

# Chapter 10

## Mindfulness–Based Interventions in Psychosis

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### ABSTRACT

*Individuals suffering with psychotic disorders face lifelong emotional dysregulation and may have impairments in their thought processes and perceptual experiences despite the availability to pharmacological treatment and good compliance. They feel extreme distress with their psychotic experiences that may result in avoidance of these experiences which may further warrant for residual symptoms and frequent hospitalizations. For a few decades literature has focused on exploring the possibilities of acceptance-based interventions in psychosis. Mindfulness interventions employ the strategies of direct use of meditation practice or combined use of meditation with acceptance-based or compassion-based practices. This chapter tends to summarize the various mindfulness interventions used for psychosis and review their feasibility in terms of evidence base and therapeutic specificity. Furthermore, it recommends the guidelines for protocol to be used with psychotic individuals and advocates the need for more methodologically rigorous evidence.*

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## **INTRODUCTION**

Mindfulness originated in Buddhist philosophy and meditation practice over 2500 years ago, but since few decades mindfulness can be seen seeking new dimensions outside the Buddhist context in health psychology where it is being employed as an intervention. Mindfulness Intervention (MI) can be helpful in easing the distress and disturbances associated with symptom of psychosis rather than controlling, restructuring or avoiding the symptom itself. These aid individuals to learn the skills to alleviate their distress, enhance positive affect, decrease negative affect and reduce maladaptive automatic emotional responses by using MI techniques. Many studies have reported significant improvements in patient's cognitive functions, emotional regulation, stress and quality of life after implementing MIs but the effect sizes were small to moderate as compared to treatment as usual or other treatments. Concerns have also emerged from the literature whether the application of mindful-meditation in psychosis will trigger or cure the psychotic episode if the individuals need to concentrate on their internal experiences without being judgmental. Thus, clinicians have serious concern with the implementation of MI. Therefore, it is important to critically evaluate and mention the components, outcomes and effectiveness of MIs. Hence, this chapter will throw light on clinicians' basic concerns about the modifications, implementation and benefits of MIs such as when and how can we start a MI and how it's going to be effective in psychosis? Can MIs provide a number of therapeutic benefits comparable to routine care? Are MIs as effective as CBT or alternative interventions? Can MIs be safe intervention for people with psychosis? etc.

## **BACKGROUND**

Mindfulness assumes that an experience is followed by some typical habitual response that may further cause distress to the individual opposing the prospect that experiences may direct lead to distress (Abba et al., 2008). Mindfulness is a mental training where an individual discovers the other ways to respond to experiences that alleviate the distress by changing the relationship that individual has with his or her emotional experiences (Ivanovski & Malhi, 2007; Kabat-Zinn, 2009). It aims at increasing one's moment-to-moment awareness and attention and simultaneously rejecting the need to change or modify one's internal experiences, such as emotions and cognitions. This kind of nonjudgmental awareness facilitates balanced emotional engagement (Bridges et al., 2004).

Mindfulness training and practice includes following elements:

1. An organized system of method which incorporates both the authentic recognized mindfulness practice (body scan, mindful walking etc.) as well as the informal mindfulness practice (Socratic dialogues).
2. An attitudinal framework characterized by curiosity, willingness and kindness. These are deliberately cultivated to become aware and present with exploration of experience of daily life during the practice.
3. An appreciation of human vulnerability that suffering is an inherent part of experience which can be recognized and there are ways to get rid of the habits to these experiences that subsequently perpetuate or add to it. This is developed by integrating the personal experience that is explored without judgment with the understanding of Buddhist philosophy around mindfulness practice. Figure 1 describes how these elements are integrated.

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