

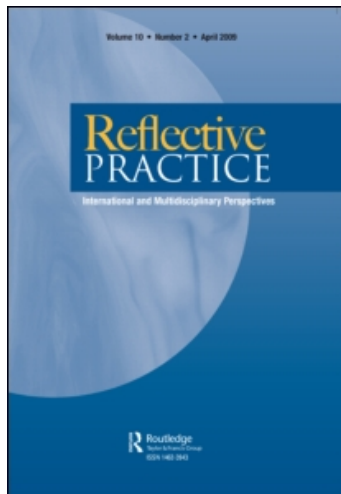
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Clear(ing) space: mindfulness-based reflective practice

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Clear(ing) space: mindfulness-based reflective practice

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This paper reports on an enquiry into how practitioners working in healthcare environments bring mindfulness, a particular type of practice of reflection, into their professional and personal lives. Nine participants engaged in group discussion, Haiku poetry writing and the recording of personal audio diaries. Thematic analysis of the diaries indicates a transcending theme that being in the here and now can highlight discomfort, pain and uncertainty. Within this, sub-themes illustrate that mindfulness can act as a support to personal and professional development, to the content and process of clinical work and as a means to support dealing with work-related stress. A final theme illustrates participants' experiences of using the research process to facilitate their ongoing reflective practice. The paper concludes with a note on what has been identified as 'mindfulness-based reflective practice': a practice that can bring vitality and fluidity to critical reflection.

Keywords: mindfulness; critical reflective practice; personal and professional development

Breath becomes for me
The glimpse between life and death
As I own my life¹

Introduction

This research is about reflective practice² and personal and professional development. From my own experience³ of practising mindfulness, as well as from conversations with others and from reading in the area, I wondered about other healthcare practitioners' experiences of the fruits and struggles of mindfulness and was curious about what could be learnt from an enquiry into their experiences of this practice.

What is mindfulness?

Jon Kabat-Zinn (1994), mindfulness' leading pioneer in Western healthcare, has said mindfulness is:

to do with examining who we are, with questioning our view of the world and our place in it, and with cultivating some appreciation for the fullness of each moment we are alive. Most of all it has to do with being in touch (p. 3)

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Mindfulness meditation⁴ is an educative form of self-awareness based on ancient Buddhist⁵ techniques that have been practiced for more than 2000 years. Mindfulness practice⁶ encourages a non-judgemental awareness of what is happening in the present moment, and can focus the practitioner to pay close attention to their experiences, thoughts and emotions without pushing anything away (Chodron, 1991). In a sense, mindfulness suggests that we do not fill our lives up with 'doing', but rather practice the experience of 'being' (Kabat-Zinn, 1990). As such, rather than focusing on replacing unpleasant emotional and physical states with more desirable states (as in relaxation training), mindfulness encourages us to be present to whatever our experience is at that moment. It can broadly be understood in terms of a practice that is available to anyone for encouraging the development of qualities, such as awareness, insight and compassion (Kabat-Zinn, 2003).

A typical mindfulness practice would be to sit quietly for 20 minutes with the intention of resting ones attention on the feeling of breathing in and out, while at the same time acknowledging other aspects of experience such as thoughts and feelings (Kabat-Zinn, 1990). This formal stopping and noticing can also be practiced more informally, with mindful attention being brought to all activities from eating to walking to working.

Mindfulness and Western healthcare

Over the past 30 years, traditional mindfulness practices have been adapted for secular use and Western healthcare professionals and researchers have proposed that the cultivation of mindfulness may be beneficial to people who suffer from a wide range of difficulties. Treatment approaches are now widely available (Baer, 2006), ranging from interventions for those with chronic pain (Dahl & Lundgren, 2006); to depression (Kuyken et al., 2008); psychosis (Bach, Gaudiano, Pankey, Herbert, & Hayes, 2006); cancer (Kristeller, Baer, & Quillian-Wolever, 2006); and many other debilitating conditions.

The benefits of mindfulness practice are not limited to patients/clients with specific clinical health related difficulties. Mindfulness may also offer an enriching support to professionals working in health and social care services. Through developing their own mindfulness practice⁷ professionals can develop a greater sense of compassion (Jones, 2007); form a deeper relationship with themselves (Fleishman, 1995, cited in Jones, 2007); offer support at times when working with those in crisis and distress (French, 2000); and can use it as a possible aid to reflective practice (Epstein, 1999; Johns, 2005).

It is this last point, that mindfulness might support reflective practice, which the present paper is particularly concerned with. Reflective practice represents that part of professional life that is dedicated to developing a 'capability to reflect critically and systematically on the work-self interface' (Gillmer & Markus, 2003, p. 23) and is increasingly being recognised as a core competency for those working in a range of disciplines including education (Manen, 1995) and healthcare (Department of Health, 2004). More recently in the area within which the present authors are more familiar – that of clinical psychology – reflective practice has been incorporated into a model of personal and professional practice that can be 'developed systematically and analyzed empirically' (Sheikh, Milne, & MacGregor, 2007, p. 278). However, despite these developments it is still often far from clear how in practice professionals 'do' reflective practice. For example, in exploring the epistemology of reflective

practice Manen (1995, p. 40) highlights the difficulties ‘on the spot’ for professionals to be able to follow either of the commonly held notions of reflection-on-action, or reflection-in-action developed by Schön (1983): ‘what makes true reflection in action difficult is that life ... is contingent, dynamic, everchanging: every moment, every second is situation specific’.

A further, recently developed critique by Taylor (2006) warns against the danger of reflection as ‘romantic realist’ performance staged to persuade educators and supervisors that the practitioner is well skilled and competent. Taylor states that insufficient attention is given to the form reflective accounts take which ‘seem to be accepted *tout court* as making accessible the inner thoughts and feelings of individual practitioners’ (p. 192).

Given such questions, it could be argued that any enquiry into reflective practice should thus attempt to bring alive the complexity and tensions inherent in making sense of our personal and professional selves through the lens of ‘reflection’, and we shall return to both Manen’s and Taylor’s critiques in the discussion.

Methodology

Baer’s (2003) conceptual and empirical review of the impact of mindfulness-based clinical interventions concluded that many of the associated concepts (such as cultivation of awareness and compassion) are difficult to evaluate empirically. Indeed, Moss, Waugh, and Barnes (2008) have described the mindfulness experience as having a quality of ‘slippery-ness’ to its nature, and that there are inherent paradoxes in trying to make the nature of mindfulness more tangible (Moss & Barnes, 2008). This study aims to understand the quality and texture of experience that practitioners have in bringing mindfulness to their personal lives and professional practice. It draws on key principles from action research, auto-ethnography and creative research methodologies to address the less tangible aspects of mindfulness.

Action research as a methodology represents a spectrum of methods that can be used in research and also for problem solving in communities and organisations. One way of conceptualising the various methods is as a spiral of collective self-reflective inquiry (Kemmis & McTaggart, 1988). As a research approach it can be seen as an extension to reflective practice (Meyer, 1993; Schön, 1983). Action research has four defining characteristics: it is practical in terms of dealing with real-life issues; focused on generating change in practices; a cyclical process whereby critical reflection on practice leads into research findings, which generate possibilities for change; and is participative, with participants being active in the research process (Denscombe, 1998). These four defining characteristics make action research an appropriate choice when researching the fluid and reflective nature of mindfulness.

Similarly, auto-ethnography is unique in that it places the participant at the centre of the research enquiry and encourages them to draw upon various resources to facilitate introspection and reflection. It does not advocate one resource over another, but presumes a multi-faceted approach, which may include descriptive accounts of events, thoughts, feelings, poetry or anything that can best represent the texture of personal experience (Ellis, 1999). Whilst auto-ethnography more commonly tends to place the researcher as a participant, it is possible to invite participants to be ‘ethnographers of their own circumstances’ (Zimmerman & Weider, 1977, p. 484). Diaries

have the potential to record events over time, as close as possible to when they occur (Willig, 2001) and can be a powerful way for individuals to capture experience and weave together fragments of their personal and professional lives (Clandinin & Connelly, 1994). The use of audio diaries is a contemporary development to the written diary and is arguably a more accessible approach (Hislop, Arber, Meadows, & Venn, 2005).

Creative research methodologies have been developing in recent years (Broussine, 2008) and the use of expressive arts is being adopted increasingly by qualitative researchers, who make use of artistic media as both sources of data and for data representation (Furman, 2006). The use of, for example, poetry as a creative approach fits well with the nature of mindfulness, and has often been used in mindfulness groups as a way of helping participants feel their way into describing and capturing the essence of practice (Baer, 2006; Segal, Williams, & Teasdale, 2002). One form of poetry that has been particularly linked with the present moment experience of mindfulness is the Japanese poetic short form 'haiku'.⁸ As with mindfulness practice, the haiku poet brings a 'gentle awareness' to the present moment and records whatever image, sensation or feeling comes to mind. Grisoni (2007) argues that 'haiku in particular demonstrate an ability to explore the dark side of experience as well as the light and juxtapose the rational realm with the emotional' (p. 13).

Research design

Drawing on these three approaches (action research, auto-ethnography and creative research), the methodology was aimed at offering the participants an experience that would enable learning and development from a reflective research process. The research design consisted of three phases spanning 11 months: a day workshop involving group discussion and a creative exercise (June, 2008); solicited participant audio diaries over a two-week period immediately following the workshop; and a follow-up workshop (May, 2009). The workshops took place at a Contemporary Buddhist Centre in rural south-west England. The University of Plymouth Clinical Psychology Ethics Committee gave favourable approval to the design of this research. All participants gave informed consent.

Participants

Nine participants took part in the research. To ensure confidentiality participant demographics will be kept to a minimum. In brief, the sample included: eight women and one man; all experienced healthcare practitioners of various professions; all white; and all residing in south-west England. Participants had previously attended one or more workshops and/or an eight-week evening course on mindfulness for healthcare professionals.⁹ Via email (distributed by author 2), all previous course attendees were invited to participate in research into their personal and professional experiences of mindfulness practice. Twenty-three people initially expressed interest, with the final nine particularly interested and able to attend the specified workshop date. The specified interest of these nine participants and their willingness to attend and engage gave the researchers confidence and hope that they would connect with the research process in a thoughtful and productive way. There was no attempt to find a homogenous group of participants in terms of a

similar level of experience of mindfulness. However, none of the participants were complete beginners.

Data collection

The first part of this research was a day workshop facilitated by authors 1, 2 and 4. The structure of the workshop was based, in part, on traditional mindfulness-based groups (i.e. Kabat-Zinn, 1990; Kabat-Zinn et al., 1992) in which there is typically a mixture of experiential practice and discussion on how participants are finding working with mindfulness in daily life. Following this practice and discussion, participants were invited to break into groups of three for a haiku exercise. In each small group each member took it in turn to speak for 5 minutes about their individual journeys with mindfulness. Whilst the other two listened, they were instructed to each write down 10 key words or phrases that struck them from the narrator's story. The participants were then given 10 minutes to individually create their own haiku from the 30 words and phrases that were noted collectively in their small group. The individual haiku were shared by the participants within the larger group and further discussion was had about the process. Whole group discussions were audio-recorded.

Following the group discussions participants were invited to participate in the next phase of the research; using audio diaries over a two-week period at work and at home to reflect in any way they felt appropriate. Interested participants were given voice recorders, shown individually how to use them and given the instruction: 'Please use these voice recorders to reflect on anything you would like to say about your "in the moment" experiences of using mindfulness. This may be in relation to the practice itself or how you have noticed mindful awareness informing your professional practice'. No set requirements as to how often the participants should make diary entries was given, but participants were invited to make at least one entry per day. At the end of the two-week period, all diaries were collected from the participants by the lead researcher and transcribed verbatim.

In the final phase of the study, a follow-up workshop was organised for feedback and discussion following analysis. This enabled the continuation of the cycle of reflection and learning and for participants to be involved in the validation of results. Three out of the original nine participants were able to attend. Attendees were asked to reflect on what themes they felt emerged from a selection of audio diary quotes they were presented with. Themes they considered as significant were similar to those developed in the thematic analysis process. Out of this workshop grew the wish from the participants that as a community they would continue to meet as a 'mindfulness-based reflective practice group'.

Analytic method

A thematic analysis suited the needs of this study as it is a widely used flexible qualitative analytic method that is arguably independent of theory and epistemology (Braun & Clarke, 2006). It is a tried-and-tested method for identifying, analysing and reporting patterns (themes) within the data. Analysis in this study was done by the first author and followed the six-stage model prescribed by Braun and Clarke: familiarisation with the data; generation of initial codes; searching for themes; reviewing of themes; defining and naming of themes; and finally the production of this report.

Validation of themes was sought through the feedback workshop, discussions with research supervisors and in a peer supervision group.

Results

All nine participants returned audio diaries that they had used over the two-week period. Diaries ranged from between four and 30 entries and were between 11 and 120 minutes in length, with a total recording time of nine hours and 56 minutes. Participants' use of the audio diaries was variable. At times participants would make entries immediately following practice, whilst for others, entries would seemingly be made mid-practice. Participants would intersperse their entries throughout the day and at other times a longer reflection would be made at the end of the day. However and whenever the entries were made, what was clear was that participants needed to use their diaries in such a way that fitted with their present moment experience, such that they adapted and interwove the diary into the flow of their day-to-day lives.

The thematic analysis resulted in one transcending theme and three major themes (see Table 1 below). What clearly transcends all the data is that there can be a discomfort or uncertainty that comes from the mindfulness experience. Within this transcending theme are embedded three major themes: Mindfulness as facilitative of reflective practice; Mindfulness practice as used in professional practice; and, Mindful research can mirror mindfulness practice. Each of these themes comprise several sub-themes.

Audio diary quotes have been used throughout the results section to illustrate the themes. As in all qualitative research that uses quotes to illustrate findings, the quotes presented here contain various themes that could be interpreted and worked with. Each quote has been carefully chosen for how well it represents the nature of each theme. Quotes have been chosen from across the dataset¹⁰ and are each identified to the participant and the entry (participant:entry). To give the reader as clear a picture as

Table 1. Overview of themes from the analysis.

Transcending theme	Major-themes	Sub-themes
Mindfulness can bring discomfort and uncertainty	Mindfulness as facilitative of reflective practice	Mindfulness offers space to stop and think
		Mindfulness deepens relationship with self
		Mindfulness can promote change
		Mindfulness is not an exclusive practice
	Mindfulness practice as used in professional practice	Support to therapeutic relationship
		Integrates personal and professional selves
	Mindful research can mirror mindfulness practice	Support to work-related stress
		Reflection of the here and now
		Process deepens reflective relationship with self
		Intimate process

possible of the texture of the diaries quotes have been presented verbatim, with ellipses (...) indicating pauses and laughter shown in brackets. The quotes are considered to speak clearly for themselves and in a way that can invite the reader to engage reflectively with them; as such, little analytic author-commentary is used.

Mindfulness can bring discomfort and uncertainty

Throughout the audio diary data there was the sense that mindfulness practice does not often bring a sense of peace and calm as one new to practice may expect. It does not offer an escape from reality, but is an intense look at present experience. Participants recorded on most entries that their experience of sitting with and in the moment tended to highlight for them uncertainties, struggles, discomfort and pain. Whilst mindfulness practice encourages the practitioner to accept thoughts and feelings non-judgementally, the participants in this study noted explicitly how hard this can be:

There's just such a huge instinctive drive to push it [pain] away. So not only have you got the discomfort, but also over and above that are the thoughts that come in which are like 'I don't like', 'why have I got', um 'how can I get rid of it', 'I'm feeling fed up about it'. (8:12)

When talking about the busyness of her mind and her resulting frustrations, one participant said:

It just gets reflected, the practice is almost like ... holding up a mirror to what's going on with the mind at times during the day. It's like having a good long look at what's going on. (6:8)

This quote implies that a range of emotions can be experienced with this type of reflective practice, and further that rather than this being inherently problematic, the familiarity of a regular practice can foster an ability to sit with whatever it brings.

Mindfulness as facilitative of reflective practice

Throughout the audio diaries participants spoke of their mindfulness practice being facilitative of reflective practice. Mindfulness practice can offer the practitioner a space to stop and think; an opportunity to deepen relationship with themselves; and a chance to see and do things differently. It can be about noticing and paying attention, which is accessible to all.

Mindfulness gives a space to stop and think

I was reflecting whether mindfulness leaves more space in my life, my sense is it does ... and I do notice a difference on a day when I don't practice my mindfulness of feeling everything's all rushed. (4:3)

Mindfulness practice can deepen the relationship with self

Throughout the diaries participants frequently engaged in a sort of dialogue with themselves, which seemed to deepen their self-experience:

The edge about mindfulness is that it can lead us into relationship... into a direct contact with very uncomfortable feelings. It can make us more aware of splitting, of dissociation and the temptation for me is actually I don't really want to be mindful at all if I'm comfortable it leaves me in a place of feeling ill at ease. (3:2)

Mindfulness practice can promote change. Reflective practice can initiate change and participants indicated their mindfulness practice could encourage change. When reflecting on thoughts she had been having during a period of sitting mindfulness practice, one participant said:

The first thing that you might notice is feeling physically very tense um ... down, stressed, fed up. Perhaps not having been aware ... why or how you've got to that point. And I guess being mindful of it gives you an opportunity either to just be aware, just be mindful and think 'oh my mind's very busy or fretting about work'. Or maybe it's about, it gives an opportunity to take some practical action over it. (8:6)

Mindfulness is not an exclusive practice. Participants spoke of mindfulness as a way noticing, of paying attention, that is not unique to a formal practice:

I uh talking about mindfulness as a special period in time, it suggests that I can't be mindful at other times. And that doesn't seem right. (7:9)

Mindfulness as used in professional practice

Throughout the diaries participants all spoke of mindfulness influencing their working lives. What arose was that participants all reflected on how their practice influenced: their therapeutic relationships; their integration of their personal and professional selves; and their survival of work-related stress.

Mindfulness practice as a support to the therapeutic relationship

When talking about sitting with clients this quote is representative of how participants spoke of their mindfulness allowing a 'space' to be cleared in order to connect more fully with the therapeutic engagement:

Just a brief period of it [mindfulness], cleared a space in my mind, in order that I can be a lot more present ... and probably much more effective for that reason. Without the clutter of um various prejudices around this particular case. (7:17)

Mindfulness practice and the integration of personal and professional selves

What mindfulness practice seemed to do for participants was allow them to be an integrated self in their clinical work. A self that reflectively brings their personal experiences to their professional work and a self that allows the personal to be touched and to learn from their professional encounters. When describing feelings of inadequacy at not being a good enough meditator, one participant said:

And it's important that we use mindfulness I suppose with people with depression that we're not setting them up for another failure by um sharing mindfulness techniques where again you might feel that you're not doing it right. It's not about getting it right, it's just about having a window on your mind really. (8:4)

Another participant spoke about mindfulness acting as a way of bridging the gap between the therapist and the ‘therapised’, the professional and the lay-person, or ‘well’ and the ‘not well’:

If I’m actually truly allowing myself to be as I am which can include feeling hopeless, helpless, impotent, all of those things which as a therapist it can be so hard to sit with. If I can be sitting with those with compassion and acceptance then I will allow my clients to do the same and that would feel good. (3:6)

Mindful research can mirror mindfulness practice

Auto-ethnography and action research methodologies have shaped this research. Therefore, it was interesting to see how frequently the participants all reflected on the process of engaging in the research and the audio diaries. The following sub-themes illustrate that the mindful research process can mirror mindfulness practice, with audio diaries being able to: reflect the here and now; create a vibrant process that deepens the reflective relationship with the self; and offer an intimate experience.

Reflects and deepens the experience of the here and now

Some participants seemed to use the audio diaries as a tool to heighten their in-the-moment experience:

So it’s lovely to just sit for a moment and go within and appreciate this sensory landscape. Which I do feel that I have been doing all day, but there’s something about the speaking of it that’s changing my perception or making me feel more connected to it. (2:3)

Process deepens reflective relationship with self

The participants each tended to use the diaries as a way of enquiring into their experience of themselves, to deepen their understanding and create a more intimate relationship with themselves:

I wanted to thank you because it’s been really interesting to watch my coming and going relationship with the mindfulness and I guess that’s not a relationship with mindfulness it’s a relationship with myself, both personally and in my work. (3:16)

An intimate process

Participants noticeably opened up with the audio diaries and allowed their vulnerabilities to be seen intimately:

I am going to let it be part of me and my personal life now. Because I think that’s the way that we’ll all get more out of it. And I’m going to sort of forget the fact that I’m going to hand this to anyone at the end. I’m going to just use it for self-reflection. (1:3)

I’m revealing more than I’m comfortable with because I feel that it’s really important to be authentic within this project but I guess ... yes there’s a point where we can ... oh I ... no I gloss over the difficulties at times and I’m just realising ... sometimes there is something about a choice of when I say it. (3:7)

Discussion

As briefly discussed earlier in this paper, current reflective practice trends in contexts such as healthcare might suggest that reflective practice is a relatively straightforward enterprise. Yet, as critics such as Manen (1995) have pointed out, the *experience* of trying to be reflective is by no means straightforward when we are 'on the spot' in the lived moments of our working lives. As Taylor (2006) highlights, our accounts of 'doing reflection' can become stuck in typical rhetorical devices that demonstrate competency, but can gloss over the lived experience of reflecting. Where might this study sit with such questions? This study has found that mindfulness as experienced by healthcare professionals can be a process that (inevitably?) engages with the uncertain and uncomfortable, as well as more positive states of mind, in a direct and visceral way and can arguably be described as a process of reflective practice inviting both challenge and acceptance. But what kind of reflective practice is this? Following Manen we would argue that mindfulness is neither 'reflection-on-action', nor even 'reflection-in-action', but is closer to his conception of reflection as 'tactful action': a 'Noncognitive, Nondiscursive Confidence' (1995, p. 45) or 'attentiveness' (1995, p. 44), that if nourished through mindful practice can support the kind of embodied awareness that could be argued to support 'my felt sense of the classroom, my feeling who I am as a teacher, my felt understanding of my students, my felt grasp of the things that I teach, the mood that belongs to my world at school, the hallways, the staffroom, and this classroom' (Manen 1995, p. 46). Manen draws on Molander (1992) to suggest such tactful action – and we would posit – mindful reflection, is akin to a 'silent knowledge' 'implicit in my world and actions rather than cognitively explicit or critically reflective' (1995, p. 46).

The moments of uncertainty and discomfort that can come with such 'silent knowledge' may, we suggest, reduce a tendency to get caught with a rhetoric of 'reflection as resolution' the danger suggested in Taylor's account as 'romantic realism'. However, one could argue that such discomfort may be seen as an unwelcome effect of mindful reflectiveness, undermining our confidence, and ultimately undermining our resilience. If mindfulness-as-reflective practice were to be offered in an uncritical fashion, it too would run the risk of oversimplifying the challenges of engaging in reflective practice. One way of avoiding an overly uncritical approach to mindfulness within research and clinical practice would be to place this study alongside future research that may consider the experience of people who stop practising mindfulness. Research to date has almost exclusively positioned mindfulness as a universal 'good thing'. For some practitioners it clearly is and that should not be negated. However, what of those people who chose not to participate or drop out of mindfulness-based studies?

However, in terms of the accounts of participants in this study (and this chimes with the authors' own experience of mindfulness and much of the biographical accounts in the literature), experiencing uncertainty and discomfort is part of a bigger picture of greater intimacy with a broader range of awareness, which paradoxically can leave us more resilient and more available to ourselves and those around us.

Given the current climate of increasing waiting lists and performance-management pressure, healthcare professionals (and we assume many other professional groups wherever they work) are in need of supportive resources to keep them well. The clients we work with will also be best served by professionals who are well but grounded and reflective within themselves, rather than burnt-out and defended against

their own, and others', pain and distress. Mindful practice may offer the practitioner a space in which to be curious about themselves and their work. As the Haiku that begins this paper suggests, mindful reflective practice may help us to keep breathing metaphorically and literally.

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Notes

1. A Haiku created by one of the research participants.
2. Although we use the term 'reflective practice' in the singular throughout this paper, we wish to acknowledge that there are many different types of practice that use reflection, of one kind and another, as the key process.
3. In this paper we privilege the 'voice' of the first author, to reflect both her lead role in en-visioning this study, but also to highlight a more 'first person' perspective in the paper.
4. The terms 'mindfulness' and 'meditation' are frequently used interchangeably. For example, some people might describe their practice as mindfulness meditation. A simple way to distinguish the two for the purpose of this paper is to view meditation as a much broader concept that can include mindfulness, but can also incorporate other features such as altered states of consciousness.
5. Mindfulness-based practice is not exclusively Buddhist. It is more a universal phenomenological experience of the nature of the mind, emotion and suffering and its potential release. Mindfulness is about attention, therefore we are all mindful to a greater or lesser extent; it is an inherent human capacity.
6. The term 'practice' does not mean a 'rehearsal' or perfecting of some skill so that it can be put to good use at some other time. In the meditative context 'practice' means being in the present on purpose. The means and the end of mindfulness practice are really the same. Through practice a person should not try to get somewhere, only work at being fully where they already are (Kabat-Zinn, 1990).
7. It is widely recommended that those who offer mindfulness as a clinical intervention should have their own personal practice (Kabat-Zinn, 2003).
8. The traditional haiku consists of a defined pattern of 5-7-5 syllables, which are spread over three lines respectively. Its simplicity can invite widespread participation even among those who would not ordinarily consider themselves creative (Blasko & Merski, 1998).
9. These courses and workshops had been facilitated by authors 2 and 4 (both experienced mindfulness practitioners and group facilitators) and had taken place at the same location.
10. Quotes are not used from participant 5 as this diary was particularly short in comparison and therefore contained less material to use.

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