Cognitive Behavioral Mindfulness Therapy

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Cognitive Behavioral Mindfulness Therapy may be used for treating a variety of conditions: depression, anxiety, thought/personality disorders, and eating and substance abuse disorders.

It recognizes these foundations. 1) Thoughts arise between stimuli and responses — both physical and emotional. 2) The client has the capacity to be aware of thoughts and change them. 3) Sometimes (often) thoughts elicited by stimuli distort reality.

Behaviorism is a term for expressing a relationship between stimuli and responses. Remember Pavlov's dogs -- stimulus (meat) that produces automatic behavior (salivation) is paired with an unrelated stimulus (bell). Over time, when the bell is rung in the absence of the meat, the dogs salivate. BUT, the response can be extinguished over time by presenting the bell tone without the presence of meat and the "conditioned" stimulus (salivation) is "extinguished."

Behaviorism began with this approach to addressing troubling stimuli in the lives of clients. They were exposed to feared/triggering stimuli so that over time the fearful/upsetting emotional response was extinguished. Example: A client who fears that squirrels will drop from trees onto his head practices walking closer to trees and then notes that squirrels don't drop onto his head. Over time, the fear is extinguished.

The **cognitive** addition to behaviorism invites a client to examine his thinking, checking it for accuracy, reasonableness, probability, and consequences. Regarding the squirrel

example, research would indicate that it is contrary to the behavior of squirrels to drop out of trees onto the heads of pedestrians. And, even if it happened by accident, one can be further comforted by knowing that squirrels are not carnivorous creatures. The coupling of cognitive and behavioral therapies is known as Cognitive Behavioral Therapy (CBT).

Mindfulness is the most recent permutation/addition to the CBT model. Mindfulness assists a client to notice thoughts without attaching to them, much like noticing birds flying over one's head. It is grounded in teaching the client to focus on his/her breathing. By practicing mindfulness breathing on a daily basis, morning and evening, a client will automatically engage this calming behavior when confronted by anxiety/depression provoking stimuli. This response is combined with cognitive insight and behavioral exploration.

Mindfulness Practice

1. Choose a comfortable sitting position -- lotus or in a chair. The goal is not to fall asleep, but to keep your energy path open as you focus on the breath. Eyes may be open, shut, or "soft" -- unfocused. A candle may help as a focal point. Meditative music or the sound of water may be beneficial.

2. Breathe through the nose and exhale through the mouth, as if through a straw.

3. When inhaling notice the sensation of the air through the nasal cavity as you fill the lungs from the lower portion to the upper portion.

4. As your lungs feel comfortably full, exhale without forcing the process.

5. While inhaling and exhaling, direct your consciousness to the breath, simply enjoying the process...in through the nose and out through the mouth.

6. As thoughts or sounds distract, just direct your attention back to the breath. You are not starting over. You have not failed. You are <u>practicing</u> mindfulness breathing. Each return to the breath is a release of the distraction.

7. Some practitioners find it helpful to silently say "thought, thought, thought" or "sound, sound, sound" as they acknowledge the distraction and return their attention to the breath.

8. You may wish to set a timer so that length of meditation does not become a distraction.

A Word on Neuroplasticity -- The more we practice certain physical and cognitive patterns, the more those patterns are reflected in our neurology (the "wiring" or neural clusters of our brains). This change in turn will modulate our automatic responses to certain stimuli.