

Using Mindfulness Based Cognitive Therapy for Emotional Tolerance and Mood Relief with Men

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Mindfulness means paying attention in a particular way
On purpose
In the present moment
And non-judgmentally

Jon Kabat Zinn¹

A Man Like John

John² was angry when he arrived for his fourth counselling session. “The bird” at welfare had accused him of beating his children and he was beginning to realise that it would take at least a year before he had his “family together again.” He was also having difficulty continuing a repayment to Centrelink, difficulty finding work, and was feeling lost and lonely living alone. “Can’t they see I’ve changed, I’m not going to get angry to the extreme again. I’m determined it’s not going to happen.”

We explored how John had coped with stressful meetings and phone calls during the week - how he had “kept his cool” with welfare and Centrelink, what this said about John and how his new rulebook was helping him to stay on track.³

Throughout 40 minutes of the session John remained angry, speaking energetically, clenching his fists, and sitting rigidly in his chair. I could sense the tension in the room and in my own body.

¹ From “Mindfulness Based Cognitive Therapy for Depression” by Segal et al, page 121.

² “John” is not an individual client. The description given here is representative of sessions I have had with several men who were challenging their violent/abusive behaviours. I have also used a variation of this approach with clients who were dealing with other issues.

³ My work with men who are challenging their violent behaviour is informed by the work of Alan Jenkins, Ken Mc Master and the “Stopping Violence Groups” program materials.

Every 10 minutes or thereabouts I stopped John and asked him to rate his anger, to describe what he felt and what he was sensing in his body. Initially he rated his anger at five out of ten and gave descriptions of tension in his stomach and heat rising to his head. I also told him briefly what I noticed. After each of these short assessments we continued to explore his response to the difficulties he had experienced.

It was an uncomfortable 40 minutes but I believe that it was worthwhile for John. Up to this session he had claimed that “the anger” went from zero, where he felt calm, to ten, where he “lashed out”, in less than a minute. John was surprised when I reminded him of this. We spent the last part of the session exploring the implications of John’s ability to tolerate “the anger”, as it was happening, and how this ability could help him in dealing with frustrating situations.

In the session, that I have described, John was able to experience “the anger” in my presence, in the present moment and without lashing out in any way. This was a unique experience for him. Recently Daniel Stern wrote about the importance of this type of lived experience.

In and of itself, verbally understanding, explaining or narrating something is not sufficient to bring about change. There must be an actual experience, a subjectively lived happening. An event must be *lived* with feelings and actions taking place in real time, in the real world, with real people, in a moment of presentness..... The idea of presentness is key. The present moment that I am after is the moment of subjective experience as it is occurring – not as it is later reshaped by words.⁴

John was able to stay with and tolerate his emotional response to difficult recollections in counselling with me. In addition, I believe that he also had the opportunity to learn to meaningfully organize his response to what he had previously considered unbearable. Barry Magrid, a psychiatrist and psychotherapist who is also a Zen teacher,

⁴ “The Present Moment” by Stern, Preface, page xiii

writes about this aspect of mindfulness practice in meditation and in therapy.

Like analysis, meditation trains us to stay with, tolerate, and explore thoughts and feelings normally felt to be too painful or frightening to endure. I call this the *structure-building* aspect of practice. By “structure,” I simply mean the capacity to tolerate and meaningfully organize our emotional experience. The absence of this capacity is reflected in the subjective sense of being overwhelmed by experience or of intolerable anxiety in the face of certain feelings,⁵

A man like John will need more practice to increase his capacity to tolerate and meaningfully organise his emotional responses. Practice in counselling or in groups, and practice in everyday situations.

Mindfulness Based Cognitive Therapy (MBCT) Groups

In addition to using mindfulness practice in counselling, I have also facilitated 5 groups for men dealing with depression, anxiety, and chronic stress using explicit MBCT practices.⁶

During these groups, men often tell me that their thoughts “brought on the depression” or “made it worse.” Mindfulness practice helps in “decoupling the pain from thoughts about the pain.”⁷ And therefore breaks the cycle of thinking that starts or increases moods. By practicing mindfulness regularly men can develop the capacity (what Barry Magid calls structure building) to allow distressing thoughts, feelings or body sensations without reacting to them. They learn “to look at their thoughts, to stand back from their thoughts, and to look at alternatives.”⁸

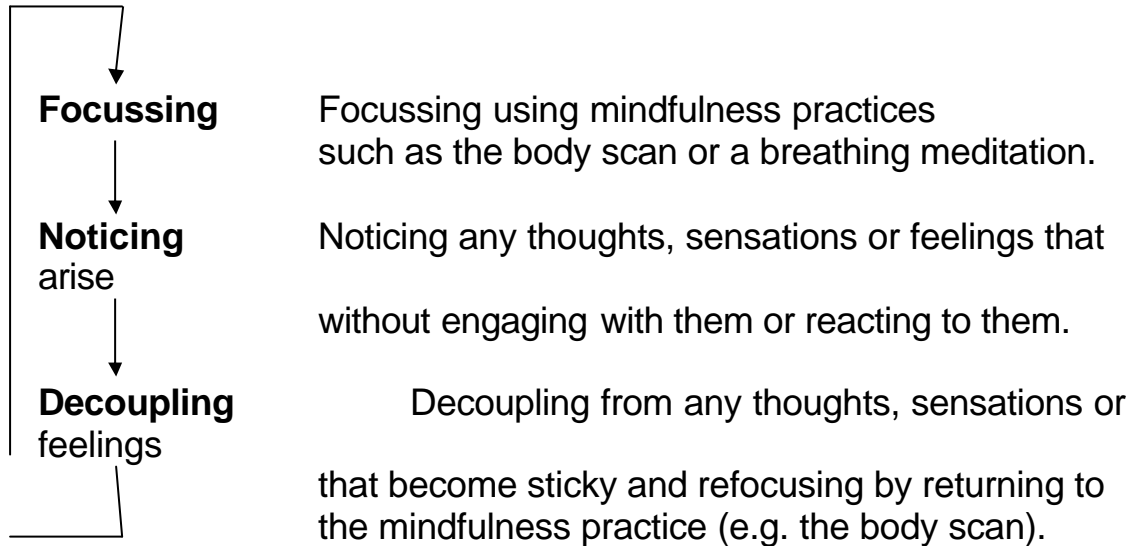
⁵ “Ordinary Mind” by Magid, page 103

⁶ Many of the practices that I use are included in “Mindfulness Based Cognitive Therapy for Depression” by Segal et al

⁷ Mark Williams in conversation with Norman Swan on “The Health Report”, broadcast Monday 13 May 2002.

⁸ Mark Williams in conversation with Norman Swan – as above.

With groups I introduce mindfulness practice using a three phase model.



When men start practicing mindfulness most of their energy goes into focussing and remaining focussed and many feel that they are making very little progress. They also get concerned because they have little time free of thoughts. However, once they are focussing some of the time and noticing some of their thoughts, sensations or feelings they are being mindful.

After his first body scan one man complained that he was unable to relax, that he had spent most of the time in pain and struggling not to move or scratch himself. When this happens I usually start by asking the man to elaborate on what he noticed – thoughts , feelings, body sensations, the urge to move, what he did, what he noticed that was different to normal. I may also say that there is no “right” or “wrong” when practicing, and that noticing the urge to move and even moving and scratching can be done mindfully.

It takes time for the men to realise that the purpose of mindfulness is not to relax, have a calm mind or to feel good. The aim is simply to focus, notice and decouple, and thereby get a wider perspective on the passing events in the mind. During the feedback following practices, we focus on what they have observed and how they have decoupled from persistent patterns. By the fifth or sixth session most

of the men realise the importance of relating differently to emotions and moods.

Two Ways the Mind Relates – Being and Doing

With groups it helps to distinguish between the Doing Mode and the Being Mode – two ways the mind relates to the contents of consciousness. When we are in Doing Mode we see that things are not what we want them to be. In this mode of mind we will work hard to resolve the discrepancy between “what is” and what “should be”. We try to resolve problems, achieve goals, and understand our lives and the universe. meaningfully organise his emotional responses

When we are in Being Mode the emphasis is on “accepting” and “allowing” without trying to change the way things are. When we are in the being mode there is no need to achieve goals, reach a certain standard or evaluate what is happening.

	Being Mode	Doing Mode
Emphasis on	Noticing Allowing Accepting Experiential understanding Wide focus of awareness	Achieving Solving Efficiency Intellectual/technical understanding Concentrated focus of awareness
Limited when	Getting the job done	Dealing with emotions, moods and feelings
Extreme	Passive Conforming Manipulated by others	Target fixated Driven Struggling and striving

Mindfulness practice is primarily about being (accepting and allowing) but it also involves some doing (e.g. focussing and refocusing).

Both being and doing are necessary in everyday life. What is important is the ability to shift between these two modes, and the ability to be as mindful as possible while in doing mode (e.g. being mindful in relationship can help to shift the focus from problem solving to listening/dialogue). There is increasing evidence that mindfulness practice helps in many areas.

Origins of MBCT and Research Findings

Jon Kabat-Zinn's Stress Reduction Program at the University of Massachusetts Medical Center, uses various mindfulness practices (e.g. breathing exercises, body scans and yoga stretches). A recent article in Time Magazine describes how Kabat-Zinn founded the program in 1979 and how he has been trying to find a more scientific demonstration of the healing power of meditation. The Time Magazine article goes on to say that:

Over the years he has helped more than 14,000 people manage their pain without medication by teaching them to focus on what their pain feels like and accept it rather than fight with it. "These people have cancer, AIDS, chronic pain," he says. "If we think we can do something for them we are in deep trouble. But if you switch frames of reference and entertain the notion that they may be able to do something for themselves, if we put very powerful tools at their disposal, things shift extraordinarily."⁹

Initial research has shown that mindfulness can also help in reducing a variety of mood difficulties and chronic stress, and can increase emotional tolerance for people who have suffered repeated trauma. For example, Marsha Linehan considers mindfulness skills central in treating people with borderline personality disorder.¹⁰

Mindfulness Based Cognitive Therapy (MBCT) for depression, developed in Canada and England, is an adaptation of Jon Kabat-Zinn's program. MBCT includes mindfulness practices which can

⁹ "Just Say Om" by Joel Stein in Time Magazine, August 4th 2003

¹⁰ "Skills Training Manual for Borderline Personality Disorder" by Marsha Linehan Page 63

help people to recognise mental patterns and thereby break the link between moods and thinking patterns. Mark Williams, one of the originators of this program, has commented on the success of this eight week program.¹¹

At this very early stage we wanted to know, “Does this (mindfulness group) improve better than treatment as usual?”..... The treatment as usual group, as we expected when we followed it for 12 months, relapsed quite heavily. About 66% relapse if they’d had three or more periods of depression in the past. For the group who came to the eight weeks, in the next 12 months that relapse rate went down to 37%. So about a halving of the relapse rate.

The research points towards a decrease in relapse rates and an increase in ability to stay with distressing moods.

The Space (or Capacity) to Question Meanings

As well as increasing a man’s ability to tolerate distressing moods and emotions without having to battle with them or act them out, mindfulness opens a space that questions thoughts and meanings that cause difficulty. When a neighbour does not greet John in the supermarket does it necessarily follow that they ignored him and that he is unlovable? Are some of the old beliefs that he has about being a man true or helpful in his present relationship?

This “space” to question meanings is different from the “challenging” that is popular in Cognitive Behaviour Therapy - which can easily turn into excessive “doing”. The “space” or “capacity” that I am referring to here allows for a viewing and a loosening around patterns of interpretation and belief without struggling to change them. It is a space that is open to paradoxes and contradictions that have no simple solution. The ability to be mindful builds this capacity to stay with the complexities of our emotional lives and belief systems, and, in consequence, our ability to tolerate complexity in relationships.

¹¹ Mark Williams in conversation with Norman Swan on “The Health Report”, broadcast Monday 13 May 2002.

Conclusion

I have been surprised at the power of these simple mindfulness practices to improve the quality of men's lives. Mindfulness practices have also improved my ability to stay present with men without getting bogged down in my own pet theories and solutions – these, also, need to be questioned no matter how helpful they are. What I have found most important is to return, again and again, to the direct experience of “being” with men.

Some Useful Resources

- “Stopping Violence Groups”, Northern Metropolitan Community Health Service, Adelaide, 1997
- Hayes, Strosahl and Wilson, “Acceptance and Commitment Therapy”, Guilford, 1999
- Jenkins, Alan, “Invitations to Responsibility”, Dulwich Centre, 1990
- Kabat-Zinn, Jon “Full Catastrophe Living”, Delta 1990
- Linehan Marsha M., “Skills Training Manual for Borderline Personality Disorder”, Guildford, 1993
- Magrid, Barry “Ordinary Mind: Exploring the Common Ground of Zen and psychotherapy”, Wisdom Publications, 2002
- McMaster, Ken, “Feeling Angry, Playing Fair”, Reed Books, 1998
- Segal et al “Mindfulness-Based Cognitive Therapy for Depression”, Guilford 2002
- Stern, Daniel N. M.D., “The Present Moment in Psychotherapy and Everyday Life”, W.W. Norton and Company, 2004
- Stern, Joel, “Just Say Om”, Time Magazine, August 4th 2003
- Williams, Mark, “The Health Report”, ABC radio, broadcast on Monday 13 May 2002