Open Presence: A Mindfulness-Based Group

Bram Conley, LMFT
I can explain *Mindfulness* to a colleague.

1. True
2. False
3. Maybe, I know a little
Definition of Mindfulness

• Mindfulness involves intentionally focusing one’s attention on the present-moment experience in a nonjudgmental and accepting manner.

• This state of mindful awareness is contrasted with the “automatic pilot” mode in which one’s attention is focused elsewhere, such as thoughts, worries, or plans, and with behaving automatically, without awareness of one’s actions.
Clinical Uses of Mindfulness

- Depression
- Generalized anxiety disorder
- Eating disorders
- Borderline personality disorder
- Relationship distress
- Psychosis
- Cancer
- Chronic pain
Open Presence

- 10-week group for males and females 25-65 years old.
- Formal mindfulness exercises
  - Sitting meditation
  - Walking meditation
  - Sensory awareness
  - Body scan mediation
  - Mindful yoga
  - Mindfulness of thoughts and feelings
  - Lovingkindness mediation
Open Presence (con’t)

• Informal, daily-life mindfulness activities
• Recommended formal mindfulness practice times were 10 minutes at the beginning of the group and increased to 25-30 minutes at the end of the group
• Group members were given taped recordings of guided meditations
Data Collection

• Measures collected prior and just after the group:
  – Beck Depression Inventory (BDI-II)
  – Beck Anxiety Inventory (BAI)
  – Mindful Awareness and Attention Scale
  – World Health Organization Quality of Life Inventory –Brief (WHOQOL-BREF)

• Qualitative Interviews
Group One Characteristics

- 100% female
- Mean age = 42.75
- 50% African-American, 25% Caucasian, 25% Hispanic/Latino
- 50% lived alone, 25% lived with family, 25% lived with extended family
- Mean length of treatment = 1482 days
Group One Data

- Anxiety decreased significantly
- Depression decreased significantly
- Daily mindfulness increased significantly
- Perceived quality of life increased significantly
Group One Interview Findings

- Utilized skills learned in group to deal with painful emotions.
- Client that was experiencing psychosis had implemented more formal mindfulness exercises than any other group members.
Group One Findings (con’t)

• Better able to handle situations that would have triggered anxiety/depression prior to the group
• More self-acceptance and acceptance of others.
• Decreased impulsivity and reactivity
Changes Based on Feedback

• Explicit attendance and tardiness policy was implemented.
• A workbook was created that contained homework assignments and relevant readings.
• Audiotape/CD with meditations was provided during session 1.
Group Two Characteristics

- 40% female, 60% male
- Mean age = 64.2
- 20% African-American, 60% Caucasian, 20% Mixed race/ethnicity
- 100% lived alone
- Mean length of treatment = 2,156 days
Group Two Data

- Anxiety decreased significantly
- Depression decreased significantly
- Daily mindfulness increased significantly
- Perceived quality of life not significantly impacted
Group Two Interview Findings

• Many group members had incorporated formal mindfulness practices on a daily basis.
• Ability to “breathe with” anxiety and depression.
• More appreciation for beauty of daily life.
• Lovingkindness meditation helped group members’ interactions with others.
Recommendations

- Explain the attendance/tardiness policies and the necessity of active group participation during the pre-group interviews to ensure that the group members are able to form a cohesive and supportive group.

- It is recommended that a peer-led, drop-in sitting group be created for follow-up.

- Have each Open Presence co-facilitator partner with a less experienced mindfulness practitioner to lead future groups.
Recommendations

• Since a great number of the consumers served at suffer from psychosis, it is recommended that training in Bach and Hayes’ (2002) 4-session, Acceptance and Commitment Therapy (ACT) be sought out to assess its applicability in this outpatient milieu.

• Future evaluation projects should collect longitudinal data to assess the relapse rate of those with depression and the longer-term outcomes of the group.
I can apply *Mindfullness* to my HIV work

<table>
<thead>
<tr>
<th>25%</th>
<th>1. Yes, I am already doing it</th>
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<tbody>
<tr>
<td>25%</td>
<td>2. Yes, I think I can</td>
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<td>25%</td>
<td>3. No, I need more information/support</td>
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<tr>
<td>25%</td>
<td>4. Not sure</td>
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