A Snapshot ..... 

Using Mindful & Compassionate approaches to care in the Therapy Area of Lakeview Acute psychiatric admission unit, Kildare & West Wicklow

Lisa Mac Gabhann, RPN, Lakeview Unit
“Mindfulness means paying attention in a particular way; on purpose, in the present moment, and non judgmentally” Jon Kabat Zinn. (1991)

- Mindfulness origins lie within Buddhist & Christian philosophies & practices.
- Mindfulness has been widely taught & used as a secular (non religious) approach to life for over forty years.
- Mindfulness has been rigorously researched.
Defining Compassion:

“A behavior that aims to nurture, look after, teach, guide, mentor, soothe, protect, offer feelings of acceptance and belonging – in order to benefit another person”.

Prof Paul Gilbert. (2013)
Mindful meditation groups:

- Ten min. introduction to mindfulness, a definition and the core principals of non judgment & acceptance.
- Ten min. guided meditation including four elements of: Settling, grounding, resting & support. May include compassionate imagery.
- Ten min. reflection on the practice.
- (Groups- Community. Common humanity)
Using Mindful approaches to care in group or 1:1 - Enquiry:

- Are you suffering right now? How do you know you are suffering? Where in your body do you feel you are suffering?
- Can your describe your suffering- Emotions, sensations, pain.
- Do you have thoughts about your suffering? Thoughts are not feelings. Thoughts may not be true.
Compassionate approaches in the context of mindfulness:

- Invite the person to rest their hand on the place they feel the suffering.
- Breathing into & out of the place of suffering.
- Imagery e.g.- compassionate colour.
- Acknowledging suffering is normal & healthy whilst recognising the distress around it.
Pre mindfulness meditation: Curled up on chair, head tipped low, crying. Agitated, feelings of hopelessness & worthless. Thoughts out of control.


After a few mindfulness practices: acceptance of feel anxious, so no need to fight it or get rid of it. Anxiety alleviated. No longer needed to hide symptoms from adult children. Reduced shame. Feelings of inner peace, hope & self worth.
‘Marigold’. Anxiety affecting all decision making, including eating – malnourished. Highly self critical.

- Not comfortable with self compassion, avoids these practices.
- Does not want to change unhealthy thinking patterns. Afraid to let go of thinking. (“Addicted to thinking”)
- Once used mindfulness to get herself on the bus.
- Has used mindful movement and noticed thoughts settled.
‘Mark’. Social anxiety, epilepsy.

- Attended several groups & expressed benefit.
- Realising others were suffering too. (Common humanity reduced feelings of isolation).
- Panic attack (in art group) – “I’m afraid, what’s happening”. Explained what was happening-anxiety escaping from your body, let it go, don’t fight it, let it happen. It will pass. Used self compassion hand on heart, breathing into his heart. Mark felt comforted.
During handover I felt frustration & anger at the management & care of a vulnerable client. Rather than speaking from my emotional self I used mindfulness- brought my attention to my body & my breath. Recognised & accepted the emotional feelings in my body. No judgment. Looked at the team & accepted they had genuinely done the best they could in the difficult circumstance. No judgment. My anger eased almost instantly.
Bibliography
