

Mindfulness in Education

Thinking it through

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8th September 2017

Aim

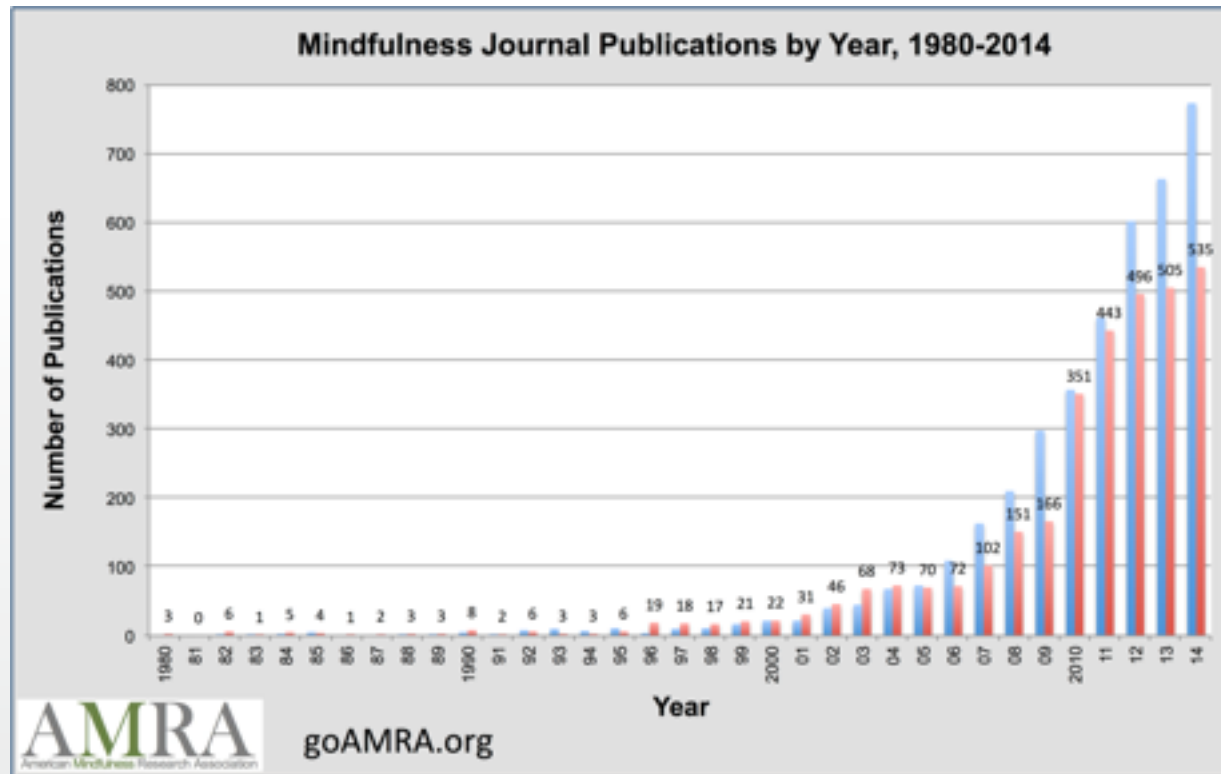
1. To provide you with a list of points to think about when considering the utility of mindfulness in your institution
 1. I will use Southampton medical school, and **thinking through** how it could support our students, as an example

Why do we want/need this?

First question!

Dobkin, P. L., & Hutchinson, T. A. (2013). Teaching mindfulness in medical school: where are we now and where are we going?. *Medical education*, 47(8), 768-779. McConville, J., McAleer, R., & Hahne, A. (2016). Mindfulness Training for Health Profession Students—The Effect of Mindfulness Training on Psychological Well-Being, Learning and Clinical Performance of Health Professional Students: A Systematic Review of Randomized and Non-randomized Controlled Trials. *Explore: The Journal of Science and Healing*. 3

Growing evidence base



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<https://goamra.org/resources/>

Why do we want/need this?

1. Help students with the **transition** to university
2. Address student **distress**
 1. Manifestations: stress, depression, burnout
 2. Potential causes: adjustment to med school, ethical conflicts, exposure to death/suffering, student abuse, personal life events, debt
 3. Consequences: impaired academic performance, cynicism, academic dishonesty, substance abuse, suicide
3. Enhance academic **performance**
4. Make students aware of how mindfulness may benefit **patients**
5. **Support** students to become **resilient** doctors
6. Think about the **impact** doctors have on patients – beyond clinical skills

¹Postareff, L., Mattsson, M., Lindblom-Ylänne, S., & Hailikari, T. (2016). The complex relationship between emotions, approaches to learning, study success and study progress during the transition to university. *Higher Education*, 1-17. ²Dyrbye, L. N., Thomas, M. R., & Shanafelt, T. D. (2005). Medical student distress: causes, consequences, and proposed solutions. In *Mayo Clinic Proceedings* (Vol. 80, No. 12, pp. 1613-1622). Elsevier. ³Mrazek, M. D., Franklin, M. S., Phillips, D. T., Baird, B., & Schooler, J. W. (2013). Mindfulness training improves working memory capacity and GRE performance while reducing mind wandering. *Psychological science*, 24(5), 776-781. ⁴Fjorback, L. O., Arendt, M., Ørnbøl, E., Fink, P., & Walach, H. (2011). Mindfulness-based stress reduction and mindfulness-based cognitive therapy—a systematic review of randomized controlled trials. *Acta Psychiatrica Scandinavica*, 124(2), 102-119. ⁵Singleton, O., Hölzel, B. K., Vangel, M., Brach, N., Carmody, J., & Lazar, S. W. (2014). Change in brainstem gray matter concentration following a mindfulness-based intervention is correlated with improvement in psychological well-being. *Frontiers in human neuroscience*, 8. ⁶ Dobkin, P. L., & Lucena, R. J. (2015). Mindful medical practice and the therapeutic alliance. *International Journal of Whole Person Care*, 3(1).

Why do we want/need this?

1. Help students with the **transition** to university

2. Address

1. There are lots of different reasons why we may wish to bring mindfulness into our universities
2.
 - Different departments/individuals may have different views on this – dialogue is important!
3.
 - This question isn't just about the student

s, exposure

academic

3. Enhance academic **performance**

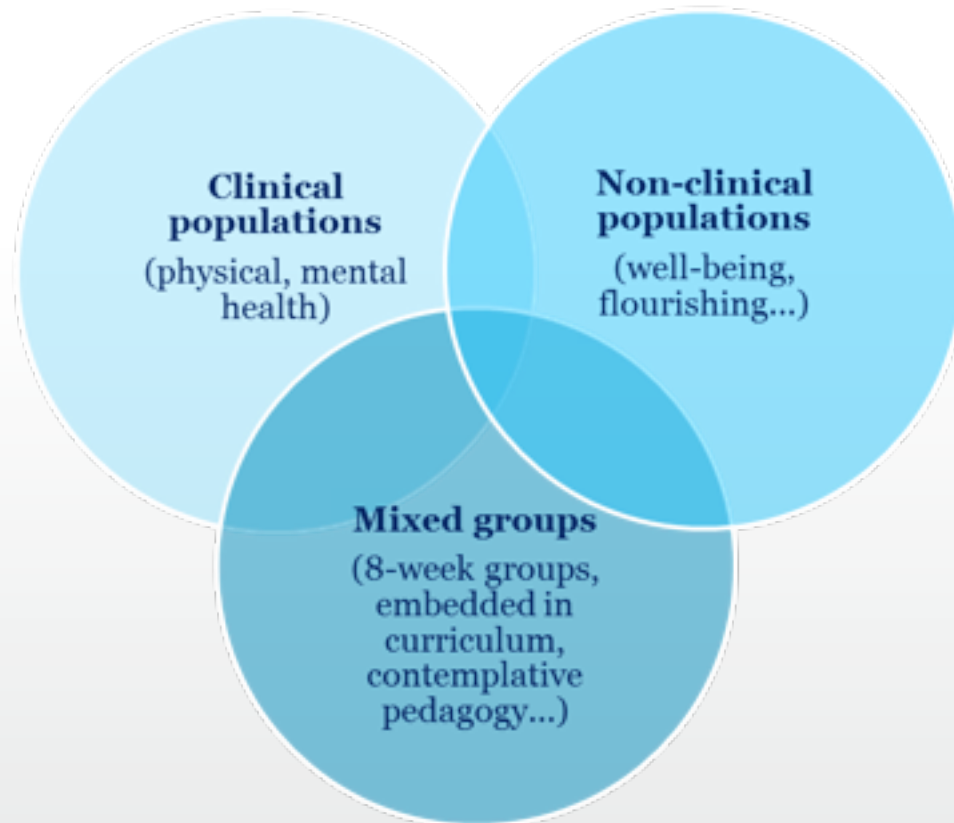
4. Make students aware of how mindfulness may benefit **patients**

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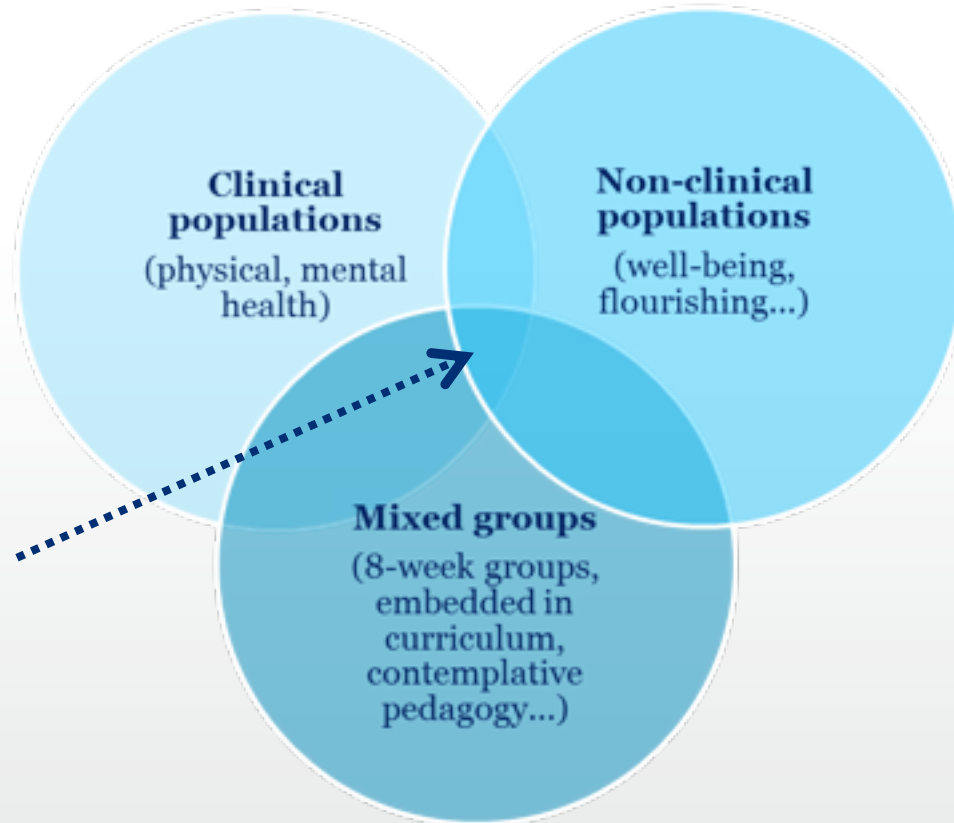
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What do our students need?



What do our students need?



Which approach?

1. **MBSR, MBCT, Breathworks, MSC**
 1. MBSR, MBCT, Breathworks, MSC
 2. Taught by mindfulness teachers (clinical & non-clinical)
2. **Health Enhancement programme**
 1. Health Enhancement programme
 1. Staff trained to support students
3. **Mindfulness-Based Coping with University Life**
 1. Mindfulness-Based Coping with University Life
 1. Delivered by mindfulness teachers and HE staff Body-Based
4. **Yoga, Tai-Chi, Body in mind training**
5. **Body-Based**
6. **Body-Based**

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Which approach?

1.

It may be that more than one approach is helpful—students have different needs and may engage via different 'hooks'.

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2.

Yoga, Tai-Chi, Body in mind training

3.

Note that practitioners and researchers are often very passionate about their particular approach. My own take is that this is often very personal for people, most practise themselves and feel very connected/loyal to a certain group/approach.

Body-

2. Yoga, Tai-Chi, Body in mind training

4.

Contemplative pedagogy

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How do we deliver any of this?



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How do we deliver any of this?



One-to-one



Group/Community



Complex/Multi-faceted

UK Network for Mindfulness-Based Teachers. Good practice guidelines. <https://www.mindfulnessteachersuk.org.uk/pdf/teacher-guidelines.pdf>

Thinking it through: Getting started

1. Why do we want/need this?
 1. Likely to be many different reasons – being clear that you're not clear is a good start!
2. What are the needs of our students (clinical/non-clinical)?
3. Which approach(es) do we want to take?
 1. Established programme, adaptation, lifestyle, embedding approach in teaching, body-based?
4. How will we deliver?
 1. Face-to-face, blended learning, online
 2. One-to-one, small groups, whole year/programme/university
 3. Who should deliver it – mindfulness teacher (staff/bought in), existing staff (not trained), apps/online?

Thanks!

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