Credibility in mindfulness training for young people

Harriet Ennis

Providing the evidence-base to establish whether mindfulness for young people is beneficial is undoubtedly more challenging than it has been for adults. First of all there are the practical difficulties in training teachers to deliver mindfulness well. Yet this is what needs to be done; teachers with the class management and pedagogical expertise are best placed to deliver mindfulness training to students with whom they have built trust. Secondly, it is difficult to measure the outcomes, particularly for teenagers, because unlike the positively predisposed adult participants of Mindfulness-Based Stress Reduction (MBSR) and Mindfulness-Based Cognitive Therapy (MBCT) training, adolescents, particularly if drafted into research at school, are less likely to focus on gaining understanding of the techniques, let alone actually practise them. Thirdly, a Whole-School drive and parental involvement, to promote mindfulness practice, may seem necessary to get students to spend enough time mindfully to see measurable benefits, but may actually have counter-productive effects. Students, parents and even teachers can react badly to such initiatives from leadership, which means any null results from formal studies may not be valid. The upshot of this is that clear evidence may be some time away. In the meantime the low risk of adverse reactions to mindfulness needs to be mitigated through the use of guidelines and training for educators. In search of solutions to the challenges to research validity, randomised controlled trials using teachers (not researchers) who have training and credibility to deliver mindfulness training, will paint a clearer picture of its effectiveness for young people.

AS AN EDUCATOR keen to get on with teaching mindfulness skills to students, I want to ask the question, 'Should I go ahead, or not?' On the basis of positive, personal experience of mindfulness and after convincing myself that there is a wealth of research evidence of both physical and mental health benefits in different patient categories, as well as in 'prevention' in healthy adults, the answer seems to be, 'Yes'. Despite my professional scepticism and colleagues' observations about the faddishness of mindfulness, I am reassured by the robustness of the evidence. For example, the positive findings from Gotink et al.'s (2015) research resulted from a systematic review and meta-analysis of randomised control trials only. So, I want to deliver A-level BioPsychology content on neuro-plasticity within the practical context of mindfulness practice. But I begin to wonder, given that this is such a potentially powerful technique, might there be dangers? Is the evidence from adults generalisable to children and young people? Is personal enthusiasm qualification enough to embark on training students? If I decide to avoid risk and not teach mindfulness techniques, will I be 'throwing the baby out with the bathwater' and missing an opportunity to make a difference to student wellbeing?

One of the greatest strengths of mindfulness practices is that they can be integrated into a busy modern life. In light of research on adults showing that mindfulness can have numerous benefits, including increasing calmness, clarity and concentration (Walsh & Shapiro, 2006), consideration of the Mental Health Spectrum model (2011) suggests that, in the context of a growing frequency of mental health issues among young people, mindfulness will help struggling students cope better and give those who have moderate mental health a route to greater flourishing. It follows that educators should take every opportunity to raise awareness of, and embed, mindfulness into education.

Must we wait for more research evidence from, for example, Oxford University's

My Resilience in Adolescence (MYRIAD) project before we proceed with embedding mindfulness training into school curricula? While we await the level of evidence from randomised controlled trials that we have for adults, mindfulness training for young people goes on apace. Over 4000 teachers in the UK are now trained in Mindfulness in Schools Project (MiSP) curricula using the .b course, (pronounced 'dot-be') or Paws b, designed for secondary and primary school children respectively. In my experience, other teachers are teaching mindfulness with little or no training, fuelled by personal enthusiasm. Worryingly, though, some educators are teaching mindfulness without enthusiasm to, for example, fulfil aspects of their school's PSHE curriculum.

Richard Burnett, co-founder and Director of MiSP, points out that 'there are very few negative outcomes' from mindfulness (Cooter, 2018) of any sort. However, untrained educators may not be aware that on rare occasions people have had an adverse reaction to mindfulness with serious, long-term effects (Foster, 2016). One conclusion to draw is that only qualified experts should be teaching mindfulness, not least to protect teachers and schools from litigation. Moreover, if there is reason to believe that mindfulness can be dangerous, even if only for a few individuals, then perhaps we should not be exposing young people to it at school at all?

Yet no one would suggest that young people should not be exposed to the (occasionally deadly!) risks of exercise. The benefits of both exercise and mindfulness are well worth the level of risk associated with them. As Florian Ruths, mindfulness researcher, puts it '…out of 100 people who do that [go to the gym] about 20 will injure themselves, because they haven't been taught how to do it properly, or they've not listened to their bodies. So when you're a responsible clinician or GP, you tell someone to get a good trainer.' As well as being 'good trainers', educators need good practice guidance, suitable for use in schools and universities, including protocols for trainers to direct students towards help if they experience any unusual reactions, and to ensure that educators training young people in mindfulness are aware of the potential for such issues.

A risk-benefit analysis for teaching mindfulness in schools also includes consideration of whether there is robust evidence that the benefits of mindfulness in adults are applicable also to children and adolescents. In adults, these benefits, in diminishing degrees of certainty, include improved wellbeing, stress reduction, cognitive benefits in focus, attention and working memory, sociability and emotional intelligence, and even self-regulation (Burnett, 2018). Yet, an adult choosing to learn mindfulness as a technique to help them flourish, or as a technique to help them cope with poor mental health, is in an entirely different situation to a student having mindfulness 'imposed' on them in school. Such inevitable differences in research context are one reason why gaining clear evidence about whether mindfulness benefits young people is not easy.

The Research Digest recently published an article online noting a failure to find any benefits of a school mindfulness programme for teenagers (contrary to some earlier positive findings). The Digest's article, focussing on teenage cynicism as a barrier to the benefits of mindfulness, sums up the research as follows:

> 'These results may not surprise readers who are sceptical of all the hype around mindfulness. The researchers, who are mindfulness enthusiasts, wonder if perhaps the early teen years are not the optimum time to teach mindfulness. Despite the added capacity [compared with younger kids] for abstract thought to allow skills such as metacognition to unfold, perhaps more "cynical" early adolescents require increased life challenges before the relevance of socioemotional tools becomes evident. (Johnson et al., 2016)

Importantly, MiSP's Richard Burnett points out that this was just one study, in which the mindfulness practitioner who was training

students, rather than being a classroom teacher, was a researcher with no pre-existing relationship or rapport with the class. Thus it is not clear whether adolescent cynicism, or even their lesser motivation to learn mindfulness skills due to fewer accumulated life challenges, led to the null result. Perhaps they would have been open to mindfulness if they had learnt it from a teacher who they knew and trusted, and who knew them well. Furthermore, this was part of a whole-school intervention, involving parents in making sure the students practised mindfulness at home, which, Burnett says, is 'absolutely not how to introduce mindfulness to teenagers!'(Cooter, 2018).

Perhaps the best outcome that mindfulness training can provide for students, who Burnett admits, after 15 years of experience, in all honesty don't do home practice, is in sowing seeds for later life. Burnett points out that mindfulness training can also give students skills to help them in specific situations like 'brain freeze' in exams and with disagreements at home or with peers. Though these are worthwhile benefits of mindfulness, such temporally remote outcomes and a lack of sustained practice mean research is unlikely to produce data showing significant cognitive benefits in short term student studies.

Research into the neurological effects of meditation points to mechanisms by which regular practice may be essential to seeing significant change. Haemodynamic changes with functional magnetic resonance imaging (fMRI) before, during and after meditation show significant differences and a 'dose' effect in left-prefrontal cortex (an area with a key role in emotional regulation and associated with 'happiness') activity when adept meditators are compared with control novice meditators (Davidson & Lutz, 2008). It is likely that mindfulness effects similarly take time and sustained practice before the physical brain changes that underlie improved wellbeing show up. This means that if young people are indeed dis-inclined to practise reliably this is an obstacle to investigating the effects of mindfulness on young people.

Finally, the gold standard required for evidence of young people's response to mindfulness is higher than the randomised, controlled trial. Crucial to collecting valid data on the successfulness of mindfulness for young people is not just using *teachers* qualified in mindfulness, who have pedagogical and class management skills, rather than researchers, but also, I suggest, using teachers who are screened for *teacher credibility*. This includes *trust, competence, dynamism* and *immediacy* which Hattie (2016) identifies as a key factor to maximising learning of any sort. In the case of mindfulness, where poor teaching could have negative outcomes, both for individuals and, more broadly, in missed opportunities to improve ongoing mental health in society, teacher credibility is all the more important. Teachers of mindfulness need to have built trust with their students – that is to say, they need to have the rapport that Burnett suggested was missing from the 'sincerely meant but too top-down' approach to teaching mindfulness associated with the null results from Johnson's study. Teachers need to have specialist training to be able to show *competence* so that they can convey mastery of the subject without hesitation. *Dynamism* relates to the enthusiasm teachers need to show for mindfulness and *immediacy* can be provided by presenting current research data to students, to make it clear to them the benefits they can gain. The *credibility* of the leader or educator promoting, or delivering mindfulness training to young people, may be as important as their expertise and qualifications in mindfulness. A lack of consistency in this factor may have been hampering attempts to collect meaningful evidence as to the efficacy of mindfulness training in schools. In summary, implementing mindfulness training with highly credible classroom teachers will simultaneously minimise risks, enhance benefits and provide additional validity to academic studies.

The author

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Resources

There are many courses available for those wishing to learn mindfulness skills and for those who want to become teachers of mindfulness. Teaching mindfulness is not regulated so you don't need a teaching qualification. However, training is recommended.

Courses to start you off with your own mindfulness skills often run as a weekly eight-week course, or as five-day intensive residential. For example, Mindfulness Based Cognitive Therapy (MBCT) is suitable for people wishing to enhance their general physical and mental wellbeing. *http://oxfordmindfulness.org/about-us/courses/mbct-courses/*

Face-to-face training is recommended but there are also many online resources including guided meditations, articles and videos and some that are free. For example, the following link is for an eight-week Mindfulness-Based Stress Reduction (MBSR) course, designed for people who are not able to take a live MBSR course for financial or logistical reasons. *https://palousemindfulness.com/*

Some accredited teaching qualifications expect that you have done a course to develop your own mindfulness practice before you begin training to teach mindfulness. This link lists the experience you need before enrolling on one such accredited teaching qualification. *http://oxfordmindfulness.org/about-us/training/step-1/*

The Mindfulness in Schools Program (MISP) website offers a range of training aimed specifically for teaching mindfulness in schools. *https://mindfulnessinschools.org/courses/*

Some mindfulness teacher training-courses do not have BPS accreditation, but are run by organisations that are members of the UK Network of Mindfulness Teacher Training Organisations, adhere to their Good Practice Guidelines, and offer certification.

If you want to become a mindfulness teacher you might consider applying for membership from this organisation. *https://www.ukmindfulnessnetwork.co.uk/*

Finally, the BBC's Dr Michael Mosely answers the question, 'Should I try Mindfulness?': *http://www.bbc.co.uk/programmes/articles/3dqFp4tkhsZ1VR97X0cmqhg/should-i-try-mindfulness*