Pause. Reset. Return. Mental Hygiene and Mindfulness in Daily Routines for the Mental Wellbeing of Mental Health Professionals

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Pause. Reset. Return. Mental Hygiene and Mindfulness in Daily Routines for the Mental Wellbeing of Mental Health Professionals

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Abstract

Children and adolescents in the United States are experiencing a mental health crisis which also impacts families, caregivers, including the mental health professionals providing support. This rationale paper expands on the history and limited current research to reintroduce the term “mental hygiene” as a lens to address the ongoing stress, the need for self-care and respite, and the value of incorporating mindfulness in the daily routines of mental health professionals. Intentional use of the term “mental hygiene” seeks to highlight an active and engaged process including mindfulness practices to decrease stress and burnout. The literature supports the inclusion of mindfulness and meditation practices to reduce stress, decrease anxiety and depression. Mindfulness Based Interventions (MBI), mental hygiene, daily routines and rituals, and tangible resources for health care professionals such as Code Lavender are discussed in the paper. The creative project includes a series of three workshops, designed for mental health professionals to introduce or reintroduce mindfulness practices as a part of a mental hygiene plan and to create individualized comfort kits like the Code Lavender and Dialectical Behavior Therapy (DBT) kits. The workshop’s theme, Pause. Reset. Return will underscore the positive impact of mindfulness practices in daily routines.
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Pause. Reset. Return: Mental Hygiene and Mindfulness in Daily Routines for the Mental Wellbeing of Mental Health Professionals

Multiple pandemics and a documented mental health crisis have raised the need for greater awareness of mental health accessibility, various services, and resources for intervention and support. The impact on children and adolescent’s mental health and wellbeing is prevalent in major media stories and academic research (Richtel & Alfonsi, 2022). There is a mental health crisis among children and adolescents which impacts families, caregivers, and psychological professionals. With the increased need for access to care, there is a growing need for practitioners to support clients and exercise mindful attention to their personal mental wellbeing.

Statistics demonstrated an increase in anxiety and depression among children and adolescents prior to the Covid pandemic (Richtel, 2022). Professionals working within the mental health field have significant client wait lists and are working long hours, which may impact their personal wellbeing and trigger burnout. It is important for mental health professionals to attend to their mental wellbeing. Mental hygiene emphasizes the prevention and protection aspects of mental wellbeing. From an individual perspective protection and prevention includes stress management or reduction, identifying and engaging in routine activities that promote mental balance and resilience such as connection with others, time alone, physical activity, and activities that give a sense of productivity or satisfaction.

Routine, consistent mindfulness, and meditation practices are incorporated into therapeutic modalities and treatment protocols for both clients and for practitioners within mental health and caretaking fields. While the term “mental health” is employed throughout the research and literature to define one’s mental status and wellbeing, the terms “mental hygiene” and “mental wellbeing” are intentionally used throughout this paper. With this perspective in mind and an awareness of mental health and wellbeing challenges, this paper will explore the literature
and answer the following question: “what might support or encourage mental health professionals to actively engage in mindfulness practices for their own mental wellbeing?” Mental hygiene as a framework holds the potential for mental health professionals to intentionally plan daily routine activities including mindfulness practices to support their mental wellbeing.

The following inquiries assisted in developing the literature review and discussion: “what is considered good mental hygiene?” and “for those psychotherapists using treatment modalities that incorporate mindfulness practices, do they, in a sense, practice what they preach? and, if not, would an intentional introduction or reintroduction to explore mindfulness practices intentionally with a mental hygiene framework create routines for support?”. This paper reviewed the literature on mental hygiene, mindfulness interventions, potential positive impact of mindfulness, to support stress management, and more recently established responsive practices such as Code Lavender implemented in healthcare settings to address stressful events. The discussion elaborated on the research by proposing a series of three workshops specifically designed for mental health professionals. The three workshops utilize a mental hygiene framework that includes mindfulness and meditation practices as part of routine care for personal mental wellbeing.

**Literature Review**

The literature provides a framework for understanding mental hygiene, mindfulness, and meditation practices for mental wellbeing. The literature review is based on the original question, “what supports or encourages mental health professionals to engage in mindfulness practices as mental hygiene for mental wellbeing?”. Sources reviewed include academic and professional journals, textbooks, mindfully informed psychotherapy treatment manuals, popular news outlets,
social media, and mindfulness applications. Collectively, the sources provide contextualization of mindfulness and meditation’s potential positive impact. They also identified opportunities to develop research to create accessible, tangible, and experiential practices for mental health professionals to routinely engage in some form of mindfulness practice.

**Mental Hygiene**

The term “mental hygiene” appears less in recent academic and health literature. According to a 1995 position paper by former John Hopkins Department Chair, Dr. Wallace Mandell, the term “mental hygiene” dates to just after the Civil War. Mandell (1995) wrote that concerns were high at that time about, “the effects of unsanitary conditions,” (p. 1). Mandell included this definition of mental hygiene from Isaac Ray, the founder of the American Psychiatric Association “the art of preserving the mind against all incidents and influences calculated to deteriorate its qualities, impair its energies, or derange its movements” (Mandell, 1995, p. 1).

The work of Clifford Beers appeared in a plethora of writing concentrating on mental hygiene. Beers played a role in introducing mental hygiene into the early 20th century. In his publication, *A Mind That Found Itself*, Beers (1907) chronicled his experiences of three hospitalizations and advocated for humane treatment of persons suffering from mental illness, raising standards of treatment through an “educational campaign” and funding to improve institutions that provided treatment. Historically, mental hygiene has been described as a movement leading to the shift in care of those struggling with mental health conditions, treatment, and preventative care. Mental hygiene was viewed as an essential component for overall health and wellbeing and attributed to a “condition, subject to fluctuations due to biological and social factors,”; on the other hand, mental hygiene is related to all of the
activities and techniques which encourage and maintain mental health,” (Bertolote, 2008, p. 113). The mental hygiene movement centered on the collective community that recognized individuals as part of the whole and highlighted the “need for prevention rather than “cure,”” (Bertolote, 2008, p. 113). During the British National Association for Mental Hygiene assembled the First International Congress of Mental Health in 1948, “hygiene” and “health” were used interchangeably in connection with “mental” until “hygiene” was replaced by health,” (Bertolote, 2008). This historical perspective of the terms “mental hygiene” signals preemptive and proactive prevention practices to support mental wellbeing.

Canadian researchers Tremblay, Rodrigues, and Gulati (2021) proposed a mental hygiene framework to support mental health and mental wellbeing for the general population. The frameworks’ aim was to reintroduce mental hygiene for mental wellbeing and suggested routine daily practices that support psychological well-being. Activities and practices proposed in the study included: meditation, positive psychology interventions such as gratitude practices and positive statements or journaling, self-directed cognitive therapy defined as writing thought records, prayer, and nature exposure (Tremblay et al., 2021). Tremblay et al.’s study (2021) acknowledged mind wandering and rumination noted potential negative effects on mental health and mental wellbeing. Rumination is defined by Watkins and Roberts (2020) as “repetitive, prolonged, and recurrent negative thinking about oneself, feelings, personal concerns and upsetting experiences’ ’ (Watkins & Roberts, 2020, p. 1). Jha (2018) defines mind wandering as “having off task thoughts while engaging in an ongoing task of some sort.”

The research explained how mind wandering and rumination are “targets” within the expansion of the framework to include “activities” that “lead to formal mental hygiene
recommendations for the public” (Tremblay et al., 2021, p. 10). Moreover, meditation is included in this list of activities. Tremblay et al. (2021) recognized the potential for awareness through meditation practices as an activity to impact the intended “targets” of mental hygiene for mental health and mental well-being. This study is central to this literature review and emphasized the potential for creating a series of workshop sessions within the mental hygiene framework.

Mental hygiene, mental health, and self-care have similar components regarding the attending to the wellbeing of oneself. Mental health is often considered a condition where one is in a state of “good” mental health, whereas poor mental health implies suffering from a mental health challenge or disorder such as anxiety or depression. Daily stressors can impact an individual’s mental health and wellbeing including physical wellbeing. In contrast, mental hygiene is proactive in nature, which suggests engaging in activities that create mental stability and facilitate well-being. Mental hygiene can be understood from the perspective of other forms of routine hygiene.

**Daily Routines**

The terms and concepts of “hygiene” and “mental hygiene” highlight the long practiced daily routines and activities an individual engages in for optimal wellbeing. This perspective of a daily routine adds to the understanding of a more proactive and action related way of maintaining wellbeing. Hygiene routines and practices such as hand and body washing, sleep, oral and dental hygiene are well documented as preventative practices for disease prevention and promotion of overall wellbeing. For example, “care of teeth and gums can help prevent oral health problems” (Healthy People, 2022) Guidelines for sleep hygiene noted benefits for improving health (Center for Disease Control and Prevention, 2022). The words ```preventative``,”
“consistent”, and “maintaining health” were noted in the literature. These hygienic practices appeared to prove beneficial for one’s health and wellbeing when incorporated into a daily routine. A 2020 study stated, “regularizing daily routines for mental health during and after the COVID-19 pandemic” recognized routines’ capacity to “buffer the adverse impact of stress exposure on mental health” (Hou et al., p. 1). An online health resource advocated for the “health benefits of having a routine” (Northwestern Medicine, 2022). Health benefits included “better stress levels, better sleep and better health” (2022). Maintaining one’s wellbeing is akin to engaging daily hygiene practices for physical health and overall mental and emotional wellbeing.

Dr. Daniel Siegel’s “healthy mind platter” provides an example of proactive practices for mental and physical wellbeing to support optimal functioning (Siegel, 2021). The “healthy mind platter” includes examples of seven daily practices or areas to support a healthy mind. One of the seven practices, “time in” encourages pausing to reflect and turn inward, like a mindfulness or meditation practice. Siegel designed the “healthy mind platter” with a recognition that “many are deficient in a daily regimen for mental wellbeing” resulting from stress, a sense of overwhelm and multi-tasking. Siegel’s “daily regimen” consisted of seven daily practices and Tremblay et al.’s (2021) proposed mental hygiene practices included awareness practices that can include mindfulness and meditation.

**Mindfulness**

Mindfulness, as it is known in the West, has roots in the history of Buddhism and Eastern culture (Dimijian & Linehan, 2003). One of the most widely used definitions of mindfulness is derived from the Mindfulness Based Stress Reduction (MBSR) program developed at the University of Massachusetts Medical Center by Jon Kabat-Zinn. Developed to address and decrease stress and chronic pain, MBSR was designed as an eight-week course with each session
lasting two hours (Harold, 2022). MBSR incorporated mindfulness meditation practices as well as “simple stretches and postures" (Niazi & Niazi, 2011). MBSR consists of awareness practices such as awareness of breath (AOB), body scans to direct the attention to each aspect and sensation in the body, and yoga movement practices (Kabat-Zinn, 1990).

Kabat-Zinn (1994) defined mindfulness as, “paying attention in a particular way: on purpose, in the present moment, and non-judgmentally” (p. 4). While exploring mindfulness training in clinical interventions, researcher, and developer of mindfulness measures Dr. Ruth Baer (2003) concluded, “thus, mindfulness is the non-judgmental observation of the ongoing stream of internal and external stimuli as they arise" (p. 125). Kabat-Zinn’s (1994) definition is widely used in research, academic writing, books, and manuals on practicing mindfulness, and mainstream media. The MBSR program developed in the 1980s, is the most often cited training curriculum and guidance that is incorporated into other forms of stress reduction and mindfulness training (Baer, 2003). MBSR provides a secular practice of mindfulness. Mindfulness can be practiced by cultivating skills “intentionally attending with an open, accepting, and discerning attitude (Shapiro & Carlson, 2009, p. 12). Informal practice is exercised by incorporating these skills into everyday life and activities (Shapiro & Carlson, 2009).

Mind wandering, which is the default mode network (DMN); rumination; and separation of the mind from sensations in the body are often associated with anxiety and depression (Tremblay et al., 2021). This “continuous partial attention” created disconnection with us and others around us (Kabat-Zinn, 2005). In Coming to Our Senses, Kabat-Zinn (2005) spoke of, “the dynamic balance we call, “health” involves both the body and the mind,” (p.7). Mindfulness is often described as an embodied practice that holds the potential to re-connect the body and the
mind. The terms “embodied practice”, “embodiment”, or “embodiment theory” were used in research to define what one study by Barsalou (2007) described as, “cognitive processes as grounded in the organism’s sensory and motor experiences, such that bodily experiences have direct effect on the mind” (p. 619). In this manner, mindful awareness incorporates the body and mind in embodied practices for reduction and management of stress.

Dr. Jha’s (2018) TEDx Talk *How to tame your wandering mind*, featured findings from research on how attention affects perspective and the negative impact of stress and mind wandering on attention. Her research with military personnel has shown practicing mindfulness for 12 minutes or more a day to be effective in supporting attention and memory during high stress moments (Jha, 2013). This work is significant as it points to two benefits of shorter practices, while understanding that longer and more frequent practice leads to more positive results.

Stress can be an element of daily living. *The End of Stress as We Know It*, Bruce McEwen (2002) identified stress as, “a state of overload. External events unite with the discomfort of our own response to overwhelm us and exhaust our ability to cope” (p. 2). Social isolation and health precautions during the Covid-19 pandemic caused increased stress levels, fear, and anxiety of the general population; however, a full understanding of the effect on mental health professions is not yet known (Litam, 2021). Mental health professionals experienced additional stressors resulting from a change in how services and treatment were administered. They have more often provided services and intervention through in-person meetings with their clients. Covid-19 precautions deemed these meetings unsafe. Mental health professionals navigated ethical dilemmas around serving their clients by “doing no harm” and working online through telepsychology or other online applications (Sampaio et al., 2021). Litam
et al. (2021) included mental health professionals as “front line workers” and noted compassion fatigue and burnout as potential “occupational hazards” resulting from the Covid-19 pandemic. Both Sampaio et al. (2021) and Litam et al. (2021) recommended mindfulness as a self-care strategy for stress management, burnout prevention, and compassion fatigue. Compassion fatigue is defined by Shapiro, Brown, and Biegel (2007) when they stated, “due to the emotional labor that is often a part of therapeutic work” (p. 105). The fatigue and stress are often exhibited in the body's stress response and mindfulness practices can deliver relief.

The potential positive benefits of mindfulness and meditation practices are well documented in the research. Rick Hanson (2009) cited the wide range of mindfulness’s benefits on health and wellbeing in his book *The Buddha’s Brain, the practical neuroscience of happiness, love & wisdom*. Mindfulness and meditation practices have shown to support improvements in mood; decrease anxiety and depression; offer pain management; assistance with chronic medical conditions such as cardiovascular disease, asthma, type two diabetes, and PMS; slow the body’s stress response moving toward physical and emotional re-regulation; and strengthen the immune system (Kabat-Zinn (2009), Ryan et al. (2011), Davis and Hayes (2011), and Holzel et al. (2008), Lazar et al. (2005), (2008), Davidson (2004), Davidson et al. (2003); Shapiro and Walsh (2006), as cited in Hanson and Mendius (2009). Utilizing the lens of mental hygiene, previously explored as prevention, mental health professionals can benefit from two demonstrated positive aspects of mindfulness, stress reduction and management (Kabat-Zinn, 1990) and the ability to increase overall awareness by minimizing mind wandering (Tremblay et al., 2021).
**Mindfulness in Treatment**

In a mental health setting, mindfulness and meditation is often interwoven with specific treatment modalities, protocols, or programs for introducing, teaching, and practicing mindfulness with clients. This review will focus on treatment modalities that are based on MBSR and or inspired by mindfulness and meditation practice to provide an understanding of how mental health professionals may be trained in and experience mindfulness and meditation practices. Mindfulness Based Stress Reduction (MBSR) programs were designed to relieve individuals from suffering and stress management. Mindfulness and mindful meditation are linked to reduction in stress, anxiety, depression, pain, and myriad other physical and mental health disorders (Kabat-Zinn, 1990). MBSR is credited with a reduction in symptoms of anxiety and panic and to help maintain this reduction (Niazi & Niazi, 2011). MBSR is a non-pharmacological approach to addressing the emotional and physical symptoms of mental health disorders. Kabat-Zinn (2005) stated, “this journey toward greater health and sanity is catalyzed by mobilizing and developing resources we already have. And the most important one is our capacity for paying attention” (p. 8). “Mindfulness is an attribute of consciousness long believed to promote well-being” (Brown & Ryan, 2003, p. 822). In addition to MBSR, mindfulness practices and techniques are fundamental elements within treatment methods, including Mindful Based Cognitive Therapy (MBCT), Dialectical Behavior Therapy (DBT), and Acceptance and Commitment Therapy (ACT), (Dimidjian & Linehan, 2003). These are considered mindfully based interventions (MBIs), treatment methods, and practices that are well-studied and developed based on MBSR (1990).

Dialectical Behavior Therapy (DBT) was developed to treat complex mental health disorders including suicide, borderline personality disorder (BPD), depression, anxiety, eating
disorders, and other mood disorders that cause significant impairment in functioning and emotional dysregulation (Dimeff & Linehan, 2001). DBT incorporates mindfulness and DBT skills to support present moment awareness holding the dialectical of what is occurring in the present moment with acceptance and desiring change. Present moment awareness and non-judgmental acceptance of what is occurring in the present moment are pillars of DBT mindfulness (Dimeff & Linehan, 2001). In DBT mindfulness, practices are taught as skills such as relational skills, which includes interpersonal conflict management, emotional regulation, and distress tolerance (Linehan, 2015). Clients in DBT treatment are taught mindful breathing to connect with body and breath and to utilize senses such as mindful listening, eating, movement including walking and yoga, and self-soothing (Linehan, 2015). Mindfulness is a means to tolerate distress or distract from unwanted and wanted thoughts, feelings, and emotions. The practices are recommended as part of a “daily mindfulness regimen” for clients to engage in as alternatives to decrease unhealthy behaviors and coping strategies such as self-harm and increase healthy behaviors such as awareness of feelings in the present moment, to facilitate mental wellbeing (Linehan, 2015). Mindfulness meditation is not advisable for those with serious mental health challenges or as a stand-alone treatment (Dimidjian & Linehan, 2003).

The intensity of working with this population requires good mental hygiene, mental health, and well-being as well as a solid support network. The importance of mental health professional's personal mindfulness and mediation cannot be overstated. Research has indicated these professionals are suggested to “practice mindfulness in their daily lives and be members of a clinical consultation team that practices formal mindfulness at the beginning of each meeting,” (Dimidjian & Linehan, 2003, p. 170). It is critical for practitioners to employ mindfulness skills to help decrease stress and anxiety; prevent burn out; increase empathy and compassion, while
also enhancing one’s mood to overcome difficulties. This suggested a consideration for how the skills and activities previously mentioned may also be beneficial for therapists and mental health professionals to engage in outside of their professional setting.

Not only is it important to consider a client's mental wellbeing and mindfulness, but it is equally crucial to consider the mental health professional’s wellbeing too. Training in the previously discussed modalities encourages and suggests therapists include either formal or informal mindfulness or meditation as optimal and effective practices (Dimidjian & Linehan, 2003). Both Linehan and Kabat-Zinn have made major contributions to treatment protocols and secular mindfulness and refer to their practices and continued dialogue with their teachers in support of their practice. Examples of how mindfulness can be incorporated into professional training are evident in the healthcare setting.

**Training and Curriculum**

Mindfulness training has been and is included in the medical field to enhance physicians clinical and relational skills with patients. In an article titled, *Mindful Practice*, Dr. Ronald Epstein (1999) explored the benefits of mindfulness to physicians and their patients through reflective processes and attention. Epstein (1999) wrote that mindfulness, “leads the mind back from theories, attitudes and abstractions…to the situation of experience itself, which prevents us from falling prey to our own prejudices, opinions, projections, expectations and enables us to free ourselves from the straitjacket of unconsciousness” (p. 835). Epstein’s work provided an operationalized definition of how mindfulness can support and enhance the experience of those in the helping professions. His work contributed a simple and concise definition that mindfulness is a focus on the “ordinary, the obvious, and the present” (p. 835).
Building on this premise, Epstein and colleagues have created a series of workshops that aim to help health professionals with the primary goal of “enhancing joy and well-being” (Epstein, 1999). The workshops included managing challenges; increasing self-awareness and engagement; stress reduction; connecting with community; finding meaning in work; building resilience; developing relational skills including deep listening; and cultivating compassion and gratitude (Epstein, 1999). With this model in mind, it is crucial for the mindfulness community to create innovative ways to implement and incorporate mindfulness into curriculum or coursework for other health and wellness professions.

**Manuals and Professional Guides**

Mindfulness and meditation practices have been professionally manualized for nonprofessional persons as well as professionals. Four sources were reviewed to provide context on mindfulness as it relates to mental health including: *Full Catastrophe Living* (Kabat-Zinn, 2013), *Sitting Together Essential Skills for Mindfulness-Based Psychotherapy* (Pollak et al., 2014), *The Art and Science of Mindfulness Integrating Mindfulness into Psychology and the Helping Professions* (Shapiro & Carlson, 2009) and *Mindfulness and Psychotherapy* (Germer, Siegel, & Fulton, 2013). These three sources were chosen as they incorporate theoretical, academic, and practical applications of mindfulness for helping mental health professionals. Kabat-Zinn’s (2013), *Full Catastrophe Living*, is a resource for anyone interested in learning more or beginning an MBSR Program. *Full Catastrophe Living* provided the MBSR history, MBSR research, and detailed lessons on how to begin the practice. MBSR, an eight-week mindfulness program was developed by Jon Kabat-Zinn in the Stress Reduction Clinic at University of Massachusetts Memorial Hospital (UMass Memorial Health, 2022). Kabat-Zinn’s work also included researched based practices, resources for further learning and links to guided
practices. As earlier written, MBSR was created as a stress management program that has since evolved and informed several other therapeutic practices to address mental health challenges.

The book *Sitting Together Essential Skills for Mindful-Based Psychotherapy* (Pollack et al., 2014) also underscored the benefits of a mindfulness practice for both clients and mental health professionals. Included in this resource is the grounding theory, origins of mindfulness, practices for clinicians to share with patients, practices to engage in while in therapy to support present moment awareness, as well as “eight ways to maintain a mindfulness practice” (Pollack et al., 2014, p. 33). *Sitting Together* gave the reader scripts for mindfulness practices to incorporate with clients in the therapeutic setting as well as practices for personal use. The *Sitting Together* website (Sitting Together, 2022) provided printable scripts as well as audio versions of the practices to be downloaded for ease of use. Each practice can be adapted and applied to a variety of therapeutic or personal settings.

*The Art and Science of Mindfulness* (2009) presented the reader information about how to incorporate mindfulness into the therapeutic setting as well as sidebar questions to encourage the reader’s personal mindfulness practice. A section of the book is devoted to, “Mindfulness and Self Care for Clinicians” (p. 107). This chapter recognized that most mindfulness research has focused on benefits to the patient (Shapiro & Carlson, 2009). Shapiro and Carlson (2009) discussed the common practice of professionals not caring for themselves despite “encountering extraordinary amounts of suffering and stress” (p. 109). The authors highlighted mindfulness as a “preventative” measure and recognized that taking time for practice and training can sometimes feel challenging (Shapiro & Carlson, 2009).

*Mindfulness and Psychotherapy* (2013) provided clinicians with the definition, history, and foundations of practicing mindfulness in professional and personal settings. The book’s
editors and authors Christopher Germer, Ronald Siegel, and Paul Fulton have contributed to the field of mindfulness in psychotherapy as it is known in Western culture. Germer (2013) stated “Mindfulness must be experienced to be known” (p.8). Like Kabat-Zinn, the authors distinguished between formal and informal practices and recommended mindfulness in everyday living through attention and awareness. This awareness and attention support a way of being in the present moment rather than functioning on autopilot. It is important to note that both formal meditation practices and mindfulness practices in everyday life support one’s wellbeing. Kabat-Zinn (1990) referred to informal practice as “valuable” but loses “much of its ability to stabilize the mind if it is not combined with formal practice,” (p. 57). Kabat-Zinn devoted two chapters of Full Catastrophe Living to maintaining formal and informal practice. Combining and translating these practices into supports for professionals with a tangible aspect may be advantageous.

**Code Lavender**

Healthcare professionals often experience intense stress in their work, and this has certainly been the case in a pandemic (Leo, Abina, Tumolo, Bodini, Pazini, Sabato & Mincarone, 2021). A group of researchers sought to determine the effects and feasibility of responding to healthcare workers in distress following a stressful event in the workplace (Davidson et al., 2017). The Code Lavender intervention was designed as an intentional act of kindness for health professionals following a stressful or challenging event. According to Davidson’s (2017) article on the implementation of Code Lavender in a hospital setting, “those who received the intervention; 100% found it helpful” (p. 181). The introduction to Code Lavender to the health professionals was on a voluntary basis. Just as colors are used to signal medical or emergency situations in a healthcare setting, Code Lavender was created with the calming and stress relieving aspects in mind. Following a stressful event, a code can be called, which signals the
attention of a trained staff member. Subsequently, the staff member reaches out to persons to connect with them and provide a Code Lavender Kit. The kits may include items such as comforting words that are written or typed, chocolate, lavender essential oils, and information for health referrals (Stone, 2018). Like mindfulness, these items utilized the senses to restore a sense of calm and centering. While limited information is available about the impact of Code Lavender, perhaps Code Lavender’s principal values and practices could be translated and applied to a therapeutic practice. This author has yet to find sources that extend this “code” to other helping professions beyond healthcare settings. One potential area that could be expanded on to support mental health professionals is creating a self-soothing or comfort kit. These kits would support emotional regulation and self-soothing, that are like the components of DBT individual and group work.

**DBT Comfort/Self-Soothing Kits**

As previously stated, DBT is a treatment modality most often practiced with adolescents and young adults. Mindfulness practices including awareness of breath, eating, and movement are a central component introduced and taught with clients in conjunction with other DBT skills. These mindfulness practices and DBT tools are intended to support emotional regulation as well as attention and focus (McKay et al., 2007). In DBT groups, participants learn to discern what practices support their comfort and well-being and what senses can be engaged to calm, re-regulate, and ground. A tangible component of the group activities may include creating a “self-soothing” or “comfort kit” that is composed of objects chosen by an individual’s preference.

Sensory awareness in the moment is important because it allows us to feel the emotion, be in the moment, and to relinquish our control to judging and over analyzing. In a kinesthetic and sensorial manner, we engage with our senses and immerse ourselves in the moment. These
kits contain a variety of objects which activate and stimulate senses such as: taste, smell, feeling or touch, sight, or hearing. Tactile objects such as a fidget or a feather, sweet or sour, a preferred essential oil, words of encouragement, a strand of beads for movement, in addition to other items that participants create. These kits are designed to be portable so that participants carry them throughout their day for support when emotions threaten to overwhelm or when they may be tempted to revert to unhealthy coping strategies. Items in the kit have been connected to the mindfulness practices explored in earlier group sessions, such as candy during a mindful eating activity. Mindful eating is important to help participants understand how to ground themselves in the moment by being aware of their taste, smell, hearing, and touch senses. The concepts of the Code Lavender and DBT soothing, and comfort kits hold potential as useful tangible resources to be developed and shared with mental health professionals for personal use.

Mindfulness in the Workplace

Mindfulness and meditation practices are becoming more common in the workplace setting. Google, Target, and General Mills have developed and offered mindfulness programs for their employees to manage “workplace stress and improve mental focus” (Schaufenbuel, 2016). King (2019) discussed mindfulness programs to combat workplace stress such as “burnout” or “compassion fatigue.” King (2019) identified burnout among healthcare or social work services as, “symptoms of depression; blunted affect; aggression; decreased commitment to patients or clients; psychosomatic manifestations; or decreased cognitive performance, motivation, and judgment” (p. 193). Both authors recognized mindfulness programs offered in the workplace as potential benefits for wellness and well-being. Jha (2013) offered mindfulness as helpful regarding burnout in medical professionals and teachers. She suggested that while the stressors
may not be reduced, a person’s relationship to the stressors may change due to engaging in mindfulness practice.

Sharon Salzberg, meditation teacher and cofounder of the Insight Meditation Society recommended guidance for meditation in the workplace in her 2014 book, *Real Happiness at Work Meditations for Accomplishment, Achievement, and Peace*. Salzberg (2014) weaved in shorter practices she referred to as, “stealth meditations” that connected to the senses bringing awareness to the present moment. Salzberg described the relational quality of meditation and mindfulness, its portability – it can be done virtually anywhere or at any time and is not intended to “flatten” one’s emotions but calls us to be present and explore our habitual reactions. She identified mindfulness as a key component of supporting balance in the workplace and positively affecting how we relate and communicate with others. Salzberg (2014) asserted, “mindfulness of our inner world at work enables us to communicate and connect more skillfully with others through compassion and clarity of purpose” (p. 141). For those who work in direct practice with clients to support their mental health and wellbeing, these practices could prove invaluable. In this manner, mindfulness is considered a practice or tool for self-care.

Online applications including Calm and Insight Timer give assiblility to self-care and wellbeing practices including mindfulness practices. Both online apps explicitly refer to “reducing stress and anxiety” (Calm, 2022; Insight Timer, 2021). These mindfulness apps offer a variety of practices to choose from and track and positively reinforce consecutive or consistent use and support the concept of daily routines that connect with hygiene practices for overall physical and mental wellbeing.

The terms “self-care” and “well-being” were highlighted in professional resources and popular media sources during the pandemic (Vasquez, 2020 & Tygielski, 2020). The continuing
pandemics and the mental health crisis among children and adolescents underscored how vital and necessary it is for professionals to seek support for their mental health and well-being. The research and programming of mindfulness experts guide both individuals and professionals to explore mindfulness and meditation practices for enhancing daily physical and mental wellbeing.

**Discussion**

Mindfulness and meditation practices are not merely selfish acts or “navel gazing”. The research suggested these practices can lead to considerable pain and symptom reduction or management leading to greater health and mental wellbeing. Cristina Feldman, a meditation teacher, and cofounder of Gaia House Retreat Center offered a perspective on self-care and wellbeing in her book *Boundless Heart, The Buddha’s Path of Kindness, Compassion, Joy and Equanimity* (2017). Feldman (2017), shared these words originally attributed to the Buddha: “How does one look after others whilst looking after oneself? By practicing mindfulness, developing it and making it grow” (p. 23)

The Buddha’s question, “how does one look after others whilst looking after oneself?” (Feldman, 2017, p. 23) characterized mental hygiene as a framework that implies that daily routine practices contribute to overall well-being. This is consistent with literature that underscored the choice and active nature of daily or routine practices for mental hygiene.

**Pause. Reset. Return.**

The proposed use of a mental hygiene framework encourages individuals to recognize choice and the ability to actively participate in their personal mental wellbeing. Oftentimes, mental health professionals have a keen understanding of the importance of their personal mental wellbeing and yet often struggle to take time for routine activities and practices. Furthering the research around mental hygiene, mindfulness and mental wellbeing, this question arises “what
supports, or programs might encourage mental health professionals to engage in mindfulness practice for the benefit of their mental wellbeing? Moreover, would creating a more personalized mindfulness and meditation practice be helpful?"

While facilitating an introduction to mindfulness workshop, therapists noted time constraints and skepticism as principal factors for not practicing mindfulness. Among this group of seven private practice therapists, each received training in and utilized mindfully informed treatment modalities, DBT and ACT, with adolescent clients. And yet, they reported rarely engaging in formal practice. Kabat-Zinn (2013) and Salzberg’s (2014) work proposed benefits of shorter practices that may encourage and provide rejuvenation for practice.

A potential solution to the time and skepticism factors is to create a series of workshops for mental health professionals to intentionally explore and create personalized mental hygiene plans which incorporate mindfulness practices and comfort kits. With explicit permission from the Helix Center in McLean, Virginia, the workshop would be titled, “Pause. Reset. Return” (The Helix Center, 2022). These three actions are the process adolescents follow in their treatment which includes learning and practicing mindfulness in DBT treatment.

Specifically, The Pause. will be for therapists to intentionally identify mindfulness practices that can be incorporated into their daily lives. The Pause. aspects of the practices involve taking a mindful break during stressful moments or as preventative practices prior to beginning difficult work with clients. Ideally, the reset will occur through engaging and immersing oneself in mindfulness and meditation practices. The practices might include a formal meditation practice such as awareness of breath practice. Other practices that can be incorporated are walking mindfully, mindful eating, doodling, painting, and listening to music. The Return post Pause and Reset will be different for each person. The goal is for the process to create a
space for experiencing mindfulness practices that will provide support when stress or intense emotions threaten to overwhelm. The workshops will also include creating individual kits like the Code Lavender kits used in healthcare settings or DBT comfort and self-soothing kits. Creating comfort kits could help support therapists to identify sensory components to engage the senses combined with mindfulness practices to manage stress and intense emotions that may arise throughout the workday.

The well documented benefits of mindfulness and meditation practices on stress reduction, emotional regulation, and impact how workshops might be structured. These workshops will focus on the potential personal benefits for the therapist’s mental wellbeing, rather than how to incorporate or teach the practices to clients. However, as the literature revealed, one’s personal practice may naturally inform introducing and practicing mindfulness with clients. As mindfulness is communal in nature and not a solitary practice, the group participation in the workshop may also cultivate space for connection and community. The workshops intend to encourage mental health professionals to take a routine and active approach in their self-care for optimal wellbeing and functioning. A more detailed outline, speakers notes, and resources is included in the next section of this rationale paper.

**Conclusion**

Multiple pandemics and a documented mental health crisis among children and adolescents have increased the needs for and demands on mental health professionals. Mental health professionals’ wellbeing is essential and vital so they can best serve their clientele and avoid burnout. With an understanding of the current mental health and wellbeing challenges, there is a need to specifically address means to support and encourage mental health professionals engaging in mindfulness practices for their own mental hygiene. Mental hygiene
as a proactive framework holds the potential for mental health professionals to intentionally plan daily routine activities including mindfulness practices in support of their personal mental wellbeing. The research concluded that mindfulness and meditation practices hold potential to positively impact health and mental wellbeing. This includes mental health treatment modalities that incorporate mindfulness and meditation in client work. And yet, it is unclear as to whether mental health professionals include mindfulness as a component of their routine wellbeing practice. While the term “mental hygiene” appears less in recent literature, Tremblay et al. (2021) proposed a reintroduction of the term “mental hygiene” to encourage individuals to actively engage in daily practices to support mental health and wellbeing. Mindfulness is included in the routine practices. Taking this into consideration, the proposed workshop series “Pause. Reset. Return’s methods are grounded in the research. The workshop series provides the time and space for mental health professionals to explore mindfulness activities and practices that can be incorporated into their daily routines. By developing opportunities for exploring mindfulness and meditation practices, mental health professionals may find respite and personal support as they continue to support their clients and their families.
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Creative Project Overview
Mental Hygiene and Mindfulness for Mental Wellbeing

The Creative Project Pause.Reset.Return. consists of three workshops that seek to restore and invigorate mental health professionals while considering busy schedules and time constraints. Workshops are designed to be one and half to two hours in length. The workshops are similar in structure and content to a Mindful Based Stress Reduction (MBSR) workshop providing both an experiential and learning environment to engage in a variety of mindfulness practices and consider metal hygiene. Whether a seasoned practitioner or someone new to mindfulness and meditation, participants are encouraged to take part of the workshops with a “beginner’s mind”. The workshop could also be positioned as a mini retreat to provide practice, respite and an opportunity for professionals to connect and create community.

The workshops are designed for participants to engage in mindfulness and creative practices and to proactively consider a plan for routine mental hygiene and self-care. Participants will be invited to identify mindfulness practices, both formal and informal to incorporate into their daily living for mental health and well-being. The workshops include formal sitting and awareness of breath as well as practices that utilize each of the senses: hearing, sight, smell, touch, and taste to explore and engage in mindfulness and meditation.

Creative and tactile elements will be incorporated to bring playfulness and exploration into the workshop. For example, participants will create visual representations of the various mindfulness practices explored in the workshops. These “stealth meditations” come from Sharon Salzberg’s book Real Happiness at Work Meditations for Accomplishment, Achievement and Peace. The “stealth meditation” cards and other elements are part of sensory based comfort kit like the Code Lavender kits used in hospital settings, or in Dialectical Behavior Therapy’s (DBT) self-soothing kit. The elements of the workshop are purposeful to provide mental health professionals time and space for being.
Pause. Reset. Return
Mindfulness and Mental Hygiene for Mental Wellbeing
Creating Workshops for Mental Health Professionals

The ongoing health pandemics and a documented mental health crisis among children and adolescents are placing increasing demands on mental health professionals and caregivers working with these populations and their families. Time constraints and remembering to practice are often cited as reasons for why mediation and mindfulness practices are engaged less frequently. The following series of workshops were created as part of a Thesis/Capstone project for the culmination of Lesley University’s Graduate Mindfulness Studies Program. The workshops are intended to be facilitated and guided by experienced mindfulness practitioners. Several mindfulness and meditation practices incorporated in these workshop sessions expand on and integrate the work of other therapists and experts in the field of mindfulness and mental health. The concepts and practices themselves may be familiar.

The theme of the workshop, Pause. Reset. Return., is borrowed with permission from the Helix Adolescent Outpatient Clinic in McLean, Virginia. The theme highlights the intentionality of setting aside time to Pause., allowing for a Reset. through mindfulness and meditation practices, to conduct a Return. to personal mindfulness and meditation practices for mental wellbeing. The workshops are based on the research conducted on mindfulness and meditation practices and include the less frequently used concept of mental hygiene. Sessions purposefully employ the framework of mental hygiene to examine routine practices that can be incorporated throughout the day as well as engaging participants in the creation of a personalized comfort kit. Each workshop is designed with the demands on time in mind and centered on engaging in practices through each of the five senses. The overall timing of each workshop allows for learning and engaging in experiential practice, conversations and connection, and creative elements with a sense of restorative fun and play.

The layout and components of the workshops are influenced by the Mindful Based Stress Reduction (MBSR) class and include concepts from Dialectical Behavior Therapy (DBT) and Code Lavender used in healthcare settings. The addition of ‘curiosity’ to the more traditional MBSR dialogue and inquiry component of the workshop is purposeful for participants to go beyond the present moment experience following a practice to examine where and when practices can be incorporated into their daily activities. In DBT, clients in group work construct a comfort kit that is personalized with objects and items which activate sensorial experiences. Code Lavender kits are used in healthcare settings to provide tangible support during stressful and traumatic events. These kits also contain sensory items to aid in comfort and stress relief. The creation of a comfort kit allows participants to tap into the senses and identify
items to represent sensory components. The comfort kits are intended to make stress relief tangible.

**For example:**
- Sounds: music or nature, internal sounds, heartbeat, and the breath
- Touch: sense of hands and feet resting in a space & soft or smooth objects
- Visual: photo of a loved one, a phrase written on a notecard, or and loved object
- Smell: essential oil(s), candles, tea bags or loose teas
- Taste: sweet and sour candies; adjustments can be made for food sensitivities and allergies
- Connection: identifying go-to persons for support

Mental health professionals engage in continuing education training and professional development to stay abreast of best practices in service to clients. These workshops are designed with the intention that participants set aside the idea of learning for others, focus on themselves, and dedicate the time for respite and rejuvenation. The research indicates that professionals with personal mindfulness practices may have a positive impact on client work.

Encourage participants to be open to experience of the present moment setting and approach each session and practice with a “beginner’s mind”. Reassure participants that handouts and materials will be shared so notetaking will not be necessary. The allotted time for the workshops is flexible. However, each workshop session may last for two hours. Facilitators may wish to adjust the schedule and combine two or more of the workshops into one day or break out beyond three sessions. In addition to developing a personal practice, therapeutic practices and teams may consider how these brief mindfulness meditations and activities in the workshops might be incorporated into common meeting times. For example, a short meditation practice at the beginning of a staff meeting or before starting a group could be beneficial. The possibilities for growing a personal or group practice are endless.

Facilitators are encouraged to spend time considering workshop logistics and acquainting themselves with materials. Selecting a location, seating, and other accommodations such as space for indoor and potentially an outdoor practice, yoga mats or towels for optional seating and any refreshments to have available. Mindfully spending time with the materials, practices, and activities to become familiar with the flow of the sessions and to tailor workshops to individual preferences is also recommended. The workshop outlines are designed to serve as “day of” facilitator notes. There are abundant resources in print, websites, and online applications that have been reviewed and consulted in the process of creating this project. However, three resources heavily influenced and informed the development of these workshops including:

- **Real Happiness at Work Meditations for Accomplishment, Achievement, and Peace** by Sharon Salzberg (2014)
- **Sitting Together Essential Skills for Mindfulness Based Psychotherapy** by Susan M. Pollak, Thomas Pedulla, and Ronald D. Siegel (2014)
- **How to Train an Elephant & Other Adventures in Mindfulness** by Jan Chozen Bays, MD (2011)
Workshop Details

The following is included for each workshop session:

- Overview/outline including approximate timing and brief notes
- Workshop/plans with detailed speakers notes
- Relevant materials for facilitating and guiding the workshop
- Supply list and resources for creative activities and practices
- Resource list that includes reading, workshop and alternate practices, and links to practices
**Workshop Outline Session #1**  
**Pause. Reset. Return.**  
**Mindfulness and Mental Hygiene**

<table>
<thead>
<tr>
<th>Time</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 min.</td>
<td>Welcome and Intros</td>
</tr>
<tr>
<td></td>
<td>• Workshop logistics: taking care of the self, &amp; intro of participants</td>
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<tr>
<td></td>
<td>• Overview of the workshop</td>
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<tr>
<td></td>
<td>• Exploring brief daily practices &amp; creating a personalized mental</td>
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<td></td>
<td>hygiene plan &amp; comfort kit</td>
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<td></td>
<td>• Power of the Pause &amp; “Stealth Meditations” just 3 breaths practice</td>
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<tr>
<td>20 min</td>
<td>What is mindfulness? What is mental hygiene?</td>
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<td></td>
<td>Research and Scientific Literacy</td>
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<td></td>
<td>Shadow side of mindfulness</td>
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<tr>
<td></td>
<td>• Invite participants to share what they know, and how they may</td>
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<tr>
<td></td>
<td>practice</td>
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<td></td>
<td>o “What is your experience or practice of/with?”</td>
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<tr>
<td></td>
<td>o o What is your current mental hygiene/mental well-being plan?”</td>
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<td></td>
<td>o “What do we know about mindfulness and the brain?”</td>
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<tr>
<td></td>
<td>o Dr. Daniel Siegel’s hand model of the brain</td>
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<tr>
<td></td>
<td>o Dr. Amisha Jha’s research mindfulness and attention</td>
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<td></td>
<td>• 12 min. Practice</td>
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<td></td>
<td>o Trauma Sensitive Mindfulness, TSM</td>
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<td></td>
<td>o Mental Hygiene as a framework for these three sessions</td>
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<tr>
<td>10-15 min</td>
<td>Awareness of Breath Practice</td>
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<tr>
<td></td>
<td>• “We begin with the breath as it is almost always available.”</td>
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<tr>
<td></td>
<td>• Guided practice – invitation to practice, provide choice of</td>
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<tr>
<td></td>
<td>anchor of awareness</td>
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<tr>
<td>Time</td>
<td>Activity</td>
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</tbody>
</table>
| 10 min | Inquiry, Dialogue & Curiosity         | • Invite participants to share about their experience:  
  o “How was the practice?”  
  o “What did you notice?”  
  o “Did anyone notice their mind wandering?”  
  o “Did you return to your anchor?”  
  o “Any challenges during the practice?”  
  o “When might this practice or a variation of it fit into your daily routine?” |
| 5 min  | Shift to outside space – can also be done indoors | • Move from group room to outside patio  
  • Ask participants to bring a yoga mat with them |
| 10 min | “Simply Listening” practice           | • Guided practice building on the script, “Simply Listening” in *Sitting Together* – p. 68.  
  • Read paragraph from Sharon Salzberg and Joseph Goldstein to introduce the practice |
| 15-20 min | Brief Dialogue, Inquiry & Curiosity Creating a Comfort Kit | • Invite participants to share their experience:  
  o “How was the practice?”  
  o “What did you notice?”  
  o “What sounds did you hear? Any other senses that you became aware of?”  
  o “Curiosity – when might this fit into your daily routine?”  
  o Create a small visual representation of the number three to remind – “just three breaths practice”  
  o Distribute boxes or small zipper bags for comfort kits |
<table>
<thead>
<tr>
<th>5 min</th>
<th>Wrap up and thank you!</th>
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</table>
|       | • Gratitude and thank you!  
|       | • Intention setting for the coming week(s) & extending practices to everyday moments:  
|       |   o Explore brief AOB practice  
|       |   o “Stealth Meditation”  
|       |   o What sounds & song(s) catch your attention?  
|       | • Homework: bring a photo or object that can be used as a visual for love and joy  
|       | • Refer to handouts and resources  
|       | • Share contact info and be available after workshop ends for additional questions |

**Prepare for workshop:**
If making “stealth mediation” cards on heavy paper, follow the instructions below:

- paint paper with black gesso
- let dry then cut in squares to desired size
- copy any handouts and gather other supplies
- site visit to the location to ensure enough space and seating or yoga mats if using
Session 1 Facilitator Notes
Welcome & Introductions

• Encourage participants to get comfortable in the space, noting options for sitting, standing
  o refer to chairs and yoga mats if available
• As participants are settling in, suggest that they mindfully observe their environment and notice who is in the room with them
• Mindfulness is relational
  o Is not just sitting alone in silence; this is an opportunity to also connect and build community and support for one another
• Workshop logistics: taking care of the self
  o Reference self-care taking a break as needed, location of restrooms
• Overview of the workshop: Pause, Reset, Return. three sessions designed to allow respite and space to return to or deepen mindfulness and meditation practices.
• An opportunity for participants to slow down the momentum of their week to just sit and be present
• The sessions will introduce the concept of mental hygiene as a framework to incorporate brief daily practices to support mental wellbeing and to create a personalized comfort kit like DBT soothing/comfort kits or Code Lavender kits developed and used in a hospital setting.
  o Introductions: “What brought you here today?”
  o Power of the Pause & “Stealth Meditations”
    • In Real Happiness at Work, meditation teacher and cofounder of Insight Meditation Society, Sharon Salzberg (2014) included, “stealth meditations, to specifically shape our ability to bring mindfulness, concentration, and compassion to our work,” (p. 6).
• Together, we will explore and examine where and how brief practices can be inserted throughout the day.

Short Practice:
• Let’s try it! “Just 3 breaths practice” (adapted from Chozen Bays, 2011, p. 76)
  o “Finding a comfortable seat, close your eyes or lower your gaze depending on your comfort level”
  o “Imagine a moment that is not too far in the past or something too far into the future that elicits a physical or emotional tension to your body.”
  o “If this is too challenging, create a fist with your hands and flex your arms to create tension”
  o “Then release”
  o “Try this again, but as you release take three steady and even breaths”
  o “What do you notice?”
  o “When could you use this “stealth mediation” during your day?”
Consider:
- “Three breaths before putting your feet on the floor in the morning”.
- “Three breaths as you pick up your keys”.
- “Three breaths before entering a room”.
- “Or perhaps choosing a sound in your day, such as a phone ringing or vibrating, and each time you hear the sound, pause, notice your body and your breathing, take three even and steady breaths.”
- Chozen Bays shares:
  - “Prescription for health: Quiet the mind for just three breaths. Repeat as needed.”

Mindfulness - Mental hygiene - Exploring the Research and Scientific Literacy
- “What is your experience or practice of/with mindfulness and meditation practices?” Invite participants to share what they know, and how they may practice
- If it is challenging, what gets in the way or is a hindrance?
- “How or what would describe your current mental hygiene/mental well-being plan?”
- Defining mindfulness
  - “Mindfulness is awareness that arises through paying attention, on purpose, in the present moment, non-judgmentally,” says Kabat-Zinn. “And then I sometimes add, in the service of self-understanding and wisdom”.
  - Addition from Rhonda Magee
    - “Relationality as Jon Kabat-Zinn and other mindfulness teachers repeatedly remind us, is the heart of mindfulness. Though our definitions may differ, mindfulness practice may make us more aware of the ways in which “we” relate to everything else”.

What do we know about mindfulness, potential benefits, and the brain?
- Sometimes think of it as two-fold: attention and self-regulation
- Building up our ability to focus attention & to increase our resilience - the bounce back when we become dysregulated.
- Sympathetic Nervous System
  - fight flight freeze faint
- Parasympathetic Nervous System
  - rest and digest
- Distress tolerance - widening that window to tolerate stress and intense emotions
- River of Life Chaos and Rigidity
  - stay between the two “the middle path”
- Staying present
  - not falling forward into the next moment or falling back into the previous one
- Neuroscience - neuroplasticity - experience changes the brain – “neurons that fire together wire together”
- Daniel Siegel’s hand model of the brain (included in handouts)
- The term or work “anchor” is used to describe how or where we can anchor our attention during mindfulness and meditation practices.
• Each of us can choose what or where we place our attention.
• Shorter practices - Dr. Amisha Jha’s research on mindfulness, attention, and concentration, 12 min. practice 5X a week
• Mindfully Based/Informed Interventions: Dialectical Behavior Therapy (DBT), Acceptance and Commitment Therapy (ACT), and Mindfully Based Cognitive Therapy (MBCT)
• These can be referenced or explained in more detail depending on therapists training:
• Mindfully Based/Informed Interventions: Dialectical Behavior Therapy (DBT), Acceptance and Commitment Therapy (ACT), and Mindfully Based Cognitive Therapy (MBCT)
• These can be referenced or explained in more detail depending on therapists training:
• DBT is a cognitive-behavioral treatment developed to address “complex and difficult to treat” mental health disorders including chronically suicidal individuals (Linehan, 2001). DBT is used in treatment of individuals diagnosed with borderline personality disorder (BPD) and is also practiced in treatment of emotional dysregulation, substance dependence diagnosed with BPD, binge eating, and depressed suicidal adolescents. DBT treatment is administered within inpatient and outpatient settings.

**Trauma Sensitive Mindfulness**

• Sometimes referred to as the “shadow side of mindfulness”
• The work of David Treleaven, author, educator, and trauma specialist is an excellent resource. The title of his book and a link to his webpage is included in the references.
• Treleaven wrote:
  o “Anywhere mindfulness is being practiced, someone in the room will likely be struggling with trauma”.
• **TSM is:**
  o As we discussed mindfulness and mediation practices hold the potential to positively impact mental and physical health
  o A word or two of Caution: “mind the hype”– mindfulness is not a panacea
  o Trauma sensitive mindfulness is:
  o Being aware when staying in a practice is not helpful
  o Not just mind wandering, but ruminating
  o Taking a break - moving our bodies
  - Eyes open or focusing on an object
  - Orienting to the room - note five objects or colors
  - Grounding through feet on the floor hands in your lap

**Note to Facilitators:** consider what mental hygiene means to and for you. What do you incorporate into your day that facilitates your mental and emotional wellbeing?
Mental Hygiene

- While mental health is more commonly used every day to describe one’s mental wellbeing, as in having good mental health, for these workshops the term “mental hygiene” will be used in addition to mental health.
- Defining mental hygiene: Mental hygiene is a term that is used not as frequently as other terms. Just as one engages in routine and daily hygiene practices for wellbeing and disease prevention such as showering, handwashing, brushing teeth, sleep, and physical activity, mental hygiene can be understood as active practice and requires attention to mental wellbeing.
- These may include activities that bring joy and a sense of happiness, stress management, healthy coping strategies, social connection with others, exercise, and physical activity.
- Mindfulness and meditation practices as we discussed earlier enhance physical and mental wellbeing.
- A mental hygiene plan benefits from the inclusion of mindfulness and meditation practices.
- For example, Dr. Daniel Siegel’s (2011) “Healthy Mind Platter” includes “seven daily essential mental activities to optimize brain matter and create well-being” (https://drdansiegel.com/healthy-mind-platter/).
- “Time in” as one of the “Time in” taking time to just be, this includes mindfulness and mediation practices (Siegel, 2011).

Transition to Awareness of Breath Practice

- Mindfulness is an embodied practice - it can help us to connect our mind and body.
- We use anchors for our attention. The breath is a common starting point to anchor attention.
- If you find the breath too challenging, shift your attention to your hands or feet. I will offer alternate anchors during the practice.
- We will be exploring mindfulness practices through each of the senses
  - Sight
  - Hearing
  - Smell
  - Taste
  - Touch

Awareness of Breath Practice – AOB

- AOB scripts are plentiful and can be found in mindfulness manuals, articles, and online applications. While a sample script is included below, consider exploring other AOB practices to find one that appeals to you and one that you can guide without reading from a script. In this way you are “embodying” the practice and along with your participants.
- A script that can be used for a 10–15-minute awareness of break practice.
  - “Normalize” mind wandering and highlight “just being”.
    - “Each time you notice when the mind or your attention wanders - that’s mindfulness!”
    - “We begin with the breath as it is almost always available”
    - Attention to the breath may be challenging for some people. Offering an alternate anchor allows for greater comfort and ease.
Each practice is an invitation to explore mindfulness. Provide participants with a choice for the anchor of awareness. If attention to the breath becomes difficult or challenging, offer an alternate anchor of awareness of hands, feet, or the backside of the body that touches a surface.

The following AOB script can be adjusted to fit the facilitator's style and language preference.

Sample AOB Script

- “In this practice, we will be bringing our awareness to our breath as an anchor of our attention.”
- “From time to time you may notice that your mind begins to wander. This is what the mind does.”
- “Gently nudge your attention back to the breath or intended anchor.”
- “Each moment of noticing when the mind wanders is mindfulness itself.”
- “As we begin, taking a moment to notice the space you are in.”
- “The space may be familiar to you or new.”
- “Perhaps turning your head side to side noticing what’s in front of you or behind you”
- “Looking up towards the ceiling.”
- “Looking down at what is beneath you.”
- “Taking a moment to simply notice the space you are in.”
- “Orienting our space for practice supports a feeling of safety.”
- “Continuing the process. Maybe raising your shoulders up towards your ears and gently releasing them (see if you can relax a bit more into your body).”
- “Find a comfortable seat - in a chair, a sofa or the floor sitting in an upright position with the spine straight without being rigid, lying down or standing if you prefer.”
- “Choosing a position for how you begin your practice.”
- “Take a slow, even breath, I invite you to close your eyes if that is comfortable and feels safe for you or lowering your gaze Again, choosing whatever feels most supportive for you at this moment.”
- “Continuing our practice, start to notice your breath.”
- “Simply notice the sensation of breathing. Just as it is.”
- “Take a few slow even breaths.”
- “Perhaps extend the inhale or the exhale.”
- “You may choose to put a hand over your heart or your belly to bring an additional sense of awareness to your breath.”
- “Perhaps you notice the rise and fall in the chest or the rise and fall in the belly.”
- “If the attention to your breath feels uncomfortable or challenging, try shifting your awareness to your hands or your feet, or the backside against the chair or the floor.”
- “Noticing the points of contact of the hands, the feet and the backside.”
- “Get curious about the breath - what is the nature of your breath?”
- “What do you notice about your breath or breathing?”
- “Is your breath long, short, expansive, or shallow?”
- “Return to the breath as an anchor - or your chosen anchor sitting and noticing any sensations.”
- “You may experience the mind beginning to wander - what is calling to your attention?”
- “Thoughts? Plans?”
• “Are you experiencing a feeling or physical sensation in the body?”
• “Practice noticing when the mind wanders.”
• “Just practice noticing, no need to change your mind.”
• “Gently nudge the mind back to your chosen anchor.”
• “The breath, hands, feet, backside against the chair or floor if you are laying down.”
• “Continuing with the breath as the anchor of attention allowing the breath to just happen and return to its normal rhythm.”
• “If possible, on the next inhale take a deeper breath inhaling through the nose, through the chest and down into the belly.”
• “Breathing in, get curious about the breath.”
• “Where do you notice the breath?”
• “The nostrils, the chest rising and falling, in the belly?”
• “Just noticing the feeling and sensations of breathing.”
• “If your chosen anchor is the hands, the feet, other points of contact, noticing any new or changing sensations.”
• “Continuing with a natural rhythm of breathing.”
• “Notice the sensations that arise – coolness in the nostrils on an inhale, warmth on an exhale.”
• “Remembering that the mind wanders and noticing when it does is mindfulness itself.”
• “In these last moments of practice, allow the breath to be just as it is.”
• “Resting the attention on the chosen anchor – hands, feet, backside of the body.”
• “As we come to the end of our practice, slowly open your eyes if they are closed, shifting your gaze, moving the body, and perhaps taking a gentle stretch as we bring our awareness into our space.”
• “As we come to the end of this practice, I’d like to share a familiar quotation by Viktor Frankl.”
  o “Between stimulus and response there is a space. In that space is our power to choose our response. In our response lies our growth and our freedom”.

• “Allow a moment or two for participants to reorient to the space, take a sip or water or tea, before continuing to the next section.”

**Note to facilitators:** There are many beautiful and expressive quotations to share that highlight the “space” created in the practice as well as a transition at the conclusion of the practice. Choose one that speaks to you.

**Inquiry, Dialogue & Curiosity**

  o Inquiry and dialogue are key components of MBSR classes. This time is dedicated for participants to share their experiences of the practices. In traditional MBSR, this is not process time. For the purposes of these sessions the “curiosity” component is added to expand on when and where a particular practice might be incorporated purposely into the day. Using the lens of mental hygiene in this way, participants are encouraged to bring awareness to aspects of their day that might be more challenging, or when a “mindful break” or “stealth meditation” could be useful.
The following questions can be helpful to begin the dialogue, inquiry and curiosity sharing:

Invite participants to share about their experience and ask the following:

- “How was the practice?”
- “What did you notice?”
- “Did anyone notice their mind wandering?”
- “Did you return to your anchor?”
- “Any challenges during the practice?”

Curiosity:

- “Considering your day-to-day life, when might this or another “stealth practice” purposely be inserted as a mindful break for stress relief?”
- If possible, create a list from participants suggestions that can be shared

**Sense of Hearing – Playlists and Simply Listening Practice**

Creating Communal Playlists

- Ask participants to write favorite songs, soundtracks, podcasts etc. on the paper so the facilitator can share the list at some point before the next session.
- These playlists can also be listened to during the session segments when participants are working on creative elements of their comfort kits.
- If you are planning to offer the simple listening practice outdoors or in another space, before shifting to this alternate space, encourage participants to collaborate in creating a playlist. Refer to the paper hanging in a common area for participants to share music and sounds tracts that they find mood lifting, calming, energizing, one for meditation, one for walking, or driving etc. Feel free to add to categories. Music can be a wonderful mindfulness tool.

**Simply Listening Practice**

- This practice is taken directly from the book, Sitting Together – *Essential Skills for Mindfully Based Psychotherapy*, by Susan M. Pollak, Thomas, Pedulla, and Ronald D. Siegel, (2014, p. 68). Here is a [link](#) to practice that can be printed from the Sitting Together resource page and a [link](#) to access an audio version.
- This practice can range from 10 to 15 minutes. As these sessions are exploring shorter practices, 10 minutes or less should be sufficient for participants to get a sense of simply listening.
- The idea of even shorter or a simply listening “stealth mindfulness” practice can be discussed following the formal practice.
- The following paragraph from Sharon Salzberg and Joseph Goldstein (2014) can be read at the beginning of practice to frame “simply listening” as participants are settling in:

> We begin with hearing because it suggests something of the natural quality of mindfulness. We don’t have to make the sounds come or go. We don’t have to identify them; we don’t have to manipulate them. We can hear sounds without having to make any effort to do so. The object of sound appears, and we’re present…we’re alert…we connected to it (p. 68).
Begin the Practice

- “Start by sitting comfortably, eyes either slightly open or gently closed.”
- “Allowing yourself to simply listen to the sounds around you. Notice the sounds of the traffic, the wind, the rain, the birds, or the air conditioner.”
- “There is no need to name the sounds, to grasp or hold on to them, or to push them away. Just allow yourself to listen to the sounds as they are.”
- “Imagine that your body is a gigantic ear, or if you prefer, a satellite dish, picking up 360 degrees of sound—above, below, in front, behind—all around you.”
- “Listen with your entire being.”
- “Noticing that each sound has a beginning, middle, and end.”
- “If your mind wanders, no problem. Just bring it back to the present moment.”
- “Let yourself rest in the sounds of the moment, knowing that this moment is unique, and that this constellation of sounds will never be repeated.”
- “Take a deep breath, wiggle your fingers and toes, stretch, and open your eyes if they have been closed.”
- “Trying to extend focused attention into your next activity.”
- “Allowing a few moments for participants to re-engage with surroundings before beginning the Inquiry, Dialogue & Curiosity segment post-practice.”

Inquiry, Dialogue & Curiosity

- Inquiry and dialogue are key components of MBSR classes. This time is reserved for participants to share their experiences of the practices. In traditional MBSR, this is not process time to discuss emotions, thoughts, or feelings. For the purposes of these sessions the “curiosity” component is added to expand on when and where a particular practice might be incorporated purposely into the day. Using the perspective of mental hygiene in this way, participants are encouraged to bring awareness to aspects of their day that might be more challenging, or when a “mindful break” or “stealth meditation” could be useful.

The following questions can be helpful to begin the dialogue, inquiry and curiosity sharing:

Invite participants to share about their experience

- “How was the practice?”
- “What did you notice?”
- “Did anyone notice their mind wandering?”
- “Did you return to your anchor?”
- “Any challenges during the practice?”
- Curiosity: consider your day-to-day life, when might this or another “stealth practice” purposely be inserted as a mindful break for stress relief?
- If possible, create a list from participants suggestions that can be shared.

Creating a Comfort Kit

- “Some of you may be familiar with the concept of comfort or self-soothing kits created in DBT groups. During these sessions, we are going to use the lens of mental hygiene to consider how mindfulness and mediation practices could be incorporated into our daily routines and create our own individualized comfort kits. Just as we are exploring a variety of mindfulness practices through the senses, we will use the senses to select items
that integrate our senses of sound, touch, taste, smell, visual and include connection to this list.”

“Stealth Mindfulness” Cards
- Remembering the first pause/“stealth mindfulness” just three breaths practice?
- “Each of you will create a mindfulness card as a visual reminder to incorporate the brief “three breaths” practice into your day.”
- “Passing around 4X4 paper squares – these can be heavy duty card stock, construction paper, Post It brand notes, or any other available paper.”
- Heavyweight mixed media paper can be painted with black gesso and cut into squares prior to the activity. Gel or metallic pens work well and add a bit of “pizzazz”
- Turn on soothing music if participants are open to it.
- Encouraging participants to revisit the tensing the arms and fists activity followed by a release and three steady and even breaths.
- “Draw, write, doodle what comes to mind or is sensed in the body.”
- Some participants may want to create more than one “stealth mindfulness” card and/or one that is inspired by the ‘simply listening” meditation.
- Time permitting participants can share their cards
- Distribute boxes or zippered bags that will become the comfort kits.
- Permanent markers can be used to personalize the boxes or zippered bags.

Wrap up and Thank You!
- **Gratitude** and thank you! Invite participants to share one thing that they appreciated about this time.
- **Intention setting** for the coming week(s) & extending practices to everyday moments.
- This week explore a brief AOB practice.
- “Just three breaths” pick one moment or one setting to practice this each
- “Stealth Meditations”
- “Where and when do you find a moment to notice?”
- “What sounds & song(s) catch your attention?”
- **Homework**: bring a photo or object that can be used as a visual for love and joy
- Refer to handouts and resources
- Share contact info and be available after workshop ends for additional questions

Session One Handouts:
- Notes on Mindfulness and meditation practices
- Awareness of breath [script](#) and [audio](#)
- Simply Listening [script](#)
- Simply Listening [audio clip](#)
Mindfulness and Mental Hygiene
Workshop Outline Session #2

<table>
<thead>
<tr>
<th>Time</th>
<th>Notes</th>
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<tbody>
<tr>
<td>10 min.</td>
<td>Welcome back</td>
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<tr>
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<td>• Hello and check – in – “what’s your weather?” internal and external</td>
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<td></td>
<td>• Review workshop logistics: bathrooms, nourish as needed</td>
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<td>• Entering and Centering - brief awareness practice before jumping in</td>
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<td>• Overview of the today’s session #2</td>
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<td>• Brief review of last week, practices to add to our tool kit,</td>
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<td>creating tangible objects</td>
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<td>15 min</td>
<td>Brief review</td>
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<td>mindfulness and mental hygiene</td>
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<td>• “What do we know about mindfulness and the brain?” Share:</td>
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<td>Graphic from <a href="http://www.stressedteens.com">www.stressedteens.com</a> (in resources)</td>
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<td>• Mental Hygiene as a framework</td>
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<td>• “What have you tried or added to your mental hygiene/mental</td>
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<td>well-being plan?”</td>
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<td>• Awareness of Hands and Feet – grounding through sense of touch</td>
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<td>Sense of touch:</td>
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<td>Awareness of Hands</td>
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<td>Awareness of Feet</td>
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<td>• Guided practice – invitation to practice</td>
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<td>• See Awareness of hands script/practice</td>
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<td>• See Awareness of feet script/practice</td>
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<td>o “Did you face challenges during the practice?”</td>
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<td>o “When might this practice or a variation of it fit into</td>
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<td>your daily routine?”</td>
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<td>10 min</td>
<td>Extending to Daily Activity: Walking practice on break Mindful hand placement</td>
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<td>Return from break Sense of smell Adding to your comfort kit</td>
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<td>15-20 min</td>
<td>Adding to your comfort kit</td>
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**Prep for workshop session:**
- Create more gessoed squares if needed
- Gather supplies for creating essential oil container:
  - cotton balls
  - containers – any small plastic container with a lid
  - essential oils
- Zipper pouches or boxes for “comfort kits”
  - Day off:
    - Copy handouts
    - Post playlist; consider creating a digital version
Handouts:
Awareness of hands – see resources
Awareness of feet- see resources
Walking mindfully
Session 2 Facilitator Notes

Welcome back!
Hello and check-in: “what’s your weather?”

- Entering and Centering – “just three breaths” practice before jumping in
  - “Take three steady slow breaths.”
  - “Shifting your body as needed – maybe lifting shoulders up towards the ears, or shifting your shoulders backward and down
  - “Settling and familiarizing yourself with the space – looking side to side, up and down, in front and back”

- Check in - Ask participants to share their “weather” a metaphor for present emotional state.

- A few examples, fog rolling in might relate to confusion or sleepiness, sunny and cloudless – feeling great! or windy and shifting might indicate a change and mix of moods and uncertainty (internal and external)

- Review workshop logistics: bathrooms, nourish as needed.

- Overview of the today’s session #2
  - Refer to workshop #2 outline above sharing details about timing, breaks, projects – what to expect

- Brief review of last week, practices to add to our tool kit, creating tangible objects
  - Mental hygiene is
    - Mental hygiene is a term that is used not as frequently as other terms. Just as one engages in routine and daily hygiene practices for wellbeing and disease prevention such as showering, handwashing, brushing teeth, sleep, and physical activity, mental hygiene can be understood as active practice and requires attention to mental wellbeing.

    - Mindfulness is
      - “Mindfulness is awareness that arises through paying attention, on purpose, in the present moment, non-judgmentally,” says Kabat-Zinn. “And then I sometimes add, in the service of self-understanding and wisdom”.

      - Stealth mindfulness
      - Power of the pause
      - Just three breaths
      - Just listening
      - Adding to playlists

Questions:
- “What do we know about mindfulness and the brain?”
- Mental Hygiene as a framework
- “What have you tried or added to your mental hygiene/mental well-being plan?”
Sense of touch practices:

- Awareness of Hands and Feet – grounding and awareness through sense of touch:
  - “Our sense of touch can be a helpful grounding tool in moments when emotions are particularly intense, or we feel a sense of stress that may cause some dysregulation.”
  - “Emotions can feel as if they might overwhelm us, using a sense of touch with either the hands or feet allows for one to relax and quiet the body and mind.”
  - “Awareness of the feet is helpful when we notice we are feeling anxious.”
  - “We can literally ground ourselves by sensing our feet on the ground.”
- Awareness of Hands:
  - Author, physician, and Zen teacher Jan Chozen Bays, offers a practice titled, “Rest Your Hands”
  - This practice is adapted from her book: How to Train a Wild Elephant (2011)
    - “I invite you to take a breath, close your eyes or drop your gaze.” - whichever feels most comfortable to you in this moment
    - “When you are ready, shift your attention to your hands.”
    - “Let them relax.”
    - “Resting where they are –perhaps in your lap, at your sides, resting on your thigh or a table.”
    - “Notice how they are resting and where they are resting.”
    - “Sensing any subtle sensations in the quiet hands.”
    - “If your mind starts to wander, notice and gently nudge your awareness back to your hands.”
    - This is mindfulness
    - Chozen Bays (2011) reminds us, “When we relax the hands, the rest of the body and even the mind will relax, too. Relaxing the hands is a way of quieting the mind. We also find that when the hands are quiet in our lap, we can listen more attentively,” (p. 88).
    - “Taking another breath, slowly open your eyes, or raise your gaze as we end this practice.”
    - “Perhaps take a gentle stretch.”
  - Note to facilitator: this practice can be extended by guiding participants to:
    - “Noticing each finger.”
    - “Noticing the tip of the finger.”
    - “Perhaps gently press each one against a surface.”
    - “Noticing the palm of the hand and the wrist. Then, transition back to gently resting the hands.”

**Note to facilitators:** You can allow a moment or two before shifting to the awareness of the feet practice by engaging in a brief inquiry, dialogue, curiosity practice in between – or – Shift from the hands to the feet in the same practice. It can be helpful to gauge participants’ level of energy prior to beginning these practices.

Awareness of Feet
  - “Chozen Bays shares a practice for the feet, “Bottoms of the Feet”
  - “This practice is also adapted from her book, How to Train a Wild Elephant” (2011)
“Gently shift your attention from the hands to the bottoms of the feet.”
“Noticing the surface your feet are on: Is it hard or soft?”
“Do you notice any warmth? Coolness?”
Perhaps slowly rock your feet from heel to toe, toe to heel.”
“Noticing the shift from one point of the foot to the other.”
“Taking a breath, notice your feet quietly resting on the floor or the surface they are touching.”
“When it feels comfortable, opening your eyes, or raising your gaze, as we end this practice.”

**Note to facilitators:** The awareness of feet practice can be done sitting or standing. Consider offering this to participants at the beginning of practice.

**Inquiry, Dialogue & Curiosity**

- Inquiry and dialogue are essential components of MBSR classes. This time is for participants to share their experiences of the practices. In traditional MBSR, this is not time to process emotions, thoughts, and feelings. For the purposes of these sessions the “curiosity” component is added to expand on when and where a particular practice might be incorporated purposely into the day. Using the perspective of mental hygiene in this way, participants are encouraged to bring awareness to aspects of their day that might be more challenging, or when a “mindful break” or “stealth meditation” could be useful.

The following questions can be helpful to begin the dialogue, inquiry and curiosity sharing:

- Invite participants to share about their experience
  - “How was the practice?”
  - “What did you notice?”
  - “Did anyone notice their mind wandering?”
  - “Did you return to your anchor?”
  - “Did you face any challenges during the practice?”
  - “When might this practice or a variation of it fit into your daily routine?”

- **Curiosity:** “Consider your day-to-day life, when might this or another “stealth practice” purposely be inserted as a mindful break for stress relief?”
  - “If possible, create a list from participant’s suggestions that can be shared.”
  - “What are your daily routines? Envision incorporating a practice into your morning, midday, or evening routine.”

- Consider these ideas for practicing mindful awareness of the hands:
  - Resting your hands on a doorknob before entering a room.
  - Resting your hands on your steering wheel before starting your car.
  - Noticing bodily sensations when you are holding your phone, a pen or pencil

- For the feet:
  - Shoes on
  - Shoes off
  - First thing in the morning or as you are climbing into bed in the evening
**Note to facilitators:** including additional tactile objects is optional. The items listed below are included on the comprehensive supply list.

- Share additional tactile objects that can be included in comfort kits such as:
  - feathers
  - puff balls
  - small square of fuzzy, furry, or soft material
  - stress ball
  - stones
  - putty or play dough
  - other fidget items

**Before shifting to the break**

- Explore how you can extend these practices to daily activities:
  - Intention setting – “what can I practice during my day?”
    - Try mindfully walking or bottoms of the feet practice on break
    - Mindful hand placement - “Try placing your hand on the doorknob or object see attached handout.”
    - Check in with participants and turn on one of the curated playlists

- Return from break
  - Welcome back
  - Check in – “did you try one of the awareness practices?”
  - Reassure participants that “time off” from mindful awareness is ok too!

**Continuing our exploration of mindfulness practices, we shift our attention to the sense of smell:**

- Sense of smell – the sense of smell can be a powerful tool to connect with memories, to calm, to focus, to help our systems re-regulate
- Check in with participants to see if they are comfortable smelling the essential oils, alternatively you could have scented lotions or creams, or herbal tea bags to use.
- Refer to the Code Lavender program and tool kit
  - The Code Lavender program was created for the health care setting
  - Just as colors are used for medical codes, Code Lavender was created as a responsive program for stressful events.
  - The Cleveland Clinic described Code Lavender as a “wholistic rapid response model,” [https://consultqd.clevelandclinic.org/code-lavender-offering-emotional-support-holistic-rapid-response/](https://consultqd.clevelandclinic.org/code-lavender-offering-emotional-support-holistic-rapid-response/)
  - Code Lavender kits most often include some form of lavender scent, such as essential oil or loose lavender
  - Lavender and other aromatic inhalers may provide stress relief
  - Find your preferred essential oil:
    - sets of essential oils can be purchased online or in a variety of stores
    - encourage participants to smell a few of the essential oils to determine which one is preferable
    - “Alternatively, you could limit the essential oil to lavender or only a few scents.”
• **Create an essential oil container:**
  - "Once you have chosen a scent that is appealing to you or invites a sense of calm, place a few drops of the oil on one or two cotton balls and place in the plastic container."
  - Alternatively, each participant can be given their own essential oil.

• **Adding to your comfort kit:**
  - Share awareness of hands and awareness of feet handout for folder
  - Create a “stealth” card (s) to add to tool kits
  - Draw, write, doodle what comes to mind or is sensed in the body.
  - Participants can add items to their comfort kit
  - Participants can use Sharpie, permanent markers, or gel pens to decorate the outside of their kit
  - Consider having participants to create an intention card as a reminder for practice

**Wrap up, home practice, and thank you!**

- **Gratitude** and thank you!
- **Intention setting** for the coming week(s) – extending & adding a practice:
  - Ask yourself: “What practice will I choose to do daily? Or What when I do it for myself also benefits others?”
  - “Choose one “stealth” practice for the week or alternatively choose one at the start of your day to investigate and practice.”
  - “Perhaps try walking mindfully, see attached script/handout.”
- Refer to handouts and resources
- Remind participants of contact info and be available after workshop ends for additional questions
## Mindfulness and Mental Hygiene

### Workshop Outline Session #3

<table>
<thead>
<tr>
<th>Time</th>
<th>Notes</th>
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<tbody>
<tr>
<td>10 min</td>
<td><strong>Welcome back</strong></td>
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<tr>
<td></td>
<td>o Hello and check – in</td>
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<td></td>
<td>o “what’s your weather?” internal and external</td>
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<td></td>
<td>o Review workshop logistics: bathrooms, nourish as needed</td>
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<tr>
<td></td>
<td>o Entering and Centering - awareness practice</td>
</tr>
<tr>
<td></td>
<td>o Overview of the today’s session #3</td>
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<tr>
<td></td>
<td>o Brief review of last week, practices to add to our tool kit, creating tangible objects</td>
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<tr>
<td>15 min</td>
<td><strong>Incorporating mindfulness into mental hygiene</strong></td>
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<td>o “What have you tried or added to your mental hygiene/mental well-being plan?”</td>
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<td>o Participants share</td>
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<td>o Maybe create a list on a white board or posted piece of paper</td>
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<td>10 min</td>
<td><strong>Mindful Eating</strong></td>
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<td>o Guided practice – invitation to practice</td>
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<td>o See mindful eating script</td>
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<td>o Share how this practice can include drinking – making a cup of tea</td>
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<tr>
<td>10 min</td>
<td><strong>Inquiry, Dialogue, &amp; Curiosity</strong></td>
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<td>o Invite participants to share about their experience</td>
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<td>o “How was the practice?”</td>
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<td>o “Any challenges during the practice?”</td>
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<td>o “When might this practice or a variation of it fit into your daily routine?”</td>
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<td>10 min</td>
<td><strong>Break</strong></td>
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<td>o “Try extending the mindful eating practice to drinking such as making a cup of tea, opening a soda can, and filling a glass with water.”</td>
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<td>Time</td>
<td>Activity</td>
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<td>10 min</td>
<td>Return from break – Loving kindness practice</td>
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<td>15-20 min</td>
<td>Adding to your comfort kit</td>
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<td>10 min</td>
<td>Wrap up, share additional resources, and thank you!</td>
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**Prep for workshop session:**
- Gather supplies for mindful eating practice- sweet and sour
- Create more gessoed squares for “stealth meditation” cards and mantra cards and have pens, gel pens, sharpies and other writing implements ready for use
- Consider offering a variety of teas for participants to explore mindful drinking on break
- Make copies of handouts
- Display playlists
Session 3 Facilitator Notes

Welcome back!

Hello and check-in: “what’s your weather?”
- Check in - Ask participants to share their “weather” a metaphor for present emotional state.
  - A few examples, fog rolling in might relate to confusion or sleepiness, sunny and cloudless – feeling great! or windy and shifting might indicate a change and mix of moods and uncertainty (internal and external)

Entering and Centering – brief awareness of breath practice (5-10min)
- “Take a moment to notice your surroundings.”
- “Find a comfortable seat – stand or sit on the floor if you prefer.”
- “Shift your body to a relaxed and alert position.”
- “Take a steady and slow breath in and gently close your eyes or lower your gaze, whatever is most comfortable for you.”
- “Shifting your attention to the breath, take three slow steady breaths.”
- “What do you notice about the breath?”
- “Is it long, short, shallow, cool, warm breath?”
- “Whatever it is, it’s ok – just being curious and noticing the breath.”
- “If the breath is challenging or you experience discomfort, try shifting your attention to the hands or the feet.”
- “Breathing in, where do you notice the breath? Nostrils, mouth, back of throat, chest belly?”
- “Just notice, no need to change it.”
- “Rest your awareness in the breath.”
- “As we come to the end of this practice, take another slow steady breath, explore extending the exhale.”
- “When you are ready, gently open your eyes or raising your gaze and perhaps shift your body in a way that feels good to you.”

Overview of the today- Session #3
- Review schedule, take care of personal needs, refreshments, timing of break and end time
- Today adding practices to our tool kit,
- Brief review of last week, creating tangible objects to represent and serve as reminders
- Sense of touch – awareness of hands and feet practices
- Mindfulness for mental hygiene
- “What have you tried or added to your mental hygiene/mental well-being plan?”
- Prompt participants to share & create a list on a white board if available or posted piece of paper

Mindful Eating and Mindful Drinking
- Scripts to guide participants in a mindful eating practice are plentiful and available in manuals, articles, and online.
- This particular script incorporates the mindful eating of a chocolate kiss. It can be adapted for sweet or sour candies. Consider offering a variety of options for participants to choose from.
• Suggest that participants explore the practice with a sweet and then sour candy or vis versa
• Candies can be placed at the center of the table or passed in a basket or bowl
• Invite participants to settle into a comfortable position and begin guiding them through the mindful eating practice

Inquiry, Dialogue, & Curiosity

Inquiry and dialogue are important components of MBSR classes. This time is dedicated for participants to share their experiences of the practices. In traditional MBSR this is not process time. For the purposes of these sessions, the “curiosity” component is added to expand on when and where a particular practice might be incorporated purposely into the day. Using the lens of mental hygiene in this way, participants are encouraged to bring awareness to aspects of their day that might be more challenging, or when a “mindful break” or “stealth meditation” could be useful.

The following questions can be helpful to begin the dialogue, inquiry and curiosity sharing:

• Invite participants to share about their experience
  o “How was the practice?”
  o “What did you notice?”
  o “How is this different from how you might usually eat a piece of candy?”
  o “Any challenges during the practice?”
  o “When might mindful eating or a variation of it fit into your daily routine?”

Curiosity: consider your day-to-day life, when might this or another “stealth practice” purposely be inserted as a mindful break for stress relief?

  o If possible, create a list from participants suggestions that can be shared
  o “What are your daily routines? Envision incorporating a practice into your morning, midday, or evening routine.”

Break – 10 minutes

  o During the break consider extending the eating practice to mindful drinking such as:
    o Making a cup of tea
    o Opening a soda can
    o Filling a glass with water
    o Explore placing your attention on each aspect of making a cup of tea, opening a soda can, or filling a glass of water
      o “Notice the cup, can or glass, its shape, color size.”
      o “Place the cup, can or glass in your hand – what is the quality of the item? Cool, warm, soft, hard?”
      o “Continue to stay with mindful attention to each motion and action in mindful drinking.”

Return from break

  o “Take a moment to settle back into the space.”
“For this next practice, we will be exploring a loving kindness/compassion practice and creating a visual reminder that will use the sense of sight.”
Invite participants to find a comfortable seat, stand or lie down on a yoga mat for this next practice

Offering Loving-Kindness to Oneself

This practice, “Offering Loving Kindness to Oneself” is found in Sitting Together and online at www.sitting_together.com.
“Start by sitting comfortably with eyes either open or closed.”
“Spend a few minutes with your anchor—either sounds, touch points, or the breath.”
“Let yourself settle, noting any tension or discomfort in the body. Invite it to soften.”
“Begin by directing kindness toward yourself with some of the traditional phrases”:
“May I be safe.”
“May I be healthy.”
“May I live with ease.”
“Or perhaps, May I be happy.”
“May I be peaceful.”
“May I be free from suffering.”
Or choose a phrase of your own that evokes a feeling of soothing loving-kindness
(Repeat the phrases)
“May I be safe.”
“May I be healthy.”
“May I live with ease.”
“Or perhaps, May I be happy.”
“May I be peaceful.”
“May I be free from suffering.”
“Say the phrases silently to yourself, finding a rhythm that feels comfortable.”
“See if you can open to each phrase.”
“If one phrase speaks to you, it is fine to stay with that for a while.”
 Feel that each phrase contains an essential vitamin that you need or imagine them as a gentle, irrigating rain falling on parched soil.”
“Try the experiment of conjuring an image that evokes safety, health, peace, and ease. If it seems to enrich your sense of loving-kindness, continue visualizing the image.”
“If the mind wanders, no problem.”
“Return to the phrases or image, allow them to become your anchor.”
“When you are ready, take a deep breath, stretch, and open your eyes if they have been closed.”
“Pause after the practice to consider what words resonate with you, take a few moments to sit with the practice.”
“Instead of opening for sharing and discussion, we will begin creating a mantra card based on one of the phrases that you found appealing or comforting.”
“Place squares of paper, gel pens, markers for participants to draw, doodle, write words, phrases or representations of from the practice that speak to the individual.”
• “This activity incorporates our sense of sight or vision and a felt sense of being.”
• Prompt to begin the practice: “What colors, designs or words will create a visual reminder of offering loving kindness to ourselves?”
• “Encourage participants to begin the activity mindfully without too much thinking.”
• “Participants may want to create more than one mantra card.”
• “Or create additional “stealth mindfulness” cards.”
• “If time allows, participants may share their mindfulness cards.”

**Note to Facilitators:** consider playing calming music, maybe one of the participants generated playlists
• Participants may choose to work in silence or engage in conversation during this activity.

**Final wrap up, share additional resources, and thank you!**
• Gratitude and thank you!
• Intention setting for the coming week(s) – extending & adding a practice
• “What’s one “nugget” that you will take with you?”
• Invite participants to share
• Reminder to choose one “stealth” practice for the week or day if that works best
• Refer to handouts and resources
• Provide additional materials for participants to continue making “stealth mindfulness” cards.
• Share contact information and be available after the workshop ends for additional questions.

**Handouts:**
- Awareness of breath practice
- Loving kindness practice
- Supply list from the three workshop sessions
Supply list:
- Gel pens
- Colored pencils
- Set of Sharpies or other permanent markers
- Black gesso
- Heavy stock paper, colored construction paper or –
- Square sticky notes like Post It brand notes
- folders for session handouts
- Two or three large sheets of paper and tape for handing on the wall
- Canvas zipper pouches or boxes (one for each workshop participant)
- Small containers like a medicine bottle
- Large cotton balls
- Individually wrapped sour and sweet candies like:
  - Hershey’s kisses
  - Warheads (sour)
  - peppermints
- A set of essential oils that may include:
  - lavender
  - clary sage
  - lemon balm
  - ylang ylang
  - jasmine
  - bergamot
  - chamomile
  - rose
- Tactile objects such as:
  - feathers
  - puff balls
  - small square of fuzzy, furry, or soft material
  - stress ball
  - stones
  - putty or play dough
  - other fidget items

**Note to facilitator:** Additional items can be added to this list depending on the participants. The possibilities are endless – have fun with it!
Resources from Workshops

- Real Happiness at Work Meditations for Accomplishment, Achievement, and Peace by Sharon Salzberg
- Sitting Together Essential Skills for Mindfulness Based Psychotherapy by Susan M. Pollak, Thomas Pedulla, and Ronald D. Siegel [website]
- How to Train an Elephant & Other Adventures in Mindfulness by Jan Chozen Bays, MD
- How to Train a Wild Elephant and Other Adventures in Mindfulness - Jan Chozen Bays, MD
- Coming to Our Senses - Healing Ourselves and the World Through Mindfulness - Jon Kabat-Zinn
- David Trealeven, Trauma Sensitive Mindfulness (TSM) [link] to webpage and [link] to free webinar
- Dr. Daniel Siegel’s hand model of the brain [link] to handout and [link] to video
- Dr. Daniel Siegel’s “Healthy Mind Platter” [link] to webpage
- Dr. Amishi Jha’s research mindfulness and attention – 12 min. Practice [link] to article
- Dr. Amishi Jha How to tame your wandering mind TEDxTalk [link]
- David Trealeven - Trauma Sensitive Mindfulness, TSM
- Code Lavender - [link] to Journal of Nursing Resource
- Mindful eating [script]
- “Offering Loving Kindness to Oneself” is found in Sitting Together and online at www.sitting.together.com.

Links to Additional resources:

- Mindful Schools
- Mindful
- Child Mind Institute
- Positive Psychology Program
- Greater Good Science Center

For: children, adolescents, & families:

- Dr. Christopher Willard
- Thich Nhat Hahn Plum Village
- Insight Timer
- Calm

Compassion/Self Compassion

- Dr. Kristin Neff
- Dr. Chris Germer
- Dr. Thupten Jinpa Compassion Institute
Social Justice and Trauma

Rhonda V. Magee *The Inner Work of Racial Justice: Healing Ourselves and Transforming Our Communities Through Mindfulness*

David Treleaven *Trauma Sensitive Mindfulness*