



The
Mindfulness
Initiative

MINDFUL NATION UK

Interim report of the
Mindfulness All-Party Parliamentary Group (MAPPG)

Inquiry held: May - December 2014

Executive Summary:

The Mindfulness All-Party Parliamentary Group has carried out an eight-month inquiry into the potential for mindfulness training in key areas of public life - health, education, workplaces and the criminal justice system. We find that mindfulness is a transformative practice, leading to a deeper understanding of how to respond to situations wisely. We believe that government should widen access to mindfulness training in key public services, where it has the potential to be an effective low-cost intervention with a wide range of benefits. We urge all political parties to consider our recommendations for inclusion in their manifestos for the 2015 General Election, as part of the pressing task of tackling the country's mental health crisis.

Key Recommendations:

Health

We recommend that access to Mindfulness-Based Cognitive Therapy (MBCT) is substantially widened for adults with a history of depression, because it significantly reduces risk of depressive relapse and can reduce healthcare use.

Workplace

We recommend that public sector employers such as the NHS and civil service pioneer good practice and set up mindfulness pilot projects, which can be evaluated as part of their responsibility to combat stress.

Education

We recommend making mindfulness in schools a priority for development and research. Mindfulness programmes are popular with children and teachers, and research has shown promising potential, with an impact on a wide range of measures including wellbeing, executive function (attention, focus), emotional self-regulation and improved relationships.

Criminal Justice System

We recommend those in the criminal justice sector develop and evaluate pilot projects to identify appropriate forms of mindfulness teaching and establish their acceptability and effectiveness.

This country is facing a major mental health crisis, with growing effects of depression, anxiety and stress. One in four people experiences a mental health problem every year¹. There is widespread concern that one in ten children has a mental illness² which can have long-term implications. The economic impact of poor mental health has been put at £100 billion³ in the UK. At the same time as facing rising demand, the NHS's mental health services are under financial pressure. New approaches to mental health are urgently needed. It is in the light of this need that we have set up the Mindful Nation UK Inquiry to consider the potential of mindfulness.

What is mindfulness?

Mindfulness is the awareness that emerges through paying attention on purpose, in the present moment, with curiosity and compassion. It leads to a deeper understanding of life and how to respond wisely.

We are aware of the considerable popularity of mindfulness: media coverage is widespread and there has been a surge in demand for both face-to-face and digital courses. These, together with best-selling books and CDs, now reach hundreds of thousands of people in the UK. This is impressive evidence of a search among the general public for ways to improve their mental health and wellbeing. We believe that government could further widen access by introducing mindfulness in key public services, where it has the potential to be an effective low-cost intervention with a wide range of benefits. It could also help with the high levels of stress in many parts of the public sector – among teachers, the NHS and police and prison officers, for example – which is leading to a growth in sickness and absence as well as problems with recruitment and retention.

Many of the best-selling books and apps are drawing from Mindfulness-Based Interventions (MBIs), which have been developed and researched over the last thirty-five years. MBIs have integrated understandings from contemplative meditation practices, psychology and neuroscience. The most prominent MBIs are Mindfulness-Based Stress Reduction (MBSR) and Mindfulness-Based Cognitive Therapy (MBCT). There is a large and growing international evidence base for their wide-ranging benefits. Both are typically taught over eight weeks in weekly 120-minute classes, led by a trained mindfulness teacher.

Our eight-month inquiry into mindfulness has considered the many forms of delivery, but has focused in particular on the current practice and the potential of MBIs; it has looked in particular at the following policy areas: health, education, criminal justice and the workplace.

We have held eight hearings in Parliament attended by politicians from all the main parties, scientists, leading mindfulness teachers and trainers, and those implementing MBIs in a wide range of settings (see appendix for details). We have heard the testimony of individuals who have spoken powerfully about the impact of mindfulness in their lives – these have included ex-offenders, nurses, doctors, lawyers, schoolchildren, teachers, police officers, managers and entrepreneurs. We have heard from individuals who have found that mindfulness training has helped them manage – and reduce – the symptoms of long-term conditions such as depression and anxiety, as well as discovering new ways to live with chronic physical conditions, including heart disease and diabetes. Some have recounted how mindfulness has enabled them to cope with the combination of long-term physical conditions, disability and poor mental health, including at the end of life. We have also heard much about the potential effectiveness of mindfulness training as a preventative mental health intervention.

The testimony that we have heard resonates with our own personal experience of mindfulness in the courses we have attended in Parliament over the last two years. More than 115 Parliamentarians have now attended mindfulness classes and courses since 2013, led by Chris Cullen of the Oxford Mindfulness Centre.

¹ MIND (2014), *General Election Manifesto 2015*

² The Office for National Statistics (2005), *Mental health in children and young people in Great Britain*

³ Mental Health Foundation (2013), *The Future of Mental Health Services*

Findings

We will be publishing a full report in June 2015, but below are our interim findings and recommendations:

✂ Cross-sector Findings

- Mindfulness is a grassroots movement in which practitioners all over the country have become passionate advocates, setting up projects and persuading employers in both the public and the private sector to implement them. This is both a strength and a weakness. Implementation is piecemeal and depends on the lobbying strength of the advocate.
- There is a bottleneck in the supply of people with the requisite training to offer MBIs. Training organizations have waiting lists. This is a constraint on scaling up accessibility of MBIs. There are concerns that the training cannot be cut short without compromising the quality of delivery.
- A system of registration of mindfulness teachers is embryonic and the general public can find it difficult to assess the credentials of teachers. Progress is being made on this with the UK Network of Mindfulness-Based Teacher Training Organisations (<http://mindfulnessteachersuk.org.uk>) which has produced Good Practice Guidelines. Further progress towards clear governance of the profession is seen as a priority in order to maintain credibility.
- There are promising developments that can potentially greatly increase the reach of MBIs. These include digital delivery of mindfulness training and availability of mindfulness books. These are proving popular and enable wider access to mindfulness training. However, the research for the effectiveness of these methods is currently limited, and there are concerns that participants who only have access to digitally-delivered mindfulness and books have less opportunity to access the depth that can be obtained through teacher-led classes.
- While there is robust evidence for MBCT for depression, and good evidence from the US for MBSR, this now needs to be built on to understand better what works, how and where. The grassroots nature of the mindfulness movement is outstripping the investment in research.

♥ Health

- Mindfulness training is a valuable complement to conventional medical care. It is a form of 'participatory medicine' by which the patient is enabled to develop their own understanding of their condition and draw upon their own resources for healing and care, often within peer-to-peer groups. This is a new model of healthcare which it is widely believed will be increasingly significant in the future, as healthcare needs continue to grow.
- Access to MBCT for depression is very patchy, despite having been recommended by the National Institute of Health and Care Excellence for over ten years (NICE, 2004, 2009). Availability is variable across the country and across sectors.
- There is good evidence that MBIs can help reduce symptoms of depression and anxiety for people living with long-term conditions such as vascular disorders, chronic pain and cancer, and promising evidence is emerging for the helpfulness of MBIs for other long-term physical health conditions.

🏢 Workplace

- High levels of stress in many workplaces are contributing to mental health problems. There are some preliminary research findings as well as anecdotal evidence that mindfulness can have a promising impact on improved decision-making, empathy and more collaborative working relationships, as well as helping with anxiety and stress.
- The demand for mindfulness in workplaces is leading to a wide range of professions offering mindfulness. There are some concerns about the variability of the quality of the teaching, and that this could compromise the wider integrity of the work.

📖 Education

- Mindfulness programmes in schools are popular with children and teachers and could play a significant role in preventing mental ill-health. Research has shown promising potential, with an impact on a wide range of measures, including wellbeing, executive function (attention, focus), emotion regulation (for example, anger) and improved relationships with peers and teachers.
- There are a number of pilot projects which could serve as good practice models. For example, at Bright Futures Educational Trust based in Manchester, a federation of primary and secondary schools, half of all students and staff have now taken a mindfulness course.

⚖️ Criminal Justice System

- There is less mindfulness teaching and research taking place in this field than in other policy areas we have focused on. It may be a very valuable area for development because mindfulness training directly engages with habitual patterns of behaviour, thinking and emotional reactivity, which are responsible for actions that lead to offenders' involvement in the criminal justice system, as well as patterns of recidivism and poor mental health.
- In the criminal justice system, where there is a high incidence of depression, there is almost no access to MBCT.
- MBIs have potentially significant contributions to make to the resilience and wellbeing of those working within the criminal justice system, including prison officers and the police.

Recommendations

In the light of our findings, and in advance of publication of our full report in June 2015, we would urge all political parties to consider the following recommendations for inclusion in their manifestos for the 2015 General Election, as part of the pressing task of tackling the country's mental health crisis, as follows:

Health

We recommend that:

- Access to MBCT is substantially widened for adults with a history of depression, because it significantly reduces risk of depressive relapse, and can reduce healthcare utilisation.
- Consideration is given to widening access to MBIs in services for people with long-term health conditions.
- More mindfulness pilot projects linked to good evaluation and research should be set up.
- The mindfulness community improves its reach to a broader population, including ethnic minorities and the disadvantaged. There are already severe mental health inequalities in the UK, and mindfulness must play a role in reducing not increasing them.

Workplace

We recommend that:

- Public sector employers such as the NHS and the civil service pioneer good practice and set up mindfulness pilot projects, which can be evaluated as part of their responsibility to combat stress.

Education

We recommend that:

- Mindfulness in schools should be made a priority for development and research, especially given the seriousness of the growing mental health crisis amongst the under-18 age group. A large randomized-controlled trial is needed to explore questions of effectiveness and cost-effectiveness.
- Bodies such as Public Health England should work with public health teams and Child and Adolescent Mental Health Services (CAMHS) to promote mindfulness-based programmes in schools.
- Government supports pilot projects with clusters of schools to examine key questions of sustainable implementation.

Criminal Justice System

We recommend that:

- Those in the criminal justice sector develop and evaluate pilot projects to identify appropriate forms of mindfulness teaching, and establish their acceptability and effectiveness.

Personal Testimonies
from the co-chairs of the Mindfulness All-Party Parliamentary Group



Tracey Crouch

Conservative MP for
Chatham and Aylesford,
co-chair of the
Mindfulness APPG

'I was surprised by my depression. I'm the sort of person who people say always has a smile, but that wasn't how I was feeling underneath. I had tried medication and a few sessions of therapy but it didn't seem to be working. I heard about mindfulness so when I went to my GP for help, I mentioned it, and he was very enthusiastic and encouraging.

'The incentive for me was to get off the medication. At first I was sceptical. I thought it was another airy-fairy type of thing. But I completely changed my view. It wasn't easy to do the course – we had to diarise the weekly meetings in a busy schedule.

'The mindfulness course helped me develop coping mechanisms, and to understand the mind. Now it helps in everyday life. I concentrate better in meetings – which means they can be shorter! It has also helped build my confidence in vulnerable situations like speaking on live radio or in the House of Commons. I use the mindfulness breathing techniques during my day – walking to meetings or when I am having a quick lunch on my own. I came off medication eighteen months ago and have had no recurrence of the depression.'

'I first encountered meditation in 1987 when I was working in an infants' primary school and the staff were getting stressed before an inspection. The school nurse taught us meditation and it helped us settle right down. I then went on to use meditation with the pupils in my class.

'I rediscovered mindfulness when I was an MP and being pulled from pillar to post by meetings, plans and policies. It was what I needed to maintain balance and equanimity, so I started practising meditation and studying the philosophy behind it. I wanted to slow down and notice what was happening in the present moment. Doing that has changed me. I approached Professor Lord Richard Layard three years ago to help me set up the Parliamentary mindfulness group because I saw many others needing to do the same. I also wanted mindfulness to help in society, but we needed to practise it first, before jumping into policy. The group has helped me to deepen my meditation practice and take mindfulness into other areas of my life.

'Looking beyond Parliament, I see so many people struggling with stress and mental health difficulties. I believe mindfulness can be central to how government responds, provided we approach it in the right way – grounding what we do in science and taking a cross-party approach. This is too important to be party-politicised.'

'I've always been interested in the idea of living in the moment. On the mindfulness course in Parliament, there were several really interesting moments which will stay with me for a long time. I started doing the exercises and experienced inexplicable moments of happiness and sheer joy. On my whiteboard in my office I have a list of eight practices ranging from 'random acts of kindness' to 'take a three-minute breathing space' and 'be thankful for something'. I practise two or three of them every day.

'In the past I have experienced depression and so I know what it's like when it's creeping back up. But mindfulness is like a tool and it's the most effective one I know. Since using the mindfulness exercises, I have been more cogent in my thinking, more confident in speaking up – people may think I am confident but underneath I'm a quivering jelly! It's helped me to find the confidence to put myself forward and deal with that self-criticism which can hold you back. I enjoy my life more.'



Lorely Burt

Liberal Democrat MP for
Solihull, co-chair of the
Mindfulness APPG

Appendix
May - December 2014 Parliamentary Hearings of the MAPPG

20th May: Mindfulness in the Workplace

Chaired by *Madeleine Bunting*

Speakers included: Roland Lamb, entrepreneur and founder of roli.com; Gary Heads, Durham-based mindfulness trainer; Michael Chaskalson, Mindfulness trainer; Alison Dunn, Transport for London; Joel Levey, US-based mindfulness trainer and author; Dr. Clara Strauss, Sussex Mindfulness Centre (a collaboration between Sussex Partnership NHS Foundation Trust and University of Sussex); Sharon Hadley, Bangor University

July 16: Mindfulness and Mental Health

Chaired by *Madeleine Bunting*

Speakers included: Helga Dittmar, Mike Hales, Helen Leigh Phippard, Julia Racster-Szostak, service users from Sussex Partnership NHS Foundation Trust; Professor Willem Kuyken, University of Oxford; Jerry Fox, Devon Integrated Children's Services; Dr. Clara Strauss, Dr. Kate Cavanagh, Sussex Mindfulness Centre; Devin Ashwood, Centre for Addiction Treatment Studies, Warminster; Professor Jo Rycroft-Malone, Bangor University; Val Moore, National Institute of Health and Care Excellence; Paul Bernard, Tees, Esk and Wear Valleys NHS Foundation Trust; Dr. Jonty Heaversedge, Commissioner, Southwark CCG; Rebecca Crane, Bangor University

October 21st: Mindfulness in the Criminal Justice system

Chaired by *Lorely Burt MP (co-chair of the MAPPG)*

Speakers included: James Docherty, Violence Reduction Unit, Scotland; Rebecca Remigio, Assistant Chief Executive, Probation Service Wales; Ken Dance, Operations Manager, Medway Youth Offender Team; Mark Ovland, Mindfulness teacher; Henrietta Ireland, Youth Offender Team Devon; Professor Richard Byng, Plymouth University; Selina Sasse, Prison Phoenix Trust and MindUnlimited; Vishvapani, mindfulness teacher

November 5th: Mindfulness and Health II (Covering physical pain; NHS staff)

Chaired by *Dr. Jonty Heaversedge*

Speakers included: Vidyamala Burch, Breathworks; Dr. Christina Surawy, Oxford Mindfulness Centre; Dr. Stirling Moorey, South London and Maudsley NHS Foundation Trust; Dr. Trish Lück, Paediatric Palliative Physician; Dr. Lana Jackson and Dr. Catherine Cameron, Brighton and Sussex University Hospitals NHS Trust; Dr. Angela Bussutil, Faculty of Clinical Health Psychology, British Psychological Society; Lisa Graham, Kevin Donohoe, Sue Brown, Lancashire Care NHS Foundation Trust; Dr. Alice Malpass, University of Bristol; Dr. Julia Wallond, Exeter Mindfulness Network; Dr. Kate Cavanagh, Dr. Clara Strauss, Sussex Mindfulness Centre; Dr. Robert Marx, Sussex Partnership NHS Foundation Trust; Michael West, King's Fund

November 19th: Mindfulness in Education

Chaired by *Madeleine Bunting*

Speakers included: Paul Burstow MP, Professor Katherine Weare, Emeritus Professor, University of Exeter; Richard Burnett, co-founder, Mindfulness in Schools Project; Amanda Bailey, Chief Operating Officer, Bright Futures Educational Trust; Fergus Crow, Director of Partnerships, National Children's Bureau

November 25th: Mindfulness in the Workplace

Chaired by *Madeleine Bunting*

Speakers included: Chris Tamdjidi, Kapala Academy, Germany; Dr. Jutta Tobias, Cranfield University; Emma Wardropper, David Bolt, Capital One; Sue Cruse, Dr. Philip Gibbs, GlaxoSmithKline; Marion Furr, Department of Health; Michael Chaskalson, Mindfulness Works; Geoff McDonald, Bridge Partnership

December 9th: Mindfulness and Policing

Chaired by *Jamie Bristow*

Speakers included: John Murphy, Chair of Health & Safety Committee, the Police Federation; Paul Quinton, Evidence & Evaluation Advisor, College of Policing; Mark Preston, DCI Major Crimes Unit, Surrey and Sussex Police; Mark Davies, consultant and mindfulness trainer; Zander Gibson, Borough Commander, Southwark, London Metropolitan Police

December 9th: Mindfulness and Gangs

Chaired by *Chris Cullen*

Speakers included: Gwen Williams and Philippa de Lacy, Hackney & City MIND; Ade Afilaka and Leslie Mitchel, Wise Youth Trust; Edward Kellman, Nilaari; Fabian Kellman, Kids' Company; Baroness Lola Young

Acknowledgements

We are grateful to the Mindfulness Initiative for clerking this inquiry. The Mindfulness Initiative is a collaboration which includes three universities (Bangor, Oxford, and Exeter), the Sussex Mindfulness Centre and the Mental Health Foundation. Thirteen associates of the Initiative have donated time, led by co-directors Madeleine Bunting and Ed Halliwell. For a full list of the Initiative's associates please visit the website (www.themindfulnessinitiative.org.uk). The advisory board includes Professor Willem Kuyken (Oxford), Professor Mark Williams (Oxford), Chris Cullen (Oxford University Mindfulness Centre), Florian Ruths (Consultant Psychiatrist at the Maudsley Hospital, London) and Rebecca Crane (Director of the Centre for Mindfulness Research and Practice, Bangor).

We are deeply grateful to the Lost & Foundation and the Enso Trust for their generous support of the Initiative. We are also grateful to Bow & Arrow, the growth consultancy, and to Stephen Holland for their pro bono work on the design of this report.