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## Studies in mindfulness: widening the field for all involved in pastoral care

Graeme Nixon, David McMurtry, Linda Craig, Annick Nevejan and Heather Regan-Addis

School of Education, King's College, Aberdeen, UK

### ABSTRACT

Since 2010, the University of Aberdeen, Scotland, UK, has offered an MSc in studies in mindfulness degree programme within its School of Education. The programme has attracted over 200 students from multiple professional contexts, providing the authors with the opportunity to gather and analyse demographic data, as well as data regarding student motivations and expectations, both personal and professional. The paper initially creates a picture of the current UK 'studies in mindfulness' landscape by describing the established programmes at UK universities. Data from an entry questionnaire completed by three cohorts of students on the 'Aberdeen' programme and data collected from students throughout their studies is then presented, analysed and discussed. The authors argue that, in their professional roles, graduates from programmes and courses at Universities in the UK are introducing an ever-increasing number of people to mindfulness. They are implementing and integrating mindfulness into diverse social, business contexts as well as into all sectors of education. The University of Aberdeen's programme, based in the School of Education, perhaps represents a move towards more holistic, pastoral and multi-professional applications of mindfulness. This contrasts with the clinical, pathological settings for mindfulness to date.

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## Introduction

Powell, Gilchrist, and Stapley (2008) report on an innovative 'Self Discovery Programme' with young children (p. 206), which resulted in positive changes in self-control and attention/concentration skills. Several UK universities are developing 'self-discovery' approaches to pastoral care, which include teaching mindfulness. In addition, several universities offer award-bearing mindfulness programmes. Given the challenges of providing and widening access to pastoral care, this is an interesting and relevant development.

Mindfulness is defined variously with interesting nuances and emphases within and between definitions. According to Kabat-Zinn (2003), it is the awareness that emerges through paying attention purposefully to present experiences without judgement or

preference. For Siegal, Germer, and Olendzki (2009) it is attention regulated to rest upon immediate experience, leading to a greater recognition of mental events. Mindfulness is an orientation to experience in which one engages with an attitude of kindness and curiosity.

Mindfulness as practiced and taught in UK Universities, is secular and does not involve or require involvement in any religion or commitment to any particular belief system. That said, secular mindfulness is a form of meditation, and it draws upon Buddhist practices and psychological theory. The inclusion of mindfulness in pastoral care provision in HE requires, therefore, a good understanding of its historical development and the underpinning theory, as well as knowledge of specific practices.

As a contribution to developing current practice, approaches and thinking in pastoral care, we aim in this paper to provide a comprehensive overview of the current provision of mindfulness courses within UK Higher Education.

## Overview of practice and application of mindfulness

Secular mindfulness-based approaches and interventions are burgeoning (Baer, 2006; Crane et al., 2010; Shapiro & Carlson, 2009; Singh, 2010). This has happened primarily within mental health and medical settings. Two approaches to health care in which mindfulness is a core aspect can be broadly delineated: mindfulness-based stress reduction (MBSR) (Kabat-Zinn, 1982, 1990), and mindfulness-based cognitive therapy (MBCT) (Segal, Williams, & Teasdale, 2002). These forms of mindfulness intervention are used to treat an increasing range of psychological disorders such as depressive relapse, sleep and eating disorders, psychosis and borderline personality disorder. It should also be mentioned that mindfulness approaches can also be discerned within dialectical behaviour therapy (Brown, Marquis, & Guiffreda, 2013; Linehan & Dimeff, 2001) and acceptance and commitment therapy (Hayes, Strosahl, & Wilson, 2011). Both of these latter approaches place emphasis on the development of acceptance and present moment awareness as core to a range of therapeutic conditions.

Baer (2006) describes the blend of content within these approaches to mindfulness as a combination of formal, informal, short and more extended mindfulness practices, all of which are designed to develop awareness of attention, observation without reaction and categorisation of the activities of the mind and body. MBSR (Kabat-Zinn, 1982, 1990) provides an eight-week model which has been used for chronic pain and stress related conditions. The formal group practices within the course are normally supplemented by group discussion and a daily 45-min homework practice.

MBCT (Williams, Teasdale, Segal, & Kabat-Zinn, 2007) maintains many of the same practices and the eight-week structure, but also includes cognitive therapeutic inputs aimed at allowing participants to develop awareness that thoughts are not facts and recognition of automatic thoughts, thereby allowing practitioners to come to a degree of understanding about, and control over, the anatomy of depressive relapse. MBCT also includes exercises designed to allow participants to create an action plan for relapse prevention. MBCT is recognised as a possible treatment for depressive relapse by the National Institute for Clinical Excellence in the UK and is therefore an approved intervention by the UK's National Health Service (NICE, 2004).

The growth of these mindful-based interventions since Kabat Zinn first introduced mindfulness into the secular health context in 1979, is impressive. Kabat-Zinn's hope that mindfulness 'be developed and tailored in the future to specific classes of individuals and diagnoses' (2002, p. 734) seems to be becoming a reality. That said, it could be argued that the

development of mindfulness-based interventions in the UK was initially driven by MBCT as a result of publications in the early 2000s relating to its application to depressive relapse (Crane et al., 2010). This has influenced the nature of mindfulness approaches in the UK, and academic courses in mindfulness developed to date reflect an emphasis on MBCT.

The emergence of mindfulness has prompted some to claim that mindfulness is emerging as a transtheoretical construct within third wave therapies (Didonna, 2009) which has been a move to therapeutic approaches more sensitive to context, grounded in acceptance and flexibility rather than a more didactic or behaviourist therapeutic paradigm.

An adapted version of ACT – Acceptance and Commitment *Therapy* – has been proposed, which promotes the same processes but in a non-therapeutic context (Hayes, Bond, Barnes-Holmes, & Austin, 2007). Mindfulness-based approaches have also been applied to other, non-medical contexts such as sport (Bernier, Thienot, Cordon, & Fournier, 2009), business (Langer & Moldoveanu, 2000) and education (Hyland, 2009; Langer, 2000). In these areas the ability to observe experience non-judgementally has been explored as a means to not only enhance well-being and communication, but also performance. In other words mindfulness is increasingly being seen as a way of enhancing professional efficacy in multiple contexts.

Given the growth of interest in mindfulness-based approaches, within the UK there has also arisen a desire to develop a set of competences for teaching mindfulness. Crane (2011) describes the opportunities and risks involved in the rapid expansion of mindfulness, particularly the danger that the emphasis on a personal, experiential commitment, becomes diminished. In 2010, the Network of Mindfulness-Based Teacher Trainers created guidance on competences in teaching mindfulness and their assessment, training processes and standards for good practice for mindfulness teachers (UK Network of Mindfulness-Based Teacher Trainers, 2010). The question of measuring and assessing competence to teach mindfulness also raises professional and ethical issues.

## **Mindfulness postgraduate programmes and courses in the UK**

In face of the growth of mindfulness-based approaches in multiple contexts it is apposite to look at the institutions and programmes that have evolved to meet the demand for expertise and training in mindfulness. A number of training initiatives and independent organisations have emerged to meet the desire of increasing numbers of people to train in mindfulness (Crane et al., 2010). For the purposes of this paper, discussion has been limited to UK postgraduate programmes offering training in, and/or learning about, mindfulness. Currently three UK Higher Education Institutions (the Universities of Bangor, Exeter and Oxford) offer training in mindfulness that centres on MBSR and/or MBCT. Table 1 summarises key aspects of these postgraduate programmes in mindfulness, as well as the postgraduate mindfulness programme at the University of Aberdeen, where it is delivered for multiple professionals by the School of Education. It should also be noted that both the centres for mindfulness at Bangor and Oxford recognise the potential application of mindfulness into non-clinical settings and offer training and/or advice about how mindfulness can be used in fields such as education and business. Nevertheless, the focus at master's level reflects an emphasis on MBCT/MBSR as Table 1 reveals. Since 2010, the University of Aberdeen, Scotland UK, has had an MSc in studies in mindfulness. A unique feature of this programme is that it is focussed upon the study and practice of mindfulness from a social science rather than clinical



**Table 1.** An overview of postgraduate programmes in mindfulness within the UK.

| Institution            | Department   | Qualifications available (all postgraduate)                               | Entry requirements (these may be incremental as students progress within the programme)   | Programme structure and content (all part-time)  |
|------------------------|--|---|---|--|
| University of Bangor   | School of Psychology   | Diploma in teaching mindfulness<br>MSc/MA in mindfulness-based approaches | <ul style="list-style-type: none"> <li>Relevant clinical training (for MBCT)</li> <li>2.1 degree, though equivalent professional experience considered</li> <li>A professional qualification and context which provides setting for introduction of mindfulness-based approaches (this can be health, counselling, social care or education)</li> <li>At least three years experience within this professional setting</li> <li>Completion of an eight week MBCT, MBCT or Breathworks course prior to beginning the programme</li> <li>Frequent and regular practice for a year prior to beginning the programme</li> <li>Applicants must be qualified clinicians</li> <li>Three years post qualification experience</li> <li>Previous knowledge of cognitive therapy</li> <li>Knowledge of mindfulness based approaches</li> </ul> | <ul style="list-style-type: none"> <li>Founded on MBSR, but with option to learn to facilitate MBCT</li> <li>Five weekends over each academic year</li> <li>45 min daily practice</li> <li>Buddhist background</li> <li>Foundation of experiential practice</li> <li>Research module</li> <li>Mindfulness and individual therapy</li> <li>Assessed teaching practice</li> </ul>  |
| University of Oxford   | Department of Psychiatry   | Master of studies degree in MBCT  | <ul style="list-style-type: none"> <li>First degree in psychology or cognate discipline</li> <li>Health professional qualification and/or UKCP or BAC accreditation</li> <li>At least two years post-qualification health/mental health experience</li> <li>A personal mindfulness practice. Basic CBT skills</li> <li>First degree</li> <li>A professional context in which to examine potential/actual applications of mindfulness</li> </ul>   | <ul style="list-style-type: none"> <li>Two years with ten three day teaching blocks and two residential retreats (5–7 days)</li> <li>Personal practice/study of 6–7 h per week</li> <li>Theoretical basis of MBCT</li> <li>Aspects of Buddhist psychology</li> <li>Examination of clinical applications</li> <li>Examination of relationship between theory and applications</li> <li>Personal Practice, initially in MBCT</li> <li>Retreats to deepen practice</li> <li>Peer presentations</li> <li>Supervised practice and placement</li> <li>Observation of MBCT</li> <li>MBCT theory and research</li> <li>Buddhist Psychological underpinnings to MBCT</li> </ul> |
| University of Exeter   | Clinical Education and Research, College of Life and Environmental Science | Certificate, diploma and MSc in MBCT                                      | <ul style="list-style-type: none"> <li>First degree in psychology or cognate discipline</li> <li>Health professional qualification and/or UKCP or BAC accreditation</li> <li>At least two years post-qualification health/mental health experience</li> <li>A personal mindfulness practice. Basic CBT skills</li> <li>First degree</li> <li>A professional context in which to examine potential/actual applications of mindfulness</li> </ul>   | <ul style="list-style-type: none"> <li>Three experiential modules (mindfulness, compassion and insight) in years one and two</li> <li>Professional enquiry and work-based project examining application(s) in professional context(s) in years two and three</li> <li>Assessments based on principles and experiences of practices, and professional applications</li> </ul>   |
| University of Aberdeen | School of Education  | Studies in mindfulness PG cert, PG dip and MSc                            | <ul style="list-style-type: none"> <li>First degree</li> <li>A professional context in which to examine potential/actual applications of mindfulness</li> </ul>   | <ul style="list-style-type: none"> <li>Three experiential modules (mindfulness, compassion and insight) in years one and two</li> <li>Professional enquiry and work-based project examining application(s) in professional context(s) in years two and three</li> <li>Assessments based on principles and experiences of practices, and professional applications</li> </ul>   |

perspective. Data collected from/with students undertaking the studies in mindfulness MSc programme at the University of Aberdeen, is presented and discussed later in this paper.

Other mindfulness courses, modules or workshops at UK Higher Education Institutions include: University of Salford, 'Integrating Mindfulness' module (30 credits); University of Cambridge 'Introduction to Mindfulness (CBT)' (not award bearing); University of Glasgow 'Mindfulness Based Stress Reduction Course' (not award bearing); University of Central Lancashire 'Mindfulness Meditation' (not award bearing) and University of South Wales 'MBCT' (not award bearing), (see <http://mindfulnessforstudents.co.uk/mindfulness-courses-at-uk-universities/>). Non-award bearing courses are commonly designed to support students and to enhance their well-being throughout their studies.

### **The MSc in studies in mindfulness programme, the University of Aberdeen**

The University of Aberdeen, Scotland UK, validated an MSc in studies in mindfulness degree in 2010 and has since been recruiting annually to the programme. The degree is a four-year, part-time programme of study. A 'blended' approach to learning is taken – a mix of person-to-person interactions at study/practice weekends and online study through a Virtual Learning Community. There are currently 200 students studying on the programme and the first students to graduate did so in July 2013. Annual recruitment to the programme is between 45 and 55 students.

The primary aim of the programme is to facilitate the study and practice of mindfulness and to critically analyse and evaluate its relevance to, and application in, professional contexts. Although secular with no adherence to a religion or to any other belief system, the programme does draw upon, reference and critically examine the practice and articulation of mindfulness from Buddhism, as well as from a range of seminal texts and developments (e.g. Gendlin, 1982; Kabat-Zinn, 1982, 1990; Kabat-Zinn & Chapman-Waldrop, 1988; Segal et al., 2002), and recent research.

There is an expectation that students studying on the MSc programme will commit to a personal practice of mindfulness involving 45 min daily formal practice, using an approach that is taught on the programme. A pre-requisite of study is that students have access to a professional setting to which mindfulness practice can be contextualised. Throughout the programme, students reflect upon and articulate the relevance and appropriateness of mindfulness training and practice to that setting or context. The professional contexts that the majority of current and previous students have access to fall into three categories – (i) medicine/health care (including counselling, psycho-therapy, general practice and nursing), (ii) education (in a range of settings) and (iii) business. In the final stage of their studies, students undertake small-scale empirical research.

In a number of ways, the University of Aberdeen degree is distinctively different. Unlike the other UK-based mindfulness postgraduate programmes, there is no requirement that participants have previously studied or practiced mindfulness, have a particular degree or already have clinical experience (see Table 1). The degree is located within the School of Education and not a Psychology department or centre. The study of mindfulness and associated concepts, such as awareness, acceptance and compassion, explores a number of historical and contemporary perspectives. These include the development of mindfulness within Buddhism and other religious and secular philosophies, and scientific evidence from evolutionary biology and neurological science. Interpretations of internal psychological

process that occur as a result of mindfulness practice over an extended period of time are also explored in the programme. These emphases, and the broad range of professional contexts of the students, inform the research projects that are undertaken by students. Although a very small number of students do select and undertake research that is clinically orientated, the majority of the projects undertaken are interpretivist, qualitative and social science research. Thus, in addition to considering the effectiveness in solving problems, study and research is focused upon the role of mindfulness in life enhancement for students and their clients rather as a clinical approach to specific psychological problems. Of significance is that these studies occur from *within* a context (a group, school, sport, business, family or other social context). The impact and effect of mindfulness practice upon individuals are evaluated from different perspectives. The focus of the study may be effective upon the lived experience of the individual, upon others with whom the practitioner is in relationship and/or upon the context – family, workplace, community or society.

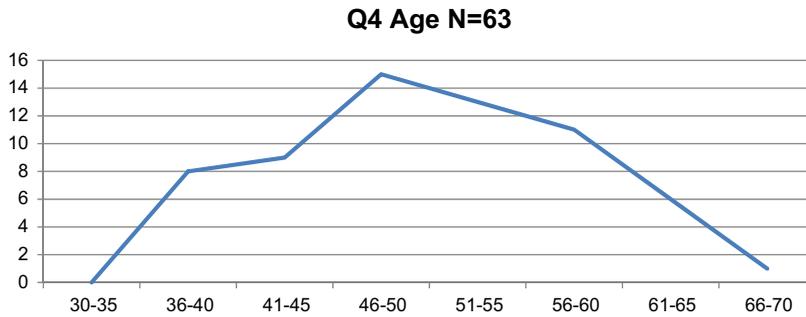
A further departure from established clinical mindfulness programmes is the emphasis on the development of compassion and self-compassion which is introduced at the outset of the programme using kindness practices and develops to include self-compassion and compassion for others practices. This reflects the idea that self-compassion is essential to the development of kind mindful awareness and dispositions such as equanimity, loving kindness and appreciative joy (Gilbert & Choden, 2013). Many students explore the role of compassion in their professional contexts, particularly relating to themes such as compassion fatigue, burn out and approaches to pastoral care and stress.

### **Student demography, motivations and the impact of mindfulness**

Empirical research was conducted involving three cohorts of students entering the University of Aberdeen's studies in mindfulness taught postgraduate programme in 2010, 2011 and 2012. At the first teaching weekend students were issued with a participant information and consent form which outlined the aims of the research and sought consent to use questionnaire data as well as evidence taken from the assignment for the first module (ED505A mindfulness). Anonymity was assured. The whole process was consistent with British Educational Research Association (BERA) ethical guidelines for educational research (2011).

The questionnaire, which was completed by all the participants, was used to gather data regarding the selected demographic characteristics, (age and gender and selected social factors), their previous study and practice of mindfulness, and their motivations, expectations and challenges or difficulties. The structure of the questionnaire reflected Wellington's assertion (2000) that schedules of questions should begin with closed questions and move towards openness, thereby allowing interviewees the space and time to engage with the deeper, more reflective issues as they complete the questionnaire. The hope was that the first questions (numbers 1–8), whilst providing rich quantitative data for the researcher, would also allow the respondent the opportunity to 'warm-up' (Robson, 1983) before tackling the higher order analytical questions to follow (numbers 9–11). In all, 63 questionnaires were completed representing 58% of the 108 students who embarked on the programme over the years 2010–2013.

The questionnaire was followed by an analysis of a random sample of student assignments ( $N = 17$ ) from all three cohorts. The assignment required students to write about and reflect on the perceived impact (both positive and negative) of embarking on the mindfulness



**Figure 1.** Age of students.

**Table 2.** Student occupation(s).

| Occupation                 | Number |
|----------------------------|--------|
| Counsellor/psychotherapist | 15     |
| Manager                    | 11     |
| Teacher (school)           | 10     |
| Nurse                      | 6      |
| Business/life coach        | 6      |
| Lecturer (FE or HE)        | 5      |
| Meditation/Yoga teacher    | 5      |
| Consultant                 | 3      |
| Social work/care           | 2      |
| Psychologist               | 2      |
| Performer                  | 2      |
| Martial arts instructor    | 2      |
| Charity worker             | 2      |

programme on both their personal and professional lives. This assignment is the two-part assessment of the first course studied within the University of Aberdeen programme, ED505A 'Mindfulness'. In part one of the course assignment, students are required to demonstrate knowledge of a selection of practices and their theoretical bases, before reflecting on their personal experiences of these practices. Students are encouraged to document problems, inhibiting factors and difficulties, as well as positive effects and enabling factors. This is often supported by their reflective practice journal, which they are encouraged to keep. In part two of the assignment, students are required to demonstrate effective analysis of the research into, and/or the possible application of mindfulness within their own professional context. This can relate to well-documented research into mindfulness interventions or to aspects of their professional life where mindfulness may be beneficial (for example, in dealing with stress, improving management style, decision-making, enhancing communication and facilitating a more compassionate approach to colleagues and clients).

## Findings

### *From 'entry' questionnaires*

The 63 returns to the survey represented an even distribution across the three cohorts, with returns of 20 (2010), 19 (2011) and 24 (2012) from each group. Of those who returned the

**Table 3.** Student experiences of studying, practicing and teaching mindfulness.

| Duration of experience | Study of mindfulness | Mindfulness practice | Teaching mindfulness |
|------------------------|----------------------|----------------------|----------------------|
| <1 year                | 17                   | 11                   | 10                   |
| 1–5 years              | 6                    | 12                   | 8                    |
| 6–10 years             | 7                    | 10                   | 3                    |
| >10 years              | 16                   | 21                   | 4                    |
| No experience          | 17                   | 10                   | 37                   |

**Table 4.** Reasons for embarking on the programme (selected).

| Reasons for embarking on MSc                    | Number |
|---|--------|
| To support and develop (mindfulness) practice   | 30     |
| For personal and spiritual development          | 18     |
| For career development                          | 17     |
| To learn about mindfulness                      | 16     |
| To introduce mindfulness into work              | 16     |
| To gain qualification/credibility               | 13     |
| Attracted to blend of experiential and academic | 11     |
| To help others                                  | 7      |
| To enhance the experience of clients            | 6      |
| To teach mindfulness                            | 6      |
| To improve relationships                        | 5      |
| Attracted to course's emphasis on compassion    | 2      |

**Table 5.** Anticipated professional benefits (selected).

| Anticipated benefits   | Number |
|--|--------|
| Supportive tools for clients and colleagues                                  | 26     |
| Greater objectivity  | 24     |
| Better working relationships   | 21     |
| Enhance professional development   | 15     |
| To be able to teach mindfulness to a specific group of clients or colleagues | 12     |
| Introduction of self-compassion and compassion for others                    | 12     |
| Enhanced presence  | 10     |
| Greater integration of personal practice with professional life              | 7      |
| Brings credibility and <i>gravitas</i> to mindfulness                        | 6      |
| Improved self-awareness  | 4      |
| Diminish reactivity  | 4      |
| Improve teaching   | 4      |

**Table 6.** Anticipated personal benefits (selected).

| Anticipated benefit                        | Number |
|--|--------|
| Self-knowledge                             | 28     |
| Calmness and better at dealing with stress | 25     |
| Self-compassion and compassion for others  | 25     |
| Improved quality of life                   | 25     |
| Better relationships with loved ones       | 22     |
| Greater acceptance                         | 22     |
| More established practice                  | 11     |
| To diminish reactivity                     | 5      |
| Authenticity                               | 4      |
| Presence                                   | 4      |
| Creating a mindful community               | 3      |
| Greater self-esteem                        | 3      |
| To be a better person                      | 2      |

**Table 7.** Personal benefits of the programme (selected).

| Personal experience of benefits of the programme | Number |
|--|--------|
| Greater self-awareness                           | 16     |
| More acceptance of self                          | 11     |
| Enhanced awareness of body/emotion interface     | 10     |
| Dealing more effectively with stress             | 8      |
| Greater equanimity                               | 6      |
| Less judgmental                                  | 5      |
| Greater appreciation of life                     | 5      |
| Better concentration                             | 4      |
| Dealing more effectively with distraction        | 4      |
| Improved relationships                           | 4      |
| Dealing more effectively with physical pain      | 3      |
| More compassion for others and self              | 3      |
| Dealing better with difficult memories           | 3      |
| Deeper reading of mindfulness literature         | 2      |

questionnaire, female outnumbered male respondents two to one (42 female, 21 male). The age distribution is represented in Figure 1.

A range of occupations was evident in responses. Table 2 shows professional contexts where there was replication across responses. A number of students listed more than one profession.

Other contexts described by respondents singularly were health care research, communications, employment advice, writing, law, prison service, osteopathy and the civil service. The age distribution (Q4) is represented in Figure 1. 55 (87%) of the students are over 41.

In response to Q5 about religious affiliation, the two largest responses were 'non-religious' (28) and 'Buddhist' (21) which accounted for 49 of the 63 respondents. However, there were other responses such as Christian (6), unsure (2), as well as Muslim, spiritual, holistic, multi-faith and Buddhist Christian (all with one response each).

Regarding the degree of pre-course experiences of the study, practice and teaching of mindfulness, 46 students (73%) had previous experience of the study of mindfulness, 53 (84%) had previously practiced mindfulness and 25 (40%) had previous experience of teaching mindfulness. Table 3 outlines the longitude of these experiences.

Question 7 asked students about their reasons for embarking on the programme, which yielded a complex set of 163 responses, as is evident in Table 4 which shows the most commonly stated reasons.

When asked about the anticipated professional benefits of the programme again students offered a range ( $N = 181$ ) of responses. Table 5 evidence the most commonly stated hopes for the course.

Question 9 asked students to state what they anticipated in terms of the personal benefits of embarking on the programme and the most commonly stated views are represented in Table 6.

### **From student written assignments**

Table 7 represents the most commonly experienced personal benefits written about by the students in their assignments.

**Table 8.** Challenges and negative experiences.

| Challenges and negative experiences          | Number |
|--|--------|
| Conditioned habits                           | 9      |
| Fear of academic inadequacy                  | 5      |
| Striving and attachment to outcome           | 4      |
| Poor health                                  | 4      |
| Verbalising the mindfulness experience       | 3      |
| Engaging with academic literature            | 2      |
| Intimidated by the size of the field         | 2      |
| Feeling vulnerable practicing with strangers | 2      |
| Significant life events                      | 1      |
| Physical discomfort during practices         | 1      |
| Being distracted by bliss states             | 1      |
| The cultural setting for the course          | 1      |

Other benefits, though only mentioned singularly, were more confidence; greater patience, being less competitive; feeling connected to nature; an enhanced sense of humour; feeling connected to humanity; greater insight and an enhanced sense of curiosity.

Students were also asked to relate any difficulties, negative experiences and challenges to developing their practice. Some of these related to participating in an academic course and maintaining a mindful practice, whilst others were of a more personal nature. These are presented in Table 8.

In the second part of the assignment, students were required to analyse the benefits of the application of mindfulness to their professional context. These benefits could relate to mindfulness as an intervention or in terms how it has enhanced efficacy in the workplace at a more personal level. Table 9 presents an analysis of the assignments relating to this.

## Discussion

### Gender

The demographics presented demonstrate firstly that the students attracted to the 'Aberdeen' programme are mostly female and over the age of 41. Is it the case that mindfulness typically attracts females? This may be the result of cultural norms and expectations informing the attitudes of males and females towards mindfulness and the studying of it. Could there be a correlation between gendered attitudes to spirituality? This is something explored by Bruce, who argues that 'alternative spirituality is the preserve of middle-aged, middle-class women with university level qualifications' (Bruce, 2012, p. 107). This, however, may be to misrepresent secular mindfulness training as somehow part of a movement to more individualised spirituality rather than as an established tool which has a range of benefits in multiple professional contexts. The data from this research about religious affiliation reveals that only 1 student described themselves as 'spiritual' and the largest constituency (28) stated they were non-religious.

### Age

The evidence shows that the Aberdeen programme has attracted, in the main, mid to late career professionals. It could be that they are seeking career development. Indeed 15 students indicated this was a professional expectation of the programme. This age pattern may also more prosaically reflect the material ability to embark on master's level study.

**Table 9.** The professional benefits of mindfulness.

| Health   | Education/coaching  | Business   |
|--|---|--|
| <ul style="list-style-type: none"> <li>• Less reactive (8)</li> <li>• Enhanced therapeutic relationships (4)</li> <li>• Mindfulness as a unifying therapeutic model? (3)</li> <li>• Recognition of unconscious processes in self (3)</li> <li>• Depressive relapse prevention (3)</li> <li>• More productive (2)</li> <li>• Presence with and to patients (2)</li> <li>• Greater empathy (2)</li> <li>• Self care for health provider (2)</li> <li>• Reduced stress (2)</li> <li>• Dealing better with anxiety (2)</li> <li>• Greater sensory awareness (2)</li> <li>• Greater tolerance of pain (2)</li> <li>• Enhanced communication between staff (1)</li> <li>• Mindful use of power (1)</li> <li>• Mindful parenting (1)</li> <li>• Greater self-awareness (1)</li> <li>• Acceptance of others (1)</li> <li>• Facilitated the return to work (1)</li> <li>• Dealing with trauma (1)</li> <li>• Dealing with guilt (1)</li> <li>• Suicide prevention (1)</li> <li>• Greater resilience (1)</li> <li>• Greater confidence in public role (1)</li> </ul> | <ul style="list-style-type: none"> <li>• Being more responsive (3)</li> <li>• Greater presence in the classroom (2)</li> <li>• Coping more effectively with stress/anxiety (2)</li> <li>• Resilience (1)</li> <li>• Well-being (1)</li> <li>• Concentration (1)</li> <li>• Greater emotional balance (1)</li> <li>• Dealing with specific learning difficulties (1)</li> <li>• Enhanced relationships (1)</li> <li>• Avoiding destructive coping strategies (1)</li> <li>• Staff well-being enhanced (1)</li> </ul> | <ul style="list-style-type: none"> <li>• Less reactive communication (6)</li> <li>• Enhanced emotional intelligence (2)</li> <li>• Less rumination (2)</li> <li>• Job satisfaction improved (1)</li> <li>• Less stress (1)</li> <li>• Employee resilience (1)</li> <li>• Increased well-being (1)</li> <li>• More effective leadership (1)</li> <li>• Managing confrontation more effectively (1)</li> <li>• Embracing change (1)</li> </ul> |

Every university programme of study involves a financial outlay that is significant for many students. Postgraduate study perhaps, therefore, attracts people who not only have the motivation but who also have the financial capability and this may relate to the age profile of applicants.

There is though, the question as to whether mindfulness is something that appeals to people of a certain age. Could it be that when people enter what is often described as 'middle age' they are perhaps 'ready' for mindfulness? Armstrong (2007) describes the period between 35 and 50 as the 'Age of Contemplation', where people move on from worldly or material concerns towards a deeper consideration of themselves and their lives. Armstrong's next stage ('Benevolence') between 50 and 80 is when humans, having established themselves in their work and raised families, contribute voluntarily to society for its improvement. Might then, there be an optimal age for mindfulness? Are professionals over the age of 35 drawn to its contemplative and thereafter compassionate nature? Perhaps this, combined with their financial wherewithal, goes some way to explaining the age profile of the students involved in this research. It would be interesting to cross-tabulate the Aberdeen evidence not only with age profiles of students elsewhere, but also with any correlations emerging from the literature about the success of mindfulness-based interventions relating to the age of clients or patients.

### **Religious affiliation**

As previously stated the largest constituency among respondents on the question of religious affiliation was 'no religion' (28/63), followed by Buddhism (21/63). This question was included

to ascertain the religious background of participants and to provide some indication as to what religious or ideological groups were attracted to the study of mindfulness.

There is on-going discussion in mindfulness literature about the secular/spiritual/religious nature of mindfulness (Hirst, 2003; Kabat-Zinn, 2003). In a cultural context which is increasingly secular (Bruce, 2012) and where there is often widespread (usually unreflective) antipathy to religion, particularly towards religions' institutional forms, there can be a tendency to overstate the 'secular' credentials of mindfulness and downplay any 'spiritual' connections. That said, mindfulness has many of the characteristics of a more naturalistic spirituality that may make it attractive in the twenty-first century situation to people who are otherwise of no 'religious' commitment. For people of no religion mindfulness is an individualistic approach which corresponds on many levels with a zeitgeist of personal autonomy and the rejection of traditional hegemonies (including religion). Mindfulness, as it has emerged as a secular approach since 1979 in Euro-American society, claims to make no metaphysical, enchanted or supernaturalistic claims, thus appealing to those inclined to reject belief systems founded on claims of a theological nature.

According to Hirst (2003), mindfulness also represents a confluence of western psychology and eastern wisdom and this is revealed in themes within both tradition relating to attachment, instinct, archetypes, constructionism, actualisation, meaning and existentialism. If this is the case one can begin to understand the appeal of mindful approaches to the 'psychologised' western mind. Epstein perhaps captures this when he states that Buddhism is 'the most psychological of the world's religions, and the most spiritual of the world's psychologies' (1998, p. 16).

Another possibility is that mindfulness, for certain people, fills the existential vacuum described by Frankl (2004). That is, within an increasingly secular and individualised society mindfulness represents a way for people to explore ideas of meaning, authenticity and wholeness, but sanitised from any 'religious' connotations. It could be said that Buddhism has, therefore, been shaped to fill the existential vacuum, taking a core practice but ignoring (or psychologising) enchanted notions about, for example, karma, samsara or rebirth. The corollary of this is that forms of mindfulness closer to home (for example, as can be found within Christian mysticism) are ignored.

Another interesting response to the question about religious affiliation was that of respondent 4 who, having declared themselves Muslim, went on to outline one of their aims of the programme as 'to enhance my devotional practice'. This may bear out the view stated above that mindfulness is a ubiquitous quality and can be found in multiple traditions.

## **Motivations, expectations and challenges**

When asked what was their primary reason for embarking upon their studies, the response most given was to support and develop mindfulness practice. This reason had 66% more responses than the next highest reason given (which was 'for personal and spiritual development'). Clearly, beginning and/or sustaining mindfulness practice was a reason for engaging in the programme that was important to many participants. Several other reasons were also given (see Table 4 page 13); collectively and individually, the students had several motivations for wishing to engage in the academic study of mindfulness.

For some students, reasons of a personal nature were the primary motivation, often involving personal and/or spiritual development. These were general and sometimes more specific characteristics:

Becoming a better person

Gaining self knowledge

Improving relationships

Being more happy and content

Being more calm

Being more 'mentally, physically and spiritually aware'

To sharpen my intellectual faculty

More peace of mind. Expanding my mind. More contentment as myself.

For some, the benefits were very personal and immediate involving dealing with poor health and coping with physical pain. Other students had the highest of personal expectations:

Transformation of neurosis. Greater joy, wisdom, compassion, insight. Liberation!;

To prepare and cope with impermanence and death;

Freedom from delusion – more able to see reality as it is.

Several participants stated motivations that relate to their professional context or life, and to professional benefits that they hope for. The range and frequency of the anticipated benefits, taken from questionnaire data, are given in Table 5, page 14. As is indicated by Table 9 (page 17), some of these benefits relate to the particular professional context – adding to therapeutic approaches; avoiding patient relapse (Health); enhanced employee resilience and managing change (Business); in Education having more presence and capacity to responding to learning issues; compassionate leadership, and compassionate approaches to working within socially deprived educational contexts.

Some students expressed awareness that personal characteristics they wished to develop will also make a difference to them in the workplace. They identified that the personal benefits of mindfulness also have an impact upon them professionally and their work:

More balanced at work

Enable me to function better in the workplace

To keep steady in turbulent times

To be able to integrate personal practice with professional practice more effectively.

Others expressed a wish to develop their professional characteristics, skills and abilities, and to develop enhanced competency. For some, the development of tools to use in the workplace was an important gain.

Interactions and communication with others improved. Responding rather than reacting to others.

To create clarity, a better delivery and communication.

Another set of skills.

Gravitas.

Professional and career development was a desired outcome frequently expressed. This might result in a change of job or in developments to the current role:

Open new areas of creativity

Opportunities for more avenues at work

To build my container in order to take on more responsibility at a higher level of management

Teaching mindfulness classes.

Participants expressed the wish that their mindfulness practice and study would result in improved working conditions or changes to their working environment:

Ability to spread or plant seed for culture of self compassion among colleagues and hence promote compassion with clients

Improve the general well-being of the employees.

Potentially use it on behalf of the organization for stress reduction activities.

Many students expressed the wish that their study and practice of mindfulness will result in benefits to others in their professional context or be of benefit to the context, community or organisation itself. This was often expressed altruistically:

Offer a life tool to children

More able to help others move forward in their lives

A tool/means of helping others find more peace in their lives

Inspiring people to develop and use their inner potential

Help service to embody mindfulness.

As well as identifying their motivations, the students highlighted challenges and negative experiences that they saw as potential barriers to success and the achievement of goals (Table 8, page 16). These barriers included their own characteristics, attitudes and responses, issues arising from study and the programme, and life events.

As the comments above illustrate, there was a clear indication from the participants in this research that they are motivated to study and to practice mindfulness for personal or self-development reasons *and* by the application of mindfulness to their professional life. Collectively, these students are (or will be) implementing and integrating mindfulness into several professional contexts, including education. In doing so, they are introducing mindfulness to many people, some of whom may not have encountered or experienced it previously.

Mindfulness practice and postgraduate study may result in these students enhancing their professional skills and abilities to the benefit of themselves, the people with whom they work and the setting or environment. Effectiveness in meeting professional goals and responsibilities may be increased. The student's personal commitment to mindfulness may mean that they introduce it authentically and this may be a factor in mindfulness practice being sustained by practitioners. The altruism of some of the students may also be a factor in the efficacy of mindfulness for individuals and its impact upon social, business and educational settings, practice and issues.

This expansion of mindfulness into different social settings and contexts, also however, raises ethical questions and issues of competence. These issues are being addressed nationally in the UK, by for example, the network of mindfulness-based teacher trainers creating

a set of standards for teachers of mindfulness-based approaches. The use and application of mindfulness is also encompassed by existing professional standards in education and health care. However, the teaching of mindfulness out with formal education is currently not regulated and this is a significant issue and concern.

## Conclusions

The number of full postgraduate programmes and stand-alone courses, seminars and workshops being offered and run by UK Universities and Higher Education Institutions is increasing and most of these are clinically orientated. Many non-award bearing mindfulness courses are concerned with supporting students and enhancing their well-being throughout their studies. The University of Aberdeen MSc in studies in mindfulness, is currently unique in the UK, in that it is orientated primarily towards social science.

Demographic data from this research suggests that there may be groups of potential postgraduate students – such as males or younger students – who are not undertaking programmes of study. Universities may wish to explore this issue and take action to enable wider access to their mindfulness programmes.

Postgraduate students studying mindfulness are strongly motivated for both personal and professional reasons. For some, religious affiliation and/or spiritual development are relevant to their motivations and their expectations. Where students are motivated religiously or spiritually, these factors are contextualised by the students' professional motivations, which are often altruistic, focused upon helping and supporting clients, patients and learners.

Postgraduates are increasingly taking mindfulness into diverse professions and occupations and are applying mindfulness to social and educational contexts, as well as clinical practice. This is increasingly introducing more people to mindfulness and resulting in mindfulness having an impact upon a range of aspects of life, work and experience, well beyond the focus of mindfulness when it was first introduced into secular, western contexts by Kabat-Zinn and others in clinical settings. University programmes and courses in mindfulness which are broader in scope and reference than previously are likely to be developed in response to these interests and the social, community and organisational applications of mindfulness. This will enhance and develop our understanding and use of mindfulness. As a student and participant in this research stated, such developments to the postgraduate study of mindfulness, may lead us to,

... the bigger picture and a more integral view – flexibility (agility) of mind and a capacity to move from the particular to the universal, with ease.

A number of students on the Aberdeen programme have indicated that they are involved in some pastoral capacity within their profession. This includes health educators; student support officers at further and higher education institutions, guidance teachers; business managers and coaches; school teachers in both primary and secondary sectors, as well as clinicians in a range of health contexts.

Any studies based on assessed evidence, such has been the case here when considering mindfulness assignments, should be treated with a degree of circumspection and caution. However, despite this inferential limitation we hope that this paper has outlined that mindfulness, as taught in UK Higher Education, is being explored, studied and applied in increasingly diverse professional contexts and the use of mindfulness as a tool for professionals involved in pastoral care represents a broadening of application beyond traditional clinical settings.

## Disclosure statement

No potential conflict of interest was reported by the authors.

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