

ON THE CUTTING EDGE

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Mindfulness in Education by Diane R. Gehart, Ph.D., LMFT

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The simple practice of focusing on the breath while quieting the mind's inner chatter—mindfulness—is quickly transforming the fields of mental health and wellness medicine (Baer, 2006; Didonna, 2009). Most often, mindfulness takes the form of sitting meditation but mindfulness practices also include walking meditation, eating meditation, and even mindful yoga. Over three decades of research has identified mindfulness practices as the gold standard for preventing depression relapse (reoccurrence of depression) and has become standard practice for the treatment of depression and anxiety as well as trauma, attention-deficit disorder, substance abuse, and eating disorders. Additionally, mindfulness is established as a viable and effective treatment for numerous physical conditions that are caused by or exacerbated by stress, including chronic pain, cancer, cardiovascular disorders, fibromyalgia, diabetes, psoriasis, and sleep disturbances. Mindfulness has also been used to improve couple relationships (Carson, Carson, Gil, & Baucom, 2006) as well as improve parenting skills (Bögels & Restifo, 2014).

More recently, educators have begun exploring the potential of using mindfulness to enhance the academic environment and improve student performance. Mindfulness has been used with children ages 5-18 and has been found to be a feasible and acceptable treatment (Schonert-Reichl et al., 2015). When used with younger children, shorter age appropriate mindful activities—such as blowing bubbles or rocking a stuffed animal to sleep on one's belly—are used instead of formal sitting meditation (Salzman, 2014; Willard, 2010). Educators and researchers are particularly interested in the potential of mindfulness to significantly improve attention long-term in children diagnosed attention deficit disorders by increasing function in the prefrontal cortex (Carboni, Roach, & Fredrick, 2013; Rapport, Orban, Kofler, Friedman, & Bolden, 2015). In fact, mindfulness training is now recommended in current treatment guidelines as a standard treatment option for children diagnosed with ADHD (Cassone, 2015).

Developed by the Goldie Hawn Foundation, *MindUp* is the most commonly used mindfulness curriculum in PreK-8 classrooms (2011a, 2011b, 2011c). Students who participated in this program demonstrated not only improved focus on academic activities but also improved pro-social behavior, self-regulation, empathy, and peer acceptance, and had reduced depression and aggression (Schonert-Reichl et al., 2015). The program is readily available through book retailers and is organized around 15 lessons that include an introduction to mindfulness, the neurophysiological foundations, and specific applications. In addition to these weekly lessons, brief 60-second mindfulness practices are integrated into the school day at the beginning of class and at each major transition in the school day. There are three versions of the curriculum available: PreK-2, Grades 3-5, and Grades 6-8. In the years ahead, mindfulness and related practices are likely to become increasingly common to improve not only academic performance but also to address education of the whole person.

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Mindfulness in Education

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Want to Learn More About Mindfulness?

ONLINE RESOURCES

www.dianegehart.com

Guided meditations, client handouts, and educational materials

www.dreimccollum.com

10 minute guided meditation soundtrack based on the “3 minute breathing space” from Segal, Williams & Teasdale (2002)

www.marc.ucla.edu

Mindful Awareness Research Center at UCLA

www.mbsr.mass.edu

Mindfulness Based Stress Reduction

<https://goamra.org>

American Mindfulness Research Association; has a monthly newsletter on research published each month