has helped her "bracket off" her assumptions, thoughts, ideas during her practice with clients and stay "present". The group discussed this idea and further comments were offered, such as the realisation that it is not so much about leaving out one's own stuff as much as it is the recognition that *it is there* while consciously diverting attention back to the client. They likened that to the experience of mindfulness meditation where one is invited to be aware of everything that is involved in their present experiencing while anchoring their attention to their breathing; so they spoke of the parallel of that experience with the therapy session, being aware of whatever is going on internally for the counsellor while anchoring oneself in the "here and now" with the client.

P3 reflecting on his own experience offered that mindfulness practice for him is about "acceptance and reconciliation" towards that which is difficult to bear: "*accept it, it exists for as long as it exists, its telling you something, there is a good reason that it exists*..." (17:224), he offers as if thinking out loud. Discussing how often we find ourselves "*at war*" with that which we do not want in our experience ("*it shouldn't be happening to me*" 17-18:228-230) and how this inner conflict often takes over other areas in our life, P3 and P4

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concluded that there is something about acceptance that "*softens*" the anger and the resistance and ultimately leads to change:

P3:   "*I think the stoicism of being able to stay with yourself in what is happening is the basis that gives you the opportunity to go somewhere else if you wish to...*
(agreement from the group)
P3:   *It is the way in which you accept the here and now, the love with which you will receive yourself by which you may possibly transfer him to another place....*
P4:   *Again, it's the same with a client...*
P3:   *In the same sense, yes...*
P4:   *If you accept your client the way they are, you will be able to transfer them someplace else..." (18-19:243-248)*

The felt experience of mindfulness practice and the realisations that surfaced as a result, led the discussion to how the personal experience informs the professional practice –thus making a link between the two; how their own personal experiencing cannot be separate from what they do as counsellors. Accepting the other means accepting oneself first: the group hovered around this idea of self-acceptance and compassion.

Another finding from the mindfulness practice was the invitation to act consciously; P4 reflected that has "rescued" many times from following her impulsive character and the need to appear as "friendly" to her clients. Becoming more aware of what she is doing has helped her be more conscious of why she is doing it. P3 added that after meditation his perceptiveness has a different quality. P4 prompted for further clarification:

P3:   "*[after meditation] ...I evaluate things completely differently, I grasp different messages and interpret them differently...I can say my perception is significantly widened...*
P4:   *In terms of what? Can you explain that a bit more?*
P3:   *Yes, when I am centred and I go into a session, I grasp a different hue to the meanings, I cannot explain it any better or put it another way....*
P5:   *Yes...yes...!*
P3:   *Really, I am much more directed towards the other, the other seems more clear, there is greater clarity in the messages I get, my thought is more focused, it is not*

upset. The attunement is <u>such</u> that I can understand the other better, significantly better...of course I don't always do that...

P2: *This reminds me of what I experienced during the weekends here* [the MBSR programme] *but also of all the times that I tried to practice what we did […] I experienced it too, what you are talking about, this centeredness in the <u>here and now</u>. There is no past and there is no future. Which is...maybe in meditation this is what happens, cutting yourself off from everything and live in the here and now. It doesn't matter what you have done up to now and it is not a concern what you'll do next. So that when a [therapy] session begins afterwards, you are grounded...*

P3: *Exactly..." (21:273-279)*

The ideas offered in this extract revolve around the experience of mindful meditation *after* it has ended: the widening of perception, the clearer tuning-into the self and the client, the centredness that does not get lost in the past or the future, and the link all this has with how present one is ("*grounded*") when preparing for a session.

The sense of openness, attunement and acceptance in relation to the Other was further discussed by P1:

"P1: *for me mindfulness is also a...a realisation and an acceptance of my <u>whole being</u>, of my thoughts, my senses... and I am much more open in whatever I am experiencing but also of the other so that in a session or a meeting to have the <u>whole being</u> of the person opposite me there, so that I am present in that relationship...And it's <u>not just</u> the thoughts or the feelings, it is everything...all these together...*

M: *And it is the cumulative outcome of all these...more than the sum of the parts...*

P1: *yes...yes...*

P4: *But you become aware of it. When this happens in a session, I am aware of it, that now at this moment, this is how it should be and when this is lost, I am also aware of it [...] I feel that I understand it and there have been times in sessions where I say, 'this is ideal what is happening now!' (laughter) 'well done, why isn't someone recording this, this is exactly as it should be and it might not even last long'!!!" (22: 289-292)*

Finally, the group discussed the practicalities of meditation and how one deals with the fact that despite all these benefits, there never seems to be time in the day for meditation. P5 acknowledged having taken from the practice the idea of having a beginners mind, of being open and curious in her daily life and uses the metaphor of being " ... '*a little explorer*' *who knows nothing and today will discover something new*" (23: 314) but has found it difficult to actually practice meditation. We explored this further starting with my question about whether she has tried meditating together with her sense of resistance, without needing to think about it and an interesting confrontation ensued from the group:

> "P5:   *up until the present day I have needed to be interpreting and I am tired of interpreting, so I don't want to be interpreting any more...*
>
> P4:   *[addressing P5] 'Cause this is something you do quite a lot, it must be exhausting...!*
>
> P5:   *(quietly) Yes it is...let alone the fact that I am used to it and I can manipulate it! (group laughs)*
>
> P2:   *When I hear (P5) talk about her issues, I think you are constantly trying to reach perfection...*
>
> P5:   *yes, yes...*
>
> P2:   *The goal: "perfection"... (laughter)*" (24:320-326)

The group then went on to discuss difficulty within themselves whether it is in the shape of self-expectations ("*I struggle with giving permission to myself*" said P5, 25:340) or expectations of others ("*I don't expect anything of others ...I have had major control issues*" P4 reflected, 25:334). They then went back to discussing how the instruction during meditation to return the attention to the breath *gently* has been the key for most of them to discovering another way of relating to their experience and most importantly to one's own self:

> "P3:   *In exercise [...] even if your thinking drifts off, we gently bring it back. You cannot <u>imagine</u> how much this has helped me and you know, this gentle manner is the starting point from which I have changed my relationship with myself. I do not get angry that my thoughts drift off because really and since before doing the*

mindfulness exercises, when I was trying to meditate <u>I was not doing it gently</u>, trying to bring back...so that created a lot of anger and...

P2:   And anxiety...

P3:   ...this magical word 'gently' is exquisite...

P2:   its a very good way of putting it...as is not trying to control or change my breath. This is most <u>liberating</u> for me; the gentleness as well reconciles me, relaxes me...I become a little child (laughter)

P3:   it contains reconciliation!

(group talks over each other)

P2:   ...but not changing my breathing includes a massive aspect of reconciliation for me. This is what it is, I close my eyes and concentrate on my breathing, this is it, it is not <u>wrong</u>...

P3:   this is just it...

P2:   it just is...it doesn't mean that I am anxious and that I will change it...

P4:   even if my breathing is shallow it does not mean that I have to change it...I am not wrong, because in mindfulness nothing is wrong...

P2:   Exactly

P3:   Precisely

P2:   And for me that has helped so much that...I can say that it has created a motive for me to practice it. I don't need to be strict with myself. I may be a <u>mess</u> and take a moment and ...just observe my <u>messy breath</u>... and believe me, I am just observing, and I might even smooth it...if I am accepting....

(group laughs)

P3:   The "it's not wrong" becomes "<u>I am not wrong</u>"" (25-26: 341-353)

I think that this extract illustrates how this reconciliation with the self can be achieved through the seemingly simple –but actually quite difficult- invitation to observe our experience without trying to change it. Following the thread of the theme of reconciling parts of self, the group then went on to talk letting go, using humour to underline how intense the need for control can be:

"P2:   it is very difficult to let go of control for suuuuuch a long time! 10 minutes!" (26:361)

and

"P4:   There are times that it's like, in the craziest situations and during these times I say to myself 'practice some mindfulness –can you?' –'You are joking of course', says the other part of myself, 'how can I leave all these and practice mindfulness?'. How arrogant...!" (27:367)

So the difficulty around practising mindfulness is to teach the controlling, analysing, interpreting mind to let go of the need to be in control.

Finally the group discussed how the cultural context in the West is the antithesis of mindfulness and how it is difficult to go against the way someone has been "conditioned" to function. Furthermore they highlighted how the cultural values of one's environment reinforce abilities such as fragmentation/multitasking and achievement especially in the professional sphere (28-29: 385-396).

The discussion concluded with some ideas around how it would be very important to encourage the new generations of children with a different kind of learning including encouraging mindfulness from an early age. Discussing living in our mindless environments, P4 comments:

P4:   *But mindfulness says something very simple […] it says "what you are"..."become what you are" ... It says something extremely simple and yet so difficult to do...How far away have we come...? (27:376)*

Theme summary

The experience of mindfulness in general and of an MBSR programme in particular, took place within the idiocyncratic context of a counselling training programme in Greece. This context included the trainees' experience of the process and challenges of training, including expectations, dreams and the needs participants brought with them in training;

this involved learning to cope with inter and intra personal challenges; it involved dealing with the aftermath of the "crisis" during their training and sudden change; anger, detachment, withdrawal and efforts to "move on regardless" were discussed. Issues concerning the relationship with the training organisation surfaced with the most prominent involving a need for acknowledgment of the impact and to see the values of the organisation as congruent with the values taught in counselling training. Using this experience as a basis, participants then explored what this crisis or the training in general brought up for them in terms of personal challenges. These involved lessons on dealing with anger, "abandonment", anxiety, and each participant described their own individual and deeply personal struggle. Issues around labelling vs. accepting others and being the "perfect" trainee also emerged.

 The category of themes developed around the experience of MBSR within this background involved experiences of becoming aware of own assumptions and impulsiveness, exercising open awareness and groundedness cultivating reconciliation and acceptance of one's self, etc. The invitation of mindfulness as expressed by P4 to "become who you are" resonated with the whole group.

Group dynamics and participants as co-researchers

In the interview with FG1 the flow of the discussion was very intense but it did not feel elaborate or difficult. I noticed that the members who were already familiar with each other, i.e. belonged in the same cohorts- understandably were more at ease with arguing or confronting each other –such as participants P3 and P2 who have become friends through their training; they were more open about voicing their experience and interacted a lot with each other. P1 and P5 were more reserved. P2, seemed to me, travelled from an initial place of detached determination ("I *decided to complete my training and take what I can as if nothing changed*") or observation of others (commenting on P3's experience, correcting/debating with him) to a softer and more introspective stance towards the end ("*to let go for 10 minutes because deep inside yourself you believe in 'here'... (pointing at her heart"), 26:364*).

It was also interesting to see how the participants often acted as co-researchers asking each other for clarification and explanation, often urging each other to think about their

individual experience. There are many examples, but one which is characteristic can be found on pages 14-15 of the interview. Other examples included questions to each other (P4 to P3: "*Did that impact your work as a counsellor afterwards?*" 5:48).

The group also worked together on co-constructing a framework around their experience of mindfulness practice, sharing their individual experiences but also building on each other's reflections in order to each a common understanding of what mindfulness is; so the whole last part of the interview (Interview pp 16-28) is effectively a collaborative exploration on the parameters of mindfulness practice as it was experienced in their personal and professional lives; the members of the group shared their individual experiences, explored meanings together, clarified their understanding against each other, offered conceptualisations of their experience and built on each other's meanings.

B) Focus Group 2 Results

The discussion brought up different feelings in the participants in relation to being near completion of their training. There was considerable stress around finishing and perceptions of own competence. Feelings of frustration, tiredness, impatience, relief, pride, the sense of time and the need for acknowledgment were all mentioned.

A large part of the discussion involved the contact with new knowledge through training which impacted the way participants related to themselves. A sense of struggle was mentioned by most: a sense of "*coming in contact* [with new knowledge and awareness] *and getting burned*" (P2, 8:111); initially not having the "*arguments*" to support the "*new self*" and getting frustrated with people who expected her to stay as she was (P5, 6:87-89); running a race (P4, 11:147); fighting a battle (P1, 8:108); fighting with a strict self who always judged her as "inadequate" (P3, 7:97). The discussion revealed a shared experience of coming into conflict with parts of self that resisted change whilst making space for a new emerging self through contact with academic and experiential learning.

The two elder participants, P2 (48yrs old) and P3 (54yrs old) could connect more immediately with the positive outcome of this struggle with their inner self. P2 talked expressively about a sense of "*liberation*" (8:109), P3 about striking a balance while acknowledging that "*balance itself is not perfection*" (7:99). The third in line in terms of age,

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P4 (41yrs old) spoke of a process of coming to terms with time and "*slowing down*" and becoming more accepting of her own pace in training (11:147). The younger members, P1 (32yr old) and P5 (26yr old) seemed still entangled in the process.

The processes described there were variable: P2 discussed how the training process helped her settle her inner issues and ultimately offered her a sense of "*liberation*", "*freedom from guilt*" from past roles and beliefs and "*rebirth*" (8-9: 109-11). Barbour (2010) says that "it is important to remain alert to the concepts to which participants are appealing and pay attention to the language [...] they employ" (pp126). I was particularly struck by the intensity and the emotional impact of the words chosen to describe this process.

This sense of space for growth was sharply contrasted by the experience of P1, for whom counselling training resembled a "battle"; being caught unprepared for the experiential learning required in the programme, she found it very unsettling:

"*P1:   I mean that I experienced this freedom from guilt, a battle! I didn't experience it as a sorting out but as a battle…!*" (8:108)

Further on she reflected more on this with my prompt:

"*P1:   [...] when we actually joined the [personal development] groups, that for me was very difficult, very…The individual therapies were a different world, they were brilliant but very conflictual…*
M: What was conflictual? (brief pause)
P1:   What was conflictual?
M: Who was on the other side?
P1:   Conflict with myself rather, with what I had learned, with the way I behaved…with all the things we carry…" (9-10: 119-123)

Thus, a battle commenced between the "old self" and the "new self" who had started emerging in training. As a response to P1's vivid evocation of a battle, other members offered different perspectives such as the loss of a previous self or way of life (P3) and the effort in "taming inner beasts" (P4) -an idea which resonated with the group as at that point

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the discussion became animated. In -what I found- a very eloquent way of describing the process of training, P4 talked about her struggle with the beast of "time":

> *"...when I started my training, for me it was a race, let's say 100 metres. I had to run fast because I felt I had started late [...]...I thought I wouldn't have enough time to do many things. About halfway through it became a marathon for me. I used to think: "I don't need to run that fast, I have to build stamina in order to manage everything". Now it has become a stroll for me (laughs from the group) A nice walk in the sense that I learned to have a good time in the here and now [...] that I haven't got anything to rush for. I walk, maybe I will stop for a bit and look around, maybe I go back to something I may like and then go forward again and how nice everything is, I hum along, I take others along for my walk..." (11:147)*

Other expectations had to do with measuring oneself against and of trying to fit into the "counsellor's suit" (P5). The feelings and images evoked by participants in terms of the process seemed to revolve around a coming into contact with the Self, acknowledging parts that might be a burden to moving forward and engaging into an inner battle which, although not easy, seemed necessary in order for a new self –and role- to emerge.

<u>Competence: learning to be "good enough"</u>

Perhaps understandably, reflecting on where they are in their personal and professional process, raised issues around the question of their competency as future counsellors.

The issue of competency spanned from an observed sense of omnipotence *"I can do everything, and I will show the others"* (P1) and *"arrogance"* (P4 –see below); to a sense of anxiety about doing things right and fighting the sense of *"never being good enough"* (P3 and P5).

How other people mirror this competence –be it clients or supervisors- seemed to be an important issue and is present in the group dynamics. An example involved a discussion between P1 and P5 in terms of getting your value acknowledged: P5 mentioned the positive feedback that some clients she had referred to P1 for counselling and went on to comment that it is important to hear the good feedback on your work; P1 expressed her gratitude towards P5 for this and added *"I need to hear something like that"* *(3: 36).* P5 gave another

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perspective to why it is important to receive positive feedback which has to do with the politics of many placements in Greece and why it is easier to get acknowledged as a volunteer but not as a trainee:

"P5:   …in our work generally, it is very difficult to become acknowledged -if you are not already acknowledged- whereas you may be great for everything as a volunteer, you are not good enough as a trainee essentially, so even when there <u>was</u> recognition I couldn't really see it as meaningful, I used to find excuses such as…when my counselling clients during my practice used to tell me that they are doing really well an inside I was thinking, "I've got a good supervisor, I've got a good training, my studies were good" that's why we are doing well…". (4:53)

This alluded to attributing good outcomes to external factors and not to her own competence. Another group interaction emerged around the issue of recognition which began with P4 mentioning being scared at times by her own "arrogance" as she put it. She spoke of an incident when her supervisor alerted her to the fact that she was seeking approval from him *("I was <u>really excited</u> to tell my supervisor, to say "wow, look at this!" (exaggerates feeling) and he immediately brought it up as an issue! Oops! (brief pause) What is that? Why do I feel…What do I want? Do I want recognition, is that what I expect? And then this cliff came up for me and I was walking on a tight rope")*. As if to highlight the "sin" of this "*arrogance*", P3 reminded her that on that instance she had called her supervisor "*colleague*" as well! P1 then jointed in by jokingly quipping what would be the supervisor's response to such an indiscretion the trainee's part: *"Four therapy sessions for this issue, please!"*. P2 on the other hand, offered that the need to be acknowledged for good work would not be seen as a "*mistake*" if expressed with the right measure. (3: 38-49)
So acknowledgment of one's professional value was recognised as very important by the group, but at the same time there was an anxiety towards giving in to inner voices that seek recognition for apparently narcissistic reasons. Therefore a need to know "what I do well" and to have that reflected by others was communicated.
Another dimension to the issue of competence was being impatient in terms of a client's progress. P2 identified it as having to do with her own sense of inadequacy and with realising in supervision that clients' pace and is not necessarily a reflection on her own

competence. The issue of being "*good enough*" and its implied felt opposite, the "*never enough*" (P5) carried the discussion further into the expression of anxiety around competence. P3 identified this belief as something central in her life while growing up and in her experience of school, a belief that came at a "*great cost*" for her as she put it; this sense of "*never being good enough*" carried through her adult life and her other roles –of wife, mother, and professional. A feeling of being "*always inadequate*" ensued, a feeling that P2 could also relate to.

The continuum drawn out by the participants ranged from the despair of "never enough" to the "scary arrogance" of needing to show off about one's good practice brought forth the issue of one's own expectations and the underlying anxiety and insecurity towards the newly formed counsellor identity.

Being present: accepting the imperfect self

It seemed to me while reading and re-reading the manuscripts that the participants were describing the *roles* they were inhabiting or should be inhabiting: being a counsellor that "cares a lot" about others; the thoughtful professional who does not "abandon" clients; who can produce "results"; who can fit into the "counsellor's suit" and is always "empathic"; furthermore, being the mother, wife and professional who meets successfully everyone's needs and requirements, not least her own and does not leave "unfinished business" pending. There was a humorous albeit painfully true moment in the interview when P3 talked about how she managed to find some acceptance in herself towards leaving some "*unfinished business*" pending although "*it is good to have them in mind, not to forget them..*" and P1 exclaimed "*God forbid that we do!!!*" and the group broke into knowing laughter (7: 97-99).

"Perfection" emerged both as a process (getting rid of expectations and embracing the uncomfortable reality of imperfection) and in terms of professional competence (realising that there is no single "truth" but "many right ways" of doing things). However, the most profound aspect was a change in terms of relating to oneself. Participants brought it up in several life experiences:

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P3 discussed how having attended the MBSR seminar helped her when during the summer her father was diagnosed with cancer and died soon afterwards. She spoke quite movingly about how she found the space to enjoy the love and companionship she still shared with her father instead of being completely absorbed by the prospect of his death:

> "P3:   I realized that I applied some things during the time of my father's illness and his death and it helped me avoid…not avoiding pain but to…to _not only_ experience pain […] when I was holding his hand, taking him a cheese pie or some orange juice or when I washed him, I was focusing on that, the fact he was alive…that we are together, that I had the opportunity to do some things I had not done, I am given this opportunity… to take care of him and I would move away from the death part…but it nevertheless _prepared_ me to… face…the issue of death in a _milder_, sweeter way because I focused on _love_…(pause) […] how can I explain it, dear M.[addresses researcher]…as though everything was dealt with in a very _sweet_ way, although what we were _really dealing with death_…(pause; carries on but is obviously emotional)… the time I found him, dead, when I closed his eyes …I thought that…well, when a short while ago, even thinking about such a thing I would be like "oh Christ, I can't be left by myself!" … during _that time_ it was as though…did I see as something very natural….I don't know how to say it…but afterwards I felt a sense of… _completeness_ […] I took in every moment, I was there every moment…and…(pause) The main thing is this, as I recall it, that I stayed with what I took from all this man…and so I sort of …escaped the _cruelty_ of death" (18: 228).

P3 encapsulated the meaning of being present within a very painful life event; staying present meant focusing on her father's existence in the "here and now" and this gave her the opportunity to look after him and communicate her love and care but also the opportunity, it seems, to say goodbye in a way that was meaningful for her.

P5 spoke about her struggle with overeating and how through the mindfulness seminar she came to be more accepting of herself and a group exploration ensued around the nature of change:

> "P5:   I have _definitely_ gone into the process of self-observation […] and through that process […] was to rid myself of all these things that made me feel guilty…and not

only get rid of guilt but to start enjoying things, so for example over the past two years I had quite a disturbed relationship with food […] so in the past I had a lot of overeating incidents, so it could have been once a week -which of course compromised all my efforts of the whole week- but it was really big, it was <u>massive</u>, whereas now that I don't feel guilty, I may just be happy just with a piece of chocolate… and to enjoy it <u>much more</u> than in the past when the quantities were massive and now that the quantity is small and I may experience it very positively…(pause) Yes, I think I am more in touch…

M: *maybe because something has "softened" there…? It has become… easier and more acceptable…that ok, <u>there will be</u> those times…?*

P3:   *It is the strictness…*

P1:   *…(quietly) how I experience C.(P5) now is that the way she is now is much more "human" than I have ever known her…and that should be enough…*

P5:   *Yeah…I didn't know it either (laughs)…I thought I should be 'something more'…" (16: 194-198)*

It is interesting how P3 recognised the rigidity of self-reproach, the strictness that she highlighted for P5; and how P1, building on this theme, commented that P5's lack of self-acceptance had made her in the past be less "human".

Exploring further the experience of MBSR training, P4 offered that the mindfulness seminar gave her a sense of validation of her own intuitive way of being, which acted as "company" in what was earlier experienced as a lonely path through life:

P4:   *…that's it, exactly it…so this thing you are referring to* [mindfulness] *whilst I had this in my mind, it created for me a scientific frame with which I could say, oh! This isn't just something that I have, others can see it and that gave me a lot of satisfaction deep inside […] it gave me some <u>company</u>, I experienced the journey as very lonely, as if I am the only one feeling this- nobody else feels this; ever since I was a baby, I felt that for certain emotions that were out there I was the only one so I used to try and hide them because I didn't want to be standing out, this individuality...(group murmurs in agreement). Now I don't want this. Now when I think I am there is*

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something unique about my experiencing, I now project it out and not hide it inside, not for showing off in the sense of "wow", look at that but I am not embarrassed…So now I like this strolling around…(smiles)". (11:151)

And P2 offered how it changed her relationship with time:

"P2:   (quietly)…*I just wanted to say that this helped me in terms of time…before…I was either going to be late or there was never enough time, or I needed to fit everything in…and now after all this I have become better able to manage my time and I felt that I could also be more settled inside and on the outside with those around me, I could feel lighter and as though I had the luxury to rush for something that needs to happen…but also to slow down at times, to be able to enjoy relaxation and another time to do nothing, nothing, nothing, not having to think about something but overall to be able to feel good with myself and those around me*
P3:   *And that seems really important…*
(silence)
M: *It is what M (P4) talked about earlier that life does not need to be a 100 metre race… (laughs)…to have already started running before…*
P2:   *…before the gun is fired! (laughs)"* (20:147-150)

It seems to me that the vital aspect of having the luxury to live "in" time is the sense of "feeling more settled inside and outside" that P2 mentions, which again alludes to having reached a stage of self-acceptance and of coming to terms with imperfection.

This is not to say that the MBSR seminar was experienced as positive and illuminating in its totality. P5 struggled with the meditation exercises as she tried to "relax". Even though relaxation is not a goal in MBSR and there was not such instruction or expectation, nevertheless it is important to take into account that the participant experienced it this way and was frustrated to discover that she could not follow. Despite that, it was significant that she stayed with the observation of herself and her body experience even though it was unpleasant as MBSR programme focuses on discovering the "embodiment of our experience" even when it might not involve relaxing sensations (McCown et al 2010).

However, it is equally possible that a group situation whereby people follow guided meditation exercises is not a conducive learning environment for everyone or at the very least not appropriate for people at specific times in their life; the timing of experience can play an important role. It is interesting though that whilst this particular trainee offered that while she could not follow the meditation exercises and found it hard to meditate at home, she felt helped by the invitation accept her experience, which motivated her to work on the feelings of guilt around her overeating.

P1 found an unwanted amount of contact with herself which at the time felt too much to handle. She reflected though that now, after a period of observing her "absence" from her daily life, she is ready to re-connect.

> *"P1:   It was as if I couldn't stay with myself for as long- so my thoughts were distracted when we were doing the [meditation] exercises, I was…I couldn't maintain my concentration easily; I don't know whether it had to do with the time in my life…I wasn't very well… it was something new, I had never done it before……this made it feel a bit too much […] during the last couple of weeks I realized that would listen to the news and not understand and…it'd finish and I hadn't understood a thing, I couldn't describe what I had listened to…or that I'd read a book and wouldn't take things in…and I think this is the time to get to terms with this, to be more focused in the moment…so now is the time for me to take a closer look… so shall we have another meeting so that I can tell you how it went? (group laughs)" (22:172)*

P1 touched upon the issue of the duration and timing of the MBSR being experienced as overwhelming for her. It is important to note here that the original MBSR programme lasts for 8 weeks of 1.5-2hours meetings each, plus one extra day of full immersion plus a requirement of a 45min daily meditation exercise for participants (reference), so it can be intensive for a newcomer. Compared to the space provided by the 8 weeks, the condensed 2 weekend training we provided might have indeed been overwhelming for some people even though everyday practice was not expected (participants were instead invited to experiment with meditation at their own pace). It is possible that this could have been quite intensive for some people. Another possible explanation might be with regards to the

subjects covered, and not with the duration of the seminar: the second part in an MBSR programme focuses on awareness of emotions and emotion-focused coping as well as patterns of interactions with others so understandably it can be experienced as more demanding than the first. I discuss the study's findings regarding difficulties/challenges of mindfulness practice in the next chapter (Chapter 9).

Theme summary

One category had to do with the "Process": where the participant is right now, the thoughts, emotions, senses and images connected to that, the sense of time speeding up or standing still, the tasks at hand, the challenges etc; another major category seemed to be something around "Competence": dealing with the course requirements, with endings, with setting boundaries to self and others, with own expectations ("never being good enough"), with constructing their own professional robes, needing acknowledgment from others but also fearing it too, facing challenges from other figures (older clients; doctors advocating the biomedical model of care) etc. Finally, a third category was about "Being present": the benefits and challenges that emerged from the MBSR training; the challenge of focusing attention, of relating to unwanted feelings, senses and experiences, of what is "right" mindfulness, and on the other hand, being present as helping deal with death and loss, being more aware in daily life, catching up with time, shedding guilt, accepting non-perfection, or in one participant's words "becoming more human".

Group dynamics and the participants as co-researchers

P1 often provided an injection of humour with a self-depreciating angle for the group which lightened the discussion and often acted as a diffusion of the "heaviness" that had descended.

P5 used a number of incidents from her life to illustrate her new faith in herself and how she has advocated it towards others. I have wondered whether –being the youngest of all- she was still in the process of constructing an identity while detaching herself from family and family-imposed roles, or if she felt that her youth was a reason that others did not take her seriously (she mentioned one incident) and thus she was putting up a bigger fight than the

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rest regarding her identity. She was very keen to tell the group about instances in her life where she had "stood up for herself".

P2 and P3 occupied the roles of the "elders" of the group –being older in age (the fact that they were mothers also played a role in my view). They discussed how being older allows them to see the experiences discussed in the group from a different angle, as individuals who had been through various of life's "*disasters*" (P3) and had long experience of "marrying" their professional roles (occupational therapist/trainer and English language teacher/language centre owner respectively) with being caretakers in their family.

I saw P4 as the conjurer of images for the group –most of the images that emerged originated from her so she had an ability of talking in pictures and of drawing others into them; she also mildly placed some challenges for other participants.

Already existing friendships and allegiances were present: P2 felt a connection to P1; P1 felt encouraged and grateful by the positive feedback she received by P5; P4 acted as a "witness" to the way her friend P3 was dealing with her father's illness and death. There were points of convergence and divergence (mentioned in more detail under themes) but no outright conflicts.

There were times when the participants in this group too acted as co-researchers, asking questions ("*P1: I lost you now...why did you say these two were in conflict?" 12:163*) prompting, challenging assumptions, clarifying and explaining each others' experience (*P3: "this is about an acceptance of yourself" 14:186*), which gave the group the feeling of a collective exploration and discovery. In terms of their discussion of their experience of mindfulness, their approach was less explorative and collaborative than FG1, sharing their individual experiences but reflecting on them one at a time instead of using them as a ground of exploring a collective "truth" together.

The use of imagery by the group members (FG1 and FG2)

I was surprised and very curious by the use of imagery by the groups. Images can describe experience in such a beautifully condensed form –they convey thoughts, emotions,

memories, pictures all in one and they can provide very useful metaphors for the whole group. While I did not set out to explore how the participants expressed themselves through imagery and metaphor, I was often struck by the vividness both in terms of mental pictures and emotion that the participants conjured during the group discussions. Here I make a brief mention of these occurrences, noting that in FG1 the imagery was mostly about the sense of abandonment or mistreatment around the crisis they had experienced while in FG2 it was mostly descriptive of the participant's inner processes.

Both groups used the metaphor of a journey to speak about their experience through training.

FG1 used imagery mostly to do with the experience of the crisis during training; participants offered vivid images of "***being dropped from an embrace***", or having (violently) one's "***plug pulled out***", seeing the new tutors on the course as "***lambs brought to slaughter***". P5 described an "***inner light***" switching on when she feels aligned with herself.

The images in FG2 were more in terms of each participant's own journey; P2 spoke of ***rebirth and liberation*** –talked about her life being about "***walking back and forth in a "narrow corridor***" until she found herself in a "***forest clearing***" with many paths leading away from her and with the freedom to choose which one she wanted to follow. This image was sharply contrasted by the image of "**a battle"** with oneself, and with "**coming to contact with things and getting burned**". Another participant brought forth the image of walking on a **tight rope over the void** in order to describe a difficult moment in supervision.

Taming the wild beasts was an image that captivated FG2 in terms of discussing inner difficulties and challenges (family values and beliefs, real life was about difficulty, nothing should be taken lightly or for granted, racing against time and one's self etc). ***Training as a race*** was also an interesting metaphor (***100m race/marathon)*** before becoming a ***stroll*** to be enjoyed. Finally, an interesting image was the evocation of a counsellor's ***suit*** and to what extend one can make adjustments to it (to add one's "*own accessories*" in P5's words).

Summary: Overall themes for FG1 and FG2

The experience of an MBSR programme by Greek trainees was initially discussed in relation to the overall process of counselling training and the challenges faced therein. Inter- or

intra- personal challenges were identified and illustrated the process of training as a deconstruction of previous learning and of an earlier sense of self. Interpersonal challenges which were identified included an apprehension towards "professional gatekeepers" (tutors, supervisors, mental health professionals). Intra-personal challenges involved the trainees' own expectations while coming face to face with one's own perceived "inadequacy" during training. There was an underlying thread in both groups involving perceived (in)competency. The groups offered images such as the "*counsellor's suit*" (FG2), which could be intimidating, or the "*counsellor's shoes*" (FG1), which could feel too big to walk. Underlying these images seemed to be the fear that one is "*never enough*" (FG2). The experience of challenge varied across participants including for example, both feelings of "liberation" and of "battling with beasts"**.**

In terms of the MBSR programme, participants in FG1 spoke of experiences such as being able to observe their inner processes and to better "bracket off" their personal values and assumptions in order to create space for the interaction with their clients. They also spoke of being better able to stay in the "here and now", to be more open to whatever arises, listen more and to tune in more acutely to their client. They also mentioned becoming more aware of their interpreting mind and of their own impulsivity, thus helping them act more consciously during the session. The group has also discussed a sense of being open and accepting to whatever is there in the present moment, as it unfolds. Seeing the positive results in themselves some participants mentioned trying out a couple of mindfulness exercises with their own clients and having positive feedback (P3, FG1; P4 FG2).

In terms of their relationship to themselves, participants spoke of a better reconciliation with one's boundaries as a result of MBSR whether it had to do with standards of excellence, expectations regarding the pace with which they should finish the course or fears of inadequacy. The intention behind meditation, which is openness to experience without judgment, with self-compassion was discussed by FG1 participants who identified the impact of the instruction to return the awareness to the breath "*gently".* Staying with what is non-judgmentally seems therefore to have a significant transformational effect. It is therefore not only the exercise of staying with the present experience as such but the manner with which one is instructed to approach that experience that makes the difference in terms of facilitating change. I will return to this point in the next chapter as I believe it is one of the most significant findings of this study. The process of tuning into oneself and

"becoming who we are" was echoed in P4's/FG2 image on seeing herself as "taking a stroll", having started as a 100m runner. "Companionship", the experience of the same participant in terms of validating her intuitive way of being through mindfulness practice was also amongst the important results. Finally, the experience of mindfulness training helped two members of FG2 to deal with life problems (death of a parent and overeating).

As human interactions rarely fall neatly into exclusive categories, it was my impression that often each main category included the others: talking about one's developmental process during training for example, led them to reflect on their competence or on the personal challenges they face; reflecting on what is challenging about one's experience in turn led to talking about self-acceptance and shedding of guilt –which both related to mindfulness and to the overall process of "becoming".

Chapter 9: Project 2 Discussion

In this chapter I aim to first comment on the overall reflections of the Greek counselling trainees focus groups on their experience of counselling training and Mindfulness-based stress reduction (MBSR) programme. Within this context, I will consider what the findings tell us about the possible use of mindfulness in counselling training. Then I will identify the research study's limitations and possible future directions for research. Lastly, I will open the scope of the discussion to embrace the findings of both Projects 1 and 2 and the Heuristic Inquiry in order to draw considerations and conclusions on mindfulness and counselling. The final part of this chapter will present the impact and the products which are expected to be the outcomes of the research.

1. Reflections on Project 2 results

a. Setting the context: stress and counselling training

The stressful challenges that the process of counselling training entails is a subject that has been written about extensively (for example, Bor & Watts, 2007; Skovholt & Trotter-Matthison, 2011) so it is not surprising that they surfaced in this study too. I noted that the life experience one carried perhaps played a role in how this process was contained in this study, with older group members experiencing training as a dialogue with their already existing identity whilst younger members seemed to see training as a vehicle which challenged them towards the formation of a personal/professional identity.

The relationship with those responsible for training (tutors, training organisation) is also a well-known theme. Alred (2006) points out that training inevitably contains un-learning and re-learning, redefining one's knowledge of their own self, a process that often creates a sense of vulnerability. The relationship of the trainee with those responsible for their training is a context where this vulnerability and anxiety is evident and implicit roles are being acted out by both parties (Ibid). In the interviews –in particular with FG1- I was reminded of the centrality of these relationships in a trainees' life and of how difficulty

within training can increase the stress and sense of vulnerability. The centrality of relationships, such as with the supervisors, was also identified (FG2).

Another source of stress was the anxiety around one's competence and skill as a trainee; themes of inadequacy and of how successfully one is filling out the "counsellor's shoes" (FG1) and the "counsellor's robes" as well as life experiences of "never being good enough" in other roles emerged (FG2). Seeking acknowledgment from peers and experienced professionals fitted what Skovholt and Rønnestad (2011) identify as a distinct phase in the development of counsellor identity; the novice counsellor seeks expertise in external sources (unlike the seasoned practitioner who relies mostly on internal expertise). It is no wonder therefore, that in the quest for professional competence whereby one's own knowledge and skill is constantly measured and found wanting, the counsellor's "robe" can feel daunting. This anxiety was played out in various contexts including the supervisory relationship (being seen as "adequate" by a seasoned professional), peer relationships (receiving positive feedback from others) and in work relationships (being validated by other professionals/supporters of the biomedical model). Reflecting on these experiences, I was reminded of Skovholt and Trotter-Mathison's (2011) comments on the apprehension of trainees in front of the "professional gatekeepers" in counselling and psychotherapy, supervisors being one of them. They write:

> "So the novice with as much choice of his or her supervisor as his or her parent and with ambiguous standards to meet, lives under illuminated scrutiny. The difficulty is magnified by the following reality: 'Supervisors are not only admired teachers but feared judges who have real power' (Doehrman, 1976, p.11)". Now that's a stress!" (p.96).

The experience of this study's Greek trainees confirmed that counselling training was seen as a personally involving, powerful and challenging journey. It was against this background that the trainees enrolled for an MBSR programme which I will now proceed to discuss.

b. The effects of MBSR training in Greek trainees

Setting the scene

Although there has been an increasing research activity in the effects of mindfulness programmes on different populations, Davis and Hayes (2011) point out that it has been only recently that mindfulness has started being explored in relation to its benefits towards therapists and trainees, therefore our knowledge on this subject is still being developed. Whilst the already existing studies (see Literature Review) show promising results in terms of how mindfulness can be beneficial for therapists and point towards the benefits of including it in training therapy programmes, still more research is required in order to: "influence policy changes and changes in psychotherapy training programmes" (p.205). Christopher et al (2010) identify that there is only a handful of studies available which focus on the impact of mindfulness on counselling students. With this in mind, I will proceed to discuss what this study offered in terms of adding to the limited knowledge that we already have in this field.

Firstly, this study took place in a country where mindfulness theory and practice remain largely unknown. To the best of my knowledge there are no therapists identifying themselves as mindfulness-based or mindfulness-inspired and there are no training programmes or seminars on the approach apart from the ones offered by the Athens Mindfulness Centre, established by my clinical psychologist colleague and myself (see "Impact and products" at the end of this chapter). So, for the time being, these findings are unique in terms of mindfulness and counselling trainees in Greece.

Secondly, the mindfulness input which the trainees had in this study involved a well established protocol with good research grounding: the MBSR programme has received research support hence it has served as a blueprint for the development of other mindfulness interventions (McCown, 2011). To comment on Christopher et al (2010) above, the handful of studies available on counselling/therapy trainees have often varied in terms of mindfulness input and trainees. For example their own study included participants from school counselling, marriage counselling, mental health counselling programmes and involved the implementation of their own mindfulness protocol called "Mind-body medicine" (Ibid). Gehart & McCollum (2010) have created their own mindfulness programme for marriage counsellors/family therapists; Shapiro (2007) implemented an

MBSR programme on counselling psychology trainees; Grepmair (2007) offered Zen meditation to psychotherapy trainees. Irving et al (2009) reviewed the findings on the effects of MBSR in health professionals in general (medicine, nursing and psychology trainees). Escuriex & Labbe (2011) reviewed 20 studies on the positive results of mindfulness on health professionals, out of which only 6 studies involved mental health professionals. Whilst it is important to know how different professionals find mindfulness practice, our knowledge about how specific professional identities interact with specific mindfulness inputs remains limited. Not all mindfulness interventions are the same and not all counselling trainees have received the same training; training could vary within and across countries. Often important details such as the theoretical approaches taught on the programme or the specific requirements –e.g. if trainees are required to undergo personal therapy themselves or not- are not mentioned in research. Therefore, there is no clear picture on what kind of mindfulness programme is applied to what students in which kind of training. Yet I believe that the exploration of such dimensions is important in order to further our understanding of the benefits of the approach.

In this study, the trainees were near completion of a 3 year integrative counselling training programme and at the time of the interviews had either completed or were in the process of personal therapy; this is important in terms of what impact they attributed to training/therapy and what to MBSR. Their reflections on the MBSR programme are presented below.

c. MBSR, self acceptance and "becoming who you are"

The trainees reported a number of benefits such as better self-attunement and self-acceptance which led to a greater sense of integration between their personal and professional roles (see Results). The themes particularly revolved around the facilitation of a sense of "becoming oneself" on a personal level, the enrichment of the therapeutic presence, and on self and other attunement. For example:

> "…after meditation […] I see that I make a completely different evaluation of the messages that reach me –generally in life but also in sessions […] I can say that my perception is significantly widened […] I am much more directed towards the other,

the other seems more clear […] the attunement is such that I can understand the other better". (P3/FG1, p…)

This ties in with research findings indicating that mindfulness helps become aware of the reactive mind and be more flexible in using attention with awareness (Hayes and Davis 2011) and suggesting that mindfulness fosters a better sense of self-attunement in psychotherapists which in turn leads to a better attunement with clients in the therapy room (Bruce et al, 2010). The participants in this study confirm these results and their experience suggests that mindfulness enhances their therapeutic presence. Geller and Greenberg (2011) identify this as one of the main components of the usefulness of mindfulness in psychotherapy.

Even more important than the effects on their counselling role, was the experience of mindfulness by trainees on a personal level. It was interesting that it was the explicit *intention* behind the meditation (i.e. "gentleness" –see FG1 Results) that seemed to facilitate the sense of self-acceptance and of embracing one's own and others' existence with "love" as one of the participants put it (FG1 interview, P3). While "love" is a strong word and possibly carries various connotations, I believe that it is the non-judgmental stance cultivated during mindfulness practice that is being described it this reflection. This and other similar experiences of a "mindful life stance" – such as identified sensations of "centredness" and "groundedness" during meditation- created significant difference in the participants' sense of relating to their own self and to others. FG2 experiences such as "becoming more human" and allowing oneself to develop in its own stride, indicated that the MBSR training facilitated a clearer sense of accepting one's self, limitations, "inadequacy" and ultimately "human-beingness". The befriending of one's self, "sitting next to" the Self with acceptance during meditation is a central component in mindfulness theory (Santorelli, 1999). It is important that the trainees related these experiences to the MBSR programme specifically and not to other parts of their training or to their personal therapy.

It is also important to note that greater self-acceptance was felt during meditation through the experience of the body (e.g. learning to "stay with one's messy breathing" -see Results/FG1). Indeed, cultivating self acceptance and self compassion through the body is a very explicit intention in MBSR training (see McCown et al 2011) through different practices. A simple yet effective method is the instruction in meditation to observe the wandering

mind, and recognising that it is in its nature to wander around, to return it to the awareness of breath. Whilst acceptance is a quality that has been identified as an active ingredient of mindfulness (Shapiro, 2006), I believe that the participants of this study highlighted how it actually *feels* as an experience and its usefulness in their life. Experiences of "*becoming who you are*" (FG1) or "*becoming more human*" (FG2) identified that MBSR had a function of bringing together all of their experience and integrating more clearly who they are and how they react in their personal lives (and consequently in their professional roles).

The results of this study indicate that the way this "*wholeness*" was achieved was by the cultivation of qualities such as acceptance (e.g. "*reconciliation with oneself*"; "*accepting the here and now with love*" and dealing with a parent's death)*;* non-striving ("*I thought I should be something more*"), non-judging (dealing with guilt in overeating) patience ("*the stoicism of being able to stay with yourself*"); "*taking a stroll instead of running a marathon*"; "*being in time*), beginner's mind ("*not creating 'boxes' to categorise others*"; "*being a little explorer*"), trust ("*I am not wrong*"; "*become what you are*") and letting go ("*it is very difficult to let go of control*" [during meditation]"; "*you don't need to be perfect*").

All these qualities mentioned above –acceptance, trust, patience, beginner's mind, non-striving, non-judging, and letting go- are what is referred to in MBSR theory as "Mindfulness Attitudes" and constitute the foundations of mindfulness practice (Kabat-Zinn, 2004). The attitude(s) with which meditation practice is approached is very important because they cultivate a different kind of awareness, one that allows new learning and healing to happen (Ibid).

Whilst in this study I did not set out to directly explore the participants' experience within the context of these attitudes, I realised after I had immersed myself in the findings for some time that the experiences emerging more strongly in the results were those which had to do with the "backbone" of the meditative awareness in MBSR. Together with the finding that mindfulness practice in MBSR can facilitate a greater "human-ness" and "wholeness" in trainees, participants also indicated that the vehicle through which this happens could be the attitudinal foundations of the MBSR programme. Kabat-Zinn (2004) has found similar results in the patients in the University of Massachusetts, Stress Clinic where MBSR groups are run:

"Perhaps more than anything else the work in the stress clinic involves helping people to see and feel and believe in their wholeness, helping them to mend the wounds of disconnectedness and the pain of feeling isolated, fragmented and separate, to discover the underlying fabric of wholeness and connectedness *within themselves*" (p.162).

Based on the findings of this study I am suggesting that something very similar has happened with the counselling trainees: their experience of mindfulness seems to have helped facilitate a different, more "whole" way of perceiving themselves and of connecting the dots between their personal and professional roles through mindfulness' attitudes.

As far as I am aware, this personal and professional self integration is an element which has been hinted at but not expanded upon in the literature on mindfulness and trainees. The research that has been available has focused on potential benefits of the combination of mindfulness practice and counselling training such as decrease in stress, negative affect, ruminations and state and trait anxiety and increase in positive affect and self-compassion (Shapiro, Brown and Biegel, 2007); increased empathy, compassion and counselling skills including better attunement to the client, sitting more comfortably in silence, listening more actively (Newsome, Christopher, Dahlen, & Christopher, 2006; Schure, Christopher, & Christopher, 2008; Siegel, 2008) and overall therapeutic presence (May & O'Donovan, 2007; Bruce et al 2010). Such results are very important in pointing out towards the direction that change happens in mindfulness and what kind of impact it has. In relation to the stress of counselling training context, Skovholt and Rønnestad (2011), discussing the challenges faced by most counselling trainees, acknowledged that "many elements combine to increase performance anxiety in the beginner" (p.48). The findings of this study indicated that it is particularly within times of difficulty in one's training or personal life that mindfulness can have a significant "holding" effect. The sense tolerance is related to the quality of self-acceptance and compassion and to the ability to regulate emotion. Chambers, Guillone & Allen (2009) identified the cultivation of the skill to regulate emotion as one of the most important functions of mindfulness: "the capacity to remain mindfully aware at all times, irrespective of the apparent valence or magnitude of any emotion that is experienced" (Chambers, Gullone, & Allen, 2009, p. 569). Therefore, the experience of an MBSR programme within counselling training offered a clearer "grounding" for the trainees both within themselves and within their roles in their professional environments. This study has

gone a step further in suggesting that when the way a trainee relates to their own self changes, then this changes the way they see their self both on a personal and on a professional level, thus resulting in a better integration of their roles and a greater sense of "full human-beingness".

However, there were also difficulties reported in relation to the MBSR training. Again, our knowledge in the field is limited and very few studies on mindfulness report negative experiences. In this study participants were deliberately asked to discuss the difficulties encountered as it was deemed important in order to enrich our understanding of the MBIs. Here I discuss the specific experience of trainees and in the next section of this chapter I open the discussion to various risks and/or points needing further clarification which have been identified in this doctoral paper and in the literature. In this study, a two trainees found the MBSR programme emotionally overwhelming (P1/FG2) and difficult to follow (P5/FG2) respectively. Christopher et al (2010), in their study of implementing a mindfulness programme on counselling trainees, found that there were "several who mentioned that the practices were sometimes difficult emotionally and that the support of a good counsellor was needed for these times" (p.338). It must be noted that their study was not of an MBSR programme, although it did contain mindful meditation amongst other practices (teaching, hatha yoga and qigong).

I believe that the timing during which one chooses to take part in MBSR has to be carefully considered and perhaps a detailed assessment of a participant's own resources should take place before commencing on the programme (this was not done in this case, since all the MBSR participants were counselling students who had access to individual therapy).

Another point to consider regarding the difficulty with MBSR is that it is quite possible that when one connects with their present experiencing they might come across unsettling, unpleasant and/or overwhelming thoughts, emotions and body senses. This is normal since tuning into the self at any time might involve a different range of experiences. It is important that this is acknowledged and proper guidance and care is given, as people might confuse mindfulness with relaxation and expect to relax during the meditation exercises (as was the case with P5). Whilst this could be the case, the opposite is also possible and it is important to come across challenging experiences so as to be able to then cultivate the skills of detached observation and compassion towards one's own difficulty. However, findings

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like these might indicate areas that still need to be explored in order to better understand the way particular mindfulness practice protocols work (or don't) for different people.

Finally, participants in FG1 explored the issue of keeping oneself motivated enough to meditate in one's own time beyond the end of the MBSR programme. This is a challenge that has been identified elsewhere in literature (e.g. Sears et al 2011).

In conclusion, this study has presented the impact of MBSR training for counselling trainees in Greece and presented the following findings: a) the cultivation of awareness with self acceptance leads to a different (perhaps less demanding) way of relating to oneself, facilitating an awareness of one's "human-beingness" and leading to a better integration of their personal and professional selves and c) that Kabat-Zinn's "mindfulness attitudes" (2004) seem to be the vehicle for this change. Difficulties with practice can be encountered and it is important to explore what they tell us about the limits of the approach.

In the discussion that follows I examine a) how mindfulness practice could potentially enrich the work of counselling training programmes and b) risks and "points of clarification" that need to be taken into account.

d. The combination of counselling training and mindfulness: comments and recommendations

Mindfulness and the case of meditation

As already mentioned above, I believe that it is important to be clear about what "kind" of mindfulness input is used and how it is supported by research.

In this study an MBSR programme was employed exactly because it has a quite solid research background. However, it is important to bear in mind that MBSR is a psycho-educational protocol which can have therapeutic effects but it is not itself therapy. As such, it is not suggested that it can substitute personal therapy or established psychotherapeutic theories and practice during training. The precise differentiation between what mindfulness advocates and the already established psychotherapeutic traditions is beyond the scope of

this study; it is my belief however that as MBIs are becoming more prevalent, this is an area that will need to be more systematically reviewed and clarified.

What I believe emerged from this study was its potential benefit as an adjunct to counselling training. The trainees –all near or at the completion of their training- had already done significant work in terms of their self-awareness through their training course, personal therapy and supervision; yet, in their majority they found the MBSR programme helpful on a personal level, not as an extra technique in their toolbox. The MBSR programme seems to have utilised their already existing self-knowledge to further cultivate an element of mindful awareness, acceptance and self-compassion in their personal and professional lives, thus promoting the higher order integration of personal and professional life (Skovholt & Rønnestad 2011). These findings echo the experience of some of the therapists in Project 1 (P2 and P3) who found that mindfulness provided a valuable "anchor" during the trials and tribulations of their clinical training and who believed that mindfulness would be very useful in therapist training (P3, P4, P5): "*mindfulness should be an element of every class of all psychotherapists' training because it is a training of the mind, a training of really understanding the nature of inquiry to our experience without judging it*" (see Chapter 5 Project 1 Results). So as personal and professional development go side by side, I believe that the awareness and self acceptance cultivated by mindfulness practice can bring these two strands of development into more conscious integration even amongst difficulty and stress.

The MBSR programme incorporates all levels of present moment experience since it applies equal emphasis on working with the body, the cognitive/affective dimensions, and with the tacit by using drawing, poetry and creative writing –hence it attempts a holistic approach by giving ground to different levels of experience. I would like to particularly refer to the fact that MBSR -by using meditation- cultivates an awareness different to the cognitive/linguistic path of relating to experience. The importance of incorporating a non-linguistic relating to the self is explained quite eloquently by the writer/journalist Tim Parks:

"Language builds domes, then other domes over them as the first dissolve. Because words are never still. The opening of a sentence projects you forwards; the end

demands that you have the beginning in mind [...] Typing, my thoughts run ahead of my fingers. Driven on. Never now. Never grounded at this moment. Reading, talking, thinking, you move in a separate system. The map may be the real one but it is not the territory. To think an object is not to perceive it. To text a girlfriend is not to be with her. You lose your grip on things as they are. But this second life is compulsive. You can't stop. A whirlwind word machine lifts off from the heavy surfaces of soil, cement and skin. Mind and body part company [...]. Your mind is you. Your body is a vehicle" (Parks, 2011, pp. 210)

By contrast, he describes the meditation as:

"Wordless wakefulness, lively stillness, meditation resists description. When at the beginning words and images fizz in resistance to our attempt to put them aside, the writer can have fun. But when thought at last relents, when eyes close behind closed eyes and the mind sinks silent into the flesh, then it is hard to describe that strange state of alertness, oneness, quiet. Moreover, the meditator loses all desire to do so. To what end?" (Ibid pp 245).

It can be argued that many of the qualities that programmes such as the MBSR are said to cultivate are not dissimilar to the qualities already cultivated by different psychotherapeutic schools. Although it is not within the scope of this paper to identify the exact points of convergence and divergence between mindfulness and psychotherapy, the subject has started being explored by various practitioner-researchers. Geller (2003) for example, in her paper on how mindful meditation and experiential psychotherapies can be complementary to one another, wrote on the particular function of meditation that allows other forms of "knowing" to emerge:

"Meditation could be a useful aid to psychotherapy. Meditation loosens defences and allows the emergence of painful and repressed material (Delmonte, 1990, 1995; Goleman,1976). Delmonte (1990, 1995) explained that the suspension of habitual cognitive construing, which is part of allowing experiences to arise without judgment or alteration in mindfulness meditation, allows non-verbal and pre-logical material to

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emerge. This liberates somatic and primary process material to come into conscious awareness. This painful material can then be explored in a deeper way, with the support of a positive therapeutic alliance in experiential therapy" (p.270).

Furthermore, she outlined the importance of meditation not only in accessing material but also in facilitating a different way of relating to it, which brings to mind the element of "gentleness" identified as vital by FG1:

"Mindfulness meditation […] teaches a direct way of being with emotions and experience with acceptance, compassion and expansiveness. This allows a client to contact the depth of experience necessary for change and integration in experiential therapy, while maintaining a sense of trust and groundedness. Meditation provides a powerful tool that the client can carry with them to develop comfort in being with their pain and emotional experience". (p.270)

Although she refers to clients, I would argue that the same effects are true for those who use these tools –i.e. for the therapists themselves. Having said that, the manner of this integration is neither evident nor straightforward, nor can it substitute therapeutic work. However, I am also aware of the potential dangers of introducing mindfulness practice to trainees in an un-structured way. Meditative practice needs support from experienced professionals as otherwise it can lead to adverse effects. I agree fully with Epstein (1999) when he writes that:

"Mindful practice requires mentoring and guidance. Recognition of one's limitation and areas of incompetence can be emotionally difficult and can invite avoidance in even highly motivated practitioners." (p.838)

When not part of a carefully thought of structure that can encourage and contain self-exploration, meditation could potentially end up being a manner of avoiding coming to terms with that which is difficult within ourselves. I have explored these risks in Project 1 Discussion (Chapter 6) and have identified a need for further clarification with regards to what kinds of meditation produce what results for what people under which circumstances.

Certainly, one possible shortcoming of mindfulness interventions thus far, has been that research studies have been carried out on a diverse range of meditation (vipassana, zazen, qigong etc) and for a variety of lengths of training which has meant that the adverse effects have not been controlled for the kind and duration of meditation. For example, Davis and Hays (2011) point out that despite the assumption that all kinds of meditation facilitate mindfulness, in fact research studies show that there are different kinds of brain activity that are the result of different kinds of meditation. May & O'Donovan (2007) in a study of Australian psychologists, counsellors and social workers and mindfulness found that meditation and/or yoga practice did not have a significant correlation with levels of mindfulness; they remind the reader that there are different kinds of meditation (and I would add, yoga) not all of which have the same *intention* behind the practice; they point to "individuals who meditate for a long periods of time but do not appear to be particularly mindful or compassionate" (p. 51).

Illustrating this point, Irving et al (2009) direct the reader towards the often-quoted study of Grepmair et al (2007) and to the similarly promising study of Christopher et al (2006) on mindfulness and trainee psychotherapists, both citing beneficial findings of mindfulness and trainee therapists. The former study of psychotherapists in training found that mindfulness training enhanced the participants' ability to construct a good therapeutic relationship (as evaluated by the client) and the clients of the participants reported greater symptom reduction. It needs to be borne in mind however, that the training programme involved Zen meditation which is different to the vipasana meditation usually employed by mindfulness programmes such as MBSR (Kabat-Zinn, 2004) and MBCT (Segal et al, 2002). The latter study involved introducing mindfulness practice to counselling trainees and found a wide range of benefits (see Literature review chapter); however it is also pointed out that in the curriculum followed "mindfulness practice was just one component of the course, which also included substantial didactic material unrelated to the standard MBSR protocol" (Irving, 2009 p.63). Without wishing to undermine the promising results, I wonder when we are discussing benefits and/or adverse effects of mindfulness meditation, whether we are all talking about the same thing or if indeed mindfulness is a wide-encompassing quality existing in diverse paradigms and practices and thus quite difficult to pin down and study. Attempts to construct a psychometric instrument measuring mindfulness has instigated a

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debate between its supporters (Brown, Ryan et al 2011) and those who feel that a psychometric tool would reduce the essence of mindfulness (Grossman, 2011).

Furthermore, mindfulness meditation might not suitable for everyone, and it is important for more research to be done in this area including the protocol and effects of different kinds of meditation, vulnerability and resilience factors in participants, duration of meditation, the timing in one's life, including potential stressors and meditation etc. Irving et al (2009) point out that there is a marked absence of research in the area of potentially harmful or negative effects of mindfulness practice, although such occurrences do come up in studies. Dobkin, Irving & Amar (2012) have tried to explore possible contra-indications for MBSR training but have not come up with significant empirical evidence due to lack of specific information in the research field; however, noting that there have been participants with adverse experiences of MBSR they suggest that this is a dimension worth pursuing and that at any rate, careful screening is indicated.

Therefore, I feel that amidst the enthusiasm for MBIs, the inclusion of mindfulness practice as an add-on element in already existing counselling programmes would be misleading. Mindfulness in education is not simply a matter of adding together different ingredients: the studies mentioned above as well as this study indicate that an integration could be beneficial, but the "how" needs careful consideration: for example, thinking through the similar philosophies and practices and clarify what works, how and for whom. A new interface between counselling training and mindfulness practice needs to be constructed through systematic inquiry and clarification in a way that the result is mutually enriching, safe and more than a sum of its individual parts.

2. Bringing all strands together: Projects 1,2 and Heuristic inquiry on integrating mindfulness practice and therapy training

The exploration of this doctoral research sought to investigate how mindfulness is experienced and what about it "made sense" clinical psychologists and psychotherapists initially trained in and/or employing other therapeutic approaches (Project 1); for

integrative counselling trainees in Greece (Project 2); and for me, a counselling psychologist living and working in Greece (Heuristic inquiry). Here I aim to bring all the strands together in discussing mindfulness and its potential integration in counselling training.

Perhaps the most consistent finding across Projects 1 and 2 has been that mindfulness practice can facilitate a different way of being with oneself incorporating the body dimension in facilitating "wholeness". The importance of the embodied experience of the mindful stance and the *intention* of acceptance behind this stance which both the trainees and therapists identified (see Results Chapters, 5 & 9) was also present in my heuristic inquiry: as I have noted (in Chapter7), I have felt that when the "gentleness" towards my experience was lacking (as in the vipasana meditation retreat I attended) then meditation became more of a "struggle". Conversely, when relating to myself with an attitude of patience and acceptance, whatever it was that the mind was clinging onto became more easy to let go of. In mindfulness literature, Shapiro et al (2006) emphasise that it is the qualities of open-heartedness, compassion and human interest that make an impact, otherwise "attention can have a cold, critical quality" that can be counter-productive (p.4). Sears et al (2011) emphasise that it is the "how" of paying attention in mindfulness that seems to facilitate change; the results of my doctoral studies certainly point in the same direction, suggesting that the non-judgmental, accepting attitudes are the most important ingredients in the facilitation of a different relationship with the Self. Cultivating these qualities as a way of being, has in turn allowed for a greater sense of "being with" with others –be it clients, family or friends. As suggested earlier, I believe that the common thread running through the project 1 and 2 studies as well as my own experience is that mindfulness training can facilitate a greater integration of the personal and the professional selves and thus cultivate a "full human being-ness".

Furthermore, like the therapists of project 1 I also found a space for my spiritual needs in mindfulness practice although, as I discuss in Chapter 10 (Heuristic Inquiry) I was challenged by parts of Buddhist theory in a vipasana meditation retreat and felt more at home with secular practice. Taking into account that P3 in Project 1, also a Greek Christian Orthodox, used mindfulness practice to re-negotiate her stance towards her own religious beliefs I believe it is an important point to consider, especially when the practice happens in different cultural contexts.

Much like Project 1 therapists I have found that the presence of others in mindfulness practice is important in facilitating a sense of companionship and interconnectedness; for me personally, practising mindfulness with others has also been a process of inquiry ("how do others perceive this? what do they feel? Is my experience same or different?") and illumination ("I have not thought about this before!"). I have found through heuristic exploration that the use of mindfulness as a day to day mode of inquiry enriches my identity as a practitioner-researcher.

Finally, mindfulness practice has provided for therapists and trainees alike a holding space for difficulty where attunement could happen with acceptance and bring about a "togetherness" of Self (or selves). In this regard it promising that mindfulness training was experienced as helpful for most Greek trainees, especially when taking into account that there was no "hype" surrounding the approach in their environment. The heuristic inquiry into my own experience pointed towards the same direction –mindfulness practice brought together various levels of experiencing and "knowing" to facilitate a more "holistic" way of being.

With this in mind, a direction for future research which has been identified involves exploring the best means of integrating therapy training with mindfulness practice (Bruce et al 2010). The authors suggest that the best way for therapists to answer these questions is to experientially experiment with mindfulness meditation and its effects on therapeutic skills; they further suggest researching other practices:

> "Though mindfulness meditation shows particular promise for therapists, we believe that any practice that develops qualities of curiosity, openness, acceptance, and love, particularly toward oneself, would yield benefits in the therapy room. Examples include yoga, tai chi, chi gung, journaling, artistic expression with the intent of self exploration, and the therapist's own psychotherapy. Know thyself," the adage inscribed in the temple of Apollo at Delphi, is applicable. The therapist who is able to know himself is better able to know the patient, and therefore better able to help t patient know himself or herself" (Bruce et al, 2010 pp93-94).

Behind this playful proposition, I believe there lies the invitation for a combination of the traditions of psychotherapy, art, philosophy, spiritual practices etc in order to explore creative paths to therapist self-knowledge and self-integration. Based on the results of this doctoral inquiry I suggest that mindfulness practice can facilitate a "base" for the exploration of diverse kinds of "knowing" upon which different theoretical traditions and ways of working with the self, such as those mentioned above can be combined. As P3 has commented in Project 1, mindfulness "*provides a synthesis and a way of being with knowledge, [and] creates a space between the knowledge and us*" (see Project 1 Results).

Schön in his seminal book (Educating the Reflective Practitioner, 1987) identified the "crisis in confidence in professional education" (p.8) which values the kind of knowledge firmly grounded in systematic research in order to resolve everyday problems. He then juxtaposed to this the need to "start not by asking how to make better use of research based knowledge but by asking what we can learn from a careful examination of artistry" (p.13). I believe that this challenge is could still be relevant today – "marrying" different kinds of external and internal knowledge in professional training. I therefore agree with the suggestion of Bruce et al (2010) that both a more open and creative "know thyself" invitation and an inquiry of which unique resources each trainee or therapist possess could perhaps be more given more "weight" in existing counselling training programmes -at least in Greece. Project 2 results indicated that an MBSR programme could act as such a vehicle.

Bearing in mind that what is being proposed is rather a "stance" and not a different set of treatment techniques, caution needs to be exercised about how mindfulness is applied in the structured environments of therapy and training. Germer (2004) suggests that creating protocols for mindfulness-based psychotherapy might be useful to an extent but we should be careful not take the importance away from the therapeutic relationship. Mindfulness, he reminds the reader, is about the way we connect to ourselves and to the other; it is about "being". Geller (2002) agrees that this "being with the client" requires a "therapist's presence [which] is understood as the ultimate moment-by-moment receptivity and deep relational contact" (p.85). Therefore, the challenge seems to be that should mindfulness practice be used in counselling /therapy training, *how* this happens is important so as not to take the reductionist approach of "learning to do mindfulness to others".

From the discussion so far it could be rightly assumed that mindfulness is proposed as an enrichment to therapy and therapy training. I also propose that mindfulness practice can be enriched by psychotherapy training: in other words, I am describing a two-way process.

All the participants in this doctoral document –including myself- were mental health practitioners at various stages of their professional path, who had engaged in various forms of self-exploration. Even the trainees who took part in Project 2 had already engaged in personal therapy as a result of their counselling training and mindfulness practice enhanced existing qualities. I propose that it would be interesting to examine how counselling training facilitates a better understanding and openness to the experience of mindfulness practice. Certainly, the results of Project 1 have indicated the joint use of therapy and meditation as mutually enriching, with therapy providing the context of the relationship and the tools with which to work through the awareness brought forth by meditation (see Chapter 6, Project 1 discussion). I have also felt that my therapist knowledge placed me in a better and safer place in terms of meeting difficult experiences during meditation. For example, in Chapter 10 I speak about the "surprising" experience of a "loose" sense of self during meditation; I believe that both my professional practice and my personal experience in therapy have rendered this experience positive and even playful, not threatening or unsafe; in other words, have provided the safe "grounding" so that my Self can be then set free.

Limitations of study

There were several limitations to this study. To begin with, the trainees participated voluntarily and therefore this could have resulted in self-selection bias. The participants were all from the same training programme and therefore perhaps their experience reflects the idiosyncratic environment of the particular training and organisation. Furthermore, except for one man, the groups consisted of women which meant that there was possibly a gender bias; also, the participants lived and worked in Athens so they all came from this particular environment. Perhaps additional groups from other training programmes and/or from other Greek cities would have yielded different results or would have otherwise enriched the findings.

The particular study is also limited in that it is based on the participant's own perceptions of their experience, which however is the case with qualitative research in general. A limitation

of the self-reporting was that there was no checking of how frequently participants used meditation in their own life and in what way – e.g. if they were using the practice cds given during the MBSR programme or if they did something different; there was at least one participant in FG2 who mentioned downloading and using relaxation exercises which nature sounds, which is not mindfulness practice.

Aside from these considerations, it would have been both interesting and increase the project's quality assurance to feed back the results of the study to the focus groups and receive their comments but this was not done due to time limitations. For the same reason, I did not have time to employ multiple coding for this project.

 It would also be interesting to investigate longer-lasting effects of mindfulness training by inviting the participants back for another focus group discussion at 8 months or a year after the MBSR training. The anecdotal evidence I have shows a need from the participants to build on the mindfulness experience; following the interviews the participants expressed the need to have some "continuation"; as a result I decided to start a fortnightly mindfulness meditation group and to date 7 out of the 10 focus group participants carry on with mindfulness practice.

Finally, my own bias towards mindfulness practice could have influenced how I have interacted with the participants and their narratives or with interpreting the results of this study. I discuss my own experience of carrying out research and my role in it in Chapter 11 "Concluding reflections".

Chapter 10: Heuristic Inquiry into my own experience of mindfulness practice

The subject matter of my inquiry is how I have been experiencing mindfulness in terms of the facilitation of a "whole self", a "full human being-ness". In order to explore my own experience of mindfulness and examine its essence, I started by keeping a research diary writing down thoughts, ideas, memories as they emerged. I also began to notice when art and poetry nudged me in the direction of meanings that lay under the surface. I made a few drawings of my own (included here). Below I present the results of this inquiry as they emerged in each phase. I would like to point out that although the phases are presented in a neat fashion, the actual experience of me immersing myself into heuristic inquiry was not as clear-cut; rather it was experienced as an ongoing process that does not end with creative synthesis but leads to engagement with further questions. In addition, I frequently thought that through indwelling I have reached illumination which however led me back to another immersion and then back to illumination. So in my experience the process resembles more an upward spiral, with a lot of to-and-fro-ing taking place.

The inquiry runs parallel to Projects 1&2. I discuss its main findings at the end of this chapter and I revisit it in relation to the findings of Projects 1&2 in Chapter 10: "Bringing all strands together".

1. Initial engagement:

In this phase I was called to identify where my "passion" lies and put it at the centre of my doctoral research. Ideas that emerged at the time were dully recorded in my diary with a mixture of enthusiasm and apprehension about the size and the demands of the task at hand. I began to examine different research questions and ask myself time and again "what do I want to know most of all?". The answer seemed to be very near and elusive at the same time. Still, its core started to form:

> "*I have noticed that there is little, or not enough, attention to the cultivation of a holistic view of the trainee's self, an examination and cultivation of their own personal value (about which there is a lot of uncertainty). Students seem to ask "tell me who you want me to become and how to get there", as a process of acquiring*

external knowledge and skills; the words of Rogers (I think!) that you do not create counsellors but discover them, come to mind. I wonder how external academic knowledge, which comes as a standard, can be combined with internal knowledge when it comes to counselling training. (Research diary, p.5)

Writing down different ideas in my research diary and in the notebook I carried around with me during lectures and seminars, I started an inner dialogue about the "what", the "why" and the "how" of my research project. At the same time I started going to lectures and seminars on mindfulness, noting down my experience:

"we are addicted to the intensity and reference ourselves in terms of our intense experiences, as if life is happening only in the intense moments; is there a way of being that involves resting with the freedom of not being governed by events? My world is being born moment to moment" (*notebook, November 2008*).

This initial phase often involved fighting feelings of excitement, playfulness, confusion and anxiety. In preparation for my project, I note down my apprehension about being a good enough craftsman:

"I feel that I want to build a house, I have a design in mind, but when it comes to exploring different building materials, I become very confused. Should it be mud, straw, brick, glass, slabs of stone and what happens when the "big bad wolf" –in the shape of the scientific committee considering my doctoral thesis (or indeed the research community) comes around?
The architects in my family, my mother and my sister, would say in chorus: "bear in mind the environment; on what soil and what weather and geological conditions you are building your house in; take into consideration the history of the place, the culture, the wisdom of local craftsmen; find what is important for you, the elements you deem essential for the house to have and which reflect your values and your own distinct identity; clarify the design in your mind, be precise about your drawings but also flexible about going back to the drawing board again and again to refine your ideas; finally, don't forget who is going to inhabit the house, their profile and their

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needs, for they are going to be the ultimate test for the house's suitability"!
(Research Diary, p.8)

However, out of this initial phase came a sharper focus on what I wanted to explore and a clear commitment to the process. Thoughts around impact and possible social change (introducing something as new as Mindfulness to Greece) kept me preoccupied as did my relative lack of power as a young female professional in a traditional culture.

2. Immersion:

During that stage several things emerged: I engaged deeper in my own mindfulness practice in my therapist role; I experimented with being more mindful in my own private life; I started meditating more frequently; I attended short retreats and noted down my experience.

For example, I wrote in my research diary about one of my initial experiences of mindful meditation:

> *"Being in a mindful state offers to me no particular "cure" or sense of enlightenment! I do not feel different than my usual everyday self; I do not feel wiser, better, kinder, stronger. Yet there is something different; the difference for me, as a beginner, lies in being grounded in the here and now whether that is wonderful or mundane –it is not important. When my mind finds quiet and seizes to want to be in control and drag me away to places –like a listless little frog jumping from one stone to another- when active thinking sits back and active awareness comes forward then I find a different way of being in the world; of being "with the world" and engaging with it, with judgment and expectation temporarily suspended. It is in those fleeting moments of stillness that I experience a sense of freedom, a sense of limitless possibilities…and it is within this freedom that I can be calm and open. A fizzy feeling of childlike laughter bubbles up inside me."* (*Research Diary p.2)*

I furthermore, began to acknowledge the daily effects of mindfulness in myself and my thinking; rather I started noticing more the periods of my "mindlessness", when I was "absent" from my surroundings and became curious about them, asking more "whys" and "hows" (why am I disconnected now? where did I go? how does that feel in my body?). That

led to becoming more aware of my mind and my body and how they informed my awareness of whatever happened in my personal, professional or academic/research areas. I kept notes of my felt experience whether I was in a seminar at Metanoia or following a session in my own office. I began to notice subtle changes in my role as a therapist and kept entries on my observations (e.g. Research diary p.2)

The continuous observation led to an initial experimentation with introducing short mindfulness practices in my classes before teaching:

> *one student who has come in angry is surprised to discover that the anger that was gripping her stomach has melted away; another, who has been fighting a cold, finds that she gets runny eyes and nose and by the end of the class she is determined to alter her programme and go back home in order to give her body some rest; another student reflects on how difficult it is to keep her leaping mind still and how wonderful it feels when it spontaneously happens for a few moments. In the end, I ask them to write down a few words about their experience (thinking it might become useful first raw material for my project). I leave the class thinking how simple and yet how difficult it is to give ourselves permission to just be (Research diary p.10).*

The immersion phase also took me to co-facilitating mindfulness workshops in Athens. My attention turned to how I experienced the seminars on one level to turning an attentive ear to the feedback from participants in terms of how they found the experience on another level; and also engaging in reflective dialogue with my fellow co-facilitator about what our experience and the experience of our participants told us about mindfulness; I note my initial reactions:

> *"During the seminar, when we all had to report our "emotional weather" I remember saying that I felt like a sunny day with a light breeze; my mood was good, I felt a direct communication with the group, a clear intention -both from my part and theirs- for being there and connecting and an elation; at the same time, the breeze symbolised a movement of energy inside me: I did not feel completely still because a part of my mind was preoccupied with the practical and organisational aspects of the day as well as a worry about how people will feel towards the end of that long day;*

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how they will evaluate the seminar. However, the movement of the breeze also expressed my own excitement about having made it and actually running the first series of mindfulness seminars!" (Research diary, p.13)

I continued to read books on the subject to feed my analytical mind. At the same time, I noticed that I gravitated towards readings on tacit knowing and Jungian theory/dream language and intuition and the body's means of communicating psychic states and needs. I also re-connected with reading poetry and going to art exhibitions; I wrote about this process:

Right now in my researcher-practitioner role I feel not unlike a magpie, collecting in my nest ideas, thoughts, hunches, dreams, images, sensations, experiences, memories, hoping that all of my peculiar treasure somehow makes sense and holds together… I suppose it does, for what appears to be shiny to me -the things that I snatch consciously or not- during my daily life and store within myself for safekeeping are heterogeneous but not unrelated; the Mexican rituals of the Day of the Dead and the existential/Buddhist ideas around mortality and freedom; the journeys of life as depicted in poetry; Jun'chiro Tanizaki's book "In Praise of Shadows", a meditation on aesthetics and the beauty of simple things; Physics and quantum theory; the existential despair, beauty and dark humour of Francis Bacon's paintings; myths and folk tales as symbolic inquiries into the nature of the world; Mindfulness theory and practice…they all exist side by side, each a unique and valuable tool of research and exploration.   (Research diary, p.9)

During this phase I became busy with collecting experiences and "sieving" through them in order to illuminate how they translate in terms of my research project, much like a process of continuous distillation. I used the Professional Knowledge seminars as a way to further deepen my understanding of my epistemology: what is my stance towards knowledge and how do I know what I know.

 I noticed how the more I delved into my awareness of the recording and percolation of ideas and impressions, the more I experienced a shift in my perspective around my experiences of what feels genuine, how I *feel* the congruence and synchronisation with

myself, how and when I *feel* "wholeness". The more my perspective changed, the more what was once considered as stable in my personal life gave way and collapsed. A mourning process began, but at the same time the inner process of building new (felt?) knowledge continues. The construction of tacit, felt, intuitive knowledge is mirrored in a process of deconstruction were given certainties are undone.

The therapist interviews happen at this stage; new ideas are thrown at me! How do they relate, validate or enrich what I already know? What do they offer that I do not know already? What is different? I notice how I relate differently to each interviewer, much like as in therapy, sometimes feeling closer and sometimes more distant; I also notice how I experience reading the transcribed text and use mindfulness to explore the different emotions and thoughts that emerge (see Research Diary). Sometime later, I ventured to present my research interest and rationale in the 3rd Pan-Hellenic Counselling Psychology conference in Crete. I write:

> *In Crete the energy running through me picks me up like a breeze that suddenly flutters my inner self and propels me forward. Things happen within and around me that seem in synchronicity with each other. The energy is buzzing within and around me; my felt sense is that I am where I am supposed to be, after a very difficult winter of trying to keep my head above water in my personal life.*
>
> *On the golden almost summery afternoon before my speech in the conference where I am to present my research topic, I walk in the streets of the old Venetian city of Rethymnon to calm my nervousness down. How am I to talk to Greek psychologists about mindfulness? They have not heard of it, they will think I am telling them something really bizarre, they will ignore it; they will ignore my baby!*
>
> *Immersed in these thoughts, at some point I happen upon sign painted on a wall; it says:* "life is not getting up, eating and going back to bed; life is to be awake when the others are asleep".

Image: Wall paining in Rethymon, Crete

Maybe it is because my mind is full of my research ideas, but it seems to me that this is a very mindful proposition; to be awake, to be aware, to know that there is more to life than routine and habit, going round and round in circles. I feel elated as if I have received an important message from somewhere beyond! I jot it down in a piece of paper and my trail of thoughts fall neatly behind it as if they have found their place. I know where I am now, I have regained my centre, my presentation has found its heart: life is about being awake when the others are asleep! (Research diary p.27-28)

The process at this stage felt like building up a faith in non-rational knowing. I became aware of this "construction work" but it still feels awkward to integrate the two kinds of "knowing": the rational/analytic and the intuitive/tacit. Going through the steps of inquiry I cannot help a feeling of frustration: ideas still feel fuzzy and unformed, it is an elaborate process. At the same time, big shifts happen in my personal life and I find myself faced with separation and divorce. I wonder about the timing –is it accidental that they happen when I am involved in the process of listening more carefully to how I experience things?

3. Incubation

During this stage, thinking and experiencing become more intense but at the same time some clarification emerges. Meditation practice continues to bring up new understandings:

> *Sometimes language is too restrictive in describing emotional states. I observed that I experienced "shades of emotions" and that the effort to identify them created an inner tension which cut me off my present experience; also it did not have any point (why was it important to name them?) so I let go of the attempt to analyse and surrendered to the experience. (Research diary, p.30)*

I become mindful of how I approach the research process and how the threat of my own inadequacy as a researcher interferes with how I perceive the interview material. For example feeling bored while listening to the recordings of the interviews becomes a point of inquiry:

> *Observing the feeling as it rises and falls, I notice the periods where I engage with the flow of the conversation, and hence feel minimally bored, and the periods when I find it difficult to concentrate. What is it about them? I look more closely and I find something interesting: when I feel bored the most, together with the boredom I have a sense of great resistance, I just want to stop listening to the recording! Having noticed the resistance, I probe deeper: I realise that these there are parts of the recording where my internal critic is most audible (Research Diary p.31).*

This process of focusing on understanding, especially when this understanding involves as elusive and nebulous construct as dreams, hunches and intuitions, is not an easy task. During this stage I allow different things to float up to the surface and examine what they tell me. For example, I re-visit the recorded memory of a meditation experience written down in my diary:

> *"In our recent MBSR workshop, during a meditation exercise, my colleague (facilitating the exercise at the time) said "imagine that you will stay here forever". The initial reaction was anxiety and aversion towards the prospect of infinite meditative stillness! My legs became restless and wanted to twitch and my mind was*

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urging me to do something other than just "sitting". I could not stay here forever!!!

[...]

Then a shift occurs. Realising and accepting that I could be "there forever", I let go, surrendering to the experience of the moment; I am not sure exactly what happened to make this shift possible; probably the observation and kind acknowledgement of the impatience made it not so difficult to deal with. An image arose in my head: as I was sitting there motionless, I became an ancient rock by the side of a country road. I stood in the shade, I had lush green moss covering my crevices, my colour was dark grey and brown. I looked like a petrified creature of the woods, something from another time. I could see people in cars swishing past going this direction and that and I just observed them, the movement, there was no need to do anything about that which was happening around me. I experienced a feeling of relief and liberation as if the never-changing infinity liberated me from the need to rush around, make plans, complete things, go from one place to the other. I thought to myself "ah, I can set roots here, how nice it feels!"(p.34)

The experience described above highlights my process at this stage: memories of experiences come up to my consciousness as if inviting me to look at them more closely; as if to say that now the time is right and that I am ready to delve into them. This process is not unlike taking a bit of coal and peeling off layers of soil until it starts sparkling, revealing the luminous clarity of the diamond underneath. Yet, it feels much like a pendulum; the moment of clarity and consolidation takes me to a further level of incubation around new questions. I feel submerged into this wealth of material, sometimes finding it difficult to raise my head above it and I learn to have to trust that I am indeed getting somewhere with all this.

Engagement becomes deeper, I put myself more "out there" as a mindfulness practitioner here in Athens; co-facilitating seminars becomes more systematic. I attend my first long meditation retreat and I become preoccupied with inquiring into the experience of myself and others. How do I feel as a part of this? What feels good and what is a challenge? How are other people finding it? What are the questions that preoccupy them? How is all this making my own understanding of the theory and practice change and evolve? The initial childlike fascination with the approach gives way to a more critical stance towards it, and I

begin to form more concrete ideas around my experience of mindfulness. At the same time, alongside the ideas that are buzzing around in my head, there is another sort of inner knowledge being incubated and expressed in non-linguistic ways. I become preoccupied with how to express this inner non-linguistic knowledge and during the 42nd international meeting of the Society for Psychotherapeutic Research in Switzerland (June 2011) I attend presentations on qualitative research methods and become particularly interested in using drawings as a means of exploration (drawing has been a "language" that I have been using from an early age). The inward domain opens up to an exploration through drawings as well as a systematic recording of dreams in my personal diary. Symbols and images abound in my life. I am unclear about the kind of fermentation that is taking place on a tacit level as it lacks the clarity of the analytical mind and yet I am convinced that this knowledge does inform the mind and the way it perceives things. I notice that my dreams are about change and metamorphosis: searching what my new self looks like, looking for a new ID card and knowing that the old one is no longer valid; dreams of birth are also rife.

Below I present four drawings as representative of the material that has emerged during the incubation period; I discuss my reflections on these drawings and in the next section (Illumination) I discuss how these reflections have informed and developed my understanding of mindfulness.

Drawing 1: "The sleep of reason produces…"

Drawing 1 was made as a "homage" to the works of F.Goya and M.Chagal whose paintings I came across when visiting Switzerland for the conference. The works that impressed me were the following:
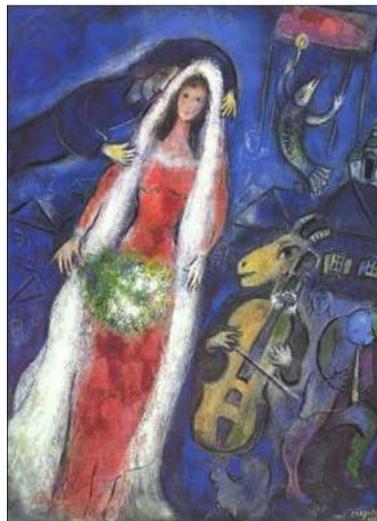
The first is Goya's "The sleep of reason produces monsters" and the second is Chagal's "The village wedding". At the time I made my quick drawing on a bench, I was just making a note of the impression that these two masters made on me. However, revisiting it later as part of my heuristic inquiry, I found that my drawing actually spoke of my own inner process. I wrote:

"Revisiting this drawing now, I can see that I am preoccupied with the distinction between knowing and "knowing"; between reason and tacit, intuitive knowledge. Goya's warning rings bells regarding my own background in a culture steeped deeply into tradition, superstition, religion and old wives' tales; my rational, "scientist" self agrees with Goya - his etching was influenced by the ideas of Enlightenment.

And yet, in my drawing, I question his pronouncement by leaving it open-ended: "the sleep of reason produces..." what? I want to find out what happens when my conscious mind falls asleep and other kinds of knowledge are allowed to surface. In my drawing I have depicted the menacing owls of Goya, but here there are messengers from a land beyond the analytical mind, not fearsome avengers. One owl appears comical, with a stern look, a ball costume and a clock, like another kind of Rabbit, looking to escort me to another kind of Wonderland. Chagall's goat appears as another willing escort to the land of the unconscious; these are allies who speak a language I have to tune into and re-discover. The bride stands alone –a depiction of myself post-divorce?- and is dressed in red, as is also in Chagall's painting. Innocence is shed; white is the colour of romantic illusion and idealised relationships. Red is the colour of truth, of how things really are; there is some pain in being in touch with the truth. The other colours seem to be random (I only had one coloured pencil) but I see now that I have painted the colours of dusk –the point where day becomes night, the mind stops thinking and emotions surface" (Research Diary p.48).

I have drawn clocks growing out of branches like apples; there is the timing of this immersion below the surface and there is also limited time; this door will not be waiting open forever, I need to stop wasting time, my doctoral work is also time-bound. The clocks tic, the clocks are apples, the apple is the fruit from the tree of knowledge according to the scriptures. According to the story, knowledge comes when blissful illusion ends. There is a different kind of knowledge that awaits for me once I learn to let go of "reason".

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In the next three drawings I notice that I am preoccupied with my embodied experience of what is happening to me during my immersion into mindfulness and research (or mindful research?).

In the first drawing, I have depicted a day of anger during a meditation retreat. I made this drawing right after meditating on my experience of anger; the meditation had made me realise that the anger was "chocking" me, and in the drawing I depicted the hot redness around the area of my neck. There was fear there about not being able to express clearly myself about what had upset me because of the immobilising anger. At the same time, the anger had energy (the fiery reds against the blue hues of the rest of the body), a bright energy that was motivating me to act on it. In this instance, I found it very interesting that through meditation and further exploration through drawing, it was my felt knowledge informed my intellect about what was going on. This was a different process to the one where my intellect –fuelled by the present emotion- decides what course of action should be taken. I found that by acknowledging the felt sense, being with it for a while with awareness and kindness while postponing the decision for action, made me respond in a different way, a more *informed* way to what was going on around me.

Drawing 2: "Experiencing anger"

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The second drawing has a different feel to it. Here I have depicted the process of looking within, exploring my internal landscape. The internal and the external landscapes are very similar in the drawing; is it that my internal world shapes the world around me in its image? Is it that after focusing on myself for a sustained period of time, and being in a naturally tranquil environment (an island) the boundaries between the internal and the external start to blur? Is it that wherever I go I am bound to carry my internal world with me and colour with it every new experience?

Drawing 3: "Looking at the world within, the world without"

Reflecting on my drawing, I get a feeling of being in peace, a certain centred-ness. I think that it captures the essence of alignment I felt at the time of making it: the inner and outer landscapes being in tune with each other, a balance and an open conduit of energy flow from within to the world outside and from the outside to the world within. Through this drawing, I am describing how it is to be at this state where I feel that the realms of the worlds from the microscopic, atom-level one to the macroscopic, universal sphere, are in synchronisation with each other. There is an experience of inner groundedness that allows an openness which goes beyond the self. I notice that in the picture I have drawn a red ferry boat. The boat is about movement, about the process, about the fact that even this sense of alignment is temporary because the trip continues to unfold, nothing is static.

The last drawing was done one morning as I sat down to work; usually the emotions that accompany this task are anxiety, fear and self-doubt that exist to a greater or lesser extend every day since I started the doctorate. That morning these familiar feelings were there but were overshadowed by another sensation. I felt this energy buzzing through my body, a whirl of ideas going around in my head, so much so that it was a task in itself to sit down and try to harness this experience in order to think about what I wanted to say. The energy came from my very core, from my belly and I depicted it as a bright current moving through me and creating a little whirlwind over my head – a stream of ideas and things I wanted to write about. What I find fascinating about this drawing is that I have depicted my experience of a creative force as something happening on a gut level and then going up to the head to rain ideas over it. Again, my process tells me that the furnace of my creativity, where raw materials get formed and energy is created, lies at a gut level and only afterwards does it rise to become intellectual knowledge.

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Drawing 4: The energy flow during incubation
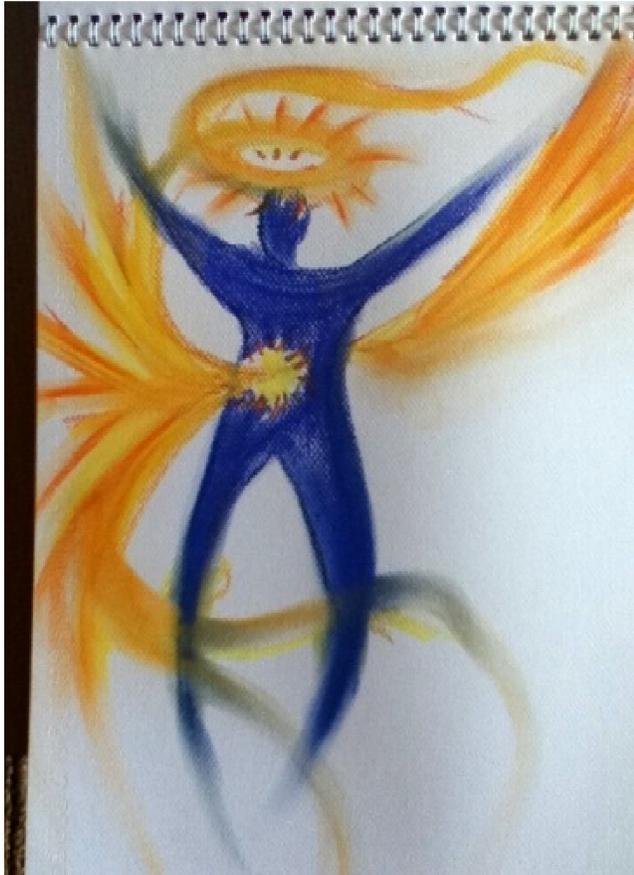
I watch all this inner mobility with fascination but also not knowing yet what the result will be. It all still feels a bit murky and I worry with not making much of a headway. Mindfulness practice helps me be more patient with myself and with allowing things to surface.

4. Illumination

The phases of illumination, explication and creative synthesis that follow contain the gradual distillation of knowledge regarding mindfulness, whilst at the same time further immersions and incubations take place. To me, illumination does not feel like a concrete stage but more like fleeting moments. It comes when I have an "aha!" moment, when

suddenly things drop into a sharp focus and I see clearly how what I am experiencing relates to my research question. The energy that goes through me in these moments is like high voltage (much like in the drawing presented above), my mind starts playing around with the new understanding, refining it and polishing it. Then it becomes easier to recognise a kindred idea in the research literature and feel validated that such an understanding is echoed by other researchers. Checking ideas as they become clearer against the backdrop of other mindfulness research serves more than just encouragement; it is also about placing my experience within the context of the wider dialogue in the scientific community. Is it relevant? Does is add something new or different? Does it clarify or reiterate a concern that needs to be attended? How does my inner process stand within the outer world of knowledge? I discuss in the creative synthesis section the need to place findings of the inquiry in relation to the field of literature on mindfulness and psychotherapy. Below I present the process of illumination in terms of my experience of meditation and drawings.

Illumination through meditation: benefits, risks and reflexive interrelatedness

Here I will focus on the points of illumination that have come from a recent experience of a week-long vipassana meditation retreat as I consider it the culmination at that point of all the varied experience described so far in my personal investigation of mindfulness.

During the retreat, I wrote or drew in my notebook as a means of recording experience. After the end of the retreat followed a quieter period of incubation where I allowed the experience to "settle in", engaged myself in my own meditation practice and drew some more. I did not reflect more on the experience at that stage, but let the knowledge rise up to my awareness at its own time.

I became aware of the function of *time* in a meditation retreat. On the surface, meditation is a tedious and repetitive task that does not alter much from one time to another (the same directions are given by the instructor; the same amount of time is allocated per exercise etc). However, I experienced how when the mind has nothing else to do and the body nowhere else to go but to engage in this experience again and again, then I slowly begin to tune into a deeper level of myself which is less preoccupied with "doing". This point of contact in turn brings clarity and centred-ness. It seems to me that it is a process that cannot be rushed in the sense of "slotting it in" in a day or a weekend. The busy self needs time to quieten, the deeper/experiencing self needs time to rise to the surface. I have felt

that it is important to observe the pace and rhythm needed for this process. It leads me to conclude that in terms of meditation there has to be a commitment of time.

One of the most surprising sensations that I have felt that with time, is when the usual constructs around "who I am" become looser, and my core self resembles more a process than a fixed idea. My being is experienced sometimes as solid and others as in constant flux. I have felt the simultaneous existence of different selves, as if linear time does not exist and I can be my child, adolescent, grown-up, researcher, therapist, private selves are all superimposed on each other. There is a paradox there that somehow feels very natural, a sense of coming back to the essence of my Self and the essence of the world.

I am reminded of a poem that captures that feeling:

When the child was a child
It walked with its arms swinging,
wanted the brook to be a river,
the river to be a torrent,
and this puddle to be the sea.

When the child was a child,
it didn't know that it was a child,
everything was soulful,
and all souls were one.

When the child was a child,
it had no opinion about anything,
had no habits,
it often sat cross-legged,
took off running,
had a cowlick in its hair,
and made no faces when photographed.

When the child was a child,
It was the time for these questions:
Why am I me, and why not you?

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Why am I here, and why not there?

When did time begin, and where does space end?

Is life under the sun not just a dream?

Is what I see and hear and smell

not just an illusion of a world before the world?

Given the facts of evil and people

does evil really exist?

How can it be that I, who I am,

didn't exist before I came to be,

and that, someday, I, who I am,

will no longer be who I am? (Peter Handke, Song of Childhood, extract)

At the same time during the retreat felt challenged, impatient, angry and even bored at times. The ideas that emerged revolved around the "how" of vipasana meditation, which at the particular retreat involved a lot of concentration practice. I noticed how as I struggled with negative emotions, so did other participants, but the instructions were to just name them. The intention appeared to be the dissolution of the Ego (for example, anger seen as an illusion). Coming from a psychotherapy point of view, I was challenged by this proposition. I became aware of the clarity of my own convictions which is that in many cases, and especially with psychically vulnerable individuals, the Ego should not be dissolved (certainly not when one is to return to "ordinary living") but to be strengthened -through compassionate awareness. Experimenting with meeting my difficult experience with patience and kindness, I found that it became easier to let go off. On the other hand, I noticed that other participants who tried to follow more strictly the instructions, became involved in a struggle to "meditate well" which seemed to involve a lot of striving and tension around trying not to engage with their negative experiences and not succeeding.

Through my immersion I have come to realise that what works for me is the clarity and centredness offered by meditation coupled with psychological concepts such as compassion towards and acceptance of the "human condition": not to deny to myself that *I am* human and sometimes *I will* react in a certain way, making it possible to meet my human-ness with the intention to understand it. Therefore, the centrality of self-compassion was a very important lesson that emerged through the process of my inquiry. It has to be noted that

perhaps I would not be able to reach that point of illumination (or not that fast) if this experience was solitary and not within a group. The experience highlighted the importance of the presence of others as a means of constructing my own understanding.

Illumination through drawing

The medium of drawing has unexpectedly facilitated a rich inquiry into my experience. Combined with heuristic inquiry's intention to tap onto the tacit and the practice of meditation, I have found that a rich flow of experiential "data" reached the surface. Through drawing, I became aware of the body as a means of experiencing the world and of informing the mind about that experience. The use of the body in my drawings as a way to connect with different levels of experiencing was a theme that came up a number of times. Other ways of "knowing" made themselves available too, as illustrated by my first drawing which refers more clearly to dreams. Intuition, images, impressions and non-linguistic, non-analytical processes of informing myself about the state of the world inside and outside of me, manifested themselves through drawing.

5. Explication

Heuristic inquiry cannot fit into time frames, I found. When the time to write up approached, I realised that I was still working through material that had come up from earlier stages when I should be moving onto the solidity of the stage of "explication" and the resolution of "creative synthesis". I therefore decided to allow the process of inquiry to carry on to the next phase of my research (Project 2).

In the meantime, I have felt that the lines between heuristic research and mindful awareness have begun to fade. When immersed in heuristic inquiry I have paid attention to everything that comes to my awareness and therefore the process is not unlike a constant state of mindfulness where I non-judgmentally accept, hold and explore whatever appears. When I have been doing mindful meditation, I am not unlike a researcher, patiently and open-mindedly putting myself out there, gathering notes of all experiences and then laying

them side by side to see what will hatch. A thought that begins to form is that mindfulness practice and heuristic inquiry could be complementary to each other as a way of researching into individual experience. What particularly draws me towards this combination is that mindfulness meditation renders the act of heuristic exploration easier; by bypassing the categorisations of analytical mind and the condensation of experience to fit linguistic forms, meditation allows the intuitive/tacit material to flow more freely into consciousness.

An example of this process that happened during the explication phase is involves meditating and drawing on the feeling of "stuckness" when I was writing up my doctorate.

Drawing 6: Being "stuck"

I noted in my diary about the experience:

"*The same situation persists. Each morning I get up with a renewed intention to start writing. It does not happen. Today I decided to meditate instead since I cannot do much else –at least disconnect momentarily from the world of the mind. I discover it is very difficult. I become aware of the constant movement of the mind, of how, in the midst of my immobility there is this frenzied mental activity. My mind rushes around to all sorts of things ranging from mundane to important and upsetting […] I return again to my breath as a desperate attempt to cling to something neutral before my mind draws me back to its whirlwind of thought and unresolved emotion.*

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When meditation ends, I feel like I barely started. I decide to depict whatever comes up and reach for my crayons. I draw aimlessly, a figure emerges...a female figure...the head is tilting to the side, the hands folded in the lap, the legs resting. A figure of tiredness and surrender. My figure. I start colouring it more and more intensely. My movements concentrate on the area of the torso –the chest, the stomach, the belly. Lots of coloured movement there. A flow of energy […]

I notice the passivity in the head and the legs. I am not interested in these areas, they seem to simply exist to complement the picture anatomically but there is no particular movement there. I draw two horizontal lines separating my picture into 3 parts –one part includes the head, another the torso and the third one the legs. "Three climatic zones" […] the zone of the head. The head in the clouds. The sky is dark but not menacing. The torso zone: tropical climate: heat and thunderstorms alternating, even more colour here, more jerky and violent movements with my crayon to depict all the mobility that exists in this zone. Finally the legs: grey is all I can think of. They are not going anywhere. A sharp contrast: legs that are not moving as if stuck in concrete. I notice that emotionally it's the most difficult part to draw.

When it is finished I realise how I feel torn between these three zones: the head is permanently lost in a world of thoughts and cannot be of much use, it cannot focus. The legs are passive, they cannot move. The centre of my system by sharp contrast is full of energy but it is like an electric thunderstorm taking place within a cloud: all this beautiful and exciting energy is exhausted within itself it is not channelled out. I realise that my parts have stopped communicating with each other. […] Hence the legs cannot take me anywhere.

How can I reconnect my core to my head and make them work together again? I realise now that my brain needs inspiration in order to start producing work again and the inspiration only comes from the soul. My soul is alive but lacking the stirrings of Eros... it needs a reminder of how it is to be in love with what I am doing. That's the bridge that has collapsed: the passion and the inspiration it churns up". (Research Diary p.31).

What surprised me was the immediacy of the knowledge once I had started drawing. Had I drawn without meditating, the mind would probably interfere to depict a "logical picture" of what it was preoccupied with. Similarly, if I had meditated but resisted the impulse to draw straight afterwards, I would probably have missed the opportunity to create a drawing that told me what I needed to see about myself. Therefore, I feel that it was the combination of

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these two modes of tuning into myself which allowed the knowledge that was there to express itself. So the process of explication built on the illumination findings that meditation and drawing are two means of exploration into the tacit domain, and brought them forward to suggest that they can be creatively combined as a form of research inquiry. Particular points that have been highlighted are the way that mindfulness meditation and art enhance the heuristic inquiry process; and secondly, that the body can be pool of knowledge about my experience, and that it can often be clearer than the mind. Both these findings seem to suggest an exciting direction in combining heuristic inquiry with mindfulness meditation.

Another realisation that was carried through illumination into explication was what might risky in meditation practice. In terms of the latter, explication involves first the realisation that in times of difficulty or unpleasantness my mind will seek to analyse, understand and possibly change things. Whilst this can be very useful, other times might lead to further "stuckness"; an awareness of the workings of the "doing mind" is important. Secondly, that meditation carries traps of detachment from experience and even from Self which need to be borne in mind.

6. ...and Creative synthesis

I notice how given the time and space to percolate, all the observations I make and carefully record slowly fall into place. The end of this process does not really feel like an end but as reaching a clearing, a place of illumination which however implies that there is more ground to be covered. As I am writing these words I am certain that the exploration of what mindfulness is will go back to yet another level of the upward spiral and onto a further stage of immersion and incubation.

At the end of this process, I ask myself "what is mindfulness for you?" and three answers pointing to different but interrelated dimensions arise. Below I give an overview of these answers as they have emerged from my personal experience. However, as I have written earlier, I am also aware that as a researcher I need to connect my findings with the outer world and see how they fit in the wider sphere of mindfulness literature in particular and psychotherapy research in general. I therefore bring the themes raised in this inquiry –and which have often overlapped with themes in Projects 1 and 2- into the context of the

research field in the Discussion Chapters of this paper. In the following section I make specific note of when research on a particular theme is discussed in other chapters.

<u>1. Mindfulness is a form of inquiry</u>

I have found it very exciting that in this project and without explicitly setting out to do so, my inquiry has led me to a combination of Moustakas' (1990) heuristic inquiry with mindful meditation. As I wrote earlier I have found that mindfulness and heuristic inquiry overlapping for me as they share a lot of ground in common notwithstanding the basic intention to eschew the "rational mind". I have experienced mindfulness as an enrichment of the heuristic method, with the inclusion of meditation. I have welcomed heuristic inquiry's invitation to come in contact with other forms of knowing and found that meditation gives me a more immediate access to those: tacit knowing, intuition, images, hunches etc.

The reason why this immersion becomes easier in meditation is I believe, because meditation bypasses the linguistic-analytic part of the brain and therefore accesses more readily other sources of knowledge within the self. I have recorded at length instances when this "other knowing" emerges through my diary entries and I have found that the combination of meditation and other means of non-linguistic expression such as drawing and dreams brings to the foreground a wealth of information which my mind would not necessarily have grasped nor acknowledged to their full extend. I feel there is always a tendency for the mind –for my mind- to make coherent stories; therefore, I believe that in its effort to do that it would probably focus on *some* information and edit out another which would not fit logically into the narrative of the story being told.

Meditation, by bracketing off the rational mind, allows for other shades of experience to rise. It also carries the invitation of open, curious, non-judgmental awareness to other realms, beyond meditation. Therefore, I am able to acknowledge upon looking at a painting, or reading the lines of a poem, that something inside pulsates in recognition, a felt sense rises that communicates directly with the image or the lines on the paper –and it is something that does not directly involve the thinking mind. It is this sense of open reception and interaction with stimuli that I have found mindfulness practice to lay the ground for so that heuristic inquiry can grow. Furthermore, the combination of mindful meditation and non-linguistic means to describe experience (in my case mostly dreams and drawings but

also hunches and instances of synchronicity in some occasions) brings to the surface the "raw material" of intuitive or embodied knowledge. I discuss the function of meditation as a distinctively different process of relating to experience and related research in Chapter 9 Project 2 Discussion.

At present I am aware of only one proposed model of using mindfulness as a research tool: this is the Mindful Inquiry model proposed by Bentz and Shapiro (1998). As a result of the heuristic process, I decided to carry mindfulness inquiry into Project 2 and have employed this model in order to analyse Project 2 Results (Chapter 8). The authors identify four distinct influences in mindful inquiry: Buddhism, phenomenology, hermeneutics and critical social theory (Ibid). My own experience of combining mindfulness with heuristic inquiry has led me to explore another dimension in terms of working with mindfulness in research (it seems to me that mindfulness *is* research). It would be interesting to see if other practitioners start to experiment with this particular combination so that a discussion on if and how mindfulness facilitates heuristic exploration can take place.

2. Mindfulness is a way of connecting with my core

As I have described above, this inquiry has required another way of relating to myself and to my experiencing. Mindfulness invited an acknowledgment, a re-introduction and an acceptance of my core self. Being accepting sounds easy, perhaps even expected from a trained counselling psychologist, but it has proven to be quite difficult in practice. My sense of acceptance has been tested by many life challenges throughout the course of this doctoral project which ranged from the personal (getting divorced) to the professional (stopping teaching) to the social (Greece being plunged into a financial, political and social crisis).

Behind the practices of mindful and heuristic inquiry lay an intention of kindness and compassion which provided the basis of how experience was approached. Real life acceptance of the imperfection, the unpredictability and the uncertainty brought up issues of vulnerability for me. Learning to embrace vulnerability and learning to use it as a fertile ground upon which I can cultivate new understandings, compassion, ways of being with myself and with others has been one of the greatest challenges of this endeavour. It has also helped me connect to my "being human" and to realise that the state of "full human being-ness" cannot exist without involving an acceptance of vulnerability. I have written

about this finding in Chapters 6 and 10 (Discussion of Project 1 and 2 respectively) as this was an experience common with participants in the research studies of this paper. Furthermore, the cultivation of acceptance quality of mindfulness that is abundant in literature as many participants offer similar experiences.

At the same time, connecting with one's self is not always easy nor straightforward. I have mentioned before the thoughts that occurred to me regarding the risks of meditation practice. I have devoted some space in Chapters 6 and 10 to present the difficulties and the risks that mindfulness practice might entail and which have been highlighted in research. Still, we do not know much about it and further exploration of the field is needed.

My personal difficulty has been finding it challenging to integrate Buddhist teachings with my own (western? south-eastern European?) thinking, as they mostly talk about life as suffering. Unlike Buddhist teachings I do not see life as suffering. I see it as unpredictable, sometimes deeply painful other times excruciatingly beautiful and even as boring or tedious but not as suffering in any sense. So a part of me wrestled with my Buddhist meditation experience on philosophical terms. I found that I prefer a more secular meditation experience. In the Literature Review and the Project 1 Discussion (Chapters 2 & 6) I have presented some research and comments on the issue of Buddhist vs. secular mindfulness practice. It is certainly a debate that has preoccupied other researchers.

Another part of me however, my inquiry has told me, was actually fighting my own experience: my analytical, psychological self wanted to assert herself, to argue for or against ideas to engage with conceptually constructing a frame for my experience. This self could not wait for the retreat to end so that she could start writing about it; this self struggled with the realisation that in essence staying with awareness in the present moment often involved exactly that and nothing more; learning to be with the mundane and ordinary sometimes proved more difficult than being with more intense experiencing.

I am aware that like myself, other people that I have encountered in seminars and retreats desire the sense of inner alignment and harmony that I have sometimes found in meditation. Whilst this is not bad, it introduces the idea of "striving" to be harmonious, which in turn is rejecting of any other experience that I might have if it is not one of alignment and illumination! I do believe that mindful meditation has to be approached with caution as it could potentially enhance avoidance, grandiosity and narcissism instead of diminish them. I am aware that there is often the temptation of the self to act in a "holier-

than-thou" way, to get lost in attractive personal stories of spiritual awakening, equanimity and acceptance, which however only mask less comfortable and acceptable thoughts and emotions. In Chapter 6 I have reflected on this danger as it has been highlighted both by Project 1 participants (mentioning mental health problems in relation to meditation) and by other researcher-practitioners; they have noticed that meditation carries the risk of being used to avoid unpleasant experiences or enhance narcissistic traits (for example see Andersen 2005). I believe that there is the inherent danger that many people, especially traumatised people, might seek "illumination" through meditation exactly in order to avoid looking into their own difficult or traumatic experiences. In other cases, meditation has been found to have a destabilising effect for some people with certain psychic vulnerabilities (Germer 2005; Shapiro 2006). In relation to this risk, Engler (1993) for example, supports that one must first have constructed a self in order to be able to deconstruct it, as discussed in Chapter 6. Allegedly, Jung had pointed out to the dangers of finding ways to avoid coming in contact with one's self and had remarked that:

'people will do anything, no matter how absurd, in order to avoid facing their own souls. They will practice yoga and all its exercises, observe a strict regime of diet, learn theosophy by heart, or mechanically repeat mystic texts from the literature of the whole world, all because they cannot get on with themselves and have not the slightest faith that anything useful could ever come out of their souls'. (in Perez-de Alveniz & Holmes, 2000).

I believe that two important points arise here (which are further discussed in Chapter 9 in relation to the overall findings of Projects 1&2): one is that the kind of meditation employed needs to be carefully considered so that the effects it produces are safe and conducive to building a healthy Ego. Barber (2012) provides a useful example of different kinds of meditation and their aims in order to illustrate that there are different approaches and agendas advocated by each one. He has drawn on sources such as Sufi teacher Gurdjieff (1973) and transpersonal psychotherapist J.Rowan (1993) to illustrate that meditation can include diverse practices not all of which can be used for therapeutic purposes. For example, he refers to the 4 kinds of meditation proposed by Rowan (1993) which aim at cultivating different states of consciousness and out of which only one –the facilitative tradition followed by vipassana and mahavipassana meditations - can be said to cultivate

the broadening of awareness to include all that exists in present moment experiencing (Ibid). I continue the exploration of meditation used for therapeutic purposes in Project 2.

3. Mindfulness as companionship and interconnectedness

Through the process of this inquiry I decided to start a mindfulness meditation group in Athens. It came at a time when my own understanding of what is mindfulness practice started to form and when the participants of Project 2 who were interviewed on their mindfulness experience asked for more mindfulness practice. The timing of the request was not accidental. The socio-political situation in Greece which had started disintegrating in 2009 reached new depths in the autumn of 2011. People who lost their jobs reached alarming levels, new taxes were introduced, the political system collapsed under the weight of a corrupt system that could no longer function. Crime in the city rose dramatically. I have felt that as my country plunged into recession, chaos and uncertainty there was an acute need not only in myself but also in other people for connection and companionship.

I therefore decided to put forth a suggestion for a meditation group; I was pleasantly surprised when a small group formed around this proposition. This was a different proposition from say, a support group. I felt that the need communicated to me (as well as my own need) was not about wanting to explain away the crisis, to share our fears, attribute responsibilities, explore the new reality emerging or our role in it or to reassure one another; it was a need to simply feel "contained" while giving the space to ourselves to find our centre in the eye of the storm. Finding this centre within a context of silent companionship differs from meditating alone. Even though there is little discussion involved, there is a sense of supported discovery and belongingness. As a result, I am wondering whether the "full human-beingness" that I have set out to discover at the beginning of the doctoral journey revolves around 1) the awareness of all that arises in the present, 2) meeting it with acceptance and cultivating compassion towards oneself and others and 3) placing all this within a sense of interrelation and inter-connectedness with the Other (as also discussed in Chapter 6, with regards to the therapists' need to have a meditative context).

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Reflections on the process of inquiry into mindfulness

At the end of this doctoral journey, I believe that I have reached some new clarity. I feel better able to discuss what mindfulness practice is and isn't from the standpoint of my own experience. At the same time, I have been made more aware through the experiences of the projects' participants how the lived experience of mindfulness encompasses a vividness, a freedom, an embodied sense of the self and even sometimes a conflictual contact with the self (experiencing both difficulty and compassion; boredom and freedom; stillness and change) that it is very hard to convey on paper. Therefore I have been concerned about the degree to which I have done it justice, knowing that the essence of the experience is hard to be captured linguistically. I have been referring to findings such as "awareness", "acceptance" and "wholeness" but have I managed to communicate some of the essence of these concepts as experienced by the projects' participants and by myself?

Challenges have also been related to writing in my non-native language and living in an environment which is culturally quite different from the environment in the UK and the world of mental health practitioner-researchers there. I have therefore wondered whether the challenges I face are not linguistic but cultural –how I conceptualise my subject matter whilst moving back and forth between the two cultures- not only speaking two different languages but also donning two different cultural hats in the process. I believe it would have added to the layers of my research to illuminate more (be more mindful of) this undercurrent process that has been at work all along.

 My experience of writing up the doctoral document echoes that of Swan (2004) who identified the difficulty in retaining a mindful, non-judgmental and compassionate stance throughout the write up of his mindfulness research whilst being aware that the result would be read and evaluated by others. I have encountered a similar difficulty which has been connected both to the fear of the audience that I knew would read and assess my own research in time, but also to the concern of whether I "made sense" in a different language and context. This experience has been briefly mentioned in this chapter when I was made aware of how influential my inner critic cold become even to the extent of sometimes "paralysing" my writer-self for days. Being mindfully aware of this inner struggle has helped if not to expel those fears, to at least contain them and allow this experience to teach me something about staying with difficulty. I agree with the author though that at times this

struggle has rendered me "mindless", being more preoccupied with how my research will be perceived by others (my supervisor; the examiners; other mindfulness researchers) or how well it has captured and conveyed the voice of participants, than of actually mindfully allowing myself to inhabit the landscape under research. Where I have felt less "responsible" towards representing others, such as in this chapter, I have experienced greater freedom and playfulness towards "doing research". This has allowed me to explore new dimensions in using mindfulness as a method of inquiry, combining mindful meditation with drawing and heuristic inquiry.

Doctoral Impact

The products

In order to present the impact and products of the doctoral projects, but also in order to represent the chain of events, the collaboration and the involvement of different people (including the project signatories) I have created a diagram which is presented at the end of this section. The entries marked with an asterisk involve actions taken together with my "critical friend" and Athens Mindfulness Centre co-founder Dr.M.Iliopoulou.

In terms of opening up my propositions to the wider scientific community I have already given two conference presentations on my research subject: one presenting my research questions and rationale and making a case for the usefulness of mindfulness for therapists (3rd Pan-Hellenic Counselling Psychology conference, Crete, Greece 2010) and another presenting my preliminary interview results from interviewing therapists who have incorporated mindfulness in their line of work (42nd international meeting of the Society for Psychotherapy Research, Bern Switzerland, 2011) (see Appendix B for abstracts). At the time of writing, I have submitted an abstract for an oral presentation entitled " 'Becoming who you are': the experience of mindfulness in therapists and trainees in UK and Greece and its relevance for counselling training" for the 3rd Joint Meeting of the European and UK charter of the Society for Psychotherapy Research, Portugal, October 2012. I also plan to do another presentation on the 4th Pan-Hellenic counselling Psychology conference, Salonica, Greece, November 2012.

Furthermore, Dr.M.Iliopoulou, my London-based colleague and I have put together the Athens Mindfulness Centre, a project still in its infancy meant to bring mindfulness to Greece. Working on establishing the centre is pretty much a work in progress at present. We have started offering MBSR, Introduction to MBIs, and Mindfulness Supervision workshops: for the past 3 years we have been facilitating a Mindfulness-based Stress Reduction programme once a year and we have been giving introductory seminars on mindfulness-based approaches for mental health practitioners also once a year. We also keep a "mindfulness blog" that we frequently write into and which is currently the only one of its kind in Greece (in Greek: http://athensmindfulness.wordpress.com/).

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We have been invited to do introductory workshops on mindfulness for psychiatrists and psychologists (Hellenic Society for Behavioural Research, February 2011) and for nurses (Eating Disorders Unit, Aeginition hospital, Athens, May 2011; and February 2012) and to discuss the possibility of providing training and support for staff working at the crisis helpline (CMHT unit, Aeginition Hospital, February 2012).

Finally, when I was working at the Hellenic Association for Continuing Education as a counselling trainer (2007-2010) I was asked to develop a short introductory 6 hour class on mindfulness for the benefit of the trainees; this was envisaged to be a stepping stone towards a further integration of mindfulness in the training programme once my doctoral research was completed and I could start working on how such an integration could take place (the head of the counselling department became one of the signatories for my doctorate). Similarly, the Associate Dean of the other educational organisation I taught in (New York College) provided the college space and support for hosting mindfulness training events by the Athens Mindfulness Centre.

All of this has been very exciting and we are still laying down the ground work as mindfulness remains an unknown concept for most Greek mental health professionals and their clients.

Bringing mindfulness-based interventions to Greece has been happening during a very difficult time for the country, which has suffered drastic cuts in salaries and pensions followed by increasing political instability, social unrest and violence. Even though the analysis of the political situation is beyond the scope of this study, it is nevertheless true that I as a researcher do not exist in a vacuum nor remain unaffected by that which is happening around me. Since September 2011 there has been increasing mention fears around the possibility of the country defaulting on its debt and what that would mean for the people. I feel that the pessimism and uncertainty are widespread, on certain days it is almost tangible in the atmosphere. I, of course, am part of all this too and there are days were I oscillate between anger and fear myself.

I could not imagine that all this would be happening when I started my doctorate. At present, and with mine and most people's work sphere imploding, I am increasingly insecure about the future. And yet, I do feel that perhaps now there is a time for solidarity and support. At times of hardship, when fear, despair, vulnerability, alienation are rife, it is exactly when people need to be held and empowered on a community level. I therefore still

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feel that mindfulness is relevant and even more necessary than before, especially for "carers" i.e., for trainee therapists in particular but also nurses, doctors and anyone in general who provides care and support for vulnerable people. I therefore envisage a product that could take the shape of empowering groups of carers via mindfulness in order to be able to help others amidst the continuously changing reality around. In short, I am wondering whether this is the time and place, at least for me in my country, to use my research and therapy practice as vehicles for social activism. Dr.Iliopoulou and I currently exploring the option of making the Athens Mindfulness Centre into a non-profit, non-governmental organisation (NGO) providing mindfulness-based seminars to therapists and carers; also providing supervision, therapy and research on mindfulness-based interventions in Greece.

Finally, as a result of trainee counsellors attending the MBSR programme and the focus group interviews, a fortnightly mindfulness meditation group has started and is currently going strong (facilitated by myself). It is envisaged that the group will be the nucleus of a mindfulness interest group in Greece. As the group grows the shape it takes and the ways it meets the members needs and/or fans out to include other activities could serve as a basis for the organic formulation of a "mindfulness meditation learning guidelines" in Greek for a Greek audience of clients and therapists (there is none at present).

Diagram 1: Doctoral impact and products

Training counsellors

Doctoral Inquiry into Mindfulness

Discussing research project with Greek colleagues

Asked to develop 6hr Intro to MF
by Couns. programme leader/1st Signatory
(date)

Conference presentations
Crete 2010; Bern 2011
Future presentations?
(Porto 2012, Salonica 2012)

Run MF training events in college
-supported by Associate Dean/2nd Signatory (date)*

Student focus groups

Greek Society for Behav.Research invite to give
2day MF seminar for M.H professionals (Feb 2011)*

6hr MF seminar
for M.H professionals
(Feb 2012)*

Meditation group

Invite to speak with
head of CMHT re: MF
for crisis helpline
staff*

Invite to give 2hour MF seminar for nurses
in eating disorders hospital unit (May 2011)*

2nd seminar for nurses (Feb 2012)*

CREATION OF NGO???

- Seminars
- Therapy
- Supervision
- Research

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Epilogue

Mindfulness and full-human beingness: an overview

The quest underlying this doctoral project has been how we can facilitate "full human being-ness" in ourselves as therapists, assuming that only then we can help cultivate it in others. The results of the studies comprising this doctorate have suggested that mindfulness practice can play an important role in this process. In Project 1, exploring how mindfulness was experienced by seasoned therapists I suggested that mindfulness not only facilitates a "wholeness" but also that it offers a "map" of relating to one's experience that leads to greater self-integration. Project 2, through an MBSR programme for integrative counselling trainees I explored the benefits which mindful practice brought to novice professionals struggling to forge an identity, which involved the invitation to "become who you are"; I suggested that the vehicle for this cultivation were qualities closely linked to Kabat-Zinn's "mindfulness attitudes" (2004). The findings open up exciting possibilities to investigate through research and the everyday inquiry of practitioners how mindfulness can be actively integrated in training in order to facilitate a more holistic sense of self. At the same time, I have presented important dimensions that need to be explored in order to meet the challenging task of clarifying the interface between mindfulness and integrative counselling.

Concluding reflections on the process of the doctoral project

"My work is purely autobiographical. It's about myself and my surroundings. It is an attempt at a record. I work from people that interest me and that I care about in rooms that I live and know. I use the people to invent my pictures with and I can work more freely when they are there" (L.Freud, 2007, p.24)

Towards the end of my doctoral journey I found myself in London, visiting a retrospective exhibition of Lucian Freud's portraits. Having always felt moved by the balance between honesty and humanity in his portraits, his words resonated with me as throughout this process I have felt that my inquiry has been autobiographical –tracing the unfolding of my

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own understanding, my own "being". My inquiry revolved around ideas that I "care about" and invited people to explore them collaboratively. It has been an exciting and enriching process of constructing knowledge both intrapersonally (heuristic inquiry) as well as interpersonally (interviews in Projects 1 and 2). At the same time, it has been about myself, my professional role and the way we train others; as a practitioner researcher I have chosen to investigate "rooms and people that I care about".

The doctoral process involved my own experience, explored through the joint use of meditation and drawing; together they became tools with which to tap onto the knowledge of the body, the intuitive and the tacit, another way of "knowing". I found that it was often the case that my felt experience was informing and guiding my mind rather than the other way around. I came across unexpected findings during meditation, such as holding shades of emotions and felt experiences which I was unable to linguistically do justice to. The Greek poet G.Seferis wrote: *«My head, my heart, my body, this family which lives with me and yet I don't know them. I am trying to see the material of this dream; this is the way poetry is constructed".* (1990; my translation).

My own bias towards mindfulness practice could have influenced how I have interacted with the participants and their narratives or with interpreting the results of this study despite my intention to honour the participants' own narratives. I have wondered if at times when I thought "yes, I know what they mean!" in response to a participant's experience, I was not de facto accepting that we were referring to the same thing. I have wondered if someone not immersed in mindfulness like myself, could have interpreted the data. I have written elsewhere (Professional Knowledge Seminars essay, Koliris 2012) about the danger of taking the mindfulness discourse as an absolute truth. I wrote about the experience of a seminar on social constructivism in therapist research (Dr.D.Mair & Dr.D.Meyer, Metanoia, February 2012):

> "The seminar invited me to build an awareness of the variable narratives I have been involved in professionally or personally; I was encouraged to see them not as essentialist facts based on a single truth but as important discourses. I reflected on the danger to consider my own research interest, mindfulness, as the only map of

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facilitating "therapist full human beingness" and ignore that mindfulness theory advocates giving space to multiple viewpoints existing in each moment (Bentz & Shapiro, 1998). Caught in the current excitement about the approach, I ran the risk of taking part in constructing a narrative around mindfulness being the next "miracle cure" and "road to happiness" – an essentialist position" (p.8)

Holding different perspectives in "creative tension" is what a mindful stance is about (Bentz & Shapiro, 1998). It has been an important learning process to extricate myself from my own essentialist narratives and, taking into account my own bias, to be able to acknowledge the existence of different perspectives. I have moved from the enthusiastic stance of someone new to mindfulness to a more critical place where I was able to reflect on potential pitfalls: e.g. the risks around meditation, or the debate around clarifying and "operationalising" mindfulness with the risk of perhaps oversimplifying it (Brown, Ryan et al 2011). In this path I have progressed from an essentialist place, believing that "mindfulness practice is good", to a social constructivist end where I have attempted to see mindfulness as but only one perspective amongst the many in the therapeutic traditions. Then, I have explored the middle ground of needing to establish under which circumstances mindfulness can be both beneficial and distinctive enough to act as an adjunct to the counselling work and training.

Mindfulness in training: "what is essential is invisible to the eye"

The quote above belongs to the timeless children's book by A. St Exupery, "The Little Prince". I have been inquiring about an essential yet difficult to capture quality.

Honouring the psychotherapeutic traditions, to which I belong as a professional, I have suggested that mindfulness practice could provide an interesting enrichment to what we already do in our work. At the close of this doctoral inquiry, I wonder if the quality of mindfulness can ever be taught within a programme that unavoidably involves structured teaching, coursework, assessment and grades. Can one be "successfully mindful" and how could that be evaluated? In the end of Chapter 6 (Project 1 Discussion) I have shared mine and other authors' wish to prevent an "institutionalisation" of the approach which would deduct from its free nature. This is a challenge with which the psychotherapeutic literature

is already familiar with. Schön (1987) spoke of the need to redress the balance between the "artistry" of the practitioner which comes through reflection-in-action and is facilitated by the process of self-discovery and static "scientific research"/ external sources of knowledge. Discussing if and how we can teach other people, he drew an interesting parallel between Socrates and Carl Rogers: "Like Socrates in Meno, Rogers believes that the most important things cannot be taught but must be discovered and appropriated for oneself" (p.92). I believe that it is within the nature of our professional role to cultivate our "wholeness" in order to be able to do the same to others as facilitators of their own discovery. I have made a case for the role of mindfulness in this process and agree with Kabat-Zinn when he emphasises that mindfulness is really about "heartfulness", the presence of heart (Didona, 2009). I started this doctoral project needing to find out what about mindfulness "made sense" to me and others: I have come to realise that there is a vital element, this "heartfulness" that could enrich the process of counselling training by discovering with inner knowing and cultivating "wholeness". The challenge of "how" this heartfulness is cultivated, given the warnings of great teachers about the difficulty around formally teaching what is essential, remains to be explored.

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