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# A Qualitative Study of Mindfulness Based Stress Reduction (MBSR) at Maggie's Centre Gartnavel Glasgow



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## Guide to reading the report

The report provides both in-depth and summarised findings to accommodate different audiences. The three Case Studies (**Appendix 1**) contextualise the main themes of the study in the context of individual stories.

## Executive Summary

This qualitative study explored the experiences of people attending Maggie's Centre Gartnavel Glasgow, participating in a group programme known as Mindfulness Based Stress Reduction (MBSR). The intervention was delivered by experienced facilitators from Mindfulness Scotland<sup>1</sup> and also attended by Maggie's staff as part of a training package. The JMA Trust<sup>2</sup> funded the delivery of the groups and training and Mindfulness Scotland funded this evaluation.

The programme runs over eight weeks and each session lasts 2 hours. Participants engage in daily mindfulness exercises designed to enhance awareness of body sensations, feelings and thoughts. The aim is to reduce stress and promote well-being. In depth interviews were conducted with 13 participants at the Maggie's Centre. The interviews followed a semi-structured format and covered experiences of the group, experience of home practice and whether participants gained any benefits relating to symptoms or subjective well-being. The interviews were recorded, transcribed and analysed for emergent themes.

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<sup>1</sup> Mindfulness Scotland is a registered charity (SC041573) based in Glasgow.

<sup>2</sup> The John Maurice Aitken Trust is registered in Scotland with charity number (SC045343).

## Key Findings

- MBSR, as delivered at Maggies, is a feasible intervention based on participant adherence and **overall positive feedback**.
- Strong **compatibility between Maggies as setting and MBSR** as intervention facilitated participants' confidence and engagement with course;
  - Ethos of trust and candour
  - Environmental aesthetics of connecting inside-outside spaces, light and calm
- The specific **expertise of experienced facilitators** from Mindfulness Scotland, and the **group learning format**, was highly valued and appeared an integral ingredient to participant enjoyment and commitment to the course.
- **Participants bring a pre-existent motivation** to build resilience and adjust pace of life. MBSR course provides skills/framework to help people achieve this.
- Participants' experienced pivotal **points of engagement** where the course became personally meaningful and purposeful. These were often unique responses to core concepts and components of MBSR, especially the following;
  - Being kind to yourself, Staying with the difficult, Adapting to change, Processing existential/spiritual experiences, Breathing techniques
- 'Staying with the Difficult' was a key practice for many which laid the foundation for a different approach to illness and building a resilient approach to life.  
(See Case Study 1 pg. 32)
- Early benefits such as improved sleep and relaxation motivated people to continue.
- Mind-Body awareness sparked establishment of a **positive relationship to body** which for some had been compromised by disease process and surgery.
- Awareness of muscle tension and breathing patterns core elements of gaining control over anxiety and pain. (See Case Study 2 pg. 37 )
- **Increased overall awareness** enhanced ability to pre-empt challenges linked to reduced physical capacity leading to a less destabilising emotional response.
- MBSR experienced as **lifestyle enhancing endeavour** which included personal growth rather than solely learning to cope. This made people feel good about what they were doing and had a **normalising effect**.
- The development of **compassion for self and others** was a crucial factor in adapting mind set and underpinned many positive outcomes.
- The 'Ripple Effect' of mindfulness, such as sharing skills/ techniques with family and ability to remain personally calm in stressful scenarios, **enabled participants to be a resource of support for families** rather than feeling like a source of worry.
- The course provided a **framework and a space for stillness, reflection and contemplation** which majority found uniquely helpful in processing some tough existential challenges. (See Case Study 3 pg.40 )

- Some participants were keen to develop mindfulness practice post course and were hoping for continuing support at Maggie's via drop in or an established group.
- Others felt the 8 week MBSR course had been a process **for internalising the support received at Maggie's and building resilience** to move forward independently.

## Key Findings Summary

MBSR at Maggie's has been a successful venture resulting in a variety of benefits for the majority of participants. These include relaxation, compassionate approach to challenges such as anxiety, pain and difficult emotions, adjusting to lifestyle change and achieving personal growth.

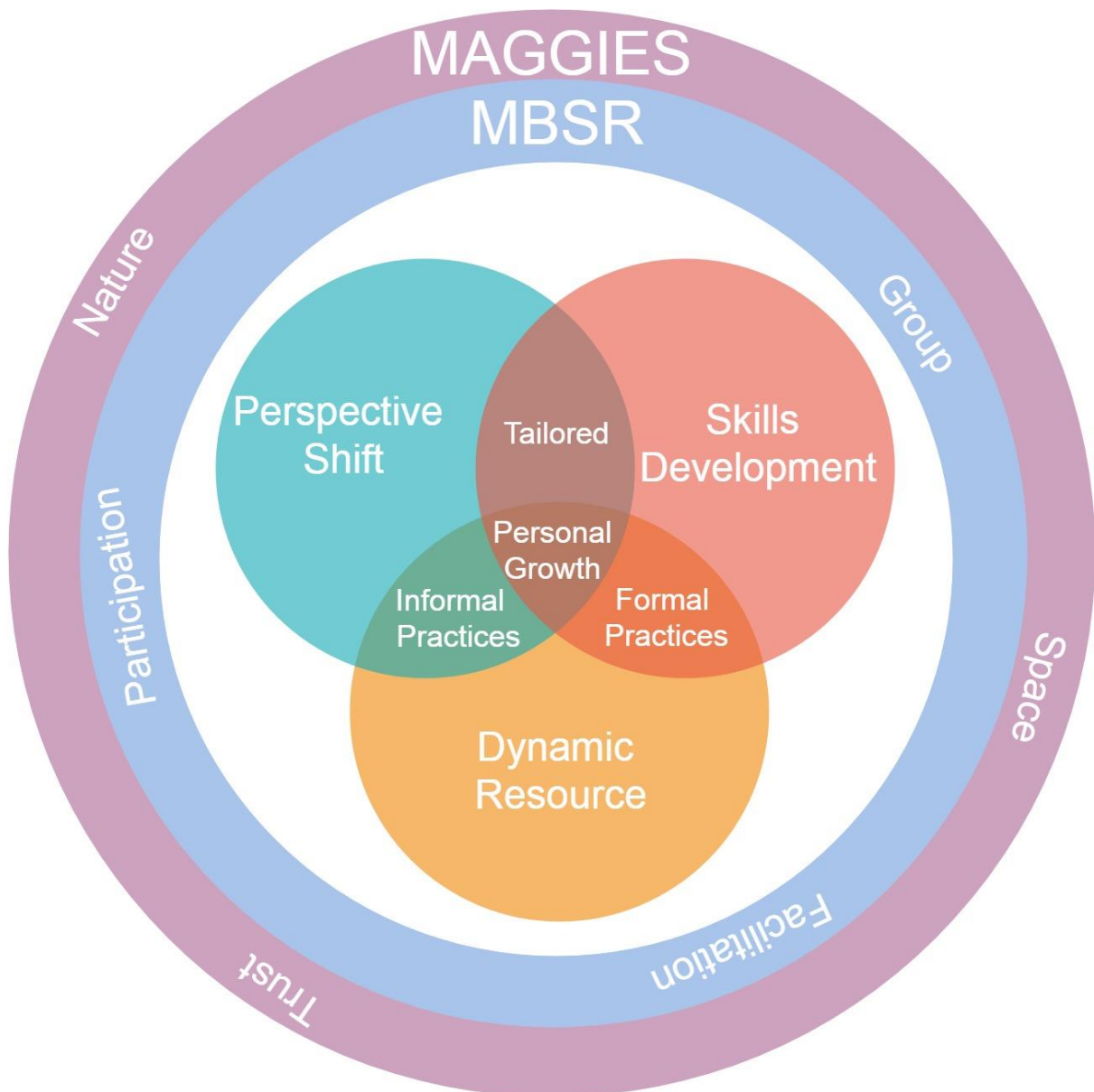
Maggie's provides a good setting for the course by way of environment, ethos and supportive staff. The group format enhanced learning. The MBSR courses evaluated here were delivered by experienced facilitators and results should be interpreted with this in mind. Any wider roll out of MBSR should prioritise suitable training protocols for future facilitators.

The MBSR intervention is applicable throughout the dynamic process of the cancer journey. The interlinked components allow participants to tailor their engagement and choice of practices, depending on their circumstances and preferences.

**(See Figure 2 MBSR at Maggie's: Summary Diagram Pg.6)**

- **Perspective Shift:** The structure of the 8 week course as a standalone experience from which participants integrated a pivotal perspective.
- **Skills Development:** Learning techniques which participants could develop through formal practice and address immediate needs such as anxiety and pain control.
- **Dynamic Resource:** Responsive to individual's journey from managing illness, personal growth goals to supporting fundamental life change moving forward.

**Figure 2 MBSR at Maggies: Summary Diagram**



## Introduction

Patients undergoing treatment for cancer often suffer high levels of stress and anxiety as well as the physical effects of chemotherapy. (1) After completing treatment many patients and their families and friends, continue to have high levels of distress requiring psychosocial care. Anxiety, depression, fatigue and sleep problems are common among cancer survivors. Threat of disease recurrence and the impact on daily life and future plans are reported as leading to increased levels of stress and anxiety. Adjustment to this cancer related stress involves cognitive, emotional and behavioural coping responses to the stress of cancer related symptoms. (2)

Hence a psychosocial approach, such as Mindfulness Based Stress Reduction (MBSR) designed to integrate stress reduction techniques with mindfulness to improve the quality of life, could be a helpful adjunctive intervention for people throughout the cancer journey.

## Mindfulness Based Stress Reduction (MBSR)

Mindfulness Based Stress Reduction, MBSR is a group intervention consisting of mindfulness meditation and gentle yoga that is designed to have applications for stress, pain and illness. The program differs from a relaxation approach by aiming at the cultivation of insight and understanding of the self and its relationship to suffering via the practice of Mindfulness. (3)

Recent innovations in psychological treatments have integrated mindfulness meditation techniques with traditional cognitive and behavioural therapies. (4) A group treatment programme known as mindfulness based cognitive therapy (MBCT) has been developed and shown to be effective in reducing relapse in people with recurrent depression. (5) MBCT has been included in the recent NICE guidelines as an efficacious treatment.

Research accumulated over the last 20 years suggests that MBSR and MBCT can help to relieve particular symptoms and improve quality of life for people in various healthcare settings. (6) Specifically for cancer patients, it has been reported to improve mood, reduce anxiety, improve concentration and reduce pain and hormone related symptoms. (7) However, a recent meta-analysis reported that the mostly positive mindfulness literature to date has a distinct confirmation bias<sup>3</sup> and is overstated given the very small effect sizes and lack of control groups. They suggest much better quality studies are needed. (8)

The MBSR course at Maggie's is based on the programme set out by Jon Kabat-Zinn. Within a framework of non-judgement and acceptance participants are taught to focus attention on the breath, body sensations and eventually thoughts, feelings and emotion with the aim of establishing a more compassionate and accepting orientation to their experience. The practice of Mindfulness is taught both in a 'formal' setting while seated, walking or lying

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<sup>3</sup> Papers that report positive results are more likely to be submitted, published and cited by other authors than negative results. Confirmation Bias is a recognised issue in many areas of academic research.



down. Participants are also encouraged to practice ‘informally’ when engaged in everyday activities. Some adjustments will be made if necessary for participants, such as length of practices and sessions to make allowances for symptoms or fatigue levels. There will be 8 weekly sessions of 2 hours plus one all-day session as in the standard MBSR programme. (See Appendix 3)

## **Evaluation Overview**

This study explored the experiences of people attending Maggie's Centre at Gartnavel, Glasgow, who participated in the group programme Mindfulness Based Stress Reduction (MBSR), delivered by Mindfulness Scotland.

The study was a retrospective cross-sectional qualitative study using semi-structured interviews (9) with the aim of allowing participants to describe their own experiences of the group. The interviews focused on their experiences of the course and the impact on their daily lives.

### ***Procedure***

All participants from two consecutive cycles of the 8 week MBSR course were invited to participate in the study. Thirteen, out of a possible sixteen, consented and three were lost to follow up. Interviewees were all female with an age range 35-65. Occupations were mostly professional, teaching or healthcare, with some retired and some still in employment. Two of the interviewees were carers. Interviews were conducted at Maggie's and lasted about an hour. The interviews, confidential to the study, were recorded and transcribed.

### ***Semi-structured interview***

The interview protocol outlined areas of interest but the aim was to allow participants to describe their own experiences of mindfulness in their own words. The domains covered included;

- How participants experienced the mindfulness group (follow up questions on what they found more and less useful)
- Experience of the practices at home (Whether they managed to complete the formal and informal practices and reasons.)
- Effects on other areas of life (if any)
- Participants' explanations for any perceived changes

### Data Analysis

Grounded Theory (10) was used to guide both the data collection and the analysis. Emergent themes are identified and put into a narrative account that tries to make consistent and meaningful statements about the participants' own experience rooted in their own words. As a check on the analysis, frequent meetings with the facilitator Alistair Wilson were conducted and feedback on extracted themes and anonymised quotes were discussed. Several meetings were also held with Maggie's centre staff who also attended the MBSR groups for training purposes.

### Confidentiality

Audio files and interview transcripts are coded for identification purposes. Pseudonyms are used in the case studies (Appendix 1) to protect interviewees' identity. The quotations included in the report are anonymised.

## Results

### Expectations

Expectations of the MBSR course varied but most participants had previous knowledge or experience of mindfulness based practices. All participants talked about actively seeking ways of dealing with anxiety and stressful situations.

It also seemed part of the appeal that it was a mainstream 'normal' thing to do and noticeably few made a direct link with cancer in the initial stages of interview;

*"I'm going around smelling the roses but it's not because I've lost it, its normal! I wished I had thought to do it earlier in life." (Gp1, 4)*

*"What do I want from mindfulness? I want spaces in the day where I don't have to think about anything else. Just put my hand on my stomach and feel the physicalness of breathing."(Gp1, 2)*

*"I want to appreciate all the wee things in life."(Gp2, 9)*

The few who did make a direct link with cancer talked about causal links with stress and hinted at underlying hopes that mindfulness could prevent recurrence;

*"I hope it keeps away cancer. I worry about that. I find it difficult to talk about. I think it was stress that brought it on me. But I'm well now and I don't want to focus on the physical side. I just want to do nice things for myself." (Gp1, 3)*

## Motivation

There was a high level of motivation driving most participants' engagement with the MBSR course from the start. The diagnosis of cancer was accompanied by a feeling of hurtling from long developed habits towards new desires and necessities which many felt ill equipped to respond to;

*"I've always been forward planning, prepared and task oriented. So I can't easily live in the moment or deal with uncertainty." (Gp1, 5)*

*"I want to appreciate life now and small things overlooked." (Gp2, 5)*

## Perceived Benefits

### Early benefits

Many participants noticed specific benefits very early in first few weeks which reinforced confidence in the course and motivated them to continue. Improved sleep and deep experiences of relaxation during facilitated practices were among the early benefits reported as this participant explains;

*"Evan after the first week I felt as if I had a bit more breathing space. It seemed to calm me for the week after and gave me space. I was quite surprised. I thought, oh there's been a change even just over this short space of time. I was pleased, em cos I really needed it." (Gp1, 6)*

People described other physical benefits such as less fatigue and one person reported that her last two check-ups at the GP had shown her blood pressure had come down and offered her interpretation of this;

*"To me that was proof it works as that has never happened before. I am a scientist so I like proof, none of this airy fairy stuff!" (Gp2, 10)*

## Managing Anxiety and processing emotion

A key benefit for many participants was developing the ability to control anxiety and overwhelming emotions;

*"I now have a habit of doing the breathing space. I mean it doesn't take it away completely, but I think ok do you want to be thinking about this now or do you want to stop. So it's given me some control. It's about stopping the cycle." (Gp2, 8)*

## Body Awareness – Mind Body Connection

Increased awareness of the mind body connection was a strong theme in the data. Participants reported an associated change in how they thought about their body and how this impacted on everything from pain to feelings of wellbeing;

*“I can feel the stress start, because my jaw and face all go rigid. I'm much more aware of when that's happening and I tell myself to stop. The fact that I'm more aware, I think, has been a big step for me too.” (Gp2, 11)*

A positive reconnection with body was not something that everyone anticipated but was warmly welcomed. This participant elucidates this theme further;

*“I'm thinking more about my body. Definitely that was pushed away with this treatment and the surgery just you don't even want to think about your body.” (Case Study 1)*

## Personal Growth and Responding to Change

### Adjusting to Lifestyle Change

MBSR practices resulted in increased physical and emotional awareness for many participants and were linked to developing more beneficial responses to the inevitable changes that had been imposed on their lives. An important effect of increased awareness was the ability to pre-empt challenges linked to reduced energy/physical capacity leading to a moderated emotional response, which was less de-stabilising. We hear from three different participants here with varied experiences of this;

*“I'm more tuned in now to what I can and can't do and I don't get upset if I can't do something anymore.” (Gp1, 2)*

*“That's a change in me. I've had to slow down. Now, instead of being annoyed and angry at having to slow down, I'm enjoying the pace and appreciating what's around me. I would not have come to that point otherwise.” (Gp2, 7)*

*“If your house is messy, but you still clean up then it's not good for your health. But also if you don't do it, you can also feel punishing towards yourself. So the course has given me the ability to have a different attitude to everyday stuff.” (Gp2, 13)*

## Initiating Lifestyle Change

There was a strong emphasis on MBSR as an unexpected opportunity for personal growth and mind set change. In parallel to the experience of developing constructive ways of responding to the imposed changes that the cancer diagnosis brings, was the realisation for some participants, that they could voluntarily make positive lifestyle changes. The possibility of fundamental change and the experience of beginning to make progress towards that was for some significantly empowering and energising;

*"It's possible to have far more control of yourself than you realise. It's made me think differently about er..well everything actually. I really like this put it that way."(Gp2, 4)*

*"I kind of wish I had done this before, years ago to be honest." (Gp2, 9)*

The experiential aspects of the course that people talked about most in relation to this theme were relaxation, staying with difficulty and loving kindness practices. These contributed to individuals' awareness of their own particular mind-set and inspired confidence to pursue a wider range of approaches they wouldn't normally think available to them.

*"I can do this. I can get to a deep stage of relaxation! I am not just a nervous energy person. I can change my personality." (Case Study 1)*

## Reshaping Identity and Control

This theme of fundamental mind set change was closely linked to the twin themes of regaining identity and gaining control over ones circumstances. The humanistic approach inherent in the MBSR course was found to be a welcome counterpoint with recent treatment experiences where some have felt objectified and powerless within high tech clinical settings;

*"You felt the facilitator was right in there with you and sharing things. It was powerful reminder – you're a person not just a helpless patient. And health care professionals are people too, with a hard job. There was a compassion and nourishment that came from that which is hard to put into words." (Gp1, 3)*

*"I feel a bit like me again... telling myself to change my train of thoughts if I start getting down instead of getting wave swept."(Gp2, 2)*

## Compassion

The emergent approaches to life and personal changes that people discussed were clearly not always the sole effect of MBSR but interlinked with cancer experience as a whole. However, the experience of developing compassion was the strongest most specific theme. The significant changes that people described were underpinned by a sense of self-compassion or what most people referred to as just being 'kinder' towards themselves.

There was a cognitive side to this in that it was expressed as a new idea that you don't have to 'beat yourself up' even though people felt they had done this automatically throughout their lives without questioning it. And there was a deeper emotional aspect that followed from this cognitive reassessment of whether they deserved to be judged harshly, that people found more difficult to put into words;

*"It's been more the emotional side of it for me just now, because I don't - I'm not - I'm a long way from having had my surgery and I've learned to live with the limitations of that. Actually, perhaps I have learned to be kinder to myself. I think, a greater ease of mind as opposed to peace, but ease of mind." (Gp1, 5)*

*"MBSR was like a real click. Although I had done the Living with Stress and Relaxation course, I was not being kind to myself. I got it probably not from the exercises but the talking and explaining, that Mindfulness is when you are kind to yourself." (Gp2, 13)*

The experience of compassion and MBSR helped one participant understand why she struggled with the public discourse around cancer and the tone of some fund raising campaigns;

*"A lot of public charities talk about fighting cancer like you were going to beat it up. This makes me feel bad. I don't want to fight I want to nurture my body." (Gp1, 6)*

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## KEY POINTS

Early benefits linked to relaxation and enjoyment of group.

Skills linked to body awareness and managing difficult emotions develop as group progresses through 8 weeks.

Psychosocial adjustments such as enjoying slower pace, compassionate approach to challenges, personal growth and fundamental lifestyle change reported towards end and extends beyond course.

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## Group Work

The experience of group was for most people supportive and motivating as is common in group work. Further, there seemed extra value in helping people to a deeper understanding of core aspects of MBSR that were novel and different to other techniques for instance the staying with the difficult practice as this participant explains;

*“One woman on the course got not good news and she explained how she coped she just breathed and tried to experience it and stay in the moment. And I know the principal from other groups... you should try to be here not somewhere else. But on the course it was this woman telling the story in the group that made it click with me. Yes. Sometimes you have the information. But it became more integrated.” (Gp2, 6)*

## Home Practice

Over half of the participants found that the homework practices were too long at the beginning of the course when they were just finding their feet with the course;

*“They wanted us to do quite long sitting, meditations quite early on as homework. I really struggled with that. It was about a kind of 20 minute cut-off for me, especially at the beginning. That was a good thing about the course; it was a very open structure for us to feedback and say we are struggling with this and they were okay with that.”(Gp1, 1)*

The longer practices were much better tolerated when facilitated within the group;

*“I think we just needed to build up to it because the last session was all meditation practice, we didn’t speak apart from instructions, and we could do that.”(Gp2, 6)*

*“I can do it in a group and it's easier. I think it must be the companion feel.”(Gp1, 4)*

*“At home...there's just too much quiet and it leaves me too aware of what's going on in my head, so it's difficult to focus.”(Gp1, 6)*

## Quality of Home Practice

The quality of the practices that participants carried out at home varied between participants and also at an individual level depending on the context and other factors. This participant captures the experiences expressed by several participants and also frames quality of practice as an important issue going forward;

*“It’s hard to do the practices and sometimes I just can’t do it. But when I get into a flow, it’s a really high quality practice and I could stay there all day. So I’m aware I could get a lot better at this.”(Gp2, 11)*



## Maintaining Mindfulness Post MBSR

Participants described a variety of ways in which they were still practicing mindfulness post group from formal to informal practice.

Some participants felt they had absorbed enough from the course to develop an individual practice that incorporated their favoured practices and suited their lifestyle. So for instance this might involve using apps, doing a 3 minute breathing space at work, whilst on a bus journey or mindful walking practices whilst exercising the dog;

*"I liked the fact there were very short ones that you could do, or that I could do while I was at work, just to calm me down and centre me, because, quite often, you need that. It was nice to know that was possible and that you didn't have to spend half an hour, or what have you, in a nice comfy seat. If you just did the three-minute one or something that was really useful. I thought that's something I can really take to work with me." (Gp2, 8)*

*"I use Headspace and there are 10 practices with cartoony things that just get the message through and keep it simple. I do it little and often."(Gp2, 11)*

*"I do it last thing at night and it helps me sleep. I know you are not supposed to do it for sleep but well that's fine!" (Gp1, 3)*

*"I go swimming regularly and I do mindfulness for the full half hour so it's just a normal part of my everyday routine now. I used to get bored swimming and now I look forward to it and feel really calm and peaceful afterwards."(Gp2, 7)*

Others had an even more informal approach in that they felt they had achieved a perspective shift that didn't require regular practice but had become integrated into their way of life say for example washing dishes mindfully. These particular participants were not planning to establish formal practice or attend any follow up groups;

*"I don't have anything like a formal practice but what I integrated from the course is nourishing."(Gp1, 6)*

*"I don't feel the need to do more practices I got all I need from the course."(Gp2, 8)*

Some expressed anxiety around not achieving progress towards a personal goal of having an established and developing practice. However, others were philosophical about this and saw it as something they wanted to do in the 'future' when they had more time;

*"I want to do more. I wouldn't say I have improved since the course. I just can't seem to get round to it." (Gp1, 3)*

*"Now I have to admit here that I'm not quite a fully-fledged practitioner. It's a work in progress. It's making time to do it. I think that's the thing. I've always been a person - it's probably the nursing background - where you've got to be seen to be doing, got to be busy. You can't sit down, because there are things to do."(Gp1, 4)*

## **The Ripple Effect**

### **MBSR: Families, Relationships, Work and Home**

An interesting recurrent theme connected the effects of participation in mindfulness on relationships with family, friends and wider social networks. These relational aspects were described by one participant as **"the ripple effect"**.

#### **Resourceful Families**

The ability to bolster resilience of the family using mindfulness skills was a much appreciated benefit. Playing a resourceful role in supporting loved ones counteracted a very difficult feeling of being the source of worry and distress as a result of diagnosis and treatment;

*"The kids know I do it. It's good for them to see it's a normal thing not a mad hippy thing and there are things you can do to help stress. They know about the body scan. So I think it's good that it's in our lives." (Gp2, 12)*

*"Of course if I'm calm, people around you tend to calm as well."(Gp1, 2)*

Also, increased awareness led to making less automatic responses in interpersonal relationships which aided better communication and understanding. Sometimes it even kept the peace, taking stressful situations down a notch to everyone's benefit;

*"My family really press my buttons sometimes but they don't have mindfulness. But it gives me respite from getting wound up about it. I'm aware of my responses and I just accept it."(Gp1, 6)*

*"I can control situations. Even if I was arguing with my husband because this still happens when you have cancer! But now because I am aware, I breathe and tell him and he can calm down too!"(Gp2, 13)*

## Renegotiation of Boundaries –Domestic Concerns

The all-female perspective in this data set highlighted the impact of established gender patterns and a necessary readjustment of roles and rules as a result of both the cancer diagnosis and participation in MBSR.

One participant described her husband's surprise and discomfort that her usual hyper organised approach to life had significantly changed;

*"He's used to having this whirlwind that ran round the house and kept everyone ticking over. This morning he was like... why are all the school uniforms lying in a bundle on the couch? I'm just like, well I'd quite like to watch this programme or I'd quite like to go for a walk. So I think he's a bit ... it's not causing massive rows, but it is a renegotiation of boundaries and who does what. That can be difficult." (Gp1, 3)*

She encouraged him to sign up for the course to reassure him that it was a positive development for her, and that he too could benefit from the insights she had gained;

*"I think he might do it which would be really great. But then nothing will get done. [laughs] The school will phone up asking me why are your weans wearing Snow White costumes to school!"(G1, 6)*

However, not all partners were keen to engage with the course or practices and that was disappointing for a few people;

*"I think, he would benefit from MBSR, but he will not come here. He says that he has a place in his mind for when things get tough. He pulls up the drawbridge." (G1, 3)*

One participant rejected her husband's view that MBSR was mainly for women:

*"My husband says he read it doesn't work as well for men, I said that's crap, Buddhist monks are men!" (Gp2, 9)*

Yet the experience of the course itself offered a way forward from established dynamics in that some felt changes in their perception of the support their husband could give and a shift away from wishing it was different.

*"But I notice my relationship with my husband is a bit improved. Probably because I just accept that he is different. He is supportive but he just has a different mindset." (Gp2, 13)*

## Quality of Time with Family

The quality of time spent with loved ones could be enhanced through sharing mindfulness activities. One participant described how including her partner in a silent walking practice had been a novel and moving experience for both which made them feel connected to each other and nature;

*“On the other side of the river, all of a sudden, we saw a little baby deer and it was such a magical experience - I saw the deer and of course we were silent so couldn’t talk and I was kind of pointing, then he saw it. We stared at the deer and the deer stared at us and then it went back to eating. It would stop and look at us across the river and walked along with us for a while. I think it was just noticing the deer much more than I would have before. It was a special afternoon.” (Gp2, 8)*

## Wider Social Networks

### *Back to Work*

The working environment was another arena where participants reported ripples of change personally and collectively. The main themes here were around improved ability to prioritise workload by stepping back from situations, rather than react automatically, subsequently making better decisions based on increased awareness and acceptance of their changing capacities. Less reactivity to negative dynamics and more empathy towards colleagues helped ease the way back into work by subtly influencing a gentler working environment. (See Case Study 3)

### *Community*

The increased ability to be present sometimes caused frustration when it seemed at odds with the rest of society and for one person seemed to highlight a pre-existing feeling of isolation of which she hadn’t been fully aware;

*“There’s a detachment in everyone. They’re talking to you, and still busy on their phones, I actually don’t like that. I’m speaking to you, you’re speaking to me, but you’re not really paying attention. You’re not really here.” (Gp1, 3)*

## Tailoring MBSR

An aspect of the course which made it highly amenable to participants was that it was highly tailorable to individual circumstances. For some participants with physically challenging symptoms this was essential;

*“I learned that, perhaps, when - the timing that suits you, you think you've got time to do it, is not necessarily the best time physically. A lot of the things we were all going through affect you physically, so you can't just say, right, at three o'clock every day I'm going to sit down, or lie down and do this. And if your body is not going to co-operate, then you just accept that. The course prepares you for that so it's all part and parcel.” (Gp2, 7)*

Other participants were entirely new to mindfulness approaches and some even to relaxation. It was a basic requirement then for individuals to be able to move through the course at their own pace and with their own goals;

*“At start I couldn't sit still even for a minute – at end I could relax and be still for 40 mins. And that was my main achievement to be honest!” (Gp1, 2)*

Most interestingly, many people were inspired to make particular practices their own in terms of developing their own goals for what they wanted to achieve. Staying with Difficulty' and 'Loving Kindness meditation' were popular practices for this approach. (For more detailed examples, see Case Studies 2 and 3, Appendix 1)

Equally, participants found they were easily able to avoid practices that didn't appeal to them personally or that they found too much at that particular time;

*“The kindness exercise, I have a feeling its powerful exercise but for me I don't like it. I don't really know why, maybe because it's very difficult! And I like the mountain exercise because it's very easy for me!” (Gp2, 13)*

## Secular Spirituality

Most participants referred to what they felt were spiritual aspects of the course and most were comfortable and appreciative of this. For some this was linked to religion and for others it was the poetry that represented spiritual elements. In general, participants seemed to derive benefit whether they had a secular worldview or other religious beliefs as evidenced by following quotes;

*"I have a faith and I believe in God and the soul. I go to church. Mindfulness fits in with that, it touches a whole in the soul, that deep despair that you can have, it allows space for that to heal. Mindfulness nourishes the mind and soul, feeds it, waters it, and connects you to nature." (Gp2, 10)*

*"The fact that it has roots in Buddhism appealed to me, I do like their teaching just as I like some aspects of other faiths teaching. I'm not religious myself but I think religion is not spirituality. We are all spiritual beings." (Gp1, 4)*

One participant who did not have any religious beliefs said she was open to anything that could help. She had previously tried a meditation group run by a Buddhist organisation to help cope with a death in the family but found the focus on discipline and strict rules difficult. She contrasts this with the MBSR group here;

*"The mindfulness course was good because you can dip in and out how it suits you. It's not about discipline or pre-set agenda. They were more like, 'how are you doing?' and 'what's helpful for you?' You need that flexibility when you are ill." (Gp2, 11)*

Another participant could understand their experience of MBSR from different perspectives, spiritual and scientific, but this served to enhance her own interaction with the course;

*"There's a spiritual element, because I'm just that way inclined. For me, I would be thinking, oh this is a time of peace and opening yourself to - well in my case it would be God. But - and the kindness element, I know that raises the oxytocin..." (Case Study 1)*

There was one participant, who was a practising Buddhist and felt the practices were too removed from their religious context to be personally meaningful but said that she recognised that it might have value for people who were new to mindfulness.

## Who benefits from MBSR?

In this particularly successful cohort, many participants had pre-existing knowledge of mindfulness approaches or had self-referred for the MBSR course. This is an important point which highlights that expectations and personal engagement might be key factors to positive outcomes.

A range of other factors influence whether a participant will benefit from or engage with the course. This is often dependant on interrelated aspects of a persons' life including where they are on the cancer journey, family and social circumstances.

For this reason it's helpful to look at individual stories in more detail. For three case studies which contextualise the experience of participants and shed some light on the overall evaluation questions please turn to Appendix 1, page 32.

## MBSR at Maggies

### Impact of Setting

The context of Maggies for the course was an important factor and there was strong compatibility between Maggies as setting and MBSR as intervention. The ethos of trust and candour that participants had experienced at Maggie's, facilitated confidence and engagement with the course. The environmental aesthetics of connecting inside-outside spaces, light and calm and access to nature were conducive to the nature of the mindfulness practice.

*"Maggies is a wee world you step into – this is getting daft and spiritual but you can feel the healing. Everyone is willing you to get better." (Gp1, 5)*

### Compatibility with Maggie's Groups programme

Participants commonly compared other Maggie's groups with MBSR. The overriding message was that the groups worked well together and complimented each other;

*"The stress reduction course (**Living Well with Stress**) was just the beginning it helped me to relax. But the MBSR it became more quality not quantity and explaining things. But because I did the stress reduction course and then the MBSR course that was good and if I had done it the other way round it would not have had the same effect. When I did the living with stress exercises on the tapes and then I did the mindfulness exercise it just came together in my brain." (Gp2, 13)*

MBSR was generally described as different in that it was a challenge in terms of the work that was required during the course. People had mixed experiences of this, negative when they felt they had failed and rewarding when they felt they had made breakthroughs and tangible benefits.

*“The exercises on Living Well with Stress course were an absolute pleasure. Just for pleasure. And the mindfulness was hard work! You have to work hard yourself.”*  
(Gp1, 6)

## Skills development and Group Support

More specifically, some participants commented on the focus of the group being on developing skills rather than the group support they experienced in other Maggie’s groups. For most people this worked well and the focus on achieving specific skills was appropriate and appreciated.

*“It gives you - its more skills based. The other one, I think is like a taster for lots of things, not as focused as this one.”* (Gp1, 2)

One person, who personally enjoyed this focused challenge of skill development, also mentioned that she was aware of a fellow participant<sup>4</sup> in the group who struggled with this and was more in need of group support.

*“I think maybe there is a need for more of the group process and support that you would normally get in Maggie’s. I noticed one person struggle in our group with that.”* (Gp1, 6)

There were differing opinions over what continuing mindfulness support there was currently on offer at Maggies. There was a new group which referred to mindfulness in the title but some were unsure as to whether it was linked to the MBSR course;

*“There is a mindfulness group started now and I can’t wait to go that it will keep my hand in because you forget.”* (Gp1, 5)

*“There is a mindfulness group that Maggies run but it’s not the same as the MBSR course. I think it’s more for relaxation.”* (Gp2, 9)

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<sup>4</sup> This participant was lost to follow up.



## Format of Course

The most popular part of the course was the 'day of silence' which involved experiential practice only. This was memorable for all participants who appreciated the deeper experience this afforded and also seemed to enjoy the novelty of this set-up.

The MBSR course was slightly longer than regular groups at Maggies and without breaks. Several participants initially anticipated that this might be testing. However, as the course progressed the format of the group mitigated the longer running time and was amenable and comfortable;

*"It didn't seem to matter there wasn't really a break, because as you moved from one section of the class to the next, from instruction to practice, - we didn't feel that we had to rush through. If people were sharing, there was no pressure to hurry up and stop, or move on, which was good, because it was - it made you feel easier about sharing something of your own. These were like breaks, because it was a kind of refreshing in between - almost like quite a natural process, quite organic in a way."*  
(Gp2, 7)

## Noise

Maggies can be a noisy environment due to the open aspect design of the building and groups of people coming and going. How participants responded to this revealed something of how people related to Maggies overall and also how the MBSR practices were impacting their approach more generally;

*"Everyone is comfortable with Maggies and accepts that that noise is - it's all people like us that are making the noise. You don't really hear it. You're in the middle of it. You're part of it."* (Gp1, 1)

One interviewee explained that she was responding differently to the noise by the end of the course, so that in a sense, the noise aspect was grist for the mindfulness mill;

*"I found it distracting at the beginning but eventually it just became part of what I was switching off from."* (Gp1, 6)

Only one participant reported a problem with noise and explained that if you sat near the air conditioning unit, and the facilitator's voice was quiet, it was not possible to hear.

## Course Facilitation

Common themes focused on the engagement and authenticity of the facilitation. Participant engagement with the practices was strengthened by the fact the facilitators were personally committed to the practice of mindfulness.

*“It felt really helpful that the end of the course...we got a pebble to take away that really helps to have that object to remind you. Alastair gave us a shot at ringing the bell and so you really felt you were fully involved there.” (Gp1, 2)*

The gentle and tactful approach with no pressure to speak was particularly appreciated. However, a few people did find the enquiry process<sup>5</sup> occasionally prevented them from speaking as they became aware they would be ‘asked a lot of questions.’

Many were in agreement that the qualifications for delivering this course were specific and felt that it might not be the same with less experienced facilitators;

*“It was quite potent. The facilitation was very professional and I think that’s important with a course like this” (Gp1, 4)*

Some participants expressed concern that Maggie’s staff would find the course too dissonant to deliver along with providing counselling and listening sessions for their own clients;

*“They’re listening to us all the time, with perhaps - I know they will have sessions for themselves, but if they’re leading something like this, then that’s quite a burden, perhaps, in some cases, depending what people are sharing. Then just to come out of that and go straight into, maybe, a one-to-one session with somebody. I think it’s a bit much to expect. Unless they’ve been doing it themselves for a long time, I think it’s a bit of a thing to expect them to be able to lead something like that MBSR because it’s very different skills, the facilitators need a bit of distance to just focus on the practices.” (Gp2, 9)*

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<sup>5</sup> MBSR Facilitator asks a series of objective questions to aid participant in interrogating and developing their own practice.

## How Does Mindfulness Work?

### Mechanism of Action

Participants experience chimes with the theory that increased cognitive, emotional and physiological awareness in combination with actively exerting control over previously automatic processes are relevant to how MBSR might work.

*“I was becoming more aware of controlling. I started catching myself. How am I breathing? What am I thinking? I am more aware.” (Gp2, 7)*

*“Gives you a distance from what your brain puts you through sometimes with constant worry about the past and the future. It’s hard, it’s not easy to just be in the moment but I find it works.” (Gp1, 1)*

Several participants elucidated on their hopes that MBSR would provide protection from cancer recurrence. There was a mix of preconceived ideas about cancer causation and personal interpretation of material delivered on the course;

*“On the course we learnt that mindfulness suppresses the level of stress because it will put the rest of the hormones at the right level. And I deduced from this that then this would protect the immune system. If you suppress the stress the immune system will be ok.” (Gp2, 13)*

*“When I got cancer, it was a very stressful time in my life and I think sometimes it takes a bucket full of stress to kick it all off. So maybe if I have more strategies like mindfulness then it won’t trigger things. ” (Gp1, 2)*

## MBSR and the Cancer Journey - A Dynamic Process

### Diagnosis and Treatment

The issue of timing of the course came up for participants when discussing the overall experience of their journey. Participants were mostly either finished treatment or were between treatments and waiting for results. The consensus was that the MBSR course might not be the best option for someone in flux from new diagnosis:

*“I couldn’t have done a course like that when I first came here a year ago after diagnosis. I was in such a mess and oh my word Stuart here was fantastic – really talked me down from the edge.” (Gp1, 1)*

One participant felt that she was unable to engage fully in all parts of the course due to planned surgery on the horizon, but felt motivated that she could pick this up again via the course materials at a later stage. (See Appendix 1, Case Study 2)

### Moving on from Maggie's

There were mixed experiences of how the MBSR group impacted specifically on attending Maggie's centre. One participant was approaching a point in her journey where she was winding down her regular attendance at Maggie's and anticipated that the MBSR course would help her ease through this transition;

*"Coming here to Maggie's, you take a deep breath and a sigh and you can just chill - but knowing that - this time I was going to get something that would help me take some of that away with me was really nice. And give me more skills to do that in my own life, because I'd found it a real struggle up until then." (Gp2, 8)*

Several others experience chimed with this idea of approaching MBSR as an almost 'advanced course for leavers'. However, for one participant it took several months of processing after the course for this to be fully recognised;

*"In the group I said that Living with Stress course could be interchangeable with MBSR but eh I wanted to say here in this interview, that I don't think it is in retrospect. Mindfulness is quite different. What I've realised, since I don't now really need to come to Maggie's any more, is that Mindfulness gives you things you can do yourself and take forward yourself and I was definitely ready for that." (Gp1, 6)*

There were still further mixed views on how completing the MBSR course dovetailed with participants' individual sense of belonging to Maggie's and the legitimacy of their access to its resources. The following participants elucidated on these sometimes complex issues;

*"The further away from a diagnosis you get the more I wonder if it's still ok to come to Maggie's. Am I taking resources away from someone who needs it more that's just had a diagnosis?" (Gp2, 12)*

*"Sometimes I think I should be away from Maggie's by now. But it's a great support and I still want to come here. And if there was going to be a mindfulness thing then it would be a wee excuse to come here!" (Gp1, 2)*

*"No I am nearly finished. It's a good place but also... it's not a hospital but it does remind you of diagnosis...it has associations." (Gp1, 6)*

In a wider sense, there was a suggestion that it would be a challenge to maintain the practices both post MBSR group if continuing mindfulness groups were not available;

*“I wouldn’t do it like at Maryhill Community Centre. It’s so conducive here you feel people understand where you’re at.”(Gp1, 3)*

*“You feel energy in the group which helps you at the time. There is a science to that its electromagnetic energy. But now that the umbilical cord is cut from the group - you don’t have the environment, the people. ” (Gp2, 7)*

Some people felt that coming to Maggies centre even for other events was a way of touching base with the principles of the MBSR course and helped keep the spirit of it alive;

*“You keep your hand in by coming here even for other things. I’ve not cut away from Maggies yet. It reminds me of when I got mindfulness and so I think I would find that hard now.” (Gp1, 2)*

## **Future Development of MBSR at Maggies**

### **What can Maggies learn about developing an MBSR intervention from this study?**

MBSR training is a significant investment where quality of delivery matters. It involves an approach which is different to what many patients and practitioners have experienced before. It can take trainees considerable time to develop expertise necessary to ensure participant engagement and optimal outcomes. This section briefly highlights findings from this study which may be particularly relevant when considering future development of MBSR at Maggies.

#### **Knowledge Sharing and developing expertise**

Active measures of capturing and transferring knowledge within the staff group as training and delivery is rolled out could contribute to building a sustainable supportive culture for MBSR at Maggies. The wider staff group, not directly involved in delivery, could then build capacity for making good referrals to the group and supporting clients going through the course. This would also create a valuable organizational asset if there was wider roll out across other Maggies Centres.

### **Future Facilitator Training**

The expertise and authenticity of facilitators was rated very highly and was a central part of the success of groups evaluated in this study. Hence, there would be high value in maximum investment in MBSR training with adequate time afforded to developing expertise. Also, consideration might be given to longer-term mentorship both within Maggies and possibly drawing on external expertise.

A related theme was that the external facilitation allowed participants to engage with the intervention at a distance from discussing personal issues and focus on developing new skills. Some anticipated that this might be harder for Maggie's staff, with a different relationship with participants, to remain objective. Although staff will of course be experienced in managing boundaries and therapeutic relationships, it might be useful feedback to bring to the foreground in future planning.

### **Recruitment of Participants**

Many participants in this study were self-referred and had positive expectations and motivation prior to starting MBSR. This may have contributed to the overall success of the groups. Depending on capacity, Maggies could rely on the apparent success of self-referral method or may wish to actively widen access for individuals, especially men, they consider appropriate as their expertise develops. But there is no guarantee that MBSR will be equally useful to patients who have not actively self-referred for the programme.

### **Adherence to MBSR Protocol**

Standard MBSR protocols may need to be tweaked to ensure sensitivity to the challenges that the course presents for participants at Maggies. Flexibility in relation to length of practice and intensity of engagement may be required for participants at various stages of their journey from diagnosis through treatment.

In particular, home practice during the course and post course is an important aspect to address at outset of delivering an MBSR course. A recent meta-analysis (11) showed an association between higher levels of practice and positive intervention outcomes, but also that participants generally struggled to complete the assigned amount of practice and exaggerated how much they actually do. The data in this study would concur with this to a degree, with a few participants expressing anxiety that they were not 'doing enough' practice. However, many were happy with personally tailoring all aspects of the course

including home practice. In any case, it would be of value to address this frankly with participants to avoid unnecessary pressure and feelings of guilt.

### **Managing Expectations**

As discussed earlier, recent reviews suggest the evidence of benefit from MBSR has been overstated. (8) This is not to say that such benefit is not possible, just that the evidence currently available does not support the strong conclusions regarding positive benefits that have been widely reported in the literature and the press. It's important for Maggies centres to be aware of this background, and promote realistic expectations of the MBSR course. Given that several participants expressed hopes that it may prevent recurrence, it should be highlighted that the intention of the course is that of support and well-being rather than treatment or prevention.

### **Continuing Support**

MBSR teaches the basics in mindfulness practices but does encourage participants to continue with developing skills. Some participants are able to continue this independently whilst others express hope that Maggies will provide follow on support by way of an established group. It might be useful for Maggies to consider whether a continuing group would be sustainable within their wider group programme and have clarity on this at beginning of roll out of MBSR.

## Conclusion

An MBSR programme at Maggie's Centre would seem to be a feasible intervention based on participant adherence and overall positive response. The expertise of the facilitators was highly valued and an important ingredient in terms of engagement combined with the much trusted Maggie's setting playing a significant role in participants' confidence in the intervention.

There is inherent value in its multi focus on teaching active skills for responding to pain and fatigue linked to symptoms and treatment, whilst also enhancing well-being. MBSR was experienced as a personal growth endeavour with lifestyle enhancing effects, partly because these particular participants were already fully receptive and motivated towards this result. Participants frequently talked about what they were doing in sessions in terms of making progressive changes, being a better version of self rather than surviving, coping or managing symptoms. There was a normalising aspect to this which meant they could move away from being a cancer patient/survivor trying to regain their old identity, to embracing the fluidity of identity, moving forward with better habits and a fresh outlook.

The course embraced spiritual dimensions of participants' experiences of cancer and provided a framework and outlet to process existential challenges. For some this dovetailed with established religious practices and for others was entirely differentiated from religion.

The development of self-compassion and acceptance was a strong theme and seemed to be a key factor in the descriptions of perspective shifts linked to a transformed relationship to illness, self and others.

Given the impact of a cancer diagnosis and the effects of treatment, these are highly relevant areas to address and MBSR appears to have the potential to make a significant contribution to care.



## Appendix 1 MBSR Case Studies

### Case Study 1: Abigail

**“Mindfulness was unexpected, difficult and life-changing.”**

This case study contextualises the overall thematic framework of the study within one participant's lived experience of the course, and in particular, her response to the ‘Staying with the Difficult’ practice.

Abigail is 63 years and has been coming to Maggies for a year post cancer treatment. Her professional background is in science and on a personal level she describes herself as contained and not usually showing emotion easily. Abigail attended the Living Well with Stress group and enjoyed this despite apprehensions of joining a group. As a result she felt more receptive to other opportunities that might help manage anxiety and so agreed to an offer from Maggie's staff of a place on the MBSR course.

#### Points of Engagement

For Abigail, the main points of engagement with MBSR were the experience of relaxation as initial motivator and the ‘Staying with the Difficult’ practice as a powerful technique. (See Figure 2) Her initial experience of this several weeks into the course was challenging. She felt overwhelmed with emotion and had to withdraw from the practices for a short time as she explains here;

*“It was the ‘Staying with the Difficult’ session in particular that brought it home to me, what it was all about. Alastair [course facilitator] had advised that it can produce strong feelings for some, and if it gets too much, just stop. I never thought that would be me. Because prior to that it was fantastic, the relaxation was so deep, beautiful, that's why I was really encouraged to do the exercises and I was really going for it. But I managed to go back to the class and Alastair had such good explanations that when you stay with the difficult, you are shining a wee torch in and become aware of emotion. So I would say that that has been the unexpected bonus for me, it's actually a good thing.”*

## Responding to Emotion

Abigail offers us a detailed description of what it felt like to 'stay with the difficult', and the significance of how that experience was processed with the facilitator and within the group setting;

*"Something difficult hits you, and normally I would have all my little mechanisms of thinking flying in, you know protect, and then I was allowing this. Allowing it! It was really hard. Then trying to process it using the methods, which are good, breathing, staying with it, accepting this."*

*"I brought it out in the group that this was happening, sharing it with other people. I had reassurance knowing that he (facilitator) was very experienced in this, because these were really big emotions, big scary - scary emotions for me. I had confidence that he knew how to help me. He was explaining you know this sort of thing happens in the brain, and that could be this or that, and asking me - Did you feel a block moving? Was it a shift...and all of this process."*

## Staying with what is

Abigail's 'staying with the difficult' experience had transformative elements and so stayed with her during and beyond the course, underpinning a new approach in her response to anxiety;

*"I still now employ that kind of thing, and I'll think to myself, if it's something very stressful, like this is all right, it will pass - and see those words, it will pass, means an enormous amount to me because I'm now able to stay with whatever it is, and just breathe and know oh this, I feel tearful or whatever, it will pass - and it does, it passes. So that's very different to just shutting it away. So it's been a big learning for me, and a very different experience."*

*"It's the level of vulnerability, a level of anxiety that you can feel with cancer which is just ... [sighs] I think that course provides every opportunity for people like me, the reassurance that these are all normal things that you're experiencing and it just makes you feel better, because you think at times you're going off your trolley, you know. But for me that really wasn't a normal thing you know. And now I realise it is a normal thing. [laughs]."*

## Body Awareness

Abigail hadn't previously been conscious of the disconnect in the way she related to her body post treatment but awareness developed through practices such as the body scan and mindful moving;

*"I'm thinking more about my body. Definitely that was pushed away with this treatment and the surgery just you don't even want to think about your body. But yeah, so that's coming back with this practice. I feel kind of connected up again, getting myself together."*

## Spirituality and Religion

Abigail discussed the support she derived from her Christian faith and the ways in which mindfulness could complement this in her current circumstances and for others who didn't have religion.

*"I think a big difference is that, in a sense in the Christian world, they don't give you as many steps to achieve it, in Buddhism they really do, simple step towards calm. In the Christian world it's praying, and actually it can take you quite a long time to be able to really pray through the heart and all of that. I dare say that the result is the same, but the experience is different."*

## How Mindfulness Works

**"There are brainwaves and hormones... but it has to come from the heart."**

It was important to Abigail to understand how MBSR might work and she offered the explanation that both spiritual and physical elements were active ingredients.

*"There is a very physical basis for it as well, I mean in the brain and the hormones like are being secreted. Also you're warning your brainwaves, in a sense, you're going into a deeper, slower rhythm. So you're conscious of dropping all of that so you're not feeling so stressed, better for the body."*

Abigail felt that elements of MBSR such as kindness and love, had to be seen in relation to other people rather than self, and so could not be explained purely by individual physiological responses.

*"But for me of course there's a spiritual element, because I'm just that way inclined. I would be thinking, oh this is a time of peace and opening yourself to - well in my case it would be God. But - the kindness element, I know that raises the oxytocin. But it has to come from the heart about other people. And mindfulness does help to generate it, and stress does take that away. You know you're so stressed, you can't give out love; when that stress level drops, of course you can - it's inbuilt in us you know, and it's really good for the body. So I am assuming that it's all of these things."*

## Personal growth – Becoming Different

Abigail's story gives a clear example of the strong theme around MBSR as a lifestyle enhancing, personal growth endeavour and the normalising effects of this in comparison to the feeling of 'surviving', 'managing' and 'coping with symptoms.'

*"I think, we as human beings, don't always achieve what we're capable of in terms of the way we are, the way we interact - all of that. If you ask yourself what is a really healthy, good, and positive way to be. Well there are lots of variations but I think the mindfulness definitely takes you in a good direction."*

*"I think habits develop over the years that you get these reactions that make you worse when things are bad like sickness or stress. But during the course, it's the realisation that you can undo that. You can become different."*

## Maintaining Practice

**"I feel I got the principles. You feel your way around it, and tailor it to where you are."**

The MBSR course materials included things she enjoyed like poetry and this helped her with the homework during course. She had not maintained formal practices post course but didn't feel it was necessary. Rather she had integrated mindfulness as a way of being and weaved short practices into her day for specific issues such as pain or stress.

*"The poetry set the scene for me. I would go home, I would call that up, and I think that already opens you up, and then you do the practise - it all goes together. I do love poetry anyway, I love art, music, and although I'm science trained, you know life is a balance and these are profound things, someone's distillation of life."*

*"I think the course itself is probably enough. Then it's up to yourself to take it forward, and at a pace that you can - I had to slow down my pace. I feel I got the principles. You feel your way around it, and tailor it to where you are."*

*"I'm less aware that I'm 'doing' mindfulness through the day. I can just watch children playing and create peace and enjoyment. I'm aware that this is mindfulness, but I would have struggled with that before. And now also if I get a pain, I just breathe into it, and it will just go - it does go away."*

## MBSR at Maggie's

Abigail feels Maggie's location is important because she trusts the organisation and the building is beautiful. She also feels the course will be different depending on level of experience of future facilitators and whether they are authentically engaged with mindfulness personally:

*"I think with the mindfulness it's the living it...a transformation happens when people are actually doing that and living it. The way Alistair delivers it is actually really quite deep. I think at that point in time, I needed someone that knew the experience, had the depth of living it, which is a bit different to delivering it. It looks easy and it sounds easy, but living it is another matter. "*

*"Maggie's I have great trust in, I think that the people who deliver things are fantastic - the courses are really good. But I did have that feeling that the Mindfulness would be that step further, even before I did it. I think it would take Maggie's quite a wee while to fully achieve it and assimilate and integrate it into their lives in order to deliver it to the highest level. So you will get different levels of the course, but you know the authenticity will shine out regardless. "*

## Post Course

In conclusion, Abigail shared her reflections on the main ways in which the experience of MBSR was continuing to impact overall on life now since the course finished:

*"I think feeling more is the main thing. I am feeling sadness more. But I can also really open up to joyful experiences, like the weekend away with my daughter, well that time, do you know that felt almost perfect to me. It stood out in my whole life. And I thought well that's partly a result of this and of being in the moment. Och it's helped me in a lot of different ways it's all weaved in now. It's a big thing - it's massive."*

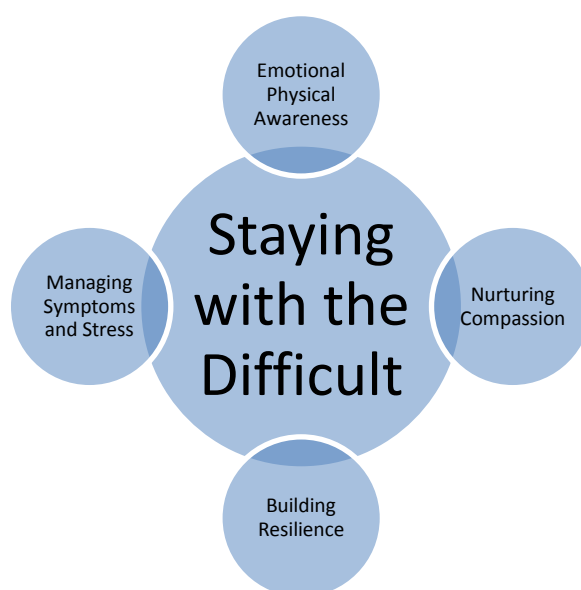


Figure 2: Staying with the Difficult

## Case Study 2: Vera

### “One big massive zen-ness – that hasn’t happened!”

Vera is 42 years old and midway through planned treatments when she participated on the MBSR course. Her anxiety levels were becoming progressively worse resulting in panic attacks and she described a feeling of desperate hope that this could be reversed by hard work on the course. The outcome of the course has been rewarding for Vera in that she has developed a more compassionate approach to herself, and this is quite from her initial expectations. She explains this in her own words;

*“Well I suppose I was thinking I would do more of it and be just one big massive zen-ness! {Laughs} Completely chilled the whole time. So that didn’t work -that hasn’t happened!”*

*“But, one of the best things about the course that I didn’t expect was the whole thing about being kind to yourself and not beating yourself up. That was massive for me. Even although I haven’t done what I wanted in terms of making mindfulness practice a big part in my life, I don’t give myself a hard time about that or anything else. And it’s turned out THAT itself has been the stress reducer. And that is very valuable to me.”*

### “Living the Hell out of Life”

MBSR helped to cultivate awareness of the different sources of anxiety. Vera identified that intense pressure to ‘make the most of life’ was a significant stressor for her and was able to foster a different approach towards this.

*“There’s a bit of pressure to feel positive, grab your life, and live the hell out of it you know. But it’s true you do want to grab everything, you have a second chance here, and its’ changed your perspective and everything. And that’s just exhausting... So to live life to the full for me means to be able to calm down. The course has helped me say just bring it down a bit.”*

The introductory practices such as the body scan, which were 40 mins long, were a favourite for Vera, effectively relaxing and easy to replicate at home using the CD’s provided. The very

short practices, such as the breathing space, were highly accessible when she found herself in particularly stressful circumstances.

*“I mean I’ve done it in a taxi. And obviously death and medical things are super stressful but even things that are not like that, you are on a knife-edge of stress so if anything else happens you just tip over the edge. We were going on holiday and the taxi was late...the stress got to me I could feel myself going. And in the taxi, I shut my eyes and pretended I was looking out the window, and I did this 3 minute thing and it calmed me right down and I didn’t feel like shouting anymore. And I know that’s not super serious but I was really on the edge.”*

Vera avoided doing practices such as Staying with the Difficult, which she felt may raise negative issues too challenging to manage, without continuing support, as she moved into a second round of surgical treatment. However, she did feel confident about tailoring the practices to suit her circumstances and saw it as a resource for the future.

*“Others in the group were talking about leaning into it and that a lot of emotional stuff had come up but I felt scared that I wouldn’t be able to handle that. Because I’ve got more surgery coming up. And with the course finished I would be on my own with it. I felt comfortable with telling myself I could dip in and out. But I do feel it’s there and I have my book and I can go back to it.”*

### **“I was so calm; I thought wow that’s not me. Or maybe that is me?”**

Vera also anticipated the mindfulness course as a potential source for personal growth and establishing long term mindfulness practice in the future.

*“After the silent class I did a fundraising video. My pals were like oh wow you were so calm and chilled. How did you do that!? And I thought oh wow that’s not me. Or I could be like that, maybe that is me? I would love to be like that all the time. It was because I had just done the mindfulness day! It was good to see how calm I could be after doing the mindfulness. There is something you can achieve if you practice, but that’s down the line for me.”*

In summary, Vera felt that the perspective shift towards kindness to self was the most important overall outcome for her and this was achieved during the 8 weeks of the course. Immediate benefits such as relaxation, accessibility of practices, ease of personalising the course, and the Maggie's Centre location, were all important factors in her engagement with the course.

*"It's been really important having it at Maggie's. It's a friendly environment that you are used to so you know it will be ok, you trust it."*

*"Yeah overall I thought it was brilliant and I really enjoyed it. Even just coming to the actual course itself you get it about being kind to yourself, even if you did nothing else, which I did. A bit. But even if you didn't, just coming to the course and relaxing was enough...really helpful."*



## Case Study 3: Joan

### Taking stock and Becoming Different

Joan is 59 years old and recently returned to work post cancer treatment. She was actively seeking pursuits that would help her recovery and wellbeing and so joined the nutrition course and the MBSR group, of which she knew little about in advance. The defining experience of the course for her, and her main point of engagement, was the loving kindness meditation. (see pg.) Joan tailored this practice to facilitate a very intentional and emotionally safe way of taking stock of life and achieving personal development and growth. The following is a short summary of her overall experience, mostly in her own words.

Joan felt sceptical in first few weeks of the course and struggled to make sense of the aims of the course. She found the initial ‘eating a raisin’ exercise (see pg.) which was designed to develop awareness didn’t help to reassure her;

*“I couldn’t even put it in my mouth as I am on this crazy diet and I just couldn’t relate... what the heck have I got myself into here!”*

Joan then describes the day of silent practice, which comes midway through the MBSR course, as a revelation:

*“I’m a nervous person. But I was so relaxed if my knuckles were on the floor I wouldn’t have been surprised. It was as though the part of your brain that feels obliged to respond, that you’ve got to put your face on, had taken a step back. And another part of your brain was working at the front, totally relaxed, just aware you were being, you were in the present but not doing anything. I don’t ever remember being that peaceful. It was a revelation that’s the only way I can describe it. So I now realise that that’s achievable. That was within the group – I haven’t fully managed that on my own, but what I have managed – I’m a far more peaceful person. For me, this has been life-changing.”*

## Accepting and Forgiving

The silent practice day was a transition point which seemed to facilitate Joan 'clicking' with a specific practice called the loving kindness meditation. The practice involves bringing to mind loved ones, or people you have difficulty with, past and present, cultivating the feeling of love, then visualising both receiving and imparting this feeling. Joan experienced the practice as a powerful process in the group and was motivated to continue exploring at home. A guided audio version of the practice was included with course materials which allowed her to develop a routine of rising half an hour earlier in the morning, opening the blind, pulling a chair to the window and beginning the 20 minute practice which she began to tailor to her own needs;

*"It was like bringing stuff up from your past and dealing with it. I really liked it. I'm not the sort to sit and dwell on things but for the first time I thought yeah ok you had a horrible childhood. I don't even know if that is what it's supposed to do but that's what it did for me. I mean that's not what they are telling you to do, to deal with things. What they are saying is promote this nice feeling of loving kindness because it will be useful for you. But it made me face things you just don't think about normally but they can be festering away hidden. It makes you deal with it in a really safe way. It's that acceptance of yourself as well and being able to forgive people. So, I did that for a few weeks, it was a big tribe of people passing through every morning!"*

## Post Course

### **"Now I know it's possible to change for the better, even with cancer!"**

In summary, Joan felt that she had been able to access resources of calm and compassion that previously seemed incompatible with how she viewed her own capacity and personality. This has benefitted her in such diverse ways as emotional resilience, less muscular tension, less reactivity to stressful triggers and has underpinned confidence in returning to work.

*"Also, this sounds daft, but I've become different. There's a boss at work that everyone finds scary. She used to come in and I would put my head down and feel nervous. Now I'm like; "Hi, how are you." My body stays relaxed. I think of her as having her own problems and maybe that's why she can be difficult. Now I know it's possible to change for the better, even with cancer!"*

## Appendix 2

### Participant Interview Schedule

A: How the participant experienced the mindfulness group

First I would like to ask you about your general experiences of taking part in the mindfulness group.

Did you find the course helpful, in what respects?

Did you find some elements more interesting than others?

Which ones?

Did you find some aspects of the programme not to your liking?

Which elements?

And why do you think this is?

Did you find working within a group context satisfying?

B: Experiences of the practices at home

I would now like to move onto how you felt about carrying out the practices at home.

Did you find working through the practices at home straightforward?

What elements did you find the easiest to implement?

Why do you think this was the case?

Were there any procedures that you found difficult to carry out at home?

Can you give an explanation for this?

How do you think that this can be improved?

C: Effect on participants or families experiences of cancer

Do you have any thoughts on how the course has affected any specific symptoms of health or how you are managing the experience?

D: Effects on other areas of life

Do you feel that these practices produced effects on any other areas of your life or quality of life?

Can you describe these?

Would you consider these to be beneficial or negative?

E: Participant's explanations for any perceived changes

We have been speaking of perceived changes to your health and state of mind as a result of your taking part in the mindfulness course.

Would you like to give your own explanations for these? As to why it worked, or why you felt it was unsuccessful.

Finally what improvements or changes would you like to see implemented to the programme in future?

F: Conclusion

We have now come to the end of the interview.

Is there anything you would like to contribute that we haven't yet covered in the interview.

## Appendix 3

### MBSR 8 Week Course Summary

Session	Title	Main Theme	Home Practice
1	Beginners Mind	Introduction Exploring Landscape of Present Moment  Poetry	Daily Body Scan One Mindful Activity Keeping Log Book of practice
2	Coping with the stress of illness	Non-Striving  Rinpoche	Body Scan daily Sitting Meditation 10-15 mins Mindfulness of routine activity pleasant events calendar
3	Staying Present	Acceptance vs Resignation Staying with the breath  Haiku	Alternate Body Scan/Mindful Stretching Sitting Meditation Unpleasant Events Diary 3 minute Breathing Space (3X daily)
4	Staying with what is Difficult	Coping with Suffering  Rumi	Alternate body scan/stretching Sitting meditation with tape Application in everyday life 3 minute breathing space
5	Working with Thoughts and Emotions	Developing Kindness  Naomi Nye	Continue practices of choice Three minute breathing /coping spaces
6	Session of Silent Practice	Experiential  Mary Oliver	Mindfulness of breathing Body Scan Mindful Stretching Guided Meditation
7	Taking Care of Myself	Maintaining Balance Regular practice Recognising Habits  Portia Nelson	Practice without guided recordings
8	Endings & Beginnings	Revisiting Body Scan Letter to Yourself  The Journey	Mindfulness Jewel Handout on mindfulness attitudes

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