

# Mindfulness and ma

What is 'mindfulness' and could its reputed improvement in clear thinking and focus benefit therapists? While some of the fervour around mindfulness may be hyperbole, there is nevertheless sufficient substantive evidence to warrant its advance. In this two-part article, Certified Mindfulness teacher Ronna Moore looks at how it could help you in your practice.

**M**indfulness is everywhere, from schools to hospitals, prisons to corporations, sporting and artistic arenas to 'everyday' living rooms.

It is said to improve communication skills, clarity of thinking, concentration and focus and is recommended for stress management, emotional regulation, general wellbeing, physical and mental performance and be a pathway to transcendent self-awareness and insight. Within clinical settings, mindfulness-based interventions are prescribed for multiple conditions such as anxiety and depression, trauma, chronic pain and cardiovascular disease.

Unsurprisingly, there has also been some push-back. There have been reports of adverse emotional and psychological outcomes and robust critique of the mindfulness research such as the recent article titled 'Mind the Hype'. The popular press has pleaded 'Can we end the meditation madness?' describing it as 'the saddest trend of 2015'.<sup>1,2,3</sup>

Drawing from research and academic literature, this article explores the relevance and implications of mindfulness in the context of massage therapy, either as a possible adjunct to clinical intervention or as a means of professional or personal development for therapists.

First, it is prudent to add a disclaimer ... there is a deep and deepening trove of literature relating to these topics, along with an animated discourse among academics, educators, clinicians and scientists. This renders it impossible to do other than present a bare bones account. For this reason, in addition to specific references pertaining to this article, there is a shortlist of suggested further reading with part 2 in the next issue.

While many massage therapists may already be familiar with or engaged in mindfulness practices, for the purposes of background, the major characteristics of mindfulness are outlined here.

## So what is mindfulness?

Just like 'massage', the word 'mindfulness' is an umbrella term with multiple meanings depending upon the context. And, just like massage, the story of mindfulness reveals a deep and multi-stranded path. It is both very old and very new. In the words of Rick Hanson, 'the modern version of mindfulness, informed as it is by emerging science, owes a deep bow to ancient wisdoms and contemplative traditions'.<sup>4</sup> In the context applied here, the meaning of 'mindfulness' derives from a nineteenth century translation of *sati*, a Pali word from the Theravada Buddhist tradition.<sup>4</sup> Among many different approaches to mindfulness and many different practices within each of these, the relationship to Buddhism is in some cases overt and, in some, barely discernible. The most well-known of the current mindfulness programs, Mindfulness Based Stress Reduction (MBSR) is presented as a secular program yet retains echoes of past traditions.

Jon Kabat-Zinn, a molecular biologist and student of Buddhism, founded the Stress Reduction Centre as part of the University of Massachusetts Medical Centre in 1979 and it was there that the MBSR program was conceived as a means of assisting chronically unwell patients, a service which continues today.<sup>5</sup> There is no doubt that this program has contributed to the popularity and credibility of mindfulness throughout the Western world. Its standardised design, its origins in a high-level clinical and research institution and its subsequent widespread distribution has meant that much of the mindfulness research to date has focused upon the MBSR program. A number of other target-specific mindfulness programs are derived from this model, including Mindfulness Based Cognitive Therapy (MBCT) and Mindfulness Based Cancer Recovery (MBCR). Home grown Australian mindfulness programs also have a strong presence.<sup>6</sup>

The recent surge in interest in mindfulness has been propelled in part by its intersection with the proliferation of the neurosciences, neuroanatomy, neuroendocrinology, psychoneuroimmunology, psychobiology among them. The knowledge flowing from these fields of study has contributed to a profound reconsideration of the Western tendency to view the mind and body as separate. What Aristotle may have known is no longer dependent upon the intuitive power of a Philosopher King. Our emerging understanding of the complexity of the inter-relatedness of the systems of the human body is orienting all those involved in health promotion towards an integrated, holistic model of care. As a mind-body practice, mindfulness sits comfortably within this framework, conferring its benefits across the biopsychosocial domains of human experience.

**'Mindfulness is the intentional cultivation of non-judgemental moment to moment awareness.'**

Jon Kabat-Zinn.

**'At its simplest, mindfulness is the practice of paying attention, knowing where our attention is and being able to choose where to direct it.'**

Craig Hassed.

**'Mindfulness is not a technique, but rather, a way of being.'**

Jon Kabat-Zinn.

Paying attention is, of course, a naturally arising capacity with which we are all familiar. However, the human mind, with 1.1 trillion or so neurons, has a tendency to be unruly, giving way to rumination and distraction and is easily side-tracked by reactive emotions, thoughts and feelings, which themselves may lead to unhelpful habits, patterns of unskilled

# assage therapy

behaviours and unmanageable stress. Fertile ground for the practice of mindfulness.

Mindfulness rests upon a suite of informal and formal practices, with meditation being its foundation formal practice. Different mindfulness-based programs may suggest different kinds of meditation, depending upon the context of the program or its intentions. But the grounding principle of all practices is to stabilise attention on what is happening in the present moment. This deep engagement with the here and now is combined with an attitude of acceptance and openness, allowing thoughts and emotions to come and go, without cognitive evaluation, elaboration, criticism or identification.

It is paying attention, but in a very particular way. The 'be here now' process of gently returning over and over again to the object of attention, the breath, for example, is not just about learning powers of attention. Rather, it is the embodied experience of 'growing' patience, equanimity and kindness.

It is commonly observed that one of the first outcomes of practicing mindfulness is the ability to move out of an aroused, activated, stressed state into a calmer, regulated, reflective state from where responses to experiences arising in the world are in accord with the best of oneself, rather than the worst.

## Finding 'the still point in the turning world' – T. S. Eliot.

Such outcomes are congruent with what is now known about how the brain, mind and body function. As brain plasticity is known to be receptive to persistence and repetition, we effectively become what we pay attention to, 'neurons that fire together, wire together' or 'states become traits'. The eight-week programs set the groundwork for practice, but it is through the continued practice of mindfulness that substantial change, in both the brain and the experience of self, can be fully realised.<sup>7,8</sup>

## The evidence base for mindfulness

- Self-regulation, resistance to distractions, impulsivity<sup>7,10</sup>
- Creativity and problem solving and reflection<sup>11,12,13</sup>
- Focus, memory, cognitive performance, executive function<sup>8,14,15,27</sup>
- Information processing<sup>16</sup>

- Anxiety and depression<sup>17,18,19,20,21</sup>
- Immune function<sup>22</sup>

## Observed effects of mindfulness on brain structure and physiology

- Increased grey matter in the insula, hippocampus and prefrontal cortex (impacting self-awareness, interoception, empathy, executive function, inhibition of the amygdala)<sup>23,24,25</sup>
- Reduced cortical thinning with ageing in the insula and prefrontal cortex<sup>25</sup>
- Preserved telomere length<sup>26</sup>
- Increased activation of the left frontal regions<sup>24</sup>
- Reduction in the size and number of neurons in the amygdala<sup>28</sup>
- Down regulation of the ANS and HPA axis and threat activation systems<sup>4</sup>
- Eliciting the relaxation response.<sup>23</sup>

## How might mindfulness contribute to massage therapy?

One way of thinking about this is to test the various practices of mindfulness against the framework of the heart of what we do, the therapeutic relationship. In the framework recruited for the purpose here, there are three components. What the therapist does (skills and techniques), how these are delivered (the therapeutic dyad) and who the therapist is (values and virtues).<sup>30</sup>

## Mindfulness and techniques

While it is likely that mindfulness might benefit the massage therapist through improving work-related skills generally,<sup>8,27</sup> there may be potential for more specific integration. As a mind-body conceptualisation, mindfulness programs include body-oriented practices and in doing so, share ground with a number of body-based disciplines which have mindfulness characteristics. Modalities such as Yoga, Feldenkrais, Pilates, Mindful Body Awareness Therapy (a massage therapy approach), Body Psychotherapy, Somatic Psychotherapy and Hakomi, all share the premise of an 'embodied mind' or a 'mindful body'.

Within the MBSR program, yoga is typically incorporated as a key body-oriented practice, 'while another is the Body Scan. In this practice, the focus is the cultivation of body awareness

and, in particular, the interoceptive features of body awareness.

Interoception is described as being the capacity to perceive and discern sensations and feelings from within the body, heartbeat, pulses, muscle sensations. From neurophysiology, we have learnt that there are benefits in body awareness in general and in interoception in particular, with such findings having an impact on a range of clinical interventions.<sup>31,32,33</sup>

'When body awareness is defined as the ability to recognise subtle internal body cues, preliminary evidence suggests that it may be useful in the treatment and management of such conditions as chronic low back pain, and post-traumatic stress disorder'.<sup>31</sup>

A recent study by Fischer et al has confirmed the effectiveness of the MBSR Body Scan as a means of improving interoceptive awareness.<sup>33</sup>

The Body Scan is similar in form to the well-known Progressive Muscle Relaxation practice but without the invitation to relax at each point in the body. Rather, the invitation is to simply attend to perceptions, internal sensations, feelings and thoughts as the focus of attention moves through the body: to observe, to notice, to label. It appears that this process facilitates changes in how a person may relate to and respond to sensations, pain for example, and that this 'felt sense' of the body serves as a conduit for positive self-organising and self-regulatory mechanisms.<sup>34</sup>

Perhaps, in light of this, in addition to the body-awareness elements inherent within assessments and treatments, the outcomes of massage therapy may be amplified by the 'folding in' of additional practices specifically addressing interoception.

This might include: minimising conflicting or distracting sensory stimuli (such as the voice!) in order for an interoceptive process of awareness to unfold or resourcing clients with an extended 'felt sense' vocabulary to assist them in the labelling of sensations and feelings.

*In the next issue ...Part 2. Both massage therapy and mindfulness programs are benefiting from a strengthening conceptual base, informed by robust science, adding credibility to their effectiveness in supporting the wellbeing of the people they serve. Part 2 includes a suggested reading list.*