Mindfulness in social work education and practice

PEARSE McCUSKER (UNIVERSITY OF EDINBURGH)
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Acknowledgements

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Key points

• Mindfulness is shown to help social work students and social workers reduce stress and enhance self-care, compassion and well-being. The current evidence has limitations, but the research base is growing.
• Mindfulness can help increase awareness of thoughts, feelings and behaviours and engender change in sense of self and wider appreciation of life.
• It is also found to align with and support the development of key social work skills and values, including, managing emotions and enhancing thinking and interpersonal skills.
• Mindfulness is not a salve for the structural challenges facing social work, but research points to its potential as an enabler of anti-oppressive practice.
Introduction

This Insight considers some of the uses and potential of mindfulness in social work. It has emerged from my experience as a social worker and researcher in highlighting the problem of stress within the profession, and finding ways of introducing and making self-care integral to education and practice. Drawing on policy and research findings, it defines mindfulness and explores evidence for its impact. As mindfulness is an emerging area of study within social work, the discussion incorporates findings from other research settings where relevant.

Overall, this Insight aims to provide students and practitioners with the opportunity to critically assess the value of mindfulness as a way of attending to well-being in their professional and personal lives. This is particularly apt at the time of writing, with the profession as a whole having to adapt to significant challenges ushered in by the Coronavirus pandemic.

What is mindfulness?

Mindfulness is typically defined as the act of being present in each moment. John Kabat-Zinn (1994, p4), who is credited with kick-starting the mindfulness movement in the West, describes it as:

... paying attention in a particular way: on purpose, in the present moment, and non-judgementally.

Mindfulness means being aware of what’s happening now and staying there with an attitude of acceptance. It is argued this practice of cultivating awareness enables people to become more familiar with their ways of being: their thought processes and habits, how they experience and react to emotions and physical sensations, and how these influence their behaviour and daily lives (Teasdale and Chaskalson, 2011). The premise is that by developing insight into these areas, people can experience potentially transformative changes; seeing how habitual thought/emotion patterns contribute...
to upsetting experiences provides the opportunity to think, respond and behave differently. Williams (2018) uses the metaphor of a stream of thoughts, in which mindfulness acts by letting the person stand back and watch patterns unfolding, leading to a different understanding about the nature of thinking and its relationship to beliefs and actions:

*Gradually, we can train ourselves to notice when our thoughts are taking over and realise that thoughts are simply ‘mental events’ that do not have to control us.*

Mindfulness is also usually linked to ideas of compassion and kindness, with practices implicitly or explicitly intended to increase compassion for self and others (Kabat-Zinn, 1994). Many mindfulness based interventions (MBI) are derived from Mindfulness-Based Stress Reduction (MBSR) (Kabat-Zinn, 1991) and Mindfulness-Based Cognitive Therapy (MBCT) (Crane, 2009). Both usually involve taught sessions over eight weeks, incorporating meditation practices, such as mindfulness of breath and body, as well as physical exercises often drawn from yoga. Mindfulness is, however, interpreted and practised in varied ways which, as the following section will illustrate, is not without criticism or controversy.

**The policy context**

Mindfulness practices and ideas are found across religions and spiritual orientations. While contemporary versions have their roots in Buddhism, mindfulness in the West is largely a secular activity. Since its introduction in the early 1990s, it has moved from relative obscurity to become a significant social and cultural phenomenon and the focus of increasing interest across personal, professional and policy domains (Brown, Creswell and Ryan, 2015). The latter is perhaps best illustrated in the publication of the *Mindfulness nation UK* report by the Mindfulness All-Party Parliamentary Group (MAPPG, 2015). It explored evidence for mindfulness and concluded that it offered significant potential for dealing with some of the intractable policy problems facing government, including the ‘mental health crisis’ affecting one in three families in the UK (ibid., p5). In this, the report saw mindfulness as a non-stigmatising and preventative way for people to manage stress and distress and improve well-being. It recommended the integration of mindfulness in the areas of health, education, the workplace and the criminal justice system. A key aim here was to enable professionals, particularly in the public sector, to ‘combat stress and improve organisational effectiveness’ (ibid., p6).
The *Mindfulness nation UK* report mirrors a wider view linking the rise of mindfulness in professional contexts to changing working conditions, characterised by increasing workloads, stress and poor mental health. The social work profession has a deep-rooted problem with stress (Davies, 1998) but, until recently, questions about social workers’ well-being have received very limited attention. The most recent *Health and safety at work statistics summary for Great Britain* (Health and Safety Executive, 2019) places social work in the second highest group for work-related stress, depression and anxiety across all professions. A more detailed picture of the challenges facing social workers has begun to emerge in the past decade, including: stress related to the newly qualified social worker role (NQSW) (Jack and Donnellan, 2010; Carpenter and colleagues, 2015); working in specific settings, in particular children and families’ services (Hussain, 2018); and a worsening of working conditions and high levels of job dissatisfaction (Ravalier and Boichat, 2019).

Of particular note in Scotland is Unison’s *Safe from harm report* (2019) which, among a list of concerns, found workload pressures increasing, almost a third of respondents citing extremely high stress levels, and 90% considering leaving their jobs in social work. There is also evidence of significant stress in social work education and a negative impact on students’ mental health (Ying, 2008; Wong, 2013).

In view of this, it is perhaps unsurprising that mindfulness has begun to make its way into social work, both as a strategy for mitigating work-related stress and, to an extent, as an intervention with people who use services (Trowbridge and Mische-Lawson, 2016). As intimated, however, this is not an unproblematic development. The idea that mindfulness can be used to tackle stress or other problems that are structural in origin – for example, arising from high workloads – has been challenged as neo-liberal, placing responsibility on
the individual to cope and adapt; a similar charge is laid against the introduction of resilience as a professional standard for social workers in the UK (Garrett, 2016). Relatedly, commentators argue that in the process of becoming mainstream, mindfulness has been appropriated to corporate ends. Purser (2019) characterises this as a process of ‘McMindfulness’ and decries how it severs mindfulness from its ethical roots and broader concerns with collective social well-being. Responses to the creeping corporatisation of mindfulness have sought to more explicitly align mindfulness practices to social justice aims, as exemplified in the term ‘critical mindfulness’ (Ng, 2016; McCusker, 2019) and in the work of groups such as the Mindfulness for Social Change Network.

In setting out the policy and evolving debate about mindfulness in this way, this Insight seeks to indicate how mindfulness might support students and qualified social workers in managing work-related demands and to enhance skills, but in ways that are consistent with the profession’s values. It acknowledges the pitfalls of assigning panacea status to mindfulness and recognises that the pressing issues facing social workers require structural and organisational change.

Mindfulness: mental health and well-being

The main focus in mindfulness research has been on how it can lessen the impact of some diagnosed mental health conditions. Mindfulness is accepted as an intervention for moderate to severe depression, with the NICE CG90 guideline (NICE, 2009) recommending MBCT for people who are at significant risk of relapse. This is based on a number of reviews of research evidence that show a reduction in risk of relapse or recurrence in people with major depressive disorder who had three or more previous episodes (NHS, 2012).

In people with no formal mental health diagnoses, but nonetheless who report forms of mental distress, the research evidence show similar patterns. For example, Khoury and colleagues’ (2015) large-scale review found that MBSR had a significant impact on stress, moderate effects on depression, anxiety and quality of life, and smaller effects on burnout. This study allows for direct comparison with social work practice and education as it included healthcare professionals and students. It found that healthcare professionals were among the groups who benefited most from
MBSR and linked this to the particularly high levels of work-related stress they experienced. The study also found significant improvements in well-being across student groups, including to mental distress, study stress and subjective well-being (ibid.).

However, the literature also highlights potential detrimental effects for some people when they practise mindfulness. One review attributed this to difficulty managing increased awareness of psychological states and advocated screening mechanisms and particular care with some groups; for example, people with histories of trauma and psychosis (Hanley and colleagues, 2016). This is not to say that mindfulness cannot be helpful for such experiences, as illustrated by growing interest in trauma-sensitive mindfulness (Treleaven, 2018). The balance between positive and negative outcomes is captured in a recent study exploring the use of ‘Calm’, a mindfulness app, with Scottish students. It found that it was associated with significant gains in well-being and positive mental health outcomes for most participants, but a minority had negative experiences. Its conclusion, that the optimal use of mindfulness varies depending on the person (Clarke and Draper, 2019), chimes with findings by Willoughby Britton in the USA (2019, p161):

...[mindfulness processes] are usually beneficial but under certain conditions, for certain people, or at certain levels, their effects can turn negative, have costs, or have undesirable effects.

Mindfulness: mental health and well-being in social work

The research base for mindfulness in social work is relatively small, with some methodological limitations. Most has been carried out in North America. Evidence is, however, growing, including more UK-based qualitative and some longitudinal research, with emerging themes generally supporting those outlined above. This includes correlations between mindfulness practice and improvements in social work students and social workers’ ability to cope with stressful situations (Ying, 2009; McGarrigle and Walsh, 2011; Gockel and Deng, 2016). In McGarrigle and Walsh’s study with American social workers (2011, p220), participants linked these positive changes to enhanced awareness of stress and the ability to manage it. They also found mindfulness provided a means of attending to self-care on a day-to-day basis that increased their understanding of its importance, and led to the
development of a wider range of coping strategies. This included practices such as stopping to take a few breaths and paying attention to bodily reactions, with attendant reports of feeling calmer and improved sleep. In a recent Canadian study, Crowder and Sears (2017) compared outcomes of an MBI with 14 social workers with a waiting list group. It found significant decreases in perceived stress for the group receiving the MBI. Additionally, at a 26 week follow-up, participants in this group reported more positive attitudes and behaviours. Key catalysts for these changes were increased ability to recognise and let go of negative thinking and to detect and regulate emotional upset. Interestingly, in Bonifas and Napoli’s (2014) study with American social work students, despite participants reporting no decrease in perceived levels of stress, their quality of life was improved. The authors attribute this to a ‘transactional model of stress’, in which external stressors do not necessarily change but the person’s ability to manage it does (ibid., p481).

Similar trends are found in UK-based research. For example, in recent Scottish and Northern Irish studies with social work students, mindfulness practices were found to reduce anxiety, perceived stress and increase awareness of emotional reactivity (Howie, Innes and Harvey, 2016; Roulston and colleagues, 2018; McCusker, 2019). A better understanding of emotions was associated with more adaptive ways of coping with them, including more self-acceptance and self-kindness. Changes were also linked to altered thought processes, including less rumination on past and future events and catastrophising, all of which were perceived as negatively impacting experience (McCusker, 2019). Students in some studies reported a greater ability to manage stress related to competing demands in
comparison to their previous academic year. This was attributed to the changes in participation in the mindfulness programmes (Roulston and colleagues, 2018; McCusker, 2019). Similar findings are reported for social workers and newly qualified social workers (Kinman, Grant and Kelly 2019; McCusker, 2019). Kinman, Grant and Kelly’s (2019) mixed-methods study with social workers, found increases in emotional self-efficacy, compassion satisfaction and reductions in compassion fatigue and perceived stress following a mindfulness-based programme. A longitudinal qualitative study (McCusker, 2019) traced Masters in Social Work students from their final year to six months into post-qualifying practice and found transformative change across a range of domains, including managing the transition from student to social worker.

The small number of studies that have addressed the impact of mindfulness on exposure to trauma, compassion and burnout have also yielded positive findings. Participants in Crowder and Sears’ (2017, p27) and McCusker’s (2019) studies reported increases in self-compassion following mindfulness programmes, which included feeling less personally damaged by service users’ trauma. The former study also found a reduced risk of burn-out. Relatedly, Constantine Brown and colleagues (2017) compared compassion fatigue and levels of mindfulness in student social workers and mental health professionals. It found that those with lower levels of mindfulness had higher levels of compassion fatigue, and concluded that mindfulness protects against compassion fatigue in both groups. These findings are of particular note for social workers with a history of personal trauma, as the evidence suggests they are at higher risk of experiencing work-related secondary traumatic stress and burnout (McFadden, Campbell and Taylor, 2014).

A key attribute of mindfulness found across the social work literature is in affording opportunity to take time out of often stressful personal, academic and practice situations. In McGarrigle and Walsh’s study (2011, p223) social workers placed importance on ‘time, permission and place for self-care and wellness’ in the workplace, which represented a tangible valuing of their well-being by the agency. Social work students in Birnbaum’s (2008, p837) study captured the need for an ‘accompanying place’, in which to gain respite and make sense of the often overwhelming demands of academic and practice learning in a ‘non-evaluative’ way. This sense
of being overwhelmed was also evident for some newly qualified workers (McCusker, 2019). Worryingly, the research base also conveys a perception that educational and practice settings do not allow for the expression of emotions despite the emotive nature of the work, mirroring findings elsewhere in the social work literature (Rajan-Rankin, 2014). Another consistently reported benefit of mindfulness was that it impacted students and practitioners at a fundamental level, often engendering a greater appreciation of life overall. Experiences such as ‘contentment’, ‘peace’ and ‘happiness’ pepper social work narratives, as exemplified by a student who found participating in a mindfulness course to have:

... encouraged a dramatic positive mind shift and caused me to prioritise life priorities and gave me confidence to be my authentic self with happier life outcomes (Roulston and colleagues, 2019, pp164–165).

This chimes with the broader literature in terms of mindfulness facilitating:

...intense, embodied, authentic transcendental experiences that pervade day-to-day life and extend beyond a remedial effect (Kellock Arnold, 2018).

**Mindfulness: social work skills and values**

The research base also indicates that mindfulness can positively impact practitioners’ skills and values and captures a range of approaches to integrating it into education and training. Here, better stress management and emotional regulation attributed to mindfulness practice, were found to positively impact interactions and relationships between practitioners, clients and colleagues. This includes greater recognition of the negative impact of stress on thinking, concentration and decision-making, and the importance of containing emotions in interpersonal work (McGarrigle and Walsh, 2011; Wong, 2013; Kinman, Grant and Kelly 2019; McCusker, 2019). Participants across a range of studies reported difficulties arising from personal experiences outside of work or placement and how mindfulness enabled them to manage them in social work contexts. Mindfulness practices were also found to enable participants to hold the emotional upset arising from the distress and trauma people presented within day-to-day social work interactions, and help mitigate emotional reactions ‘spilling over’ from one exchange to another (Birnbaum, 2008; Gockel and Deng, 2013; Crowder
and Sears, 2017; Kinman, Grant and Kelly, 2019). Taking even brief moments to gain equilibrium was seen to be key, often involving short practices, such as pausing for breath. The effect was summed up by a participant in Crowder and Sear’s (2017, p25) study as:

*I’m able to deconstruct some of the issues that present and not get so emotionally high or low because of the content but rather just peacefully attend to the issues.*

Gockel and Deng (2016, p238) make the point that, ironically, current approaches to social work education and practice offer little to students and social workers to deal with emotionally challenging experiences, over and above discussing them. In contrast, the research base indicates that mindfulness provides both a means of making sense of such experiences and a ‘concrete vehicle’ for working with them as they arise. It also enables students and practitioners to prepare for them, for example, in advance of difficult meetings or court appearances (Kinman, Grant and Kelly, 2019). In this, the facility for connecting with physical experience appears to be central, in grounding and limiting the tendency to get pulled into spirals of thought. The literature also reports benefits across other interpersonal skills and competencies, including listening, attention, presence and attunement, and empathy, all of which are considered essential to relationship-based social work practice (Turner, 2009; McGarrigle and Walsh, 2011; Gockel, 2013; Crowder and Sears, 2017). Moreover, mindfulness is credited with supporting reflection and reflexivity, by enabling the practitioner to *stay with* difficulty and acknowledge the dynamic they bring to the situation (Berés, 2009; Turner, 2009).

The research base also conveys alignment between mindfulness and social work values and points to further promising opportunities. As with skills development, this is linked to greater insight into thoughts and emotions, for example, how stress impacts on the ability to be non-judgemental with clients (McGarrigle and Walsh, 2011, p221). Mindfulness practices are reported to engender more compassionate framings of clients in challenging situations (Gockel and Deng, 2016). A smaller number of studies have more directly investigated its potential for increasing awareness of cultural and ethnic differences. For example, Napoli and Bonifas (2013, p203) explored the synergies between mindfulness and the culture and practices of American Indians and found parallels in the body-mind-spirit connection.
and commitment to presence that are emphasised in both. Mindfulness enabled social workers and students to interact in culturally sensitive ways, for instance, by respecting clients’ use of silence and being more able to tolerate it through their own mindfulness practice. In addition, mindfulness was identified as supporting more empathic responses to anger, and enabled practitioners to see where they were making prejudicial and culturally-loaded assumptions.

In supporting anti-discriminatory practice, Wong (2004) found mindfulness to be key in helping social work students challenge their sense of self. She argues that social workers often minimise their own role in upholding structural disadvantage and contends that education must, therefore, include opportunity to support ways of addressing this; an imperative that has gained more urgency in light of the killing of George Floyd in the USA and the Black Lives Matter protests there and internationally. Wong found that mindfulness enabled students to accept the discomfort that arose from their reflections about privilege and discrimination in less avoidant and judgemental ways. This afforded recognition of how their beliefs mirrored wider stereotypes related to particular religious and ethnic groups. Wong’s findings are reflected in a small but developing body of work exploring how mindfulness can move beyond an individualised-therapeutic conceptualisation to an intervention that challenges oppression (Hick and Furlotte, 2010; Berila, 2016; McCusker, 2019).

**Implications for social work**

In summary, while the research base for mindfulness in social work is still emergent and developing, it offers clear messages about its benefits and future potential. This includes playing a valuable role in recognising and attending to the emotional needs, stress and other related challenges that students and social workers experience across the education-practice spectrum. Such attention has been largely missing from social work discourse until relatively recently.

Integrating mindfulness within social work education and practice does, however, need to be approached carefully. The research evidence points to mindfulness practices having negative effects for some people and groups. Moreover, as with any intervention, the quality of provision is key. In recognition of the need to ensure teaching is safe and effective, the British Association of Mindfulness-based Approaches have drawn up a
governance framework that includes good practice guidelines (BABMA, 2020). Its website also enables users to search for teachers across the UK who are BAMBA members and have met its standards.

Lastly, as this *Insight* has indicated, mindfulness cannot address the structural origins of problems facing social workers, but it does represent one of a number of strategies that can engender a more aware, embodied, caring and compassionate sense of what the role actually involves. It also offers a means of enabling practitioners to further develop signature skills and values – those that are foundational to professional identity. Future opportunities lie in extending understanding of mindfulness as an enabler of anti-oppressive practice and in developing interventions to better mitigate trauma and disadvantage for people using social work services.
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