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**The Mindfulness Umbrella: A Qualitative Inquiry into How Emerging
Adults Perceive and Mobilise Mindfulness**

A thesis presented in partial fulfilment of the
requirements for the degree of

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Abstract

Background: New Zealand youth have among the worst mental health rates globally. Mindfulness is often recommended to improve well-being, yet little research has been done within this population. Further, the research to date has predominantly focused on quantifying results of mindfulness-based programmes, leaving conceptualisations and mobilisations of mindfulness largely unknown.

Aim: The current study seeks to understand how emerging adults (EAs), aged 18-25, who have a current mindfulness practice understand and mobilise mindfulness.

Methods: Ten qualitative interviews were analysed using thematic analysis with critical realist epistemology and ontology.

Analysis: Four overarching themes are discussed: Be Focused Right Now: Attentional Awareness; Metacognitively Mindful; Mindfully Processing and Problem Solving; and Part of Everyday Life. Both beneficial and challenging elements of mindfulness are discussed.

Discussion and implications: This is the first study to gain insight into how New Zealand EA understand and practise mindfulness. The analysis suggests participants often mobilise mindfulness for coping with challenges and maintaining well-being. The implications of this research, and possible future directions are discussed. More research is needed to generalise to broader EA and New Zealand populations.

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Chapter 1: Introduction

Challenges of Emerging Adulthood

As with all life stages, the transition from adolescence to adulthood holds a unique set of learning opportunities and challenges. Arnett (2000) initially proposed the theory of “emerging adulthood” as a way to comprehend the lives of young adults in industrialised societies. The late teen and early adulthood years can be stressful and turbulent (Kerrigan et al., 2011; Dobkin et al., 2014). It is a time of physical, cognitive and emotional development (Lapsley & Woodbury, 2016). Arnett (2007) later asserts this theory of emerging adulthood is useful to understand late teens to mid-20s specifically in industrialised societies, which encompasses a large portion of the western world, including New Zealand.

In westernised society, this experimentation, or period of finding yourself and your place in the world, takes place from roughly when you leave school (often age 18) into your mid-20s (Arnett, 1998, 2000, 2001, 2006, 2007). An example of this sociocultural change can be seen in Peer and McAuslan’s (2016) observational study of university students. The authors found younger emerging adults (EAs) aged 18-25 reported greater feelings of instability, self-focus and identity exploration compared to older EAs aged 26-29. This suggests that within modern westernised society there has been a shift in the experience of those in their late teens and early twenties. Arnett’s work argues 18-25 years is a time of unique stressors, largely characterised by a lack of stability, thus this life stage requires special consideration.

Arnett (2000, 2007) proposes five features that characterise the life stage of emerging adulthood in Western industrialised contexts. These characteristics occur at different times and in different orders during the development of every EA. The five features of this life stage are:

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- *The age of identity exploration* which encompasses aspects of exploration of values, goals, work and romance.
- *The age of instability* refers to a period where changes are frequent. This may be in work, living circumstances, relationships, or a combination of these.
- *The self-focused age* describes a phase of limited commitment to others regarding living and financial situations as this is often the first time they have lived away from home for an extended period and in which they are attempting to obtain self-sufficiency (Arnett, 1998).
- *The age of feeling “in-between”* is where an individual does not feel they are in adolescence but also not a fully functioning adult (Arnett, 2001). This is largely where the term “emerging adulthood” came from as Arnett found those aged 18-25 did not identify with the term “late adolescence”, nor did they identify with being fully adult, having not reached key milestones. These milestones include accepting responsibility for themselves, making decisions, and becoming financially independent.
- *The age of possibilities* describes a sense of optimism to transform their life into what they want it to be, free of familial or sociocultural pressures. Arnett (2006) argues this is largely due to experiencing increased freedom combined with limited experiences of failure.

Therefore, EAs tend to view possibilities optimistically and set high expectations for the future. These factors contribute to a life stage characterised by the perceived possibilities of exploring opportunities and creating an idealistic life anticipating success (Arnett, 1998, 2000, 2001, 2006, 2007).

While the stage of emerging adulthood holds a lot of promise, it also holds an element of pressure caused by aspirations to create their idealised version of themselves and their

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desired lifestyle. Coupled with ideas of self-discovery, freedom, and pressure to be “happy”, this period of life can be challenging. This may be due to the discrepancy between the EA’s current view of themselves and their idealised version of themselves or how they think society wants them to act. This aligns with self-discrepancy theory (Higgins, 1987, 1989) which proposes that the greater the differences between the actual and ideal or “ought” (how an individual views their obligations to society) selves, the greater the negative effect experienced. One way to see this manifesting in emerging adulthood is through increased risk-taking behaviour such as binge drinking, illicit drug use, and risky sexual behaviour (Sussman & Arnett, 2014; Patton et al., 2016). However, within a New Zealand (NZ) context, from 2001 to 2012 there was a general decline in risk taking behaviours (Lewycka et al., 2018).

Mental Health and Well-being in Emerging Adult Populations

Statistics including EA populations support Arnett’s (2000, 2007) perception that these ages experience increased levels of stress as evidenced by declining well-being and mental health rates. For the purposes of this thesis I will define well-being as not only the absence of unease or mental disorders but also increased experiences of wellness (Arnett, 2000, 2007; McLeod & Wright, 2016) with an ability to return to equilibrium when challenges arise (Dodge et al., 2012). The Global Youth Well-being Index (GYWI; Goldin et al., 2014) measures youth aged 10-24 from 30 countries. Just 15% of youth surveyed reported upper-middle or high levels of well-being, while 85% reported lower-middle or lower well-being. Although the World Health Organisation (WHO) has no specific statistics on well-being or mental health in EAs, it states that for those aged 10-19 (adolescents) “[d]epression is the ninth leading cause of illness and disability” (WHO, 2005, 2018). Further, every year, 20% of adolescents report experiencing a mental health problem, most often anxiety or

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depression (WHO, 2005, 2017; Wesselhoef et al., 2013). These statistics emphasise that a large proportion of the world's youth and EA populations experience poor well-being.

The literature suggests that the onset of most mental disorders occurs before 25 (Altwaijri et al., 2020; Kessler et al., 2005; Patton et al., 2016). For example, 60-80% of adolescents from the US aged 9-21 are reported to meet the diagnostic criteria for psychiatric disorder (Copeland et al., 2011). A longitudinal study in Australia, which ranked first in the GYWI (Goldin et al., 2014), surveyed youth aged 15-29 and reported that 29% male and 54% female experienced mental disorders at least once during adolescence (Patton et al., 2014). Those who experienced mental disorder for a longer duration in adolescence had an increase chance of reporting mental disorders in adulthood. Although not all mental disorders persist into adulthood (Copeland et al., 2011; Patton et al., 2014), the increased distress experienced in these adolescent and EA years suggest there is a need for initiatives aimed at increasing adaptive coping and improving this population's well-being to reduce recurrence in adulthood (Copeland et al., 2011; Patton et al., 2014).

A New Zealand Context

In NZ, poor mental health and low well-being are prevalent, particularly in younger generations. The Ministry of Health (MOH, 2018) defines “youth” as those aged 12-24. Youth aged 15-24 report the highest levels of psychological distress compared to any other age group (MOH, 2018). In concordance with global statistics, longitudinal data from NZ samples also suggest mental disorders are prevalent in adolescent and EA populations (Fergusson et al., 2004, 2007; Fleming et al., 2020a,b; Moffitt et al., 2007).

Longitudinal data collected in Dunedin showed a marked increase in depression from 15-18 in both genders (Moffitt et al., 2007). However, as childhood anxiety disorders were already prevalent, the increase was non-significant during the transition from teenage years to

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emerging adulthood. At age 32, recurrent mental disorders made up most of the total cases reported, suggesting those who experienced a mental disorder in adolescence or emerging adulthood were likely to experience mental distress in adulthood (Moffitt et al., 2007). Additionally, longitudinal data collected in Christchurch reported 21.6% of participants experienced anxiety and 18.2% experienced depressive disorders between ages 21-25 (Fergusson et al., 2007). From ages 16-21, 35% of the sample met criteria for depressive disorders, with females reporting significantly higher rates than males. Further, between these ages, 27% reported recurrent depressive episodes. Those who reported poorer mental health from ages 16-21 also reported poorer mental health at ages 21-25. Additionally, there was an association between poorer educational and economic outcomes for those who reported an increased number of depressive episodes from ages 21-25. Cumulatively, these results suggest that within NZ the onset of mental disorders often occurs in late adolescence to early adulthood, impacting on both the individual and community. These studies only reported on those meeting diagnostic criteria, suggesting under-reporting for general poor well-being.

The Youth 2000 Study (Canning et al., 2017; Fleming et al., 2014, 2020a,b) is a comprehensive study that looks at health and survey data of secondary school students. Some results are stratified by age allowing insight into the well-being of the older portion of the sample, who fall into the EA age bracket of 17 or older. The study found that only 46.9% of students reported feeling very happy or satisfied. A further 44.3% reported having adequate emotional well-being while 7.6% reported feeling not very happy and 1.2% reported feeling not at all happy or satisfied (Clark et al., 2012).

Comparing survey results from 2007 to 2012, there was a significant decline in participants who reported good overall well-being along with a significant increase in reports of depressive symptoms, with participants experiencing a period of low mood and suicidal ideation (Fleming et al., 2014). However, when compared across age and gender these

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variables were not statistically significant, suggesting a more general decline in the above measures. Recent research on this population demonstrates that most youth have good well-being but the prevalence of good well-being has decreased from 76% in 2012 to 69% in 2019 (Fleming et al., 2020a,b). These statistics highlight the importance of providing resources to improve well-being.

It is evident that young people are in need of skills to add to their coping toolbox in order to deal effectively with life's challenges. Research is needed to add to the existing literature on potential tools for EAs that are both easily accessible and desirable. Mindfulness may be one way of improving well-being in this age bracket in the NZ population. Survey data from Peer and McAuslan (2016) found that EAs aged 18-29 with higher levels of mindfulness reported higher levels of self-focus and lower levels of instability, self-doubt, and feeling between adolescence and adulthood. These findings suggest the use of mindfulness may be particularly beneficial for EAs to help overcome the challenges associated with this life stage.

Defining Mindfulness

The phrases “being mindful” and “mindfulness” typically refer to a state of present awareness. However, the technical and academic definitions of these words are both more varied and perplexing than the colloquial meaning.

Before further unpacking the western or circular definition upon which this thesis is framed, the defining origins of mindfulness are briefly explored. Although not the focus of this thesis, it is important to understand the origins of mindfulness because it is now used in western cultures as a therapeutic practice.

Buddhist Definition and Origins of Mindfulness

Early understandings of mindfulness stem from the traditional Northern Indian Buddhist scriptures of the Vishuddimagga (Buddhaghosa, 1976) and Abhidhamma (Kiyota, 1978) that hold the theoretical underpinnings of Buddhist meditation and philosophy respectively. Originally passed through oral communication and eventually translated into modern languages, like any religious or spiritual practice, Buddhism is complex and varied between traditions. Throughout the scriptures, the Sanskrit word “sati” is often found. *Sati* translates to the idea of mindfulness in English (Harvey, 2012; Lynn et al., 2017) positioning mindfulness as a central element of Buddhism.

The Buddha (interpreted as “the enlightened one”) developed the eightfold path as a guide to reach enlightenment and facilitate the alleviation of suffering (Aich, 2013; Bodhi, 1994; Huxter, 2015; Kabat-Zinn, 2013; Maex, 2011). As the name suggests, it acts as a path or a journey one must take to experience enlightenment through practising each of the eight teachings one at a time. The elements of the eightfold path are categorised into triads: “Pana” (wisdom and discernment), “Sila” (morality and virtue) and “Shila and Samandhi” (morality or concentration or meditation respectively). Appendix A contains a brief description of the eightfold path developed from past research. The final triad (Shila and Samandhi) includes the teaching which translates to “Right Mind, Mindfulness or Mental Presence” where practitioners learn about both mindfulness and meditation. Mindfulness is described as a deepened understanding of what is occurring internally and externally for the practitioner, resulting in enhanced awareness (Aich, 2013; Bodhi, 1994; Huxter, 2015; Kabat-Zinn, 2013; Maex, 2011). While unpacking the intersection of Buddhism and mindfulness is beyond the scope of this thesis, it is fundamental to contextualise the origins that contribute to modern understandings of this phenomenon.

Western / Secular Definition

Kabat-Zinn (1990) introduced the idea of mindfulness to the west as a means of reducing stress for those experiencing chronic pain (Kabat-Zinn, 1982; Kabat-Zinn et al., 1985, 1987). Kabat-Zinn's development of the Mindfulness-Based Stress Reduction programme (MBSR, explained in more depth in Mindfulness-Based Practices) is commonly used in research and practice (Grossman et al., 2004). Kabat-Zinn defines mindfulness as “paying attention, in a particular way: on purpose, in the present moment, and non-judgmentally” (Kabat-Zinn, 1994, p.4). This preliminary secular definition highlights the fundamental elements incorporated into many western mindfulness practices. Notably, this definition portrays mindfulness as decontextualised and secular, mimicking broader western patterns of adopting other cultural practices.

Since Kabat-Zinn's (1990, 1994) original westernised conceptualisations of mindfulness, two key publications have expanded on this definition. Bishop et al. (2004) proposed an operational definition of mindfulness that consists of two core components: self-regulation of attention and orientation to experiences. Shapiro et al. (2006) proposed three mechanisms of mindfulness: intention, attitude, and awareness. Both of these definitions are commonly referenced within the mindfulness literature, and while they are similar, they provide a slightly different lens on the construct of mindfulness. These definitions complement each other and are accorded equal stature.

Operational definition: Bishop et al. (2004)

The operational definition developed by Bishop et al. (2004) describes two core components that are common across mindfulness practices: self-regulation of attention and orientation to experiences. These are often referred to within the literature as “focused attention” and “open monitoring” respectively (Bishop et al., 2004; Kabat-Zinn, 1990; Lau et

al., 2006; Shapiro et al., 2006), and are not mutually exclusive, often practised within a singular mindfulness practice.

Self-regulation of attention: Focused attention

“Attention” can be explained as conscious awareness, and self-regulation is the ability to have a sense of control over oneself and one’s conscious awareness. In a mindfulness context, this manifests as focused or sustained attention on an immediate experience, or a particular stimulus or sensation (Bishop et al., 2004; Kabat-Zinn, 1990; Shapiro et al., 2006). This stimulus is often referred to as the “anchor point” (Bishop et al., 2004). While maintaining this attention, a state of alertness is practiced where there is awareness of moment to moment experiences. This focused attention increases awareness of conscious thought processes which may include detection of cognitive (such as thoughts or emotions) or somatic (such as physical touch) sensations. New practitioners often practise focused attention, through attempting to hold sustained attention on a particular object, sensation, phrase (such as a mantra) or image (Bishop et al., 2004; Kabat-Zinn, 1990; Lau et al., 2006; Shapiro et al., 2006). Practising mindfulness recognises this natural shifting of attention as it contrasts with the intention to be focused on the present moment or anchor point (Bishop et al., 2004; Kabat-Zinn, 1990; Shapiro et al., 2006). To bring awareness back to the present moment, self-regulation must be practiced. In mindfulness, this is achieved through recognising the naturally wandering mind and, rather than analysing, ruminating or elaborating on this thought, it is simply acknowledged, and attention shifted back to the anchoring point. It is important to note that not focusing on the thought does not mean the thought or sensation is suppressed or held on to, but rather the thought is acknowledged and let go. Doing this increases awareness of the present moment. Bishop et al. (2004) called this process of recognising and letting go “switching” and describe it as a skill that is developed with practice.

Orientation to experiences: Open monitoring

“Orientation to experience” describes a state of investigative awareness, adopting a relaxed sense of openness and curiosity to all cognitive and somatic stimuli that arise in the mind. Through this orientation of observing the mind as a whole, when a thought appears one shifts attention back to the current experience (Bishop et al., 2004; Lau et al., 2006). The intention of the practice is not to induce or change a current mental state, rather to notice, acknowledge and accept the current experience. The practice of mindfulness is thought to shift perception by increasing tolerance to negative or unpleasant experiences or cognitions, so that over time they are reframed and perceived as less negative. Within the literature there are many names for this process such as reappraisal (Bishop et al., 2004), re-perceiving (Shapiro et al., 2006, 2009), and it is considered a metacognitive process (Shapiro et al., 2006). Due to this process, there may be a decreased need to adopt cognitive and behavioural techniques (Bishop et al., 2004). These are often recommended by western psychologists, evidenced by the popularity of cognitive behavioural therapy which, as its name suggests, combines cognitive and behavioural techniques to treat a variety of disorders (Hofmann et al., 2012).

Mechanisms of Mindfulness: Shapiro et al. (2006)

Intention, attitude, and attention are the three core components of the “mechanisms of mindfulness” (Shapiro et al., 2006).

“Intention” describes noticing the reason for the mindfulness practice: the “goal”. This critical component to mindfulness practice is overlooked in some western definitions of mindfulness. (Bishop et al., 2004). Kabat-Zinn's (1994) definition could be interpreted to include intention through using the words “on purpose”, however, Shapiro et al.'s (2006) definition encompasses more than acting deliberately. With increasing meditation practice, intentions can shift as self-awareness increases (Shapiro, 1992). For example, Shapiro found

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that with increased meditation practice, intentions when practising meditation developed along a continuum. This continuum encompassed intentions relating to self-reflection, from regulation to exploration, and finally to liberation. Interestingly, with increased practice, mindfulness practitioners were able to shift along this continuum at will. Shapiro's work highlights the importance of the inclusion of intention in both the definition of mindfulness and within mindfulness practice.

“Attitude” is thought to encompass wholehearted openness, compassion and a conscious commitment to both the self and the practice (Shapiro et al., 2006). This attitude creates a mindset where the practitioner gently explores their attention with a kind curiosity; one that is both welcoming and accepting of both pleasant and unpleasant experiences. Through the conscious practise of this mindful attitude, one is more able to bring an open and accepting mindset into daily life (Shapiro et al., 2006). The attitude mechanism of Shapiro et al. aligns closely with Bishop and colleague's orientation to experience.

The “attention” mechanism of Shapiro et al. (2006) overlaps with the component of Bishop et al.'s (2004) self-regulation of attention explained above.

State vs Trait Mindfulness

Within western mindfulness literature, some researchers partition mindfulness into “state” and “trait” mindfulness. State mindfulness can occur during the practise of meditation and at any point when the individual's attention is openly aware of the present moment and is attempting to cultivate the key components of mindfulness (Bamber & Schneider, 2016; Bishop et al., 2004). Trait mindfulness is the level of mindfulness someone experiences throughout their day when they are not actively attempting to cultivate a mindful state (Lau et al., 2006). This level is thought to differ between individuals and is similar to personality traits in that they remain relatively consistent over time (Hanley, 2016; Rau & Williams,

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2016). However, the literature also suggests that the level of trait mindfulness can increase through consistently incorporating a mindfulness practice (Kiken et al., 2015). Further, adults in the community with a higher level of dispositional mindfulness reported, on average, decreased levels of psychological distress (Kiken et al., 2015). However, the relationship between state and trait mindfulness is yet to be fully explored and understood, and the literature on the nature and extent of this relationship is inconclusive (Bamber & Schneider, 2016; Kiken et al., 2015). Additionally, the current literature does not consistently differentiate between state and trait mindfulness, adding to the murky complexity of this distinction. For the purposes of this thesis, unless otherwise specified, the term “mindfulness” will encompass the phenomenon as a whole.

Western Mindfulness Practices

There are many practices and interventions that fall under the umbrella of mindfulness. While a full review of the vast and growing types of mindfulness practice is beyond the scope of this thesis, they can be broken into three main categories: meditation, mindfulness activities, and mindfulness-based practices (MBPs), also known within the literature as mindfulness-based interventions.

“Meditation” generally refers to the formal practice of mindfulness (Bishop et al., 2004; Kabat-Zinn, 1990; Shapiro et al., 2006) where the core elements of mindfulness are consciously and deliberately practised. Meditations can be guided by a teacher, audio recording, or app, or unguided where a noise such as a gong or a bell chimes periodically to refocus attention, or the practice may be carried out in complete silence. Practitioners apply non-attachment and non-judgement through a process of pausing, noticing automatic thoughts, then bringing the attention back to the present moment (Lau et al., 2006).

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In general, meditation focuses on the core features of attentional control, which, with practice, cultivates emotional and cognitive flexibility (Malinowski, 2013). Cognitive flexibility is the ability to adapt thoughts and behaviours in response to environmental changes (Malinowski, 2013). For example, a simple breath awareness meditation would often start by cultivating focused attention through either counting or merely noticing one's breath. When one's attention wanders, with an attitude of openness and acceptance, one deliberately shifts it back to the breath. This deliberate shift in attention is central for focused attention. A focus on the breath is common in meditation practices which increases awareness of experiences (Kiken et al., 2015) while also resulting in rhythmic breathing that helps regulate one's stress response (Napoli et al., 2005). Often, one then moves to open monitoring where, rather than focusing on one object, such as your breath, you are open to any sensation, thought or emotion that may come into your awareness. While holding an attitude of acceptance and recognising the stimuli, you then let it pass from your consciousness. In contrast to focused attention, you examine the object that is holding your awareness with a gentle curiosity until the object eventually dissolves from your attention. "Mindfulness activities" can also incorporate focused attention and open monitoring (Bernay et al., 2016). This can be any activity where one applies the values and practices of mindfulness to any given activity. Examples of these include yoga, mindful walking, art, gardening, or exercise.

Mindfulness-Based Practices (MBPs)

Several psychological interventions have incorporated the practice of mindfulness into their programmes. Below is a summary of the key interventions used throughout the literature. These MBPs are considered part of "the third wave" therapies (Hayes et al., 2004).

Mindfulness-Based Stress Reduction (MBSR)

Kabat-Zinn (1990) was the first to bring the concept of mindfulness to the west.

Kabat-Zinn developed Mindfulness-Based Stress Reduction (MBSR), an eight-week programme that aims to teach mindfulness to individuals to decrease perceived stress.

The programme includes several experiential learning activities promoting the fundamentals of mindfulness, such as shifting awareness to the present moment, and selective and non-judgemental attention (Raj & Kumar, 2019). It contains many varying types of meditation, including yoga, eating, walking and body awareness meditations. The programme focuses on meditations that promote focused attention, such as breath awareness and selective attention on the present moment. Open monitoring is also a core theme throughout the programme, which encourages participants to observe, acknowledge and accept thoughts or feelings that emerge at any given moment. MBSR courses usually run over eight weeks with 2.5 hour weekly sessions, and an additional full day.

MBSR programmes and their several variations (often known as moderated MBSR) are still frequently used globally. Research suggests these programmes are considered beneficial to many individuals, particularly at reducing stress (Fjorback et al., 2011; Goldin & Gross, 2010; Irving et al., 2009; Kabat-Zinn, 2003; Praissman, 2008). Initially developed for the treatment of chronic pain, a review of randomised control trials (RCT) noted a small decrease in reported pain. However, more statistical support was found for decreases in depressive symptoms and improvement in the quality of life measures when compared to controls (Chiesa & Serretti, 2009). A potential criticism or observation of MBSR research is that often the participants enter the programme knowing it is a stress reduction programme. Thus, the potential exists for some of the desired effects to be due in part to a self-fulfilling prophecy or placebo type effect (Kabat-Zinn, 1982, 1990).

Mindfulness-Based Cognitive Therapy (MBCT)

MBCT combines elements of MBSR with cognitive behavioural therapy (CBT; Segal et al., 2002). Initially created for the treatment of depressive episodes (Raj & Kumar, 2019; Segal et al., 2002), MBSR applies core principles of mindfulness such as non-attachment and non-reactivity to shifting how the individual understands cognitive processes, an element of CBT. This fusion of approaches emphasises developing focused attention and thereby (with practice) intends to decrease experiences of negative rumination or automatic thoughts (Cladder-Micus et al., 2019; Kaviani et al., 2012). MBCT has also shown to be effective in successful in treating conditions other than depression, such as pain and anxiety (Grossman et al., 2004).

Other programmes that incorporate mindfulness

Other programs present in the literature which incorporate mindfulness are mindfulness-based relapse prevention (Witkiewitz et al., 2005), dialectic behavioural therapy (DBT; Linehan, 2001), and acceptance and commitment therapy (ACT; Hayes et al., 1999). In these therapies, mindfulness is primarily used to encourage client awareness of behaviours, enabling them to modify those behaviours in specific clinical conditions (Lau et al., 2006; Keng et al., 2011). Finally, some studies also report non-standardised MBPs which often appear to have similar elements to standardised MBPs, however, they are adapted to suit particular studies, resources or interests.

As the primary interest of the current study is mindfulness, all MBPs will be referred to as MBPs rather than the specific intervention.

Mindfulness Literature to Date: Adult

There is substantial research focusing on using mindfulness-based practices (MBPs) to generate positive outcomes in general adult populations. In the current literature, most of the participants are “meditative-naïve” individuals who participate in an MBP which collects pretest and posttest data (Eberth & Sedlmeier, 2012; Eby et al., 2019; Khoury et al., 2013a, 2015). MBPs are effective in improving feelings of everyday stress and self-reported quality of life (Khoury et al., 2015), as well as enhancing well-being (Spijkerman et al., 2016) and treating negative psychotic symptoms (Khoury et al., 2013b). Longitudinal follow up data is rarely collected and thus there is less evidence for the long-term benefit of MBPs (Bamber & Schneider, 2016; Grossman et al., 2004; Khoury et al., 2015). Due to the limited qualitative data available to date, most of the literature reviewed in this thesis consists of quantitative studies which investigate outcomes of MBPs. Following this, the numerous common critiques and limitations that exist within the current literature are unpacked.

Quantitative research suggests that mindfulness is beneficial for the mental state of adults with medical conditions. A body of literature, including randomised control trials (RCTs; Abbott et al., 2014; Bohlmeijer et al., 2010) and less rigorous quantitative study designs (Carlson & Garland, 2005; Greeson & Chin, 2018; Loucks et al., 2015; Scott-Sheldon et al., 2019), demonstrate that while practising mindfulness may not improve physical symptoms, evidence suggests that mindfulness can elevate patient well-being. In quantitative literature, RCTs employ robust methods, minimising potential bias through utilising a control group, and randomisation. Conversely, other quantitative study designs (non-RCTs), often lack randomisation or a control group, subjecting the study to critiques of validity and bias (Abbott et al., 2014; Bohlmeijer et al., 2010). Despite this, it is important to include these studies to show the wide reach of mindfulness interventions.

While many studies employ quantitative methods with medical populations, the use of mix-methods or qualitative designs can help to gain a more comprehensive understanding of the experiences of MBP participants. An RCT design of an MBP for those with Parkinson's Disease (PD) reported small but not significant improvements in well-being both immediately after the intervention and at six monthly follow up (Advocat et al., 2016). However, participants sustained significant improvements in completing activities of daily living at follow up. A recent thematic analysis of interview data of this sample suggests mindfulness created lasting improvements, contrary to the statistical findings (Advocat et al., 2019). Specifically, themes of increased perceived control, acceptance of PD and increased autonomy to manage negative emotions related to PD including increased ability to cope and reduced negative thoughts. Similar improvements in health and well-being was noted in other qualitative interviews of individuals with PD (Fitzpatrick et al., 2010). Despite these positive findings, participants reported not adopting formal mindfulness practice but rather integrating mindfulness concepts into their life following MBP completion. These findings highlight the importance of qualitative methodologies to capture more in-depth understandings of experiential phenomenon such as mindfulness.

The research appears to support mindfulness for adults experiencing psychological disorders but provides mixed results for others. Anxiety and depression frequently occur comorbidly, as reflected in mindfulness literature. Several reviews of RCTs have concluded that there is evidence of improvement in depressive symptoms, for example, decreased rumination after engaging in MBPs (Goldberg et al., 2018), including those delivered online (Spijkerman et al., 2016). This has also been found in reviews that include non-RCT studies (Chambers et al., 2015; Hofmann et al., 2010; Khoury et al., 2013b, 2015). In addition, a review of RCTs found MBPs to be more effective than non-mindfulness based interventions

for the treatment of recurrent depression (Galante et al., 2013) and anxiety (Spijkerman et al., 2016). This was also reported for in-person MBPs when including non-RCT studies in reviews (Hofmann et al., 2010; Khoury et al., 2013b, 2015). These studies all support the use of mindfulness to relieve symptoms of anxiety and depression.

Literature suggests mindfulness is beneficial for those with psychological disorders other than anxiety and depression. Both RCTs (Goldberg et al., 2018) and non-RCTs (Russell et al., 2016) suggest MBPs improve symptoms for those with substance use disorders. For those with obsessive-compulsive disorder, a non-RCT of an MBPs has also been shown to improve symptoms (Hale et al., 2013). Further, review of RCTs suggests an improvement of chronic pain symptoms (Goldberg et al., 2018). Finally, some reviews of RCT designs support mindfulness as a suitable intervention for psychiatric symptoms (Goldberg et al., 2018), including online MBPs (Spijkerman et al., 2016). However, as explored in *Potential Adverse Effects of Mindfulness* other scholars have cautioned against this. While the majority of the research reviewed is subject to the frequent critiques explored in depth in *Current State of Mindfulness Literature*, there appears to be supporting evidence for the use of MBPs for people experiencing a range of psychological distress in adult populations.

Mindfulness is suggested to improve well-being within non-clinical adult populations. Several reviews of both RCT (Chiesa & Serretti, 2009; Spijkerman et al., 2016) and non-RCTs (Eberth & Sedlmeier, 2012; Grossman et al., 2004; Khoury et al., 2013b, 2015; Ludwig & Kabat-Zinn, 2008) have suggested that mindfulness is beneficial to the general population in improving well-being and managing everyday challenges and stress. Specifically, within non-RCT designs, MBPs have also been found to be beneficial in improving sleep patterns (Yook et al., 2008), regulation of emotions (Ludwig & Kabat-Zinn, 2008), general well-being (Eberth & Sedlmeier, 2012; Friedman, 2017), quality of life (Khoury et al., 2015), reducing

burnout (Friedman; Irving et al., 2009) and increasing compassion for self and others (Kabat-Zinn, 1990). However, some RCT studies suggest mindfulness does not improve stress more than progressive muscle relaxation (Agee et al., 2009; McCallie et al., 2006), another stress reduction strategy. While these authors suggested a longer duration to achieve a desired result, a recent meta-regression of RCTs concluded the “dose” of MBPs influences psychological outcome (Strohmaier, 2020). This narrative of a need for a higher “dose” of mindfulness is often mentioned (Bamber & Schneider, 2016; Britton, 2019; Scott-Sheldon et al., 2019). In all, these studies contribute to the overall narrative that mindfulness practices can benefit the general population while also emphasising that more research is required to understand the underlying factors that result in positive outcomes.

Several reviews and meta-analyses support the effectiveness of MBPs with general populations. These reviews include both RCT and non-RCT study designs and all suggest that mindfulness has been beneficial, holding promise for the use of mindfulness to improve well-being in general populations (Bamber & Schneider, 2016; Chiesa & Serretti, 2009; Eberth & Sedlmeier, 2012; Grossman et al., 2004). A narrative synthesis of the literature looked at 57 quantitative, intervention-based studies of stress and anxiety in college populations (Bamber & Schneider, 2016). The large majority of the studies reviewed reported significant improvements in mindfulness and significant decreases in anxiety and stress scores. While a variety of MBPs and study designs were reviewed, which may impact on the findings, it supports the use of MBPs in university populations (Bamber & Schneider, 2016). Further, the ages of participants were not reported, thus making it difficult to generalise to EA populations. Notable gaps in the literature included the limited understanding of who mindfulness is most effective for and the relationship between state and trait, also known as dispositional, mindfulness. While the narrative synthesis highlights the potential benefits of

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practicing mindfulness to improve well-being it also emphasises many essential factors that are not yet understood.

There have been clear but limited qualitative findings specifically regarding mindfulness meditations. Schwind et al. (2016) ran five minute guided mindfulness practices, delivered at the beginning and end of undergraduate and postgraduate classes for eight weeks. The practices were based on both “loving-kindness” and mindfulness meditations. At the completion of the course, qualitative content analysis showed participants experienced increased feelings of calmness and groundedness, and decreased feelings of anxiety. It is difficult to make generalisations as the participant ages of these populations were not specified by the author, however, these qualitative findings highlight the potential benefits of short mindfulness practices (Schwind et al., 2016). Furthermore, this is one of the only studies in the literature that focuses purely on mindfulness meditation practice rather than MBPs and that also incorporate non-mindfulness aspects. The limited literature on mindfulness as a stand-alone phenomenon emphasises the need for more research, particularly given that it is such a highly researched area.

There is also limited research within adult populations in NZ. To date, one mix-method study using waitlist controls has utilised MBPs for those with chronic illnesses (Mapel & Simpson, 2011). Quantitative results suggested significant improvements in psychological and physical well-being both at post-intervention and six-months follow up. Thematic analysis of interviews emphasised that participants reported an improvement in physical, psychological, and emotional health and that participants had altered their lifestyle adopting a variety of healthy behaviours (Mapel & Simpson, 2011). While these findings support the use of MBPs in NZ adults with chronic illnesses, the majority of these adults

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identified as NZ European ethnicity. As NZ is a multi-cultural society, there is need for more research to reflect its diverse population.

With regard to studies using a more general adult NZ population, there is only one relatively recent published study. Granberg (2018) looked at the feasibility of app-based mindfulness to improve stress and well-being in students, with most being older than the EA age range. This RCT study found no significant changes in reported stress or mood within the seven-day intervention compared to the baseline or control group. This highlights the need for further investigation into longer-term and alternative ways to teach and deliver mindfulness, particularly within an NZ context. Further, despite this finding, given that mindfulness has been proven to be beneficial in many populations more research is warranted to understand if it is viable to mobilise a mindfulness programme within NZ.

Potential Adverse Effects of Mindfulness

Despite the ample literature supporting the use of mindfulness, some research exists on the potential adverse effects. Britton (2019) recently emphasised that within the current literature, mindfulness is often considered a phenomenon with many benefits, however few reports specifically focus on or report any adverse effects (Britton, 2019; Coronado-Montoya et al., 2016; Dimidjian & Segal, 2015; Morone et al., 2017; Wong et al., 2018). Some authors have suggested this may be due to potential publication bias of underreporting adverse experiences (Britton, 2019; Dimidjian & Segal, 2015). For example, a review of RCTs of MBPs reported that most negative findings had been subject to reporting bias (Coronado-Montoya et al., 2016). This was primarily done through selective reporting of positive findings or through conducting further sub-group analysis. A more recent review of MBPs using RCT design reported that approximately 75% of studies did not provide information on

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monitoring or measuring adverse effects (Wong et al., 2018). This underreporting of adverse experiences highlights a critical issue within the literature that has potential implications for practitioners, clinicians and teachers. By demoting adverse experiences, it frames mindfulness as broadly beneficial when, in fact, it could potentially cause harm for some.

The literature remains inconclusive as to whether mindfulness may, in fact, be harmful to those with current or historic psychotic symptoms. A review of non-RCT studies suggests mindfulness can have potentially negative effects for individuals experiencing psychiatric symptoms such as psychosis, grandiosity or euphoria (Hofmann et al., 2010). Birnbaum and Birnbaum's (2004) qualitative analysis recommended against guided meditation practices for those experiencing current psychotic symptoms, including individuals with dissociative and borderline personality disorders. This is due to the potentially limited ability of these individuals to interpret reality as neurotypical people do (Birnbaum & Birnbaum, 2004). However, a review by Khoury et al. (2013b) concluded that mindfulness may have some benefits but was more effective in treating the negative symptoms of psychosis than positive symptoms. Finally, Goldberg et al. (2018) conducted a meta-analysis of RCTs on the use of MBPs for people with psychiatric disorders. They found that directly after treatment and at follow up, mindfulness improved patient outcomes more than control or minimal treatment conditions, but not more than other evidence-based treatments (Goldberg et al., 2018). These mixed results suggest caution is necessary for clinicians when considering practising mindfulness on patients with psychiatric symptoms. This literature also highlights the importance of producing research that reflects the experience of mindfulness practitioners, whether positive or negative, and is important when developing an accurate and rounded picture of the phenomenon of mindfulness.

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There is little evidence to show that the practice of mindfulness has any specific negative effect on the general population; however, applying a broader definition which incorporates meditation yields some adverse impacts. Interviews of males who meditate in the community, many aligning with Buddhist traditions, reported negative experiences (Lomas et al., 2015). Accounts included exacerbation of existing mental health challenges such as anxiety and depression, and challenges managing thoughts and emotions both during and after practice. Participants attributed these experiences to a lack of knowledge and guidance of meditation techniques. Western Buddhist practitioners and teachers from a variety of traditions were interviewed in a mixed methods study investigating the contemplative experiences of meditation practitioners (Lindahl, 2017). While accounts varied, most challenges and negative experiences occurred after the participants had practiced for many years. Most reported these negative experiences had resulted in moderate to severe impairment and believed these experiences had impacted their daily life (Lindahl, 2017). Both Lindahl and Lomas's studies differ from other studies reviewed as Buddhists adopt particular values and practices, mindfulness meditation being just one of them. While the westernised view of mindfulness overlaps with Buddhism, as with MBPs there are broader factors in play. These studies highlight the importance of using qualitative methodologies to gain a richer understanding of the experiences of mindfulness practitioners and the importance of collecting data from experienced practitioners. Further, this research emphasises the importance of exploring the potential adverse effects of broad mindfulness practices in research to create a rounded understanding of mindfulness as a phenomenon.

Mindfulness with Child Populations

Due to the limited research in EA populations, it is necessary to review child literature as well as adults to create a complete picture of mindfulness to date. Some studies that suggest mindfulness may be beneficial for children. For example, a mixed-methods pilot study showed that children and adolescents aged 10-13 years reported significantly improved behavioural and emotional affect, and a decrease in depressive symptoms (Joyce et al., 2010). This significant result was largely due to improvements in children who initially reported poorer behavioural and emotional affect prior to beginning the MBP, which suggests promising results for those children who may be experiencing psychological distress. Further, qualitative interviews with teachers found mixed results in reporting children's enjoyment of the programme, although, interestingly, the children themselves were not asked (Joyce et al., 2010). This raised a critique by Newton and Ponting (2012) that there is a need to include young people's voices directly in order to comprehensively understand their experience of well-being. This critique relates to the mindfulness literature where children's voices are predominantly absent. This study highlights the importance of collecting data in a variety of forms to gain a fuller understanding of mindfulness.

There is, however, some research of mindfulness in NZ children. To date, two non-RCT studies employing a culturally adapted MBP have looked at the efficacy of mindfulness in NZ child populations. A significant increase in well-being scores pre-post intervention of children from three NZ schools implies mindfulness may be beneficial (Bernay et al., 2016). However, these levels returned to baseline at three-month follow-up, suggesting consistent practice may be necessary for lasting improvements. A smaller study comparing this MBP to an emotional literacy programme for 9-11 year olds at a single school found that both groups reported improvements in well-being scores (Devcich et al., 2017). However, only the

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mindfulness group reported improved mindfulness scores and unfortunately follow up data was not collected for the emotional literacy programme. While these studies show promising results for culturally appropriate MBPs in NZ, more rigorous studies need to be conducted before an accurate understanding of this and other MBPs for children are widely implemented.

While there is some evidence to support mindfulness benefiting children, there are some methodological shortcomings within the existing literature. As MBPs are primarily carried out in classroom settings (Bernay et al., 2016; Devcich et al., 2017; Greenberg & Harris, 2012; Joyce et al., 2010), there is a limited opportunity for randomisation, which is required for RCT designs (Devcich et al., 2017; Greenberg & Harris, 2012). Further, many MBPs appear to be teacher-lead, opening research up to potential implicit bias due to pre-established teacher-child dynamics (Howard et al., 1999). Despite some studies suggesting potential benefits, two reviews have both cautioned the use of mindfulness to improve well-being in children and youth due to the methodological shortcomings of the limited number of quality studies (Greenberg & Harris, 2012; Maynard et al., 2017). Thus, while there is some evidence that mindfulness may improve some aspects of children's lives, the research is so limited it is difficult to draw any meaningful conclusions.

Mindfulness Literature Using Emerging Adult Populations

As previously identified, emergence into adulthood can be a challenging time. We now turn to the literature addressing this target population, those aged 18-25 years. Research indicates that this group is rarely targeted in the literature, which is both problematic and concerning, given the worrying mental health rates in this population (Fleming et al., 2014, 2020a,b; Ministry of Health, 2018). Unfortunately, within some studies age demographics

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were not always fully stated. Therefore, for the purposes of this section, studies are included if the mean age of participants fell within 18-25 years, or the population was undergraduate students.

Emerging Adults: University Students

In the mindfulness literature, university students are often used as a sample. This is in part because university is identified as a time of increased stress (Bamber & Schneider, 2016; dos Santos et al., 2016; Kerrigan et al., 2017; O'Driscoll et al., 2019), but also possibly due to convenience sampling. Most research on mindfulness in students is with those studying in medical fields, which is not necessarily representative of the wider student or general young adult population (Bamber & Schneider, 2016). Additionally, some scholars warn against generalising results from all student to non-student samples (Hanel & Vione, 2016). Therefore, the following student sample will be reviewed with caution.

Students undertaking studies in medical and surrounding fields are generally the population targeted for studies including MBPs. This may be because the relationship between mindfulness and stress is often measured and those undertaking studies in medical fields are subject to increased levels of stress compared to other less competitive degrees (Jain et al., 2007; Malpass et al., 2019; O'Driscoll et al., 2019; Shapiro et al., 1998). An RCT of 37 medical and premedical students completed a brief MBP (Shapiro et al., 1998). The researchers deliberately timed post-intervention data collection during an exam period to ensure results accurately reflected student outcomes while under stress. Participants reported significant improvements in many areas of well-being including increased empathy and spiritual experiences. Unfortunately, the age of participants was not reported, resulting in difficulty generalising the findings to a particular age range. However, this is the only study

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that has deliberately timed the program for the post-test results to be collected at a time of high stress and provides support for mindfulness being beneficial for those experiencing times of high stress such as examination periods for university students, even if it has only been practised for a relatively short period of time. This suggests it may be a useful tool for EAs to utilise when anticipating times of stress.

As emerging adulthood is identified as a time of stress, research comparing interventions is warranted to understand effective ways to improve well-being in this population. One RCT recruited students in medical or associated degrees, with a mean age of 25, to complete a modified MBSR or progressive muscle relaxation (PMR; Jacobson, 1938; Jain et al., 2007). Both mindfulness and PMR groups reported significantly increased positive affect and decreased distress compared to the control group (Jain et al., 2007). Only those in the mindfulness group reported significantly increased attention and reduced rumination compared to both the PMR and control groups. Although this study used a broad age range, many participants were within the population of interest. This indicates that mindfulness and its associated MBPs may be more beneficial than PMR for young adults. Unfortunately, there was no follow-up data collected for this sample; therefore, the long term differences remain unknown. This appears to be the only study that compares MBSR and PMR and so study replication is required, ideally with follow up data collected, to consolidate the theory that MBSR is a superior intervention to PMR.

Following the completion of a non-standardised MBP, qualitative interviews with six medical students aged 20-24 were analysed using a “framework approach” (Ritchie & Spencer, 2002) to analysis (Malpass et al., 2019). After completing a non-standardised MBP, topics such as increased well-being, resilience to stress, ability to communicate, empathy, and self-awareness were commonly expressed throughout the analysis. Participants also expressed

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their motivation for attending the MBP was to overcome stress and challenges. This small study highlights common experiences and understandings of the MBP suggesting mindfulness can be perceived to be beneficial for those experiencing stress.

Another equally recent study by O'Driscoll et al. (2019) used thematic analysis to establish the core themes of focus groups to explore the possibility of integrating mindfulness into the curriculum of pharmaceutical degrees, a degree identified as highly stressful. Students were aged 18-‘24+’ with most students aged 18-23. A central theme was the possibility that students could use mindfulness as a coping tool. Students who incorporated mindfulness into their studies could experience benefits such as managing stress and negative emotions such as fear. Additionally, students emphasised the value of experiential learning as they felt it allowed for more in-depth understanding. At its core, mindfulness is an experience, and as such fits these students’ learning preferences. This is an important consideration when planning to implement a programme as it needs to be both desirable and appealing to the intended audience. However, despite students acknowledging that they benefited from mindfulness, there was an absence of students reporting that they incorporated mindfulness into their current lifestyle after completion of MBP. Although the core themes suggest integration of a mindful practice in a university context, the researchers focused on mindfulness in the context of studying rather than the practice of mindfulness as a whole (O'Driscoll et al., 2019). Further, there is a case for opening a discussion of student perceptions of how mindfulness could help outside the university context, either in their personal life while studying or after completion of their degree, and what the experience would be for individuals to practice outside of their university setting.

It is interesting that both Malpass et al. (2019) and O'Driscoll's et al.,s (2019) studies highlighted a shared perception that mindfulness can be mobilised as a coping mechanism.

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One possible reason for these findings is that mindfulness is commonly framed within a western understanding as a way to reduce negative affect such as stress (Kabat-Zinn, 1990), and is something that is often promoted within psychotherapeutic frameworks (Hayes et al., 1999; Linehan, 2001; Segal et al., 2002). While this appears to be a shared finding among these two student samples, the generalisability of data collected from medical student samples is limited and more research is needed to understand if this is a common motivation for why the general population practices mindfulness.

Stress is a prominent issue within a general EA student population, and it is essential to have skills that build and maintain well-being and resilience to stressful situations. Galante et al. (2018) conducted an RCT with students aged 18 years or older. Following a non-standardised MBP, students reported significantly increased resilience to stress. On average, those who completed the MBP reported lower levels of distress compared to controls. However, the notably high non-completion and non-response rate in the mindfulness group of 37% was not investigated, indicating these results should be interpreted with caution. This further highlights the need for more rounded research including adverse effects and understanding the human experiences of practicing mindfulness (Anderson, 2016; Crane & Williams, 2010; Hughes et al., 2013; Wood, 2009; Xia et al., 2019). Galante's (2018) study provides statistical evidence supporting the use of mindfulness and highlights the importance of capturing the essence of human experience, something that is often absent in quantitative research.

The relationship of dispositional mindfulness and improved mental health are promising for the EA population. Adults with higher levels of dispositional mindfulness generally have decreased levels of psychopathological symptoms, increased cognitive processing and less rumination, suggesting overall dispositional mindfulness contributes to

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improved well-being (Tomlinson et al., 2018), suggesting it could be beneficial for an EA population. A non-intervention survey study using a sample of undergraduate psychology students, with a mean age of 19 (range not provided) measured dispositional mindfulness (Coffey & Hartman, 2008). Those with higher levels of dispositional mindfulness also reported lower levels of psychological distress and higher levels of attention, awareness and non-attachment. This positive correlation suggests that through increasing these components that are deliberately cultivated in mindfulness practices, one's dispositional level of mindfulness may also increase. Further, these relationships were mediated by emotion regulation, non-attachment and rumination, suggesting these variables contribute to one's level of dispositional mindfulness.

While there is some literature to support the use of MBPs, there is limited research on the impact of mindfulness on students who practice over a longer period of time. Research with university students also showed that more frequent mindfulness practice was associated with higher levels of state and dispositional mindfulness. A large RCT was conducted studying university psychology students with a mean age of 21 (age range was not reported) who underwent an eight-minute audio-recorded meditation or listened to a tape on education (Bravo et al., 2018). After the meditation, a significant increase in levels of both trait and state mindfulness were reported in those students with prior mindfulness experiences compared to those who were meditation naïve. That is, the more frequently mindfulness is practised, the higher the levels of reported state and dispositional mindfulness. This finding highlights the importance of conducting research on those who have practised mindfulness for longer periods of time rather than directly after completing an MBP. Research has shown this to be the only study in a young adult population to compare mindfulness experienced and naïve

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individuals. This highlights the need for more research on students with an extended mindfulness practice.

Only one study has applied mixed methodology to analyse MBPs within an EA student population. Mixed methods studies allow researchers to gain a deeper insight into the experiences of participants while still collecting statistical data between variables. The RCT study was of first year students aged 18-19 (Dvořáková et al., 2017). Quantitative findings suggested statistically significant improvements in life satisfaction and lower levels of depression and anxiety compared to control participants. However other measures of mindfulness and well-being such as self-compassion and social connectedness scores were not statistically different to controls. Qualitative interviews were conducted on a sample of participants at MBP completion (Mahfouz et al., 2018). The authors found that participants described decreased stress and increased coping skills. Specifically, participants reported improvements in organisation and time management, improved emotional awareness and self-compassion, and commitment to a healthy lifestyle including maintaining boundaries, doing activities to reduce anxiety, and making conscious decisions around food choices. These results may be more generalisable to other university students as recruitment took place across the university, not targeting people from specific degrees. These studies provide support for the idea that mindfulness may be a beneficial tool for EA students in a university context, particularly for reducing stress, enhancing well-being and building resilience. However, as no follow up data was collected on these samples, it is unknown if the participants incorporated mindfulness into their life after completion of the MBP, leaving a gap in the literature of the experiences and effects of a longer term mindfulness practice.

There have been several qualitative studies that have looked at varying aspects of mindfulness in student populations which have allowed for a deeper understanding of how

mindfulness can be helpful to students. One of the first studies to qualitatively enquire into student experiences of mindfulness, particularly in an academic setting, was that of Kerrigan et al. (2017). Ten students from varying degrees were interviewed before and after completion of an MBSR course. Participant ages were 18–29 years, with most participants having the mean age of 20 which falls within the EA demographic. Thematic and content analysis indicated students had high levels of stress, which they generally attributed to university workload. At the completion of the mindfulness course, participants reported increased awareness of being “present”, practising self-compassion particularly around perfectionist tendencies, and that practising mindfulness allowed an opportunity to reflect and gain perspective on their current circumstances. This is particularly interesting as Dvořáková et al. (2017) did not find statistical evidence of improved self-compassion, highlighting the need for more research into this relationship within EA populations. Further, participants also reported improved well-being through decreased stress and anxiety and improved ability to cope with negative physical and emotional states. Finally, participants reported feeling more positive towards their studies and had increased productivity. The mean age falling within the EA demographic holds relevance for other young adult populations. This is one of the broadest and most in-depth qualitative studies to date addressing experiences of mindfulness in a student population. However, as previously discussed, MBSR contains more than pure mindfulness leaving the effect of mindfulness alone still unknown.

As NZ is a multicultural society it is important that interventions aimed at improving well-being are applicable to people from diverse cultures. There are limited MBPs that have been proven to also be beneficial to students from non-western cultures. A sample of South Korean nursing students who completed an MBSR program reported significantly greater levels of mindfulness. Additionally, the authors of this RCT found a significant decrease in

symptoms of depression, anxiety and stress compared to controls (Song & Lindquist, 2015).

The sample was 81% female, with a mean age of 20 (age range was not provided). Follow up data was not collected for this study, however, the authors emphasised the need for future studies to include longitudinal data. This study provides evidence that MBPs may benefit students who are not from western cultures. In an NZ context this is highly relevant due to the multicultural landscape of our society.

Emerging Adults: Non-University Students

There is limited research using samples of EA who have medical conditions. Only two studies to date have looked at the potential benefits of mindfulness in EA with various types of cancers. A recent pilot study of a mobile-based mindfulness and social support programme was created for individuals diagnosed with sarcoma (Donovan et al., 2019). An app was created following qualitative interviews of 13-25 year old sarcoma patients which revealed three prevalent themes: participants were open to learning about mindfulness; anxiety of sarcoma recurrence; and a desire to connect with other cancer patients. Following app usage, there were no statistically significant changes in mindfulness, social support or quality of life. However, considering only 17 patients took part in this study there may not have been enough statistical power to demonstrate more subtle changes.

Another qualitative analysis of interviews was carried out following a mindfulness self-compassion course that ran over eight weeks for female young adult cancer survivors aged 18-27 (Lathren et al., 2018). Participants reported experiencing core psychosocial needs including peer isolation, health-related anxiety and concerns related to changes in their body. Descriptive qualitative analysis showed participants reported the MBP relieved these concerns in several ways including eliciting feelings of self-reliance for emotional support, self-

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compassion and acceptance, and a sense of common humanity within their community. Both these studies of EA cancer populations suggest there may be potential for mindfulness to help in this population. However, as with many other studies, mindfulness was not the core component in these interventions making the specific impact of mindfulness difficult to distinguish and therefore more research in this area is warranted.

While there are few studies looking at EAs with medical conditions, a recent pilot RCT study of individuals with poorly controlled type 1 diabetes was published (Ellis et al., 2019). EAs aged 16-20 took part in an MBP and reported reduced stress at both the end of the programme and at three months follow up, but no significant improvements were found for diabetes management. The control diabetes support group did report improved diabetes management but no significant improvements in stress. This pilot study provides some support for MBPs in EAs with type 1 diabetes, however replication is needed before generalisations can be made. Although those with diabetes and cancer are unique groups of EAs who have experienced and overcome living with cancer, their concerns and anxieties bore some similarities to the concerns of young adults generally. More research is needed on diverse populations before generalisations can be made about mindfulness benefiting people who have overcome challenges with their health.

To date, most mindfulness research on young people has been on students from Eurocentric cultures, leaving the question of how people of non-European ethnicities mobilise and understand mindfulness under-represented within the literature. One of the exceptions to this is a non-RCT, mixed methods study of eight Native American youth aged 15-20 years (Le & Gobert, 2015). Participants were highly receptive to a culturally adapted MBP being integrated into their school. Compared to the start of the intervention, students reported

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improved self-regulation, attention and decreased suicidal thoughts after completing the MBP.

Kerrigan et al. (2011) interviewed urban adolescents and young adults aged 13-19 years, who were all of African-American descent. Content analysis of interviews at the completion of an MBP found all participants reported experiencing significant levels of stress in their lives. All participants interviewed also reported positive and beneficial effects from the programme and experienced an increase in self-awareness and openness. Specifically, the participants reported that mindfulness helped to shift their perspectives around conflict, performance, and relationships, by approaching them with less judgement and negativity. Notably, participants reported that the MBP was not a simple solution to daily stressors, in particular they found seated meditations and practising mindfulness in their own time challenging. This finding highlights the need for mindfulness interventions and practices to be adapted for adolescents and potentially other populations. Despite this challenge, some youth felt a transformational shift for themselves and overall had positive experiences from the MBP. In a more general context, this study holds promise that mindfulness could be beneficial to young people in an everyday setting.

A recent study by Li et al. (2019) qualitatively interviewed participants aged 18-29 years, who were of Latino/a heritage and identified as lesbian, gay, bisexual, queer, or pansexual. Those with increased traits of dispositional mindfulness (Baer et al., 2008) such as awareness, non-judgemental, non-reactive, and ability to observe, reported less psychological distress which helped with coping with minority related struggles. Conversely, those who lacked these mindfulness qualities reported increased challenges including struggles with cultural and sexual identities.

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Interestingly, neither Kerrigan et al. (2011) nor Le and Gobert (2015) discuss race in their papers, nor do they explore mindfulness in the context of groups subject to prejudice. However, Li et al. (2019) emphasised that minority stress (Singh et al., 2003), the perceived stress associated with identifying as part of a minority culture, is important to consider for those who identify with ethnic and sexual minority groups (Li et al, 2019.). Through acknowledging and exploring minority stress, a deeper understanding can be gained of how mindfulness can be mobilised in a culturally relevant context. While these studies provide support for culturally adapted mindfulness practices, there is need for more research of non-Eurocentric populations in order to gain a more comprehensive understanding of whether mindfulness can and should be adopted for these populations (Le & Gobert, 2015; Li et al., 2019; Song & Lindquist, 2015), or whether there are other, more culturally appropriate ways that can improve these populations' well-being. This is particularly relevant within a multicultural landscape such as NZ where Māori and Pacifica cultures make up a significant portion of our society.

Literature to date using EA populations has predominantly used as samples student and medical populations with some research conducted with minority populations. However, there is only one qualitative study to date that includes EA from a general population. Australians aged 16-24 who either worked or studied full time were interviewed at three time points during an MBP (Monshat et al., 2013). Grounded theory methodologies were used to develop a three phase model describing participants' experiences. The first phase captures levels of distress before learning to practice mindfulness which participants associated with their life stage, particularly interpersonal relationships and educational challenges. This distress was associated with increased reactivity. Phase two detailed learning to practice mindfulness during the MBP. Participants reported finding mindfulness relaxing, generating

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feelings of increased stability and increased awareness of emotions. This was specifically defined as conscious control which overlaps with re-perceiving (Shapiro et al., 2006, 2009), decentering (Fresco et al., 2007), and metacognition (Shapiro et al., 2006) where one is aware of their thoughts. During this phase, between the third and fourth week of regular meditation the authors noted that three participants reported feeling strong negative emotions, but adverse experiences were not reported in the final two weeks of the course. Interestingly, details of these reports were not further analysed (Monshat, 2012), and the reason why three participants did not complete the MBP was also not addressed other than citing their time constraints, reiterating the earlier narrative that negative experiences reported in MBPs are often underreported and investigated (Britton 2019; Dimidjian & Segal, 2015). Following course completion, at phase three, participants reported an increased ability to observe themselves that ultimately influenced their behaviours. Further, they also reported feeling more open and confident to apply mindfulness techniques when facing challenges in daily life. However, this study had a small number of participants limiting the generalisability of the findings. Unlike other MBPs, this was specifically developed by the author as part of their doctoral thesis to focus solely on mindful awareness (Monshat, 2012). These findings suggest mindfulness may be a promising approach for EAs in the community who are not experiencing significant clinical distress. However, there remains a gap in the literature of how EAs mobilise mindfulness long-term outside of MBPs emphasising the need for more research.

Mindfulness in Emerging Adults in New Zealand

There has been some research on NZ populations, notably in primary schools (Bernay et al., 2016; Rix & Bernay, 2014), and in those experiencing chronic health conditions (Mapel & Simpson, 2011). These studies have yielded results which suggest that mindfulness is

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potentially beneficial to the NZ population. However, there appears to be limited research on mindfulness and MBPs in NZ. Research conducted for this thesis shows there has only been one quantitative study using a simple randomised design with a control group looking at EAs in an NZ context.

One RCT study looked at the effect a mindfulness and peer-support programme had on mental health on 20 medical students aged 18-‘24+’, where the mean age was reported to be 21 years (Moir et al., 2016). The authors reported no significant differences between the control group and the peer-supported mindfulness group (Moir et al., 2016). However, when looking at what the authors deemed the “intervention group” it was not surprising that their findings were not statistically significant since the intervention group was considered to be anyone who took part in one of any number of activities over a six month period. For example, listening to a pre-recorded mindfulness meditation once, attending a single social event, or attending a single mindfulness session, was all that was required to be deemed a participant in the intervention group. The results of those who participated in more activities than others were not compared but could be interesting in future research, particularly comparing those who did not practice mindfulness or only practiced once, compared to those who attended more mindfulness sessions and increased their personal practice. Students in the intervention group did report increasing their personal mindfulness practice (59%), however, 13% of students in the non-intervention group also reported increased personal mindfulness (Moir et al., 2016). Details of what the students’ personal practices included may be interesting for any future research done on this population. As mentioned before, the NZ population is very diverse and medical students are not an accurate representation of the wider student or wider NZ youth population and so the generalisability of these findings is limited. Unfortunately, due to the study design and interpretation of the results, it is not possible to

draw conclusions on the impact of the mindfulness component of this study on participants. Since this is the only study available which addresses mindfulness in EAs in NZ, there is a clear need for further research to be done.

State of Mindfulness Literature

The breadth of research supports the use of mindfulness through MBPs. However, there are several generalisations, limitations and critiques that need to be considered when reviewing the mindfulness literature.

As mentioned, there is more than one definition of how mindfulness is conceptualised. This is somewhat unsurprising given that mindfulness is a contemplative or experiential phenomenon that is deeply embedded in Buddhism yet has been plucked from its origins and adapted to relieve suffering of westerners. However, despite the multiple western understandings of mindfulness, studies often fail to define or analyse their chosen concept of mindfulness (Chiesa, 2013; Van Dam et al., 2018). A recent review of MBPs in samples of youth offenders aged 14-23 exemplified the ambiguity around defining mindfulness. This makes it difficult to assess its effectiveness, while highlighting the need to comprehensively understand the complex nature of how mindfulness is both perceived and mobilised (Simpson et al., 2018). While this critique was specifically directed at studies of youth offenders, this is also missing from the wider literature. This complicates the applicability of these studies and further hinders comparisons between studies and the generalisation to the wider population as, without an explicit definition, it creates a level of ambiguity around what they understand mindfulness to be.

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Some scholars have cautioned the use of mindfulness due to the potential reporting bias that exists within the literature. As previously noted, non-significant or negative effects of mindfulness appear to be underreported, not published, or investigated (Britton, 2019; Coronado-Montoya et al., 2016; Dimidjian & Segal, 2015). Additionally, a common critique in the current literature is that some studies have a notably high dropout rate for those participating in MBPs (Anderson, 2016; Crane & Williams, 2010; Hughes et al., 2013; Wood, 2009; Xia et al., 2019). For example, a non-RCT study of a sample of nursing students who completed an MBP had a high dropout rate of 40% (Sanko et al., 2016). The authors attributed this to the time commitment of the study itself and home mindfulness practices. No significant changes in mindfulness scores were found pre- to post-intervention for the participants who completed the MBP. A more recent study by Kingston et al. (2020) attempted to understand if mindfulness was the active ingredient in MBPs such as ACT and MBCT which both mobilise values exploration and mindfulness. While the authors reported significant reductions in depressive symptoms in the mindfulness group, they reported a 50% attrition rate impacting on the quality of the study with reasons for participant dropout left unknown. It would be highly probable that this attrition would have impacted the study's findings and reinforces the need to understand the human experience of practising mindfulness. This highlights the need for further research around the specifics of how mindfulness works and the motivations of people who practice it.

Most studies use MBPs to assess mindfulness, analysing results using pre-post study designs. In general, these studies can be critiqued from many standpoints.

First, it is difficult to attribute results purely to mindfulness when MBPs include several non-mindfulness components, including the non-mindfulness activities previously

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described as well as group dynamics and instructor influence. Therefore, the literature using MBPs assesses the effectiveness of the entire programme, and not solely mindfulness.

Secondly, studies only assess the effects of mindfulness over a short space of time, usually between six to eight weeks, with little or no follow up data collected (Eberth & Sedlmeier, 2012; Grossman et al., 2004). This limits how much is known about the lasting effects of mindfulness and how beneficial it is as a long term solution for those experiencing distress or poor well-being.

Thirdly, there is a large variation between MBPs compounding the problem of determining the effects of mindfulness. While many studies use standardised MBPs such as MBSR or MBCT, many adapt these programmes to fit time frames (Jain et al., 2007; Le & Gobert, 2015; Shapiro et al., 1998), or add in additional non-mindfulness components to the MBP such as activities to increase social support (Donovan et al., 2019; Moir et al., 2016) and self-compassion (Lathren et al., 2018).

The majority of the mindfulness literature employs quantitative methods. Grossman (2011) argues that the use of self-reported mindfulness measures depends on one's level of awareness of how mindful they are. This critique, combined with the possibility of phenomena other than mindfulness being recorded in questionnaires, potentially opens the field up to critiques around construct validity (Irving et al., 2009). As exemplified in the literature review, most studies consist of convenience sampling of university students or in a health care setting (Bamber & Schneider, 2016; Chiesa & Serretti, 2009). Neither of these samples are representative of a wider community population. Further, while many studies use RCT designs, they often are not single or double blinded, subjecting the study to bias (Akobeng, 2005; Hariton & Locascio, 2018). Finally, some reviews have highlighted the limited amount of qualitative research available (Eberth & Sedlmeier, 2012; Grossman et al.,

2004). The authors of most reviews of the literature have cautioned against wider interpretation of their results due to methodological shortcomings (Bamber & Schneider, 2016; Chiesa & Serretti, 2009; Eberth & Sedlmeier, 2012; Grossman et al., 2004; Irving et al., 2009), emphasising the need for differing methodologies to be employed in mindfulness research. While it is beyond the scope of this thesis to critique the specific self-report questionnaires used throughout the literature review, it is important to acknowledge how studies typically collect data.

Although the literature holds promise for individuals to benefit from mindfulness, the many issues within the literature emphasise the need for more diverse methodologies to be applied to mindfulness research. These prominent issues highlight the complexities of producing quality quantitative research within an experiential process such as mindfulness (Van Dam et al., 2018). The lack of quality quantitative data supports the shift to qualitative research which can allow for more in-depth understanding of the human process and experiences of mindfulness, something that is lacking within the literature.

Rationale

There are several reasons further research is required on EA experiences of mindfulness. It is well documented that at both global (WHO, 2018) and national levels (Canning et al., 2017; Fergusson et al., 2007; Fleming et al., 2014, 2020a,b; Moffitt et al., 2007) that the transition from adolescence into adulthood causes many individuals psychological distress. With the onset of mental disorders often occurring before the age of 25 (Altwaijri et al., 2020; Fergusson et al., 2007; Kessler et al., 2005; Moffitt et al., 2007; Patton et al., 2014, 2016) combined with those who experience longer or more persistent mental distress being more likely to experience recurrence later in life (Copeland et al., 2011; Moffitt

et al., 2007; Patton et al., 2014, 2016), there is a clear need for accessible and appealing initiatives or interventions for people in this age group.

In the NZ context, there has been limited research on mindfulness or its associated interventions (Bernay et al., 2016; Granberg, 2018; Moir et al., 2016; Rix & Bernay, 2014). To date, no study has exclusively looked at an EA population. As demonstrated above, the general literature supports mindfulness for improving well-being including those with medical conditions (Abbott et al., 2014; Bohlmeijer et al., 2010), those experiencing emotional distress (Goldberg et al., 2018; Khoury et al., 2015), and within general populations (Chiesa & Serretti, 2009; Spijkerman et al., 2016). However, when applied to an EA population most of the literature has used students. While MBPs appear to improve well-being in student populations, most studies use those studying in medical fields (Bamber & Morpeth, 2019; Bamber & Schneider, 2016). Few studies exist within non-student populations, highlighting the need for research with more heterogeneous samples in order to understand the potential benefits and challenges of mindfulness for a variety of EA populations. Due to the limited number of quality studies, more research is needed before recommending the use of mindfulness to improve well-being and other outcomes for EAs (Greenberg & Harris, 2012).

While the general body of research supports the use of mindfulness, the literature primarily employs quantitative, pretest posttest methods of MBPs (Chiesa & Serretti, 2009; Khoury et al., 2015; Spijkerman et al., 2016). However, these studies have generally been critiqued to potentially demonstrate bias as they rely on self-reported data (Grossman, 2011; Irving et al., 2009), are rarely blinded (Akobeng, 2005; Hariton & Locascio, 2018), with negative or non-significant results not reported (Britton, 2019; Coronado-Montoya et al., 2016; Dimidjian & Segal, 2015). This potential underreporting of adverse experiences risks

the literature being reductionist in its representations of mindfulness experiences. This has led many authors to caution against the generalisability of findings (Bamber & Schneider, 2016; Chiesa & Serretti, 2009; Eberth & Sedlmeier, 2012; Grossman et al., 2004; Irving et al., 2009) and further emphasises the need to employ different methodologies to understand experiential processes such as mindfulness (Van Dam et al., 2018). Within the literature there is almost no research highlighting the human experience of mindfulness or how it is practiced and incorporated into daily life. This includes the limited amount of follow-up data collected from studies in recent literature.

The current study looks to begin to fill these gaps in the literature by attempting to capture a sample of EAs understandings and perceptions of mindfulness. Due to the limited literature on people in westernised societies who have practiced mindfulness in their daily lives, I recruited individuals who self-identified as practicing mindfulness.

Chapter 2: Methods and Methodology

This research investigates EA understandings and experiences of mindfulness. The particular focus is on the various ways in which participants defined mindfulness, how they practiced it and the reasons behind why they chose to incorporate a mindfulness practice into their lives. The research used qualitative interview design with 10 participants aged 18-25 years who self-identified as practicing mindfulness.

Ethics

Ethical approval for this project was assessed according to Massey University guidelines via Low-Risk Notification on 16 June 2019 (reference number 4000021310). This

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is recorded on the Low-Risk Database which is reported in the Massey University Human Ethics Committee Annual Report. The research team comprising the author and two supervisors elected to apply for a low-risk notification for several reasons. These included that potential participants were over the age of 18 and therefore were able to give informed consent; participants volunteered for the study from their own free will; they were not in a high-risk group; and were not asked any sensitive or distressing questions. These factors clearly indicate that an individual participating in the study was not at increased risk compared to situations they may encounter in daily life.

Data Collection

Design

The main research question for this study was “what are EA understandings and perceptions of mindfulness?” Specifically, the objective was to find out how participants described mindfulness and how they practiced it. Further, I wanted to look at their motivations for practicing and in what ways they did or did not benefit from it.

Data was collected using individual interviews with a semi-structured design. This method was chosen because there is limited research on the lived experiences of individuals incorporating mindfulness into their lives. Compared to focus groups, individual interviews allow greater focus on the individual, incorporating space for open disclosure and in-depth discussion of experiences, beliefs and personal narratives (DiCicco-Bloom & Crabtree, 2006; Willig, 2013). Further, an individual interview design ensures greater confidentiality than focus groups (Farnsworth & Boon, 2010).

The interview questions were developed following a thorough search of the existing literature. A draft of potential research questions was presented and evaluated by the research

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team and then amended by the author. The interview schedule (Appendix B) was designed in a semi-structured manner, with most questions being open-ended. Prompts were included in the interview schedule to be used if needed. After the first two interviews, the interview structure was reviewed based on insights gained. The only change to the schedule was the addition of a definition developed by Kabat-Zinn (1990) at the start of the interview. This was included in the interview schedule from the start of the third interview and was used to initiate dialogue around how the participant defined mindfulness. In the first interviews, participants' expressed difficulty defining mindfulness. By adding this common definition and asking participants to speak to how their understanding converges or diverges from this definition appeared to stimulate thought of their own views while simultaneously positioning that view as a specific and true reflection of their own knowledge. As I was interested in participants' views, I deliberately identified participants' perceptions and beliefs prior to asking this question in an attempt to limit the possibility of influencing their response.

Topics covered in the interview schedule included how participants learnt about mindfulness and how to practice it, what they perceived the benefits of mindfulness to be, whether there were any adverse effects of mindfulness, and their perception of what other people think about mindfulness.

Procedure

Recruitment

The aim was to interview a range of individuals aged 18-25 who self-identified with practicing mindfulness using a convenience sampling approach. The first step was to identify and contact 15 organisations in the Auckland region. These organisations were selected because they offered services which involved mindfulness, meditation or related areas such as

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Buddhism, yoga and psychological services such as counselling and psychotherapy. The objective was to recruit participants who attended these organisations. Five of these organisations agreed to circulate a flyer providing information on the research (Appendix C) via email or in their newsletter. Six declined to circulate the flyer because their clients were older than the target age of the study. Four organisations did not reply.

The study was also advertised more broadly by posting the flyer on community and university notice boards in the Auckland region. Flyers were also posted on Instagram and Facebook social media pages created specifically for recruitment, and on Facebook community groups in the Auckland region, with the page administrators' permission. The target audience for the flyer was anyone who practices mindfulness, and participants were offered a \$20 voucher to compensate for travel costs and their time.

Potential participants contacted the researcher through either an email address created specifically for recruitment, or via the social media messaging system on Facebook, or through Instagram recruitment pages or a phone number listed on the flyer. Twenty-three individuals contacted the researcher using these networks to express their interest in participating or asking for more information about the study.

Once a potential participant expressed interest, an email was sent to them attaching a copy of the flyer (Appendix C) and a participant information sheet (Appendix D) containing details of the study and ethical considerations including confidentiality. The body of the email (Appendix E) thanked the participant for expressing interest in the study, asked them to read the information sheet and to contact the researcher by email or phone if they had any questions about the study. The email also contained screening questions to determine the participant's age and how long they had practised mindfulness. Twelve potential participants replied expressing interest in setting up an interview time, of which two did not have a mindfulness practice and therefore did not meet the criteria for participation. Participants

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were eligible to take part in the study if they had practised mindfulness for a minimum of three months (12 weeks). The rationale behind this is that the majority of MBIs consist of eight week interventions (Eberth & Sedlmeier, 2012; Grossman et al., 2004; Kabat-Zinn, 1990). By recruiting participants who have practiced a minimum of one month over a typical MBP intervention ensured participants had integrated a mindful practice into their life, something that has rarely been studied in a western context.

The sample size was based on guidelines for qualitative research which indicate 10-20 participants is suitable for a medium sized project such as a master's research project (Clarke & Braun, 2013). While I recognise my final sample size of 10 is on the lower limit of this recommendation, the sample size was also limited due to both time constraints and access to participants who fit recruitment criteria. The timing of conducting interviews overlapped with transcribing and data familiarisation of the transcripts. This allowed me to recognise that clear commonalities were present after approximately the eighth interview. With the completion of the tenth interview the research team decided to stop interviews due to the apparent commonality between them. While these commonalities were recognised prior to analytical coding, the concept of data saturation was approached with caution due to the critiques surrounding this concept (Braun & Clarke, 2019; Fugard & Potts, 2015; Guest et al., 2006; Saunders et al., 2018). Data saturation occurs when no novel information is identified within the data (Guest et al., 2006). This concept is frequently used in qualitative research, particularly grounded theory (Bowen, 2008; Morse, 1995; Sandelowski, 1995). However, without completing a comprehensive reading and analysis of the data it is challenging to know if, in fact, your data is saturated or not (Braun & Clarke, 2019; Emmel, 2013; Guest et al., 2006; Saunders et al., 2018). While a full commentary around the concept of saturation is beyond the scope of this thesis, it was considered. As commonalities between the data were recognised and there was limited access to further interviews, analysis began after the tenth

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interview. However, the option of a second phase of recruitment and interviewing was discussed if it was felt that the data was not sufficient to provide a comprehensive thematic analysis. With further analysis of the data and thematic process the research team decided that further interviews were not necessary to produce a comprehensive analysis.

Interviews

All interviews were conducted between July and November 2019. Safety and accessibility were considered when choosing interview settings. All interviews were conducted in small meeting rooms with the door closed to ensure privacy, with a table and chairs. Participants had a choice of three locations in the Auckland region: Inner City (SHORE & Whāriki Research Centre, n=3), Albany (Massey University, n=3), Takapuna (at an office space, n=4). Interviews lasted on average one hour, but varied between 45 minutes to 1.5 hours and were recorded using a *Sony PX470 Digital Voice Recorder PX Series*.

Using the information sheet (Appendix D) and written consent forms (Appendix F) as a guide, I explained the aim of the project and how the information provided by the participants could be included. Participants were given the opportunity to ask questions before signing the consent form. They were also offered the option of requesting a copy of the voice recording or transcript. During this process it was emphasised that participants had full autonomy over their involvement throughout the interview. Following the completion of a demographic information sheet (Appendix G) I began the interview by engaging in Whakawhanaungatanga (a way of establishing relationships with others which forms a sense of connection (Bishop, 1995)) to build rapport with the participant. This included a brief pepeha (sharing of one's identity) that shared my family background and ethnicity. The Whakawhanaungatanga also included sharing my experience and journey of practising mindfulness establishing a shared understanding and normalisation of practising mindfulness.

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This is explained in more detail below. With completion of this introduction, the participants were advised the voice recording would start and verbal consent to be recorded was gained. Following this the interview began. On completion of the interview questions, participants were given the opportunity to ask any questions or provide any final remarks or examples before the recording was stopped.

Participants

A demographic information sheet (Appendix G) was designed to gather information to accurately describe the sample, including age, disabilities, ethnicity, occupation, and how the participants chose to gender identify. All participants gave informed consent prior to the start of the interview.

Participant ages ranged from 20-25 (average 22). Of the 10 young adults who participated in the study, three identified as male and seven identified as female. No participant identified with non-binary gender. One participant identified as having bipolar disorder which they described as a disability. No other participants identified as having a disability. Participants reported a range of ethnicities as outlined in Table 1. One participant identified as Colombian (Latin) and was the only participant who identified as not being raised in NZ. This participant reported she moved to NZ three months prior to the survey, and while being fluent in English, the participant's sentence structure was not always grammatically correct. Four participants were in full-time employment while six described themselves as students. Pseudonyms were assigned to all participants at interview completion. Details of participant demographics are set out in Table 1.

Table 1*Demographic Data*

Pseudonym	Age (years)	Gender	Ethnicity	Occupation	Length of practice (Approximate)	Hear about study
Ella	22	Female	NZ European	Technician	8 years	Social Media
Sarah	21	Female	NZ European	Student, work part time	4 months	Flyer
Luke	22	Male	NZ/ Korean	Student, Lifeguard	3.5 months	Flyer
Sam	25	Male	British/ NZ	Student, Computer Science	4.5 years	Flyer
Emily	23	Female	Colombian (Latin)	Student	1.5 years	Flyer
Bella	20	Female	Pākehā	Student	5 years	Word of mouth
Mark	23	Male	NZ/ Russian	Student	10.5 years	Flyer
Shelly	24	Female	European/ Pākehā	Government	11.5 years	Social Media
Kate	23	Female	NZ European	Digital Producer	3 years	Social Media
Polly	24	Female	NZ European	Account Manager - Social media	6 months	Word of mouth

Holding Reflexivity

Reflexivity is the process of constantly reflecting on one's beliefs and positionings and how this influences the research process (Berger, 2015; Bott, 2010; Finlay, 2002; Mauthner & Doucet, 2003). Reflexivity acknowledges and situates the researcher within their socio-

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cultural spheres, which allows the researcher to unpack views or assumptions that may influence how they interpret the research (Cunliffe & Easterby-Smith, 2004; Mauthner & Doucet, 2003). It further acknowledges that not just participants, but researchers are also located in a complex contextual environment in which their values and experiences impact how they interpret research (Finlay, 2002; Wilkinson, 1988). Throughout the construction of this project, interviews and analysis, I have been aware of my positioning in relation to the research and reflected on this using a research journal. During this process, I held in mind my cultural and social values and considered how this has shaped the project.

Prior to entering this research, I had practised mindfulness intermittently from the age of 18. I believe I have a personal investment in the topic as, like my participants, I also had learnt and practised mindfulness throughout my EA years. During my personal introduction during the interview, I described myself as a 26-year-old female who identifies as Lebanese and Pākehā who grew up in Auckland, New Zealand. I explained my previous relevant education and experiences working at a youth helpline for several years and working in a sub-acute mental health setting. I further explained that I practised mindfulness and meditation in my personal life, which I began after seeking help during an experience of psychological distress during my teenage years. The key reason I included this was that I wanted participants to feel both comfortable and establish this as a safe, non-judgemental space. I also used this to role model openness and vulnerability that aligned with low-risk notification protocol. Specifically, naming but not expanding on or explaining this distress modelled that although openness was valued, sensitive experiences to the individual were not to be explored. This transparency positioned me as an insider who can facilitate the perception of creating a safe, open and non-judgemental space in which participants can share their experiences and perceptions (Le Gallais, 2008). This is thought to be particularly important for conducting research with youth populations, provided that the researcher holds reflexivity

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throughout their research (Hodkinson, 2005). Sharing my personal practice of mindfulness with the participants may have shaped both how I interacted with participants and how the participants approached answering interview questions.

Reflecting on how I approached the participants, I recognise it influenced the questions I asked and how they chose to respond. I wished to create an environment that felt supportive and accepting which meant I generally did not disrupt participant accounts of mindfulness or challenge their views. Throughout the interviews and analysis, I held in mind and was accepting that my views on mindfulness may differ to those of my participants. As I positioned myself as someone who was relatively recently in the EA age category and who practised mindfulness I was aware of the potential duality this may create. I previously described that I hold similar demographics and affinity towards mindfulness to many of my participants and that positioned me as an “insider” (Bolam et al., 2003; Hodkinson, 2005). However, due to the nature of qualitative interviewing and as someone who is both (slightly) older and who is researching mindfulness, I am aware of also being perceived as an “expert” or “outsider” (Bolam et al., 2003; Hodkinson, 2005). This duality potentially (and probably) influenced both what and how I asked questions and how participants responded. At times participants would suggest I held more knowledge than them on particular statements they made. I approached this with compassion and emphasised that everyone’s understandings and experiences are different, and it was their experience and knowledge that I was interested in before redirecting them back to the question or topic.

Through redirecting participants in this way, I aimed to increase participants’ autonomy and confidence in sharing their perceptions with me. This further aligns with a critical realist framework that I held throughout this project. The critical realist approach positions participants’ knowledge as both valid and true while also considering the individual experiences that shape their understandings. This further aligned with my interview approach

of facilitating participant autonomy while also seeking to understand and contextualise their reality.

Analytic Approach

I adopted a “critical realist” framework for my analysis. Critical realism (CR) acknowledges that perceptions are situated within a socially created context (Brown et al., 2002; Fletcher, 2017; Hoddy, 2019; Oliver, 2012; Yeung, 1997). CR stands between the poles of positivism and constructivism, drawing from both approaches (Brown et al., 2002). Positivism (most often used in quantitative research) depicts a singular version of reality, whereas constructionism (often used in qualitative research) depicts multiple constructions of realities. Through adopting various qualities of both these frameworks, CR presents a useful perspective for understanding both the nature of reality (ontology) and the production of knowledge (epistemology). CR achieves this through a comparison of objective and subjective realities. Objective realities actually exist; while subjective realities are a construction of the mind. Additionally, CR also recognises that individuals experience and perceive those realities through the lens of their own complex social contexts (Fletcher, 2017; Hoddy, 2019). Within a research context, CR adds to existing forms of knowledge offering a different perspective rather than discounting or taking away other psychological and theoretical understandings (Brown et al., 2002). With most of the existing mindfulness literature to date adopting quantitative methodologies, research through a CR lens has the ability to build upon the existing literature through offering alternative and in-depth perspectives (Brown et al., 2002).

CR distinguishes itself through the fundamental assumption that human knowledge can only reveal a small proportion of a more extensive reality (Bhaskar, 1998; Fletcher, 2017; Hoddy, 2019). Specifically, CR does not disregard perceptions of reality, rather it sees reality

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as fluid levels that interact to varying degrees. With CR theory, an iceberg model can be used to depict the levels of reality. The empirical level is the surface level (the part of the iceberg protruding from the water) of physically observed events and actions that are measurable and understandable. The actual level (the part of the iceberg just submerged) is a level where actions or events occur regardless of whether they are physically observed. Finally, the real level (the bottom of the iceberg) consists of causal mechanisms that are shaped by one's experiences and the environment in which they occur. This model emphasises that although there is a reality in which we create knowledge, there are underlying contextual mechanisms that impact on our empirical knowledge. Therefore, while drawing on positivist and constructivist philosophies, CR distinguishes itself through the fundamental assumption that human knowledge can only reveal a small proportion of a more extensive reality (Bhaskar, 1998; Fletcher, 2017; Hoddy, 2019). With a CR lens we are seeking to understand the truths of reality while also acknowledging there may be other versions of these truths.

A critical realist approach allows consideration of factors impacting on participant perceptions and how this affects their understanding of what mindfulness is and how they practice it. This is important, particularly when making claims about the research findings. Through holding a CR lens to this analysis, both semantic and latent interpretations of the data can be explored, providing a greater depth of understanding (Fletcher, 2017; Hoddy, 2019). Throughout the analytic process I sought to contextualise the data seeking to understand participants' perceptions.

On a practical note, I sought to incorporate CR throughout the research process. Although there is currently minimal methodological development and practical guidance of incorporating CR into qualitative research (Fletcher 2017; Hoddy, 2019; Oliver 2012) I aimed to hold a CR lens throughout my project. While both Fletcher and Hoddy present some practical guidance for conducting qualitative research using CR ontology and epistemology,

neither applied the CR framework to thematic analysis (TA), leaving some ambiguity of how to do this. In the analytic procedure below, I outline how I attempted to hold this lens, particularly through the coding phase of my analysis. However, I primarily maintained the use of a CR lens through the use of reflexive journaling by consciously reflecting and questioning both my positioning as a researcher and the contextual landscape of my participants. For example, as I constructed the interview schedule I recognised my approach was based on my understanding of mindfulness, both my own experience and the mostly quantitative literature. Through acknowledging how I contextualised my understanding of mindfulness I was able to ensure my interview schedule allowed space to explore areas that were not frequently discussed within the literature, such as negative experiences of mindfulness and the breadth of what can be considered mindfulness. Further, when analysing transcripts, I used reflexive journaling as a tool to consider the contextual elements of the participants' accounts while also reflecting on possible alternative interpretations and considering how this fits within CR epistemology and ontology. In this way I was able to hold a CR lens for the entirety of my analysis.

Analytic Procedure

The data was transcribed verbatim using orthographic transcription (Lapdat, 1999). All spoken words, including repetitions, were included except minimal encouragers, interjections, and marked pauses in the dialogue as they were not considered to be of importance for analysis. Transcripts were anonymised by allocating pseudonyms to each participant and generically referring to any identifying information of locations, services and other people they referred to.

Reflexive TA was used for data analysis (Braun & Clarke, 2006, 2012). This analytical approach is useful for a range of epistemological and theoretical approaches

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(Clarke & Braun, 2013) where core themes or patterns are identified and used to answer the research questions. TA was chosen as an analytical framework as there is limited literature about how people understand and experience mindfulness, particularly in an EA and non-MBI specific population. Due to the relatively unexplored area of lived experiences of how and when mindfulness is practised, TA is an appropriate analytical method to gain a rich understanding of the data as it allows for both a surface level and more in-depth reading of the data (Braun & Clarke, 2006; Clarke & Braun, 2013). By identifying and analysing key themes from the data it is possible to begin to unravel the growing phenomenon of mindfulness and gain a deeper understanding of the empirical literature through providing humanistic accounts.

Analysis of the data followed the six phases of TA recommended by Braun and Clarke (2006). I began with familiarising myself with the data through listening to the interviews and reading the transcripts several times. Once I was comfortable with the transcripts, the process of “coding” began. The current literature offers little procedural direction regarding coding within a CR framework (Fletcher, 2016; Hoddy, 2019). While both Fletcher and Hoddy have operationalised CR techniques to qualitative research, neither used a thematic framework for analysis. Because of this, their studies were used as a loose framework of how to apply CR to the qualitative methodology of thematic analysis. Aligned with both Fletcher and Hoddy’s work, semantic (explicit) codes were initially focused on how, what and when mindfulness is practised. Within a CR context, the empirical level, or the tip of the iceberg was the focus of coding. Following this, transcripts were further reassessed to identify more implicit codes that included a close look at the language used which may have been overlooked on the first code. These re-reads were focused on the actual and real level of CR, or, using the iceberg analogy, the levels that are under the water's surface. This coding phase was critical for ensuring CR ontology and epistemology was embedded within the analysis.

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After reviewing the transcripts and codes I then moved on to “generating initial themes” which involved grouping the codes which had a shared meaning. Through this initial process, there were 10 candidate themes and 37 sub-themes which were given preliminary names. These were written out on a mind-map to help recognise and clarify similarities and differences between the themes and sub-themes. Following discussion with the research team, reviewed themes were developed which included merging some candidate themes together and splitting others apart. After further review of the data and candidates, four themes were finalised that included eleven sub-themes. Table 2, in the analysis chapter, acts as a visual guide to aid readers in understanding the relationships between themes and sub-themes. Themes were written up, refined and consolidated as part of the thematic analytic process building an increasingly cohesive narrative centred around answering the research questions. With a final review by the research team, names were adjusted to accurately reflect themes. During the writing up phase of analysis, quotes were modified to aid readability without removing meaning from quotes. Horizontal ellipses ... were used where participants have repeated themselves or when they had used filler words during the interview. Square brackets [] were used where words have been adjusted to fit the context of the analysis or where words have been removed. Quotation and question marks were added to transcripts to reflect changes in intonation where participants articulated thoughts and questions they asked themselves during their practice. This was only done to aid readability or to focus the reader on the core component of the quote as many participants spoke to multiple elements of mindfulness at a time. As in CR, contextual elements are seen as important, and by not modifying quotes for readability until the write up, I was able to ensure contextual elements of quotes remained unchanged throughout the analysis.

Chapter 3: Analysis

Introduction and Overview

In Chapters 1 and 2, I outlined my rationale and motivations for undertaking this research. This included reviewing relevant literature to contextualise my aims and methodology. The literature also framed and contextualised my analysis and the analytic presentation which follows and focuses on answering my research questions: how do a sample of EAs living in NZ understand and perceive mindfulness?

The introduction of my analysis provides an explicit summary of the range of activities and practices participants considered to be part of their mindfulness practice. This is followed by a brief summary of participants' motivations for beginning mindfulness and their views on the intersections of mindfulness, religion and spirituality. While unpacking these various understandings was not a focal point of my analysis, I have included it as it is both interesting and important to acknowledge how participants' understandings of these concepts varied. This sets the scene for the thematic analysis which addresses the more implicit ways in which participants explored their understandings and practices.

The Mindfulness Umbrella: How Participants Practised

How participants described their mindfulness practises varied greatly. The “big umbrella of mindfulness” was how Kate explained her understanding of mindfulness, depicting it as a broad, encompassing term to describe many practices, aligning with others' descriptions and understandings of mindfulness. All participants reported one of the main ways they practiced mindfulness was to “apply” it (Kate, Mark, Sam) to “everyday” (Kate,

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Polly, Sam, Shelly) life or on a “day to day” (Bella, Mark, Shelly) basis. While many participants reported practicing meditation (Bella, Emily, Kate, Luke, Mark, Sam, Sarah), they all reported practicing in different ways. Many participants reported using guided meditations (Sam) via an App (Kate, Sam), via Facebook groups (Emily), and CDs (Mark). Participants also reported practicing non-guided meditations (Bella, Luke, Sarah). Some participants described meditation-like activities during which they focused on their “senses” (Ella, Kate, Polly, Shelly), while only one explicitly stated they used “body scan” (Sam) meditations. Journaling was another common way participants reported practicing mindfulness, describing this as a way of “checking in with myself” (Kate), “reflect[ing] back” (Ella), using it to “process” various things (Mark) and a way to help to gain “perspective” (Luke). Participants reported “mindful eating” (Polly) and “focus[ing]” on eating (Emily) as a mindfulness practice. Many participants identified a type of exercise or movement as a mindfulness activity. These included doing yoga (Bella, Sam, Sarah) or “body balance classes” (Polly), walking (Ella, Emily, Sam, Shelly), or running (Emily, Sarah). Kate reflected that she feels she is at her “most mindful” when doing exercise. Other mindful activities participants identified included “fire dancing” (Sam), gardening (Mark), photography (Ella, Sarah), music (Bella), and painting with watercolours (Bella).

Participants reported engaging in a range of formal and informal training. Most participants reported using electronic sources to access information about mindfulness including the internet (Bella, Kate, Polly) and Google (Sarah, Shelly). More specifically, sources such as YouTube (Emily, Sam, Shelly), Facebook (Emily) and the use of an App (Kate, Sam, Sarah) were used for finding information and accessing guided meditations. Mark reported using CDs to access guided meditations, and Polly searched books to learn about mindfulness and Buddhism. Participants also reported learning through various courses run through a local Community Centre (Mark), volunteer programmes (Emily) and church

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(Luke). Several participants referred to learning mindfulness “in therapy” (Kate, Shelly) or “public mental health” (Ella, Shelly) settings. Of these participants, only Kate stated that she had done “Acceptance and Commitment Therapy”. The others did not define the type of therapies they experienced.

The regularity of mindfulness practice varied greatly among participants. They described drawing on it when they felt they needed it, from many times throughout the day to several times a week. Participants reported practicing mindfulness for periods from three months up to 14 years. Some participants who had practiced mindfulness for many years also reported they had taken breaks from their mindfulness practices altogether although none specified the period of time they took a break from their practice. All participants reported that they intended to practice mindfulness “long term” (Bella, Kate, Sarah). The ambiguity around both what mindfulness is and how it is practiced has previously been documented in the literature (Chiesa, 2013; Simpson et al., 2018; Van Dam et al., 2018) and is somewhat reflected by the breadth of how participants practice mindfulness. While many practices described above would not be practiced in MBPs, recent evidence suggests that self-reported mindfulness levels can increase even when participating in activities where mindfulness skills are not explicitly taught (Xia et al., 2019). This supports the notion of mindfulness being an umbrella term, covering a spectrum of practices.

Experiences of Distress: Motivation for Learning

Participants identified a generalized world view that normalized a sense of struggle throughout their adolescent and EA years. For example, Ella reflected on her belief that “no-one comes out of adolescence unscathed.” Bella made a similar comment saying “everyone experiences a lot of emotional difficulty,” suggesting a similar world view to Ella but with a

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more general age range. Other participants reported struggling with societal pressure, for example Luke spoke of “high expectations at this age range, from 20 to 30, to get married, and then get a good job, and stuff like that.” These comments suggest that while participants recognise their own sense of challenge and struggle throughout their current life stage, they also acknowledge their belief that this is a somewhat universal experience for people in this age category. The concept that this stage of youth and emerging adulthood is challenging on people's mental health is reflected in the mental health and well-being statistics (Fleming et al., 2014, 2020a,b; WHO, 2018).

Commonalities existed around participants' discovery and motivation for learning mindfulness. The most frequently referenced reason was that they had experienced “emotional struggles” (Bella), and were seeking a way to “deal” (Bella, Mark, Sarah) with these. Participants described searching for a mechanism to help them cope when they were “depressed” (Emily), or “really anxious” (Kate) or when they were looking for a way to “cope with stress” (Luke, Sarah). Some participants reported coming across mindfulness when they were looking for a way to cope with new situations.

For example, Mark, who was home-schooled at the time he started practising mindfulness, reported looking for a way to help when “dealing with groups and exams, both of which were kind of new things for me.” Similarly, Sam reported beginning mindfulness at a time when he was “transitioning from going to a Christian school into university” where he was “re-analysing all [his] beliefs.” Polly reported mindfulness was “a little bit hard-wired into my personality type,” and that she was drawn to it because she has “always had an interest in psychology and mental health.” Two participants disclosed they had learnt about mindfulness from being referred to the “public mental health system” (Ella) as they were struggling with “panic attacks” (Ella) and experiences of “trauma” (Shelly). Finally, Luke

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described attending a mindfulness course at church and after practising realizing that he “really enjoyed and needed” it as he was under a lot of “pressure” and “stress”.

Participants talk around struggles during adolescence and EA echoes the first phase of distress and reactivity in Monshat et al.’s (2013) grounded theory analysis where participants reported experiencing distress prior to engaging with mindfulness. However, unlike Monshat et al. (2013), in the current study, becoming less “reactive” (Ella, Sam) was only occasionally mentioned when participants reflected their mental state before practicing mindfulness. This differs from some qualitative findings where decreased reactivity has been a central part of analysis (Dos et al., 2016).

Mindfulness, Religion and Spirituality

Participants were asked about their understanding and experiences of Buddhism in relation to mindfulness. Most reported they did not know much about Buddhism but expressed either a desire to learn about it or had not realised mindfulness was based in ancient practice. When Ella was asked if she felt it was important or necessary for people who practice mindfulness to learn about Buddhism, she divided participants into two groups:

It depends on the person, I guess. Some people don't look too deeply into the origins of anything that they're doing. Some people are more fascinated about “why am I doing this? Let's look deeper into it.” So I guess it just really depends on the person.

Someone's just, “I just want to fix it.” Some people like trying to figure out a lot more [about] what they're trying to do and why they're doing it and where it came from.

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Aligned with Ella's description, most participants seemed to be looking at mindfulness as a way to alleviate a negative emotion or a way to "fix" something. Some participants reported a desire or interest to "look into it" (Shelly) but to date had not.

The participants who had researched Buddhism reported "useful insights into what's actually going on and [...] that [it] gives you tools that you can use to deal with certain emotions or feelings" (Sam). Polly described how learning Buddhist teachings while learning mindfulness had taught her about "being accountable" and "taking ownership of [her] circumstances." However, Bella reflected that while she "liked [and knew a lot about] the Buddhist teachings" she found it difficult "trying to navigate ... the normal world that [she lives in] while holding those thoughts." Here Bella voices the common perception that Buddhist teachings were "high up in the air [and] hard to relate to everyday living" (Polly).

All three participants who identified as religious at the time of the interview reported that their faith aligned with a derivative of Christianity. It is of particular note that these participants largely described mindfulness as having strengthened their non-Buddhist religious practices. For example, Sarah who identified as "Christian", described that she "found prayers to be quite mindful." She even described that she has intertwined her daily prayer with her mindfulness practice which she called "Pre-Dawn Prayer." Sarah does this daily as it "just kills two birds with one stone for me." Luke, who identified as "Latter Day Saints" defined spirituality as "feeling that guidance and peace." He also reflected that, "When I do practice mindfulness, sometimes, but not ... all of the time, I do feel spirituality." Finally, Emily described herself as Catholic although prior to learning about mindfulness had believed that "God was a bad guy":

I think that with meditation, with mindfulness - a key for me [which] helped me to be in the present [...] with God, feel him, will trust him, to have faith.

Emily is explaining that through learning mindfulness and meditation she has been able to believe in and trust God. Although it is outside the scope of this research to comprehensively investigate the participants' understanding of how spirituality relates to mindfulness, this is clearly a complex and interesting intersection that warrants future investigation.

A Note Prior to Analysis

As previously outlined, mindfulness both within the literature and for participants in the current study it is a broad concept encompassing a variety of applicable techniques and experiences. While participants were generally able to articulate their understandings, perceptions and mobilisations of mindfulness, these often overlapped. Specifically, participants generally referred to “mindfulness” rather than explicitly describing their modality of mindfulness such as formal (for example, meditation) or informal (for example, a mindfulness activity). As described in my reflexivity section, because I sought to create a space where participants were heard I often did not interrupt participants to seek these clarifications. Furthermore, as detailed above, participants often described a variety of mindfulness practices. While this leads to some potential ambiguity as to what version of mindfulness participants spoke about at times, the following analysis thematically highlights the core ways mindfulness was understood, regardless of modality.

It is also worth noting that, at times, participants struggled to articulate particular experiences or perceptions they had regarding mindfulness. For example, although participants often spoke about the benefits of focusing on their ability to pay attention, when I asked them to elaborate on what they thought was helpful about this they often struggled to

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clearly articulate their answers. One way in which participants attempted to describe this was through explaining an “energy” (Emily) they felt when they practiced mindfulness. Shelly elaborated on how she has tried to explain mindfulness to others:

It's a whole other level of... knowing what that means, to actually understand it because it's not just breathing. It's like your whole energy that comes from your mind and your thoughts... You know? ... So it's not just taking a break, it's not... breathing like normal. It's... physically thinking in your mind of the positives that can come from you, breathing for it. ...[there is] a lot more that people need to understand... when therapists say you can just breathe through it.

Here, Shelly attempts to explain her complex experiences of mindfulness. Where she refers to “it’s a whole other level” she is referencing the complexities of the experiential nature of mindfulness and that in order to “understand it” you need to have practiced it. Shelly’s quote highlights the complexities and challenges participants faced when trying to articulate mindfulness. Some participants prefaced their response to questions in ways that also depicted this challenge in articulating the intricacies of mindfulness. For example, Sarah stated:

It's a little hard to explain, I guess that's why I've been really vague about it.

Comments such as these highlight the challenge in exploring the experiential nature of mindfulness, suggesting that it is both complex and multifaceted. These comments emphasise the importance of unpacking conceptualisations and mobilisations of mindfulness through qualitative research.

Thematic Overview

Table 2 shows the thematic outline of my analysis. My analysis is comprised of four themes with eleven sub-themes. These themes reflect participant perceptions and mobilisations of mindfulness while also answering my research questions around the intricacies of their understandings. The first three themes unpack participant mobilisations of mindfulness, the actual cognitive process and what participants do when they say they are practicing mindfulness. The first theme, *Be Focused Right Now: Attentional Awareness*, looks at the attentional components of mindfulness that participants described as pivotal to their practice. This theme includes two sub-themes – *Interoceptive Attention of Breath* and *Exteroceptive Attention Towards One's Senses*.

The second theme, *Metacognitively Mindful*, explores the metacognitive process participants used during their mindfulness practice. This theme includes the sub-themes of *Acceptance of Thought*; *Struggles with Acceptance*; *Impermanence: To Aid Acceptance*; *Challenge of Impermanence*; and the final sub-theme in *Metacognitively Mindful* is “*Control the thought of the thought*”: *Metacognitive Control*. This is particularly interesting as participants reported using metacognition to create feelings of control.

The third theme, *Mindfully Processing and Problem Solving*, includes the sub-theme *Mindfulness as a Coping Mechanism*. The final theme, *Part of Everyday Life*, looks at how participants explored mindfulness to be a broader phenomenon than their specific mindfulness practices. The first sub-theme is *Mindfulness is Intrinsic: People Naturally Have Varying Levels*, looks at participants' views of intrinsic levels of mindfulness; the second sub-theme, “*It's a lot more than what you originally think it is*”: *Shift in Understanding Mindfulness*, addresses their shift in broadening their perception of mindfulness; and finally *Self-*

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responsibilised Well-being, considers how through learning and practicing mindfulness they feel able to take responsibility of their own well-being.

Prior to diving into the analysis, I would like to introduce an analogy of how the participants used and understood mindfulness. Imagine you are learning tennis for the first time and learning all the different ways in which the ball can be struck. It feels somewhat forced and unnatural learning how to hold the racket, position your body and swing the racket to make contact with the ball. Over time and with continued practice the different types of shot become easier and a flow begins to develop. Some days on the court things will flow and feel smooth and seamless, and on others you feel like you are starting again. Eventually, with practice and time, you feel able to play effortlessly, drawing on your various shots when a ball comes towards you. Now in the context of the thematic analysis, imagine the various types of shot are the various types of ways participants describe their mindfulness practice. Say for example, the forehand represents cultivating *Attentional Awareness*, a backhand represents *Metacognitively Mindful* and a volley symbolises *Mindfully Processing and Problem Solving*. To a person naïve to the intricacies of tennis, when comparing the different ways in which players strike the ball, one may think they are all the same. However, when analysed, subtle differences emerge such as the grip of the racket, the trajectory of the swing and the player's stance and gaze. It is similar for mindfulness: while two participants may have a similar mindfulness practice, their underlying understandings and ways they mobilise mindfulness may differ. I attempt to unpack these subtleties in similarities and differences in how people understand and practice mindfulness throughout the analysis.

Table 2*Thematic Outline of Analysis*

Theme	Sub-theme
Be Focused Right Now: Attentional Awareness	Interoceptive Attention of Breath Exteroceptive Attention Towards One's Senses
Metacognitively Mindful	Acceptance of Thought Struggles with Acceptance Impermanence: To Aid Acceptance Challenge of Impermanence "Control the thought of the thought": Metacognitive Control
Mindfully Processing and Problem Solving	Mindfulness as a Coping Mechanism
Part of Everyday Life	Mindfulness is Intrinsic: People Naturally Have Varying Levels "It's a lot more than what you originally think it is": Shift in Understanding Mindfulness Self-responsibilised Well-being

Finally, continuing the tennis analogy, any of these shots can be mobilised to create a game and a shared overarching understanding as is described in *Part of Everyday Life*. The same principle applies with mindfulness, where one can draw on any number of techniques to create a mindfulness practice that can be used to suit the current situation. As with mindfulness, there is no 'right' or 'wrong' way to play tennis, however, there are ways that are more often utilised or recommended by coaches or professionals compared to others.

Theme One: Be Focused Right Now: Attentional Awareness

This theme reflects the overall nature of how participants speak of their understanding that mindfulness is both achieved and experienced through cultivating a sense of focused attention. This was brought about by having a concentrated awareness on one particular item, whether it was a bodily sensation, a thought or emotion, an activity, or something occurring in their environment. Ways participants described this was by being "focused" (Bella, Emily,

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Kate, Polly, Sam) on a particular thing such as the “present” (Emily, Luke, Mark, Sarah, Shelly) or current “moment” (Bella, Ella, Emily, Kate, Polly, Sam, Shelly). Participants communicated that by cultivating a concentrated attention they were practising a type of mindfulness. For example, Luke explained, “the biggest part for me, is the focus on one thing.” Luke is suggesting that, for him, like many other participants, focused attention is the primary component of mindfulness. Emily further explored this when describing her regular evening mindfulness meditation:

Sometimes there's a lot of things in my mind, like it's the end of the day. So I'm a little distracted for all my thoughts. But then, I start to focus on my breathing, and I start to focus on if I'm feeling some pain in my body, or if I'm feeling cold or warm, or what it's telling me, my body.

Here Emily is explaining how she practices mindfulness through creating a concentrated focus on her breath, and then her body. Through doing this, as she begins her description of her practice, Emily implies she is able to quieten her mind by explaining there are often “a lot of things” in her mind. This idea of being able to “tune in” (Sam) to yourself or your current experience and “tune out” (Sam) of your thoughts was commonly expressed by participants.

The meaning behind these excerpts are typical examples of how mindfulness is described within the literature. This idea of holding attention on a single component is synonymous with the literature on the theories of mindfulness including Kabat-Zinn’s (1994) definition used to begin the interview with participants. It is also described as *self-regulation of attention* in Bishop et al.’s (2004) operational definition of mindfulness, and attention is the second component of Shapiro et al.’s (2006) mechanisms of mindfulness. Further, awareness

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of one's thoughts and where they are focusing their attention is generally a core element taught in MBPs (Chiesa & Serretti, 2009; Crane et al., 2017; Keng et al., 2011; Renshaw et al., 2017) including MBSR (Kabat-Zinn, 1990); ACT (Hayes et al., 1999) and MBCT (Segal et al., 2002). It is also a core component in many mindfulness scales such as the MAAS (Brown & Ryan, 2003); FMI (Zenner et al., 2014); CAMS-R (Feldman et al., 2007) and TMS (Lau et al., 2006). As attentional components of mindfulness are so commonly described within the literature it is not surprising participants framed this as a pinnacle part of their mindfulness practice.

Throughout the analysis of this theme I became increasingly aware of the differences and similarities within the literature between attention and awareness. As outlined in the introductory chapter, definitions of mindfulness and its associated jargon often rely on the reader's interpretation. To clarify for this analysis, when I use the word "attention" I am specifically referring to applying attention to something so it becomes the main thing within the scope of awareness. Additionally, when using the word "awareness" I am referring to a more general sense of attention that is not necessarily focused on one specific thing. As set out above, participants generally described a sense of focus, aligning with how I have described attention. However, at times participants also spoke more broadly about awareness. For example, while exploring their understanding of Kabat Zinn's definition of mindfulness, some participants added words such as "observing" (Sam) which aligns with how I have clarified my use of the word awareness. Another interesting example of how participants broadly described awareness was demonstrated by Mark:

Paying attention, certainly, and occasionally, for me, mindfulness appears to be not paying attention to something, but I guess that's just an illusion.

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While Mark is acknowledging the regulation of attention, he is also adding that at times mindfulness can also be “not paying attention to something.” By Mark conveying this may be an “illusion” he suggests that while practicing he may be noticing something in his awareness but not focusing his attention on it. These quotes are examples of how participants briefly explored the concept of awareness. However, as further demonstrated below, the definition of attention was much more comprehensively explored by participants.

Participants primarily reported cultivating mindfulness in two key ways. These are through a focused attention on grounding sensations such as focusing on your senses, or through focusing on particular stimuli such as your breath. Prior to unpacking these distinct methods of cultivating experiences of mindfulness we explore how participants more generally spoke to understanding attentional awareness during their mindfulness practices. For example, Polly expressed her experience of refocusing as follows:

It can ground you, so [while] your mind is wandering, be focused right now.

Here, Polly is quite explicitly describing that she understands mindfulness as recognising that your mind is straying from the intentional focus point and shifting that awareness back to the originally intended focus. This statement quite clearly frames the process of refocusing her thoughts as a critical way in which Polly understands mindfulness. While some participants unpacked their understanding of attentional awareness in a straightforward manner, others, such as Sam, explored it more comprehensively:

I think I could summarize it with presence. ...it's like being in the moment, so not thinking about the past or the future, and not thinking about... other places..., but just,

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being aware of where you are now. And kind of paying more attention to that side of things, rather than everything else.

In this excerpt, Sam describes what “being in the moment” means to him which he further describes as actively not thinking about various things that are not occurring at the moment. In his last sentence, he is alluding to his awareness of his stream of consciousness and recognizing that mindfulness is “paying more attention” to the thoughts associated with the present moment rather than other thoughts that may also be occurring simultaneously. This experience of being “taken out of the moment” (Kate), or noticing your “mind wandering” (Polly) from the present moment was further explored by several participants. Within Buddhist literature the idea of shifting awareness is often referred to as the “monkey mind” (Carr, 1993, p. 149). This metaphor encapsulates the idea that the mind is restless and busy, like a monkey switching its attention from one thing to another (Carr, 1993; Suzuki, 2020). One is said to be able to tame the monkey mind through practising mindfulness by gently bringing attention back to the present moment. Some participants spoke of this as something they did not understand when they first started practicing mindfulness. For example, Kate reflected on when she was first learning about noticing her mind wandering:

I do remember them saying... it's totally normal to be taken out of the moment and distracting thoughts, but it's about bringing yourself back into the moment. And so... I think hearing that, “oh, yeah, it's actually totally normal to go out and come back”, and... it's fine for it to happen a million times. It's just that every time that you notice it, bring yourself back, and I was like, “Oh!”

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Here, Kate was recalling a moment of realization while she was learning about mindfulness. She had sought advice from her therapist about the app that she used as she was struggling to bring her mind back to the present moment. This concept of shifting awareness back to the present moment or an anchor point was not clear to her or other participants when they first started, which led them to feel they “just didn’t understand” (Shelly) or that their practice was “sometimes ... not working” (Emily). These challenges described by participants loosely aligns with Lindahl et al.’s (2017) challenges with executive functioning. Lindahl described that participants reported feeling unable to concentrate for extended periods of time. A key point of difference between this study and Lindahl’s (2017) is that their participants were primarily adult Buddhist meditators. There appears to be no literature on the challenges experienced in the early stages of learning mindfulness. All participants in the present study described that with practice and further understanding it was normal to experience their minds drifting from their focus point. This raises an important point that there is limited research on adverse effects and challenges of mindfulness (Lindahl et al., 2017, 2019; Baer et al., 2019) and is an area that needs to be more comprehensively explored in future studies.

As described above and in general practice of mindfulness people notice their mind shifting from a point of awareness, acknowledge the shift, and then bring their mind back to the present moment (Bishop et al., 2004; Chiesa & Malinowski, 2011; Shapiro et al., 2006). One participant described an alternative way of doing this. While Luke reflected on his understanding of mindfulness, he drew from his experience of an “exercise” he did while learning about mindfulness at his church. This experience consisted of him eating a “fruit burst” - a lolly - where “your job was to solely think about eating the fruit burst and nothing else, and just think about... what the flavour is and how it feels.” Luke’s description aligns with the MBCT “raisin exercise” (Segal & Teasdale, 2018, p. 111) where an instruction is given to focus on various elements of a raisin, engaging various senses. Within an MBCT

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framework this exercise is used to raise awareness of the difference between focused attention and automatic pilot and that focusing on even mundane items can reveal detail we would have otherwise not recognised. While this exercise is an example of cultivating focused attention, how Luke describes his understanding of mindfulness suggests he may have an alternative understanding to other participants:

Luke: But it was a very similar definition of when we were doing the exercise. That's what we were thinking about, about not being judgmental, and about trying to blank out. Does that make sense to you?

Interviewer: Yeah, what do you mean by blank out?

Luke: Um, to not have... other thoughts come in and only focus on the thing that you're thinking about. Thinking about being in the present. And thinking about how you're feeling right now. Instead of worrying about, oh, I've got... this due tomorrow. Or I've got this problem at home? So yeah, pretty similar.

Luke is explaining his understanding of mindfulness, expanding on the quote from Kabat-Zinn, recognizing the concepts of focused attention which he experienced in “the exercise”, “being in the present” and “not being judgemental”. Essentially, Luke’s explanation of what he means by “trying to blank out” possibly shows a non-acceptance of other thoughts entering his awareness, notably where he explains it as “to not have, like, other thoughts come in.” This suggests an element of potentially suppressing thoughts rather than acknowledging them and redirecting the mind back to the focus point. Within the literature, recognising a stream of consciousness and the concept of one’s mind wandering is frequently discussed as a natural part of mindfulness (Bishop et al., 2004; Kabat Zinn, 1990) while the neurological mechanisms of the shifting of awareness are also frequently investigated (Farb et

al., 2007; Siegel, 2007; Vago & Zeidan, 2016). However, Luke's description of blocking out his thoughts appears to align more with the concept of experiential avoidance (Hayes et al., 2004) which describes a reluctance to experience cognitions and attempts to adjust these (Mitmansgruber et al., 2009). This is interesting as it intersects with the later sub-theme of *Metacognitive Control*.

Of note was that participants described the importance of paying attention to the present moment and described two techniques that particularly helped them with this. As these distinctions are not consistently referred to in the current literature, there is no name or phrase that describes these. Therefore, I have adopted two terms from the cognitive attention literature; introspective and exteroceptive (Farb et al., 2013a,b; Fox et al., 2012; Liottel et al., 2001; Mirams et al., 2012; Ryan & Deci, 2000; Smith et al., 2006). Interoceptive attention is the awareness towards the internal state of one's body (Farb et al., 2013a,b; Fox et al., 2012; Liottel et al., 2001), such as attention on one's breath. In contrast, exteroceptive attention is the awareness of stimuli outside of one's body (Farb et al., 2013a; Ryan & Deci, 2000), such as attention towards one's senses.

While the majority of this literature is not directly relevant to this theme and unpacking it is outside the scope of this thesis, these terms are accurate ways participants spoke to mobilising these two types of focused attention. Therefore, when referring to interoceptive and exteroceptive attention, I will be specifically referring to how I have defined them above.

Sub-theme: Interoceptive Attention of Breath

Participants frequently described using a single internal focal point as their primary way of maintaining focused attention. Bringing their attention to their "breath" (Bella, Ella, Emily, Kate, Mark, Polly, Sam, Sarah, Shelly) was frequently explored by participants. While

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some participants stated they “just breathe” (Emily, Sarah, Shelly), they also conveyed that they practiced mindfulness through “watching” (Mark), “being conscious” (Emily), or “focusing on the breath” (Emily, Mark, Polly, Sam). This focus on bodily signals is sometimes referred to as “interoception” (Harshaw, 2015). Maintaining a focus on an internal stimuli such as the breath is commonly referred to as an anchor point (Bishop et al., 2004; Cardoso et al., 2004; Kabat-Zinn, 1982; Michalak et al., 2012; Van Gordon et al., 2015). The anchor point symbolizes an anchor on the seafloor holding a boat in a particular location regardless of the sea conditions. This imagery acts as a metaphor of how mindfulness works, where, through focusing on a single thing, regardless of the busyness of your mind, you are able to remain in a single place, the present moment. While this metaphor was not used explicitly by participants, it depicts how participants described focusing on a single point as a pinnacle part of their practice.

It is worth noting that some participants also mentioned they practiced “breathing exercises” (Kate, Shelly), suggesting not just a focus on but also potentially consciously adjusting their usual respiration rate. These participants described this breathing as different to how they usually breathe day to day. It was evident that participants changed their breath by “slowing [it] down” (Kate) and “breathing into your belly” (Shelly) rather than “down to your chest” (Shelly). These statements create an interesting dichotomy, as while participants primarily described this “focus on breathing” (Bella), it appears that for some participants, there is also an element of changing their breath while practicing mindfulness rather than simply observing it.

Participants frequently discussed at length that they felt a focus on their breath was a “core element” (Sam) of their practice and emphasised it was something they found to be particularly helpful. When I asked Emily what she thought was the most helpful part in her mindfulness practice she elaborated on her feelings around a focus on the breath:

Something that is [easier] for... beginners is to breathe, be conscious of your breathing. Be conscious of what are you feeling. And sometimes even... what we [were] doing was..., feel... Really that you are breathing, feel with your hand, put it under your mouth and by your nose and feel it... I think the breath, Yeah, to me... it works every time. You know, when I'm doing exams or when I feel anxious. Breathe, and everything [is] going to just relax, and then when you're relaxed, you can kind of [think of] something else.

Emily emphasizes a common perception of how important focusing on her breath is to her mindfulness practice. She positions breath awareness to be something attainable for people who have little experience of mindfulness by saying it “is [easier] for... beginners.” Further, she reflects on her ability to sense her breath through “feeling” the breath entering and leaving her nostrils. Through stating “it works every time,” Emily highlights just how important a focus on the breath is to her practice. When she elaborates on this, she alludes to her motivation of using mindfulness to counteract feelings of anxiety, increasing her ability to relax, which plays into the later theme of *Mindfully Processing and Problem Solving* where participants commonly “use” mindfulness techniques as coping mechanisms.

Some participants also reflected on how learning to focus on a central stimuli such as the breath would have been helpful when they first started. For example, Sam spoke about his belief that awareness of breath is fundamental to practising and understanding mindfulness:

How I wish I had started out is through a pure focus on the breath, because I think the way that I started out, it was like these visualizations and stuff... and they were good... and... kind of relaxing... I feel like they didn't really help me with awareness. So I

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think that the focus on the breath kind of helps to build that foundation on which you can start to build other stuff. Whereas visualizations have their useful applications, but I think that they're best paired with something like awareness of the breath as well.

In Sam's response, he positions breath awareness as the paramount element to develop the skill of awareness. By describing it as a "pure focus" and a "foundation" he emphasises the shared belief that breath awareness, in particular, is a primary way to both learn and practice mindfulness. Sam further emphasised the importance of breath awareness when comparing it to "visualizations" where it is so important that it should be "paired" with other techniques that can be used to generate mindfulness. This excerpt is an example of how participants described how central breath awareness is to how they both understand and practice mindfulness. Given that a focus on the breath and other interoceptive attention techniques are a common construct within MBPs such as MBSR (Kabat-Zinn, 1990); ACT (Hayes et al., 1999) and MBCT (Segal et al., 2002) it is unsurprising that this was considered to be important to participants. Within the literature, several quantitative studies have reported benefits of breath awareness meditations. For example, Schöne et al. (2018) reported an increase in participants sustained visual attention and spatial working memory after completing eight weeks of breath awareness meditation compared to progressive muscle relaxation. Focused breathing is also suggested to significantly increase emotional regulation scores in EA students even after a short 15 minute focused breathing exercise (Arch & Craske, 2006).

A recent study by Pozuelos et al. (2019) reported significant improvement in metacognitive processes and impulse response was evident compared to controls in participants who practiced breath awareness meditations over a three week period. Further, the positive correlation of neural activity that occurred over the study suggested that these

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improvements are cumulative, highlighting the importance of a consistent practice. Finally, MBSR participants with diagnosed anxiety disorders attributed breath awareness to increased feelings of control of panic and anxiety during follow up and exit interviews (Miller et al., 1995). Unfortunately, these interviews were not analysed using qualitative methodology resulting in this finding not being explored in depth. Within the current study, while not all participants specifically referred to focused awareness meditations, the research aligns with participants' understanding that a focused awareness on the breath is one way to mobilise mindfulness.

Sub-theme: Exteroceptive Attention Towards One's Senses

Bringing attention to where one was positioned in space was another common way participants reported practicing mindfulness. As previously noted, this will be referred to as exteroceptive awareness. This was most commonly described as being “grounded” (Ella, Kate, Polly) and using mindfulness to “ground myself” (Ella, Sarah) or that they found it was “grounding” (Bella). Participants generally described cultivating this through focusing on their “senses” (Ella, Kate, Polly, Shelly) or “bodily sensation[s]” (Sam) and how these interacted with their surroundings. Some participants also described this in more general terms. For example, Ella explained her understanding of mindfulness as “trying to ground myself and think about where I am”:

Basically, the purpose of it is to be grounded, and where you currently are or where you currently sit.

In this excerpt Ella positions mindfulness as having awareness of the present moment through focusing on your position in space as compared to your surroundings. Her use of the

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word “grounded” suggests her interpretation of mindfulness involves feeling centred with an awareness of both her physical location and her internal processes. This is shown when Ella states “where you currently sit.” As she has just referred to current space, it suggests she is referring to having an awareness of her emotions and her cognition, where you mentally “sit”. This idea of being “more present” (Mark) was commonly referenced throughout the interviews. Participants particularly emphasized the importance of being “conscious of the environment” and “aware of your surroundings and aware of your body” (Bella) as this allows you to live life “without being stuck up in [your] head” (Kate) and “live in the moment” (Bella). These descriptions echo’s the earth-touching statues of the historic Buddha, *Shakyamuni*, where he is often portrayed in a seated position touching the ground (Kamalamani, 2014). Being aware of your current senses and where you are in space made participants feel grounded, however, feeling grounded was also how participants described mindfulness.

One tool used by participants to bring their awareness to the present moment was to identify certain things that related to their senses (sight, touch, feel, sound, and taste). For example, when asked how she resonated with Kabat Zinn’s (1994) definition of mindfulness, Shelly explained:

My definition of mindfulness, it's... so I refer to the senses. So it's all about the sense for me, so if I can't see..., hear, feel it, it's not going on, so that's where I need to bring myself back to mindfulness, if that makes sense. That's how I keep in tune with that... all body... mindfulness for me. Yeah, I don't really have a proper quote for it, but I just always go back to senses... In mindfulness, yeah.

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In this response, Shelly briefly explains some of her mindfulness practice through referring to the individual senses of sound, touch and sight. By explaining mindfulness is an “all body” phenomenon for Shelly, she positions this process to be something that helps her to be “in tune” or aware of her body in physical space. In this extract, Shelly also alludes to her understanding of mindfulness as being aware of the present moment. This is particularly shown where she says “bring myself back to mindfulness” indicating that throughout this excerpt the word “mindfulness” is synonymous with “the present moment”. This is an example of how participants defined mindfulness as understanding how to use their senses to bring them back to the present moment.

Some participants provided more specific detail of their perceptions when describing their mindfulness practice. Interestingly, these more intricate descriptions arose when participants spoke about how they practised mindful activities other than meditation. For example, Emily explained that when she incorporates mindfulness into her walking, she “[focuses] on the sounds like the birds or just the wind or if I [am] cold.” Here, like many participants, Emily focuses on some but not all of the five senses - sound and touch. Sound, in particular, was depicted more frequently than the other senses when describing mindfulness experiences. Polly explicitly provided details of her thoughts when drawing on her senses as a way to induce mindfulness during her practice:

I'll think about... smell, and touch, and... what I can hear, and..., I like to peel back the layers of sounds... trying to identify all the sounds that you can until you get to nothing, like, nothing.

For Polly, who did not identify with having a formal meditation practice, this was one of the main ways she practised mindfulness. The symbolism she used of “peeling back the

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layers” emphasizes just how much stimuli can be present for us in any given moment.

Further, Polly suggests that by recognizing the stimuli and letting them go you will “... get to nothing.” This idea of letting go of the things you recognize is frequently mentioned in the literature and will be unpacked in more detail in *Metacognitively Mindful*. These are examples of how participants focused their awareness on their senses to cultivate mindfulness. It is interesting that Polly, like many participants, explained that by drawing attention to their senses they were able to bring themselves back to the present moment which they perceived as mindfulness.

While many mindfulness practices reference awareness of various senses and the present moment (Collard & Walsh, 2008; Gethin, 2011; Kabat-Zinn, 2012, 2015), the sensory awareness elements of mindfulness have been suggested as a suitable companion for psychotherapies (Tophoff, 2006). There appears to be limited literature which specifically investigates mindfulness or other exteroceptive practices focused on drawing one’s attention to their senses. A pilot project of “Sensory Awareness Mindfulness Training” (SAMT; Collard & Walsh, 2008) is an MBP purpose-built to improve work life balance through a focus on a variety of meditations aimed at drawing attention to senses. Pre- to post-intervention data from nine university employees showed significantly increased mindfulness. The study also reported a significant decrease in stress. While this study shows some preliminary support for SAMT as an MBP, the methodological shortcomings and ambiguity are concerning and warrant this study to be interpreted with caution. For example, the authors did not detail how or what they used to measure stress. While this small study holds some preliminary support for sensory awareness, more detailed and methodologically robust studies need to be conducted. The current analysis suggests drawing attention to your senses is a beneficial way to practice mindfulness, however more research is needed to further understand the relationship between the benefits of sense-based mindfulness activities other

than feeling grounded or aware of the present moment. In particular, it would be interesting to compare outcomes of mindfulness focused on the senses compared to one's breath.

One interpretation of how participants describe using a focus on their senses to elicit feelings of being grounded could be explained by schema theory (Brown et al., 2007; Leahy, 2002, 2003; Silberstein, 2012). This theory suggests that people somewhat automatically process stimuli in a biased way to add to preconceived ideas or world views (Leahy, 2002, 2003; Silberstein, 2012). The way participants identify engaging with their senses and the surrounding environment suggests they are doing this in a way to interrupt and possibly at times adjust existing schemas (Brown et al., 2007). In simpler terms, when participants engage in this type of mindfulness they seem to be viewing their position in space through a new 'mindful' lens that minimises preconceived ideas they held in their mind prior to engaging in their practice (Olendzki, 2005).

Theme Two: Metacognitively Mindful

The second theme explores ways participants adopted metacognitive techniques as part of their practice. Participants described three core ways that mindfulness allowed them to adapt how they perceive their own thoughts and feelings. They described learning to view thoughts as impermanent, adopting an element of acceptance and increased perceived control of how they view their thoughts. Some participants also reported that this perceived control also filtered through to impact their behaviours. While the ways the participants reported shifting their perception differed, they can be seen to all lie under a broader concept of metacognition. Put simply, metacognition describes how one thinks of the thought of their thought (Jankowski & Holas, 2014; Satlof-Bedrick & Johnson, 2015). Metacognitive thought allows one to metaphorically step back and become aware of and reflect on thoughts (Flavell,

1979). This theme intersects with the earlier theme of awareness in a sequential manner as, in order to adopt metacognitive strategies, one must first be aware of the thought.

Sub theme: Acceptance of Thought

Adopting an element of acceptance of their thoughts and experiences was one way many participants spoke about how they understood and defined mindfulness. Ways in which participants described this idea included phrases such as “accepting your feelings” (Shelly); “not being scared of feeling those feelings” (Shelly); and “letting it be” (Ella). These quotes all reflect a shared perception that acceptance of your thoughts and feelings is an integral part of mindfulness. Further, participants described that through their mindfulness practice they adopted a mind-set of acceptance, thus altering how they typically perceive their thoughts by using a mindful lens to interpret and adjust their thoughts. This can be seen, for example, when Kate reflected on what mindfulness means to her:

It just means to me being in the present moment..., and actually be accepting of the present moment, so not trying to fight what is going on or not trying to fight the experience or anything about it. Just being... okay, this is what it is, and not being judgmental of whether it's right or wrong, or good or bad. It's just about going, this is what it is, or this is how I'm feeling or whatever, and go, okay, that's it... not putting any labels on it, and just kind of... accepting it.

In her response, Kate clearly explores her understanding of mindfulness and how acceptance is a central element of her practice, as well as being a necessary component that she incorporates into her practice. Her views on mindfulness were also reflected by many others. Another way in which participants spoke about incorporating an element of

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acceptance is demonstrated by Bella when she elaborated on her own perception of mindfulness:

A time to be open in your own feelings, which is ... hard to do a lot of the rest of the day.

Here, Bella explicitly states that being “open in your own feelings,” which could also be described as acceptance of one’s feelings, is how she understands mindfulness. Interestingly, Bella elaborates by explaining that she finds acceptance of her internal experience difficult to do when she is not actively practicing mindfulness. This suggests that while Bella incorporates acceptance into her mindfulness practice, she currently struggles to practise acceptance in her daily life. While this is how some participants described adopting a view of acceptance, others explored it in a way that suggested they incorporated it into their general life. For example, Polly described she feels it is important to also “embrac[e] when you don't feel 100% as well” (Polly). These differing ways in which participants described acceptance emphasises the nuances of how participants understand and incorporate mindfulness into their practice, whether that be meditation, a mindfulness activity or adopting a mindful view on life. These differences in how participants described incorporating acceptance into their practice intersect with the fourth theme, *Part of Everyday Life*, described later in this analysis. In many ways it is unsurprising that participants reported incorporating acceptance into their mindfulness practice as it is a concept mentioned particularly in western mindfulness literature and its associated interventions.

As described in detail in Chapter 1, acceptance has long been a component of western theories of mindfulness. Bishop et al.’s (2004) operational definition of mindfulness described acceptance within the “orientation to experiences” and Shapiro et al.’s (2005) component of

“attitude”. It is also alluded to in Kabat Zinn’s (1994) definition that was provided to participants at the beginning of the interviews, specifically from the word “non-judgementally”. Acceptance has been incorporated into many western psychotherapeutic techniques, particularly third-wave therapies. For example, it is a central component in ACT (Hayes et al., 1999, 2004); is described within the “being” mode taught in MBCT (Segal et al., 2002); and in DBT (Linehan et al., 2001) where acceptance is taught through behavioural exercises. As acceptance is taught through these various techniques within western society it is somewhat unsurprising that participants identified acceptance as one way they understand and mobilise mindfulness.

Sub-theme: Struggles with Acceptance

While many participants recognised acceptance as a core part of mindfulness, some also reported struggling to adopt a lens of acceptance into their mindfulness practice. Participants particularly reflected on this struggle when they started to learn and practice mindfulness. Negative language is used when describing the challenges of accepting how they felt during and after their practice. Statements such as “I mustn't have done it right... I'd start judging every meditation I did” (Kate), and “it doesn't work [...] it's not doing anything to me” (Emily), explicitly suggest some participants had challenges with acceptance through voicing their struggles when they first started. Similarly, Sarah reflected on relying on the opinion of others to gain insight as to whether her mindful practice was “working” when she first practiced:

I think it's hard for you to know, unless you kind of look back and then to see.

[...]Before I started, did I actually improve?, or am I worse?, or am I just neutral?

because even if you're just not neutral, sometimes that means that it's not being

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effective, like it's not working [...] Because otherwise, if you're in the moment, and you're just trying to practice that mindfulness, like if you go a week later and be like... did anything improve, you might actually [...] not be able to see a result, because it's not like it's going to work that quickly. [...] If you're not so great at the reflecting thing, other people's input is a really good way of seeing whether or not it's actually working.

While this quote clearly intersects with the first theme, *Be Focused Right Now: Attentional Awareness*, as Sarah reports getting input from others when she first started to be conscious of her perceived lack of awareness. Comparing her mental state before and after practicing for a week implicitly suggests that Sarah does not hold an element of acceptance through her practice. Sarah further suggests her lack of acceptance by positioning mindfulness as something that works to change her mental state. If you are seeking to change something you are not accepting it. Sarah is also positioning mindfulness as something that affects her life beyond her practice by giving the example of reflecting a “week later,” further demonstrating this quote’s intersection with the fourth theme, *Part of Everyday Life*. Interestingly, Bella expressed this concern when reflecting on potential negatives of practising mindfulness:

[I] worry that if I'm always focusing on being mindful that I'm not going to deal with things that are problematic in life or things that are, I guess, more sort of ways of life that aren't conducive to happiness.

Here Bella highlights a paradoxical element of mindfulness by expressing her concern that by incorporating acceptance into her practice there is a possibility of becoming

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complacent or passive. As described in the introduction to Chapter 3, participants generally set out to practice mindfulness to bring about positive changes in their life, which could also be interpreted as a desire to ease suffering. However, as participants recognise that acceptance is an attitudinal quality associated with mindfulness, a paradox is created as they originally sought to use mindfulness to create a shift but to do this they must accept the present moment and their current situation (Shapiro et al., 2018). Bella's concern lies with the possibility that through channelling acceptance in her practice she will ultimately become complacent. According to Harris (2014) a way to overcome this is by shifting your perspective of why you practice mindfulness from one centred around creating change or self-improvement to one that seeks clarity of the present moment as, after all, the present is already happening. This paradox may explain why some participants experienced a struggle with adopting acceptance into their practice, particularly when they first started practising mindfulness.

Some participants also reported struggling with the acceptance of particular emotions during their current practice. For many, but not all participants, this was particularly around negative emotions. For example, both Mark and Emily spoke of feeling concerned about feeling "fear" during their mindfulness practice. This was typically suggested as participants spoke to this in a present tense illustrated by Mark's exploration of fear, "Despite being mindful, I still worry about it," suggesting his acceptance of experiencing fear was still a current challenge. By expressing concern over feeling particularly negative emotions when practicing mindfulness in the present tense, it suggests participants are struggling to, at least at times, incorporate acceptance into their practice.

Similarly, Sam also alluded to a challenge where he expressed anxiety about attending a meditation retreat in the future, saying he was "more nervous" about the upcoming meditation retreat than the previous one he attended. When asked if that was because he knew what to expect, he replied, "Yeah, definitely. Sometimes, I'm like, s**t, I'm going to have to

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face myself.” Sam is positioning mindfulness as a way to understand and be in touch with your actual self through his use of the expression “face myself.” This idea of facing yourself appears quite confronting and potentially frightening, demonstrated by his uncharacteristic use of strong language. In all, this quote suggests Sam has a sense of uncertainty and unease in his acceptance of himself during his mindfulness practice. The tones of ambivalence and uncertainty in this quote mimic those of other participants when they reflected on the challenges of acceptance they experienced with mindfulness.

While participants mostly spoke to struggling with acceptance, they also generally spoke of overcoming this through continued mindfulness practice. For example, Emily reflected:

In the beginning... it was frustrating [...] And then I was like it has to be like that.

In this excerpt Emily portrays her belief that experiencing frustration and struggle with acceptance is part of the “process” (Emily) of learning mindfulness. Other participants also spoke similarly of coming to terms with struggles with acceptance within their mindfulness practice at least to some extent. This was typically demonstrated by participants speaking to both incorporating acceptance and struggling with acceptance, suggesting that in general, participants attempted to include acceptance but sometimes struggled to do so, especially when they first started practicing.

As explored above, acceptance is a commonly utilised element in mindfulness and its associated interventions. However, at least to my knowledge, there appear to be no studies investigating how people who practice mindfulness struggle with incorporating acceptance into their practice. This is an interesting finding as it highlights the importance and need for more investigative qualitative frameworks exploring the specific areas participants find

challenging within mindfulness practices. This is particularly important for programmes that teach mindfulness to meditative naïve individuals as these participants frequently reported struggling when they first began learning mindfulness. Future research investigating these challenges would allow deeper insight into how mindfulness programmes and interventions can adapt to help participants overcome these challenges.

Sub-theme: Impermanence: To Aid Acceptance

Participants recognised “impermanence of thoughts or feelings” (Sam) as part of how they understood mindfulness. This was often framed in a way to suggest that the concept of impermanence was used to aid feelings of acceptance. For example, participants spoke to incorporating impermanence into their practice through statements such as “this will pass” (Kate), “things are just passing away” (Emily) and being able to “let go” (Shelly). Participants also described metacognitive shifts in their thoughts which they attributed to mindfulness practices. This included viewing thoughts and feelings as “very temporary” (Ella, Luke) and being able to “slow down” (Sarah) their thoughts allowing them to shift their perception “about the universe and how [you] think about things” (Ella).

Participants particularly described these metacognitive shifts with reference to easing mental tension, using mindfulness to distance themselves from their thoughts and even their past experiences in such a way that they have no impact on them. For example, Luke described one helpful part of mindfulness was the ability to “unpack and, in a way, distance yourself from how you're feeling.” While Luke acknowledges his increased awareness, discussed in *Attentional Awareness*, he is also suggesting he has developed the ability to view thoughts as less permanent. He does this by symbolically articulating his ability to view thoughts as movable and impermanent rather than something that stays within a person.

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Shelly also expressed that mindfulness allowed her to create a sense of distance from her traumatic experiences when she reflected on what mindfulness meant to her:

Shelly: It gives me the ability to [...] have a clear mind, while... walking beside your trauma. Does that make sense? Like, is it a good example?

Interviewer: That's such a nice way to describe it.

Shelly: You literally... give yourself a clear pathway. Well [it's] like... walking with your trauma.

In this excerpt, Shelly unpacks her understanding of mindfulness. First, she describes mindfulness as having the “ability to have a clear mind,” suggesting Shelly believes she has the ability to remain calm, composed, and think rationally. In adding “while walking beside your trauma,” Shelly is further acknowledging and demonstrating through symbolism how she incorporates acceptance of her past experiences into her practice, while also acknowledging she is able to use mindfulness to view her trauma as something that is physically separate from her present, giving her a “clear pathway”. The implication is that Shelly has come to terms with her past experiences and, while they will always be part of her, they are not necessarily part of her present or something she needs to continue to hold on to. These quotes all have an underlying tone of acceptance that their thoughts are impermanent hence the concept of impermanence being part of the acceptance sub-theme.

It is notable however that within the current Buddhist literature this shift in how participants viewed their thoughts, experiences and feelings particularly aligns with the eastern literature of mindfulness and impermanence. As outlined in Appendix A, the concept of impermanence (*Anicca*) is one that underpins the Buddhist concept of suffering (*Dukkha*), the first of the four noble truths (Kalupahana, 1975). While at an intellectual level, one is able

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to recognise that the world is consistently changing, rendering impermanence an inevitable part of reality (Kong, 2009). However, Puriso (1999) argues that people have a tendency to lead their life as if to expect permanence or stability which results in suffering. This is aligned with participants' experiences of mindfulness practices, particularly meditation, which help us to become aware of consistent change, particularly through cultivating focused attention on an anchor point such as the breath. This process is thought to help perpetuate the realisation that impermanence is inevitable and that grasping onto the concept of permanence will inevitably result in suffering (*Dukkha*) (Kong, 2009). As explored above it is evident that the participants have adopted a view of impermanence throughout their mindfulness practices, creating a shift in perception of how they understand their thoughts.

Within a western context the idea of impermanence is acknowledged but referred to in many different ways including “cognitive diffusion”, “decentering” and “metacognitive insight”. “Cognitive diffusion”, one of the six interconnected elements of the ACT concept of “psychological flexibility” describes the concept of viewing thoughts and events as temporary (Fletcher & Hayes, 2005; Gu et al., 2015; Strosahl et al., 2004). Similarly, “decentering” describes the process that enables people to contemplate their emotions or thoughts as impermanent rather than viewing them as an absolute truth (Allen et al., 2009; Fresco et al., 2007; Safran & Segal, 1990). Finally, “metacognitive insight” is the more often referred to term which encompasses the processes described above and appears to be used more frequently in the current literature (Bishop et al., 2004; Mason & Hargreaves, 2001; Norman et al., 2019; Teasdale et al., 1995). These concepts demonstrate how the eastern concept of impermanence is incorporated into westernised mindfulness practices. As impermanence is reflected throughout both eastern and western literature it is unsurprising that this is one way participants understood what mindfulness is and how they incorporate this metacognitive process into their practice.

Sub-theme: Challenge of Impermanence

Parallel with the challenges of acceptance, some participants also reflected on how they managed the challenge of impermanence in different ways. Mark stated that he was struggling with why the “mind is constantly wandering a little bit” suggesting possibly a lack of understanding or acceptance of the impermanence of thoughts. Conversely, Sam reflected on challenges of not experiencing the impermanence of thoughts at times in his current practice:

So much stuff comes up, and I noticed how [...] different emotions, certain emotions I have more [...] trouble with, [...] just observing and then letting go. [...] They kind of hold me in a bit more.

Sam is reflecting on the “weight” of some of his emotions compared to others. While Sam recognises the challenge of accepting and acknowledging a cognition, and then letting it go from his awareness, it is apparent that he struggles with experiencing impermanence which is possibly due to non-acceptance as evidenced by him saying “they kind of hold me in a bit more.” While these examples of how participants spoke differed in context, they highlight the intersections around the concepts of acceptance and impermanence. Aligning with the *Struggles of Acceptance* sub-theme, while participants reported struggling at times to incorporate impermanence, there appears to be no western literature to date unpacking this challenge. From a Buddhist perspective, it could be viewed that these participants struggle with attachment to their thoughts (Maex, 2011). Unlike participants’ challenges with acceptance, the challenges with incorporating impermanence appeared to be largely unresolved, as reflected by

their use of the present tense. This further highlights the need for more understanding of how people who practice mindfulness can overcome obstacles within their practice.

Some participants framed this challenge in an alternative way. Instead of interpreting this as a challenge to accept particular thoughts and feelings, they attempted to incorporate avoidance into their practice. Shelly, for example, explained that at times she finds it difficult to accept negative thoughts and struggles “to push it away and say, ‘I don't want you to be in my head.’” Shelly also described finding it hard to “take out the negative” thoughts. These comments emphasise the challenge some participants experienced with incorporating metacognitive elements of acceptance and impermanence into their practice. Despite participants reporting these challenges, by acknowledging concepts of acceptance and impermanence they indicate that these are core ways participants understand and practice mindfulness, even if it is sometimes coupled with challenges. This particularly highlights the need for further research among challenging experiences associated with mindfulness (Britton, 2019; Wong et al., 2018). One possible interpretation of comments such as these is that they are adopting elements of control into their practice which are further discussed below.

Sub theme: “Control the thought of the thought”: Metacognitive Control

The final way participants reported including metacognitive processes into their mindfulness practice was through expressing the belief that mindfulness allowed them to have “control” (Ella, Mark, Sam, Sarah, Shelly) of their perception of their thoughts. Specifically, participants described mindfulness as the ability to “control how you pay attention to what you're paying attention to” (Sam); as a way to “control the thought of the thought” (Shelly); as a “mind management, or consciousness management” tool (Mark) and as “being in control of things that... pop up into your mind” (Shelly). These examples all illustrate a shared understanding that by practicing mindfulness the ability to adjust how you view your thoughts

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develops. This idea of a shift in understanding your thoughts aligns with the concept of metacognition described earlier in this theme. When asked what impact mindfulness has had on her mental health and well-being, Shelly replied:

I'm so much more positive, and I don't look at my trauma as a bad thing [...] mindfulness has taught me that, yes, everything happens for a reason, but you're in control of what it's like after that..., and it's taught me to just know that you can literally do anything, and... it's so powerful what we can do with our minds... and what we set our mind to. [...] I never ever thought that I [would] get to the point where I am comfortable... talking about some really awful stuff, but it's because of mindfulness [...], it's so massive. So, ... I'm just really grateful that I've been able to get myself to the point now where I can be thankful for a lot of things... because, ... eight years ago, my trauma was... 95% of what I thought about. That was... all day every day. It controlled what I did every day. My thoughts, how I acted with people, whereas now my traumas [are]... 5% [of] what I do. [It's] completely... flipped the switch of everything. [...] and you have literally control over... a lot of things.

Shelly's description demonstrates how she understands mindfulness and how it has helped her to change how she views her past experiences. In this excerpt, Shelly reflects on the transformative shift from feeling “controlled” by her thoughts and past experiences to feeling that she has “control over” many aspects in her life. Shelly uses a lot of strong language such as “you can literally do anything” and “it's so powerful what we can do with our minds.” This suggests Shelly is speaking from a place of empowerment and feels able to accomplish anything “because of mindfulness.” This excerpt is an example of how participants believe that mindfulness allows them to have “control” over how they view their

thoughts. In some ways, this aligns with part of Monshat et al.'s second phase of gaining stability in their grounded theory analysis where participants experienced feeling “conscious control” over their thoughts (Monshat, 2012; Monshat et al., 2013). However, this was not explored in depth leaving it difficult to distinguish similarities or differences between this and Monshat et al.'s studies.

It is interesting that a number of participants chose to use the word “control” when describing their shift in perception. Particularly as it seems somewhat in contradiction to incorporating the metacognitive element of acceptance. One theoretical framework that may help unpack this unexpected understanding of mindfulness was proposed by Rothbaum et al. (1982) which proposed that the perception of control is impacted by two elements, “primary” and “secondary perceived control”. “Primary perceived control” is described as the awareness that they have the autonomy to modify their environment to some extent. An example of this within the current study is seen where Emily is describing a shift in perceived ability to “decide” what is “good or not good for [her].” This is particularly evident when she said:

I can be responsible for my own life. Yeah, for my decisions.

While the way participants spoke during interviews cannot often be attributed to primary perceived control, Rothbaum et al.'s (1982) idea of “secondary perceived control” could be attributed to much of how participants spoke. Secondary perceived control is described as using cognitive strategies such as reframing to shift one's perspective on a situation which could also be viewed as acceptance (Morling & Evered, 2006; Rothbaum et al., 1982). It is interesting that this definition explicitly intersects with the sub-theme of acceptance. An example of this is where Ella reflected how she used mindfulness to process her father's “passively racist comments”:

I just sit there and it's kind of like... that's not how I think, but I understand why you would think that because that's how you grew up. I can get actively shitty, I can try with what I can to change that, but at the end of the day, it's you. It's how you've been brought up, that's what your thoughts are and I can't change that...

While Ella is not condoning her father's racist comments, she appears to recognise that she has limited control over her father's beliefs and while she could get "actively shitty" an alternative approach is to accept that she cannot "change" or control her father's thoughts and therefore is able to find a way to accept them. This change in perception of how you view thoughts was more commonly described by participants as *primary perceived control* as evidenced in the above paragraphs where participants predominantly describe a metacognitive process of changing their thoughts. Rothbaum et al.'s (1982) theory proposes that where direct or primary control is not possible, one uses secondary control such as shifting their perspective. This is one way to understand how the participants understood and incorporated control into their mindfulness practice.

In more recent mindfulness literature there are limited studies directly investigating the relationship between mindfulness and control. Measures of self-control were investigated in adults who had completed a three day mindfulness course (Frieze et al., 2012). The authors found that there was limited impairment in attention and concentration for those who meditated for five minutes after an emotion suppression activity compared to those in a control condition. This suggests that shortly after meditation one may have an increased ability of self-control. However, as this sample is of an older age range with less experience than the sample in the current study, it is difficult to draw conclusions from this research.

Bowlin and Baer (2012) measured dispositional mindfulness and self-control in undergraduate students, a population that is more demographically similar to the current study. A positive correlation of dispositional mindfulness and self-control was found through regression analysis of the self-report measures, supporting the idea that those who report higher levels of mindfulness also report higher levels of self-control. Unfortunately, the study did not record if participants had any prior mindfulness practice. The authors also critiqued that fact that the FFMQ (Baer et al., 2006) which was used in their study does not fully capture the experiential nature of the internal experiences of mindfulness. While the present study is qualitative in nature and therefore did not incorporate measures of mindfulness, participants did report having increased levels of dispositional mindfulness as evidenced in the fourth theme *Part of Everyday Life*. This positive relationship between self-control and dispositional mindfulness is one way to understand why participants reported experiencing perceived control when practicing mindfulness.

The concept that mindfulness increases perceived autonomy over thoughts is aligned with participants' reflections that mindfulness improved their control over their own behaviour. For example, when I asked Ella why she continued to practice mindfulness she replied:

The best way to put it is helpful. It kind of keeps me in that centre line. [...] At the end of the day, what is going on in my head is out of my control to some extent, but it's something that kind of bring[s] me in or take[s] me out, basically, and that's just one of the things I can kind of control [in] my life. Mindfulness is something, in control. Whereas my brain chemistry, I can't control. So it's good to have control.

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Ella is explaining her desire for control in her life and how she believes mindfulness helps fulfil this need. Where Ella says “keeps me in that centre line” she is referring to her belief that through practicing mindfulness her mood swings (due to bipolar) are less extreme. This is interesting as she follows this by expressing that she feels to some extent that her internal processes feel out of control, however, mindfulness has developed her ability to “bring [her] back” to the present moment or “take [her] out” of a thought pattern. While some of the content in this excerpt juxtaposes the other, her overall message conveys that although she recognises it is impossible to control her thoughts and brain chemistry, she is able to pay attention which makes her feel more in control. Some ambiguity remains around whether Ella was talking about control of her thoughts or her behaviour. This was a common thread among many participants’ comments around the idea of “control”.

Another possible way to interpret how participants used “control” in their mindfulness practice is through the concept of re-perceiving (Shapiro et al., 2006, 2009) which is also known as decentering (Fresco et al., 2007). This is shown where participants report on the metacognitive ability to step back and reflect on their thoughts rather than being consumed by them, suggesting they are more detached from their emotions. Within the current analysis it seems that participants’ descriptions of “control” suggest that they felt an increased ability to use metacognitive strategies which result in them feeling in control. That is, participants metaphorically feel able to step back and observe their emotions rather than being consumed by them. However, there is a possibility that participants meant they felt literally in control of their thoughts and emotions, which does not typically align with common understandings of mindfulness. This ambiguity is seen in Sarah’s narrative about control:

I think it means being... in control of your thoughts, and actually, not being in control of your thoughts first and foremost. Because if you're not being mindful of what you're

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doing throughout the day, you're going to get... swept up by the atmosphere, whether it's stressful, whether it's sad, whether it's just the people around you, if you're able to control yourself and your thoughts, you're able to then actually go into any situation and be able to handle it... Whereas, before, I used to just get stressed because it'd be like loads of assignments, and I would like, just naturally get stressed, but [...] now I can kind of go into it and be like, here's a load of assignments, yes, I'm stressed, but I'm able to cope with it, because I know that I'm in control.

Here, Sarah attempts to unpack her position of how control fits into the phenomenon of mindfulness. Throughout this text we see Sarah contradicting herself which suggests that even for people with a regular mindfulness practice it can be difficult to untangle and understand how control fits into mindfulness. However, Sarah's statement of "if you're able to control yourself and your thoughts, you're able to then actually go into any situation and be able to handle it" suggests that she has an increased awareness of her ability to reappraise or metacognitively view her thoughts. Accounts such as Sarah's, where the concept of what participants mean when they reference feeling control, suggest that, in general, participants were describing an increased sense of agency, so that they perceive their thoughts to have less power over them. I believe that participants conveyed that this was a result of learning metacognitive strategies resulting in feelings of metacognitive control.

Theme three: Mindfully Processing and Problem Solving

At times, participants described mindfulness as processing their thoughts and emotions. Often participants described mindfulness as "thinking" (Ella, Luke, Sarah), "reflecting" (Bella, Ella, Kate, Luke, Sam, Sarah) or "problem solving" (Mark). Participants described these as reasons for when and why they practice mindfulness. Participants

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described choosing to practice mindfulness “when I have a very confused head, because I’m unsure what I’m upset about or what I want to be doing” (Mark), or practicing if something “bad happens” (Bella), taking “time off to like, reflect on it, or just like, feel, those things” (Bella). For others, they used mindfulness to understand “what happened [throughout] my whole day, and what produced that” (Emily), and described that mindfulness practices “help you to be a bit more realistic [...] and logical” (Kate) and that it helps with “noticing a connection or a lack of connection between what you care about and what’s going on for you at the moment” (Mark).

Overall, this theme intersects with the theme *Metacognitively Mindful* evidenced by participants speaking with increased agency around the ability to process and understand their thoughts, suggesting they may be using the metacognitive processes previously discussed to unpack and understand their thoughts and feelings. Further, participants refer to “reflecting” as this was often coupled with either acceptance, or non-acceptance. Despite these intersections, this theme diverges from the previously explored themes as in the current theme, where participants are actively seeking to understand either their current or historical situation or emotions, answering the research questions of both how and why participants mobilise mindfulness. In previous themes, the focus has been more centred around unpacking how they engage with their present moment thoughts and emotions during their practices. Finally, this theme is particularly interesting as these accounts of reflection or processing were solely discussed while participants described their formal meditation.

A clear example of how participants talk of reflection is demonstrated by Sarah’s description when she recalled her daily morning mindfulness practice:

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You just sort of sit and you just sort of think about ... all the things that have happened, and then all the things that you [...] want to achieve for the day, and then you sort of like start planning out the things that you need to do.

She incorporates reflecting and processing into her formal practice to reflect on her previous experiences and to also plan what to do throughout the day. Sarah, like other participants, describes this reflecting with underlying tones of acceptance demonstrated by an absence of negative rumination when she reflects on “all the things that have happened.” This is an example of how participants referred to incorporating reflection into their mindfulness practice.

Another way participants described incorporating processing and reflecting into their formal mindfulness practice is demonstrated by Luke who described asking himself questions which he likened to using a “flow chart, which seems quite scientific and mathematical.” Later in the interview I asked Luke how mindfulness had impacted his mental health and well-being. In his response, Luke further unpacked the type of questions he asks himself during his mindfulness meditation practice:

I think going back to [...] self-improvement, and self-reflection on how am I living my life right now, and how is that is making me feel... Am I happy with what I'm doing? Stuff like that has definitely made me less stressed because [...] I think I'm now able to identify when I do feel stressed, or when I do feel under pressure. Because self-reflection [...] has been able to help me know what my limits are, how much capacity I have for things.

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In this extract Luke frames his regular meditation as an activity in which he reflects in order to improve his life. In these statements Luke alludes to his understanding that mindfulness meditation can be used as both a processing and a problem solving tool. By reiterating his reflection process in response to this question, Luke shows he perceives this to be a key method for him to understand what mindfulness is and how he practices it. Specifically, Luke is essentially conveying that through his mindfulness practice he is able to reflect on how he is feeling and acknowledge what aspects of his life need changing. In Luke's case, this is setting boundaries. This example echoes how other participants spoke of incorporating reflecting and processing their thoughts and experiences into their formal mindfulness practices.

While most of the participants referred to asking themselves questions during their formal mindfulness practices in a way that was intended to understand their internal feelings, Sam gave an example of using mindfulness to solve physical discomfort during a meditation:

Sam: I was at the course and experiencing pain and suffering. It was bad until I realized why it was happening.

Interviewer: So when you were... describing that, it sounded like how you got through that was kind of just by continuing mindfulness?

Sam Yeah. And kind of... investigating the cause, so kind of like, okay. There is... pain. "What is causing this pain?" And then just kind of observing it for what it is. Which helped me to tolerate it. But then being like, "okay, where is it coming from?" Okay, it's coming from here. "Why is it happening here?" It's because I'm holding myself up so straight. "Do I need to be doing that?" No. Oh, look at that.

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This explanation of Sam's internal processing during his meditation practice shows how he incorporates investigative reflection as a way to understand his suffering. Sam's questions in the quote above could be interpreted as mindful problem solving, because he is processing his physical sensation of pain in order to find the cause and relieve the sensation. While it differs from how the other participants spoke about reflecting, processing and problem solving by being focused on physical sensations rather than cognitions, Sam explains a similar process reflecting that this way of practicing mindfulness was used by participants in various ways as they sought to reflect and understand during their mindful practice. This emphasises how various mindfulness modalities and techniques can be applied to a variety of situations.

While this type of mindfulness does not align with common western ideologies of meditation, it is similar to analytic meditation which is practiced in Tibetan Buddhism (Thurman, 1979; Van Vugt et al., 2020). Unlike focused attention or open monitoring meditations, this meditation aims to develop insight and understand one's subjective experience. This increased insight is thought to help the practitioner overcome suffering through decreasing negative and increasing positive emotions (Van Vugt et al., 2020). However, further research is needed to understand how this type of meditation differs from other forms such as focussed awareness or open monitoring.

As an alternative to incorporating processing into their meditation practices, participants frequently described use of mindfulness activities such as journaling to incorporate reflection (Kate, Mark, Shelly). A further alternative is a mood diary (Ella). Participants generally conveyed that they perceived journaling to be part of mindfulness practice. For example, when I asked Mark what he felt was most helpful for him within his mindfulness practice he described how he uses the mindfulness activity of journaling to "unpack his thoughts":

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Mark: I think it's focusing on my thoughts [...] for me, writing things helps me to be mindful, very specific thing, which... I find helps a lot.

Interviewer: It sounds like you use writing as maybe kind of like a mindfulness activity?

Mark: Yeah, I do.

Interviewer: Do you find it different [from] when you're sitting and focusing on your thoughts?

Mark: Yeah, it is different.

Interviewer: How so?

Mark: So focusing on my thoughts, maybe... if... I've been doing something very technical, or very structured, then writing is more useful, because there's a lot of conscious stimuli and system things which I need to process, whereas if I've been relating to people or just traveling and not having to make a lot of decisions, then noticing my thoughts, but not writing them down, is probably more helpful.

While Mark is acknowledging that he practices different types of mindfulness for different reasons, he is also framing mindful journaling as a way to “process” his thoughts and feelings. He seems to draw on this when there are a lot of thoughts in his mind which is suggested where he says he reaches for journaling when there is “a lot of conscious stimuli and system things.” Finally, he implies he may use journaling as a way of problem solving as he describes not needing to journal when he is “not having to make a lot of decisions,” suggesting journaling may assist him with both processing and decision making. This exemplifies how participants explored drawing on mindfulness to process or problem solve things they may be struggling with. It is interesting that most participants cited reflecting as

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part of their formal mindfulness as it may seem counterintuitive to the other ways participants practiced such as focused awareness, acceptance and impermanence. It is interesting that Kate was the only participant who contemplated whether processing falls under the category of mindfulness:

I do a lot of journaling, [...] just kind of checking in with myself and how I'm feeling and all that kind of thing. I guess it's not necessarily mindfulness, but I do really enjoy the activity of sitting there and writing... and kind of reflecting, I don't know if reflecting comes under mindfulness because you're not necessarily in the moment, but I guess it does.

Similar to Mark and the other participants, Kate is acknowledging that she uses journaling to “check in” with herself and reflect on her feelings. The incongruence Kate voices in this statement is interesting as it reflects her uncertainty around whether she considers journaling to be part of mindfulness. As she concludes “I guess it does,” this reinforces two key factors. First, Kate, like other participants, identifies that mindfulness is a way to understand, reflect and process their emotions, and secondly, that mindfulness is understood by her and other participants to be a larger phenomenon than just meditation and can be adapted to suit their individual needs. These quotes from Mark and Kate around how they mobilise mindfulness through journaling reflect their shared understanding that reflecting and processing is part of how participants understood what mindfulness is. In some ways this is unsurprising given mindfulness is often referred to as a contemplative (Shapiro et al., 2006; Malinowski, 2013) or reflective (Buttle, 2013; Epstein, 1999; Johns, 2005) practice.

Linguistically, the verb form of contemplative is “to contemplate”, meaning to think deeply and at length. In this respect, it is unsurprising that participants considered

contemplative reflection and processing to be part of mindfulness. Additionally, one qualitative study that used thematic analysis specifically framed their definition of mindfulness to be a “type of practice of reflection” (Nugent, 2011, p.1). Within this study, one theme was centred around participants’ understandings that mindfulness facilitates reflection (Nugent, 2011). This analysis aligns with the current study that through using techniques associated with mindfulness one can create a therapeutic reflective space in which one can seek to understand thoughts and feelings that are not associated with current experiences as a way to process and move forward.

Sub-theme: Mindfulness as a Coping Mechanism

The framing of mobilising mindfulness to cope with unease was expressed in a number of ways and will be explored throughout this theme/sub-theme. This theme/sub-theme specifically answers research questions concerning how participants understand mindfulness and why they have adopted a mindful practice into their life. It is interesting that participants did not elaborate on other coping strategies they had attempted to utilise other than mindfulness, although this was not something explicitly asked within the interviews.

Participants reported understanding and mobilising mindfulness as a way to “cope” (Bella, Kate, Sarah) or to “deal” (Bella, Mark, Sam, Sarah, Shelly) with the range of experiences or emotions, which were predominantly negative. This included feeling “anxious” (Ella, Emily, Kate), “depressed” (Bella, Ella, Emily), “stressed” and “stressful” (Bella, Kate, Luke, Mark, Polly, Sam), “worry” (Mark), “anger” (Mark) and “pressure” (Luke). These emotions were often described as reasons why participants mobilised mindfulness. For example, when I asked Bella about how she felt mindfulness had impacted her mental health and well-being she reflected:

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I think that's really useful for mental health. I guess in day to day coping, it's like kind of necessary, actually. But yeah, sometimes ... I feel like it's just a good strategy that literally anybody can use and it's not something that will exhaust your life, like lots of other mental health coping strategies, like, don't have to delve into any dark places. It's just like finding a good spot within you.

Here, Bella clearly explains the common perceptions that mindfulness is something to help with “day to day coping” as well as being “useful for [improving] mental health.” Bella further positions mindfulness as a preference over other coping strategies which was also portrayed by many other participants. As Bella explains, with mindfulness you “don’t have to delve into dark places,” suggesting her perceived mindfulness to be less emotionally exhausting than other “coping mechanisms”. Further, by Bella positioning mindfulness as “finding a good spot within you” suggests Bella finds mindfulness a positive experience which may be why she continues to practice mindfulness. This comment also highlights the intersection of the second theme, *Metacognitively Mindful* where participants use metacognitive skills as a coping mechanism to find a “good spot.”

Many MBPs are clearly targeted at relieving negative symptoms. For example, MBSR, as its name suggests is designed to reduce stress (Kabat-Zinn, 1990). Similarly, MBPs that are considered part of third wave therapies are used primarily in therapeutic settings where mindfulness is taught and practiced as a way to both reduce negative emotions and improve positive ones (Hayes, 2004). Given that all participants are positioned within westernised contexts, it is unsurprising that they align with these understandings of mindfulness being a technique to improve well-being.

Participants also described mobilising mindfulness when experiencing negative emotions with the aim of mitigating these emotions. Mobilising mindfulness in this way led

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participants to feel more self-reliant. One way in which participants demonstrated this was through the use of semantics. Rather than framing mindfulness as something they liked or wanted, they often framed mindfulness as something they “need[ed]” (Bella, Emily, Kate, Mark, Sam) to practice, particularly at times of struggle or stress. One example of this is Sarah reflecting:

If you're not stressed, then you don't feel like you have a need to do it.

This statement, like many others by participants, reinforces the idea that participants often reach for mindfulness during difficult times. While many participants suggested that mindfulness helps with stress, many others also suggested it helped them to cope with challenging (and often negative) emotions. For example, some described that mindfulness “help[s] you keep going” (Bella), and that it allows you to “rely on myself” (Ella) rather than “see professionals”. Shelly reflected that mindfulness has “gone from being embarrassing to being... so important” for managing her anxiety. Similarly, Mark stated that mindfulness “provided a different perspective on life and how to deal with stressful situations,” while Sam reflected, “I’ve had waves of consistent meditation, and then, not really any meditation. So I actually have seen, in retrospect, how to fix my life.” These examples depict mindfulness as something you do to cope and deal with daily challenging emotions and situations. Kate shared an interesting insight that was typical of how participants spoke about their use of mindfulness as a coping mechanism. When asked what a day normally looks like when you practice mindfulness, Kate replied:

I'm actually guilty of... rushing to mindfulness exercises when I'm having a bad day.

But when I'm having a good day, I can be... I don't need to do that,... [and just] get on

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with my day... and then whenever I'm... hung over, or if I've had a bad day at work, or something... that's affecting my physiology... then I freak out, I go "oh my god I need to practise mindfulness." ... [A] lot of the time, I do practise mindfulness. It's when I've had... maybe an off day, and I'm trying to... find a way to help cope with the situation..., and then... I generally feel a little bit alleviated after I try to practice it, and then if I don't, I'll just keep practising it... throughout the day or the night.

Here, Kate expresses guilt while setting out her view, indicating her underlying belief or understanding that this is not necessarily the intended use or purpose of mindfulness. While Kate explicitly states she uses mindfulness to “find a way to help cope with the situation,” she also uses tautology to emphasise her point. Further, this tautology highlights her belief that she can practice mindfulness as a way to cope with a range of negative feelings. Through explaining needing mindfulness when she is “hung over” indicates that at times she does not incorporate mindfulness into her daily life. It is interesting that she states that she feels “a little bit alleviated” but also sometimes continues to “practice it” if she continues to be in the undesired situation. This suggests Kate has a strong belief that mindfulness is an effective coping mechanism even if it doesn’t always alleviate a particular feeling or work as well as she wants it to. Typically, participants spoke of using mindfulness as a coping strategy, although many referred to it in less explicit terms than Kate.

The perception that mindfulness was a coping mechanism was conveyed through expressing that it can be beneficial for other people experiencing negative affect. This included people experiencing difficulties with mental health” (Bella, Ella, Kate, Mark) or “mental disorders” (Sam) such as feeling “anxious” (Ella), “depressed” (Bella, Emily) or in an “emotional rut” (Bella). Additionally, Ella stated, “Anyone. Mild, severe [can benefit]”. Interestingly, some participants also identified older people such as “the elderly” (Luke) or

those in their “older years” (Sarah) as others who would benefit from mindfulness.

Justification for this was due to recognising the prevalence of “mental health issues” (Luke) and that they may experience “more stress and way more troubles than people that are younger than you” (Sarah). Through participants explicitly naming groups they believe to experience emotional challenges, they are further implying that mindfulness is a helpful way to manage and cope with these experiences. For example, Bella reflected:

The people that I know that use mindfulness, they usually have experienced a lot of emotional difficulty, and they use it to cope with it, but, well I mean, like obviously everyone [has] experienced emotional difficulty... [but] like less extreme versions of that probably [...] don't really need to find coping strategies as much.

Here Bella frames mindfulness as a coping strategy that is particularly helpful for people who experience “emotional difficulty”. Notably, this excerpt normalises experiencing emotional challenges, a common thread throughout many participants’ narratives as evidenced in the introduction to Chapter 3.

As explored in the first chapter, a vast amount of literature uses MBPs to investigate changes in affect, mindfulness and other measures associated with improved health and well-being. As both MBPs and most of the current literature focuses on reducing unease it is no surprise this was also how participants perceived mindfulness.

In a more general sense, some participants also identified that mindfulness is beneficial to a broader population. The perception that mindfulness would be beneficial to “everyone” (Bella, Kate) or “anyone” (Ella) was communicated. For some participants this was explicitly conveyed. For example, Bella said:

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I feel like it's beneficial to everyone. I guess if you're in a bit of an emotional rut, and you have no choice to keep going? Yes [it's] like really, really useful... Yeah, I feel like it's useful to literally everyone.

Here Bella is positioning mindfulness as a powerful coping mechanism, particularly when she says “you have no choice [but] to keep going” which could be interpreted in two different ways. It could suggest that mindfulness helps you to dig deep when you are struggling with a task, or more generally (and morbidly) it could suggest that it helps you to quite explicitly keep going in life. Regardless of how this statement is interpreted, there is a clear understanding that Bella, like other participants, finds mindfulness “really useful” as a coping mechanism.

In *Mindfulness as a Coping Mechanism*, participants also explored that you can draw on at times of challenge within your life, although this was more commonly discussed at a broader and more subtle level rather than relating it to their own specific experiences. For example, when I asked Sam when he thought practicing mindfulness was particularly helpful, he reflected:

Sam: I think because our lives fluctuate so much, it's hard to say. Like it's good to do when you're not stressed... so that you will do it when you're stressed ... you know?

Interviewer: Yeah. Absolutely.

Sam: It's hard to start something when you've got so much on your plate. Whereas when you have a routine that helps to keep you at a baseline, then ... you can keep that through your stress times, and that's when the real benefits come in. So, starting it at a time when you can, is a lot easier and better than trying to start it when you need it most.

Here Sam is framing mindfulness as something that helps him to cope, particularly under stressful situations. However, he also emphasises the importance of practicing and specifically learning mindfulness when you don't have "so much on your plate" or when you are not feeling overwhelmed. This suggests Sam, like other participants, understands that mindfulness can be a coping mechanism, however this is not the only way you can practice mindfulness.

In both Sam and Bella's quotes above they have opted to use the pronoun "you" rather than "I". While "you" typically is directed at an individual it can also be used to indicate a general belief, which Orvell et al. (2017) calls the "generic-you" (p.1). Their analysis of the use of the generic-you suggests a paradoxical application. Generic-you can be used in a context-free sense, where "you" could refer to anyone. However, it can also be used to create distance from a personal perception or experience (Orvell et al., 2017). Within the context of this analysis, both options are equally plausible, where although the participants opt to use generic-you, they position that mindfulness has helped them overcome life challenges while also conveying that it can be beneficial for anyone who chooses to practice it.

Participants generally expressed that mindfulness could be beneficial to those in a youth or EA age range. Specifically, participants identified "youth" (Luke), "younger people" (Emily), "students" (Mark, Sam, Sarah) and people attending "school" (Bella, Sam, Shelly). The general justification for this was that if they had learnt mindfulness when they were younger it would have helped them cope. For example, Emily explicitly portrayed this by saying:

That would help me ... to do it when I was young, it would help me a lot.

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Participants who identified this younger age range also often suggested that developing skills of mindfulness early could prevent negative emotions in the future. For example, Kate reflected on how she would have benefitted from mindfulness if she had learnt it as a teenager:

[The] earlier you know what it is and how to achieve it the better because, obviously, when I went through a huge anxious stage, I didn't know what [mindfulness] was before then, so when I was going through anxiety, I didn't have it to call on until I'd reached out to people for help. So it wasn't until I went through the bad experience that I was then led to [mindfulness] which is great, but maybe that whole anxious experience would have been easier if I had already had knowledge of it. So if I was ... 20 when it happened, then I would have, from being a teenager, ... definitely benefitted ... knowing a bit more.

Kate explores the common belief that if she had learnt mindfulness at a younger age, she could have made her “bad experiences” “easier” or less difficult. This posits mindfulness as something that can both benefit those struggling with mental health, and as a useful tool people can draw on when they “need it” (Ella, Kate, Sam, Sarah, Shelly). While these narratives suggest learning mindfulness would help them to cope, it also suggests that participants perceived that if they had learnt mindfulness earlier, they would have experienced less suffering and experienced better well-being.

The interpretation of the use of generic-you by Orvell et al. (2017) can also be applied here where participants are explaining their belief that mindfulness would be beneficial to their younger selves and other young people. Here, participants are emphasising that they see mindfulness as a way to benefit others struggling in youth and emerging adulthood while also

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conveying the belief that it would have benefited them if they had practiced from a younger age. Further, this parallels with mental health statistics explored in Chapter 1 where the youth age bracket is identified as a time where people are more likely to experience psychological distress (Copeland et al., 2011; Fleming et al., 2014, 2020a,b; Patton et al., 2014).

A final, but less common way participants reported using mindfulness to cope was by using their formal practice to “reset” (Bella, Sam); “rebalance” (Sam) and “recharge” (Sam). Other ways participants spoke to this was by using mindfulness to “take a break” (Sam) or to “break [the day] up” (Bella). Emily described using mindful running to “get it out...and then you feel good again” suggesting a sense of release causing her to feel rebalanced. Sam, who spoke the most to this idea of mindfulness being used in this way reflected:

Giving you a kind of a reset. So every time I finished up a mindfulness [session]... or meditation, I feel reset, and I'm at my baseline level of stress and anxiety and, well, all emotions really, so... if my day... kind of like, starts oscillating, and [there is] a bit of happiness, bit of sadness, happiness, lots of stress, you know, meditate[ion] kind of just brings me back here, and the kind of the craziness gets toned down.

Sam's description of using mindfulness as a tool to “reset” aligns with how others spoke to mindfulness being a way to help cope with emotions in their daily life. In this excerpt Sam, like other participants, refers to a variety of emotions and suggests a sense of discomfort experiencing these, particularly evident when he refers to the emotions as the “craziness”. While it is evident Sam is aware of his emotions, it is unclear in this particular quote if Sam is incorporating acceptance into his practice. He appears to acknowledge them but then is using mindfulness in a way to not accept how he is feeling but instead to almost tone down his emotions. This is evidenced by him framing his practice as a way to reset his

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emotions and return to a “baseline level” resulting in his emotions being “toned down”.

Finally, throughout this statement, Sam, like many other participants, implies that this may be one of the reasons why he practices mindfulness. This way of mobilising mindfulness aligns with the theme of mindfulness being mobilised as a coping mechanism as it helps participants to decrease negative affect allowing participants to feel able to continue with their day.

Recently, Marthiensen et al. (2019) thematically analysed interviews with five nursing students following a shortened MBSR course. The first of the four themes described was “hitting the reset button” (Marthiensen et al., 2019, p.166) which aligns with the current study’s descriptions of mindfulness. Interestingly, two of the other themes: “avoiding a downward spiral” and “using an internal coping mechanism” suggest that mindfulness was mobilised within this study primarily as a coping mechanism or a way to decrease negative affect. While this study holds similar analytical interpretations relating to the current theme, the methodological framework used in the thematic analysis was not discussed. Furthermore, participants in the current study have integrated mindfulness into their daily life, rather than being interviewed following a six week MBSR course. This differing experience in learning and practicing mindfulness may contribute to why in Marthiensen et al.’s (2019) study this was the primary way participants understood mindfulness, whereas the current study encompasses a broader range of understandings. Nevertheless, this study supports the interpretation that mobilising mindfulness is a way to cope with and process life experiences.

Theme four: Part of Everyday Life

Previous themes have focused on participants’ accounts of mobilising mindfulness throughout their specific mindfulness practices, referred to in the literature as state mindfulness (Brown & Ryan, 2003; Lau et al., 2006). In this theme, the focus is on how they mobilise elements of the previous themes into their daily life. Within the literature this is

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often described as dispositional, or trait mindfulness (Brown & Ryan, 2003; Lau et al., 2006).

At the beginning of the analysis chapter I introduced the tennis metaphor where participants learnt various techniques of mindfulness that represent various tennis strokes. In this theme, rather than referring to the singular strokes, I am referencing the sense of flow that occurs with experience at tennis.

Participants described utilising techniques previously discussed and integrating these throughout their day, creating their own unique practice. Participants referred to this type of practice as being “conscious” (Ella, Emily, Mark, Polly, Shelly) or “present” (Emily, Kate, Mark, Polly, Sam, Shelly). More specifically, participants described this type of mindfulness as “consciously think[ing]” (Ella), “unconsciously” (Sam, Shelly), and practicing mindfulness or “liv[ing] in the present” (Emily). Examples of how participants spoke to this idea explicitly can be seen in the following extracts:

Polly: Yeah. I think that the thing is... I don't even know if I know how to meditate, but I think [if you put] a concentrated effort into one thing, that in itself can be a type of meditation.

Shelly: Anytime. There's... no set time where it should be good, ... you can do it in the morning for like five minutes, you can do all day every day if you want to, like, mindfulness over and over again.

Bella: It's something you personally do. ... You can [practice mindfulness] whenever.

Emily: It's not just one thing. That is, like, as you say, it's one thing that you can practice with everything. Like starting to, or talking with someone or walking it in. It's

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a whole, whole world. You can do it every time that you want to, and as you say, it's free. Just doing it, uhm, learn in the process.

These excerpts demonstrate the broad understandings participants have of mindfulness which, for many, meant expanding their initially isolated mindfulness practice and incorporating this into their understanding of mindfulness. While this theme intersects with all the previous themes discussed, it demonstrates how participants perceive mindfulness as a continuously evolving, highly adaptable, and applicable tool.

Sub-theme: Mindfulness is Intrinsic: People Naturally Have Varying Levels

A few participants portrayed the belief that all people had natural varying baseline levels of mindfulness. This spontaneously came up during interviews when participants were asked about how they came to mindfulness practice and about what mindfulness means to them. This was particularly demonstrated when participants reflected on themselves before they had tried mindfulness. A couple of participants expressed the belief that they were “naturally” (Polly) mindful, suggesting they had a level of mindfulness that existed prior to adopting a mindfulness practice. An interesting way Polly conveyed this was through expressing her belief that mindfulness was intrinsically “hard wired into [her] personality type,” conveying the belief that mindfulness is a biological necessity as suggested through the use of the word “wired” which mimics the idea of the wiring of neurons.

Some participants conveyed a belief that people can “practice mindfulness without knowing” (Kate). This included reflecting on their own experiences of practicing without being “conscious”, reflecting the beliefs of others who described practicing “without notic[ing]” (Emily). Kate particularly expressed strong views of this throughout her interview:

Interviewer: What would you say your life was like before you started practicing mindfulness compared to how it is now?

Kate: Before I had my... real first unexpected anxiety, I feel like I probably practiced it a lot without knowing it, so it's more of that... in the moment stuff.

This statement reflects the shared belief that people have an ability to be mindful through being focused on the present moment without being aware of what mindfulness is or even learning how to practice it. This idea of practicing while being unaware is interesting and speaks to the literature on dispositional mindfulness, where individuals are thought to have baseline levels of mindfulness that can be increased with mindfulness practice (Brown & Ryan, 2003; Davis et al., 2009; Kabat-Zinn, 2003; Kiken et al., 2015; Lau et al., 2006). The way participants reflected on their baseline levels of mindfulness suggest they understand mindfulness to be a broader phenomenon than formal mindfulness practices such as meditation.

Sub-theme: “It’s a lot more than what you originally think it is”: Shift in Understanding Mindfulness

Participants explained that their perception of what mindfulness is has shifted over the course of their practice. They recalled that when they started they perceived mindfulness as “an activity” (Sarah), a “skill” (Kate, Sarah) or “something you do for 10 minutes” (Bella). However, with practice, they understood mindfulness to be more than a singular activity. Participants currently perceived mindfulness as “a state of mind” (Sarah), a “choice of lifestyle” (Bella), and an “all the time thing” (Bella). This shift in understandings shows the overall realisation that mindfulness is “a lot more than what you... originally think it is”

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(Sarah). This change from mindfulness being something you do at one point in the day to something you incorporate into your daily life aligns with the theoretical positioning of state and trait mindfulness, where through practicing the state of mindfulness one's level of dispositional mindfulness also increases (Brown & Ryan, 2003; Davis et al., 2009; Kiken et al., 2015; Lau et al., 2006; Tomlinson et al., 2018). However, qualitative literature focused on dispositional mindfulness is scarce (Tomlinson et al., 2018) resulting in the current analysis contributing to filling this gap in the literature.

Interestingly, these comments around this shift in how participants understand mindfulness generally emerged when I asked each participant what they wished they had known when they started practicing mindfulness. The common response suggests that when they first learnt mindfulness, participants lacked understanding of the broad applicability of mindfulness. For example, Sarah explained:

It is a state of mind. I think that would have been so useful to find out, you know, instead of... telling you to do... things to achieve it, it would have been nice to know that it was, again, something you work on, and that it's... not just like... an activity, but it actually... what is going on in your mind, instead. I get that through the activity, you're meant to realise that, but sometimes, if you don't know that it's a state of mind, you're not able to do that activity well.

In this excerpt Sarah unpacks her shift in how she understands mindfulness. Sarah explicitly refers to understanding mindfulness as a “state of mind” aligning with the concept of dispositional mindfulness where one takes the concepts of mindfulness and applies them into one's world view (Lau et al., 2006). Sarah further reinforces this idea by explaining that she understands mindfulness as something that is “going on your mind” rather than simply an

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“activity” you do at one point in the day. Finally, Sarah expresses a sense of frustration that it took time for her to “realise” that mindfulness is something you can apply to your daily life, providing context for the underlying reason to do the activity. This tone of frustration intersects with that previously explored in the sub-theme *Struggles with Acceptance* where participants initially held expectations that practicing mindfulness would result in various outcomes. This statement by Sarah accurately describes the common challenge participants described while they learn how to “integrate” (Sam) it into their life.

A second way participants described this shift in perceiving mindfulness as something applicable to daily life was through incorporating a lens of acceptance of the “process” (Emily) of learning mindfulness. For example, when Mark reflected on what he wished he knew when he started practicing mindfulness he said:

Mark: Well, of course, it would be nice to know how to apply it immediately, but that's probably unrealistic.

Interviewer: What do you mean by apply it?

Mark: So I guess I... have to make decisions about... what [cycling] route to take, or how to prepare for an exam, and those things are... techniques related to mindfulness, which I feel is an application of mindfulness... So those things [have] taken me many years to understand how I see them. So, I would like to know those things sooner, but...

Interviewer: Yeah, ideally [laugh].

Mark: And so, nothing much which I could reasonably ask for.

This alternative way participants described their shift in understanding mindfulness is by incorporating a lens of acceptance, interacting with the sub-theme *Acceptance of Thought*.

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Mark is explaining that he incorporates “techniques related to mindfulness” into his daily life to aid decision making. He gives an example of how he uses mindfulness to processes and aid his decision making, intersecting with the third theme, *Mindfully Processing and Problem Solving*. This example highlights how the previously described themes interact with the current theme. Within this theme, the distinction lies where Mark is explicitly describing that this has now developed into a technique that he draws on throughout his day. This is an example of how participants developed their mindfulness practice over time and learnt how to incorporate these habits into daily life.

Participants described that they “apply” (Ella, Kate, Mark, Polly, Sam) aspects of mindfulness that they have learnt. Some described this as developing mindful “habit[s]” (Emily, Mark, Polly, Sarah), while others suggested mindfulness was something they had incorporated into “all the things that [they] do in the day” (Emily). Kate explained her shift to integrating mindfulness into her daily life:

It's actually part of everyday life, it's more just applying the attention to whatever you're doing, that kind of thing. So I think I'm a bit more understanding of it actually being a way bigger thing than just like meditating.

Here, Kate explicitly states that she understands and incorporates mindfulness into her daily life by applying “attention” to activities throughout the day. Kate is explicitly recognising the integration of the first theme, *Attentional Awareness* into her daily life. This is an example of how participants understood mindfulness to be a broader phenomenon than just “meditating”. Participants also incorporated metacognitive elements such as observing the impermanence of “thoughts or feelings” (Sam) and being aware of “why you're doing” (Bella) particular behaviours. These are both examples of how participants incorporated elements described in

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the second theme, *Metacognitively Mindful*, into their daily lives. Finally, as an example of the intersection of the third theme, *Mindfully Processing and Problem Solving*, and the current theme, Sarah explained:

Even if I do get stressed it's that... core of being calm that actually helps me to know how to deal with it.

This quote shows that while Sarah recognizes and accepts the natural fluctuations of emotions that all humans experience, by using mindfulness techniques she is able to remain calm to cope with challenges and stressful situations. This is evidence of how participants apply the themes *Metacognitively Mindful* and *Mindfully Processing and Problem Solving* into their daily life.

Many participants attributed incorporating attentional components in their daily life to achieve a more positive outlook. For example, Polly comprehensively unpacked her perception of the benefits of incorporating mindfulness into her life:

There's so many spin-off effects that you do get from trying to ground yourself and be in the present, whether it's better quality... relationships, because... you're more of an active listener, when it comes to engagement. Feeling grateful for little things, it's just about, you know, opening your eyes up to things that, on a daily basis, you could have easily walked past or dismiss[ed], because your mind was in a different space... Being aware makes you realize that there's a lot of other little things that are going on all the time... how else [has] it improved? And I think just generally building on a positive mindset.

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Polly is exploring how being aware of your thoughts, as discussed in the first theme, *Attentional Awareness*, impacts your overall outlook on life. Polly attributes being in the present moment to several positive outcomes and her positive outlook on life. Participants described similar “spin-off effects” such as living “in the moment” (Kate, Sarah, Shelly), being “at peace” (Luke), having “mental clarity” (Bella) and being “mentally healthy” (Mark). Other ways that participants described the positive outcomes from integrating mindfulness into their daily life was that it is a “good way to think positively” (Ella) and that it “allows you to enjoy the good moments more” (Sam). These outcomes are similar to those that have been observed within vast quantitative literature on mindfulness that suggest improvements in overall well-being and managing negative emotions (Chiesa & Serretti, 2009; Spijkerman et al., 2016). These positive outcomes support the body of literature that suggest improved outcomes for people with increased dispositional mindfulness levels (Tomlinson et al., 2018). A review of quantitative studies using dispositional mindfulness concluded that psychological (clinical outcome measures such as depressive, anxiety, and trauma symptoms), emotional (such as stress, well-being, and emotional regulation) and cognitive processes (coping strategies, impulsivity, and rumination) were aided by improved trait mindfulness (Tomlinson et al., 2018). While these findings have been documented quantitatively, there is limited qualitative analysis on accounts of dispositional mindfulness.

Sub-theme: Self-responsibilised Well-being

Participants credited their mindfulness practice with an increased sense of autonomy over their well-being and enhanced ability to act in accordance with their values. Participants described feeling empowered in a way that allowed them to take responsibility for themselves. They described that they were “more reliant on [themselves]” (Ella) that they “understand that... [they are] the one who [is] creating [their] reality” (Emily), and that they

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are “more aware of [their] own... control [of] [their] life” (Bella). Shelly, who disclosed experiencing several traumatic events throughout her life, described that mindfulness allowed her to “shut [traumatic memories and thoughts] off” and “be able to [...] not let it overpower [her]”, effectively creating space for her to continue working, unencumbered by past trauma. These statements all show the powerful shift participants reported from practicing mindfulness. Polly explored one of her core learnings from practicing mindfulness:

I think probably a huge part was the theory of being accountable, taking responsibility for your happiness. I think that was a huge trigger for me. And it's not about anyone else in your life, and you can't rely on other relationships or people... I think that was probably the biggest for me... taking ownership of your circumstances. Not that I was in difficult circumstances at all, but I think that was probably the biggest thing.

Above, Polly explored how, through learning about mindfulness, she has shifted her perception of control, empowering her to take responsibility for her happiness and way of living. This idea of “self-responsibilised” well-being was also explored in a recent qualitative analysis of post-cancer EAs where they described a perceived increase in self-reliance for emotional support (Lathren et al., 2018). Polly’s statement is an example of how participants described their shift in understanding of their own power and control over their life. Kate further described mindfulness as “a never-ending goal”.

Participants also reported an empowering shift in perception of how they viewed and understood themselves. They described this as having a “better relationship with yourself” (Polly) and helping you to “embrace who you are a bit more” (Polly). Sarah explained many changes that had shifted during her journey of practicing mindfulness, and during her interview I reflected back the idea she was describing:

Interviewer: It sounds like it's given you... a bit more... self-confidence.

Sarah: Exactly. Yeah, it has, which has given me independence from my environment.

Sarah's comment suggests that through gaining self-confidence by practicing mindfulness she has become more resilient and increased her ability to cope, regardless of her "environment". Sam expressed an increased ability to embrace his true self through an enhanced openness to experiences, following practicing mindfulness:

It's helped me to be more open, which I guess in a way feeds into kind of being less anxious and stuff. But I'm just more open to... I don't know... experiences, or... expressing myself, and that sort of thing, so I'm not holding in stuff.

Here, Sam is describing that through practicing mindfulness he experiences fewer negative emotions such as anxiety which allows him to be open to new experiences and expressing himself. This further reinforces that participants felt mindfulness allowed them to live a more authentic life where they felt empowered to live by their own beliefs and values. Shelly summarised this as, "It's not just breathing. It's like your whole energy ... comes from your mind and your thought."

The prior analysis has focused on mindfulness through a critical realist lens, focusing primarily on empirical (observable) and actual (first non-observable level) as participants' talk has primarily been focused around their introspective processes. I now shift to consider how these empirical level accounts of self-reliance and self-confidence can be understood through a more critical lens through considering the "real level" in Fletcher's (2017) model. These accounts of participants taking responsibility for their own well-being is sometimes

referred to within the literature as “responsibilised” well-being or “healthism” (Crawford, 1980). Through a CR framework we interpret these accounts as real and actual experiences recounted by participants, however we are able to investigate potential frameworks that contribute to meanings, norms and sociocultural ideas that shape participants’ talk.

On an actual (event) level, one interpretation is that the resources participants access, whether it be through various media or technologies, shape how participants understand mindfulness (Barker, 2014). These resources are often created, although not always deliberately, in ways that convey the neoliberal ideology that individuals are fully autonomous. Through a critical realist lens, neoliberalism can be seen as discourse that attributes value to individual autonomy and self-responsibility (Davies & Bansel, 2007). This intersects with capitalism and a political framework that views the free market as the best way to achieve a ‘positive’ outcome for society (and the economy). Within these frameworks, health is often viewed as wider than just physical health in ways that include natural variabilities in an individual’s psychological well-being (Barker, 2014; Parker, 2007; Reveley, 2016; Walsh, 2018). Critical researchers have argued that by including these natural variations in a broadened definition of health, one may be drawn into a continual process of self-surveillance, monitoring their affect and taking responsibility to (attempt) to adjust this if needed through methods such as mindfulness (Barker, 2014; Parker, 2007; Reveley, 2016; Walsh, 2018). An example of mindfulness resources conveying this ideology is through its promotion as an individual practice, for individual gain (Purser, 2019; Purser & Loy, 2013; Walsh, 2016, 2018). Through this, individuals may internalise ideas of personal choice, rendering them responsible for their own health as opposed to acknowledging collective influences (Barker, 2014; Parker, 2007; Reveley, 2016; Walsh, 2018).

As outlined by the current analysis, the often self-focused practice of mindfulness fits within neoliberal ideologies facilitating individuals to both ‘do’ well-being themselves, and

take responsibility for their own health (Davies & Bansel, 2007). Resources that purport to have neoliberal ideologies, along with already internalised neoliberal ideologies, influenced by Western society may contribute to why participants reported increased responsibilised levels of their health and well-being, and through a CR lens may also contribute to how participants understand mindfulness as a whole. In some way, the critical discourse above may go beyond the scope of critical realist ontologies and epistemologies. However, I have attempted to incorporate the social constructivist views of previous scholars and apply them to a CR framework, as CR is (as far as I'm aware) a novel approach to interpreting thematically analysed data on mindfulness.

Chapter 4: Discussion

Within this final chapter, I reflect on the key findings of the research. I review the themes that structured participants' talk and relate this analysis to previous literature, reflecting on the importance of continuing to broaden the mindfulness literature. I discuss the implications, strengths and limitations of my thesis and suggest directions for future research.

Extending the Current Conceptualization of Mindfulness

Extensive quantitative literature suggests mindfulness through MBPs may improve one's mental state (Chambers et al., 2015; Hofmann et al., 2010; Goldberg et al., 2018; Khoury et al. 2015; Spijkerman et al., 2016). However, relatively few studies exist of the efficacy of mindfulness outside MBP settings, and accounts of longitudinal studies (Bamber & Schneider, 2016; Grossman et al., 2004; Khoury et al.) or experienced practitioners are rare (Lindahl, 2017; Lomas et al., 2015). Only a small number of studies have sought to

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understand how mindfulness may or may not be beneficial for EA populations with the majority of research in these populations using student samples (Bamber & Schneider, 2016; dos Santos et al., 2016; Kerrigan et al., 2017; O'Driscoll et al., 2019), resulting in difficulty when generalising findings (Bamber & Schneider, 2016; Chiesa & Serretti, 2009; Eberth & Sedlmeier, 2012; Grossman; Irving et al., 2009). Within an NZ context, there is a need for accessible, practical and desirable resources to improve EA's well-being due to concerning mental health rates (Canning et al., 2017; Fleming et al., 2014a,b, 2020). This raises the question; how do EAs living in NZ understand and mobilise mindfulness?

Participants' discourse of how they understand, implement, and perceive the positive and negative aspects of practicing mindfulness yielded a range of conceptualisations and ultimately framed mindfulness as an umbrella term. This speaks to the discussion around the existing ambiguity and challenges of defining mindfulness (Chiesa, 2013; Simpson et al., 2018; Van Dam et al., 2018) while aligning with Xia et al. (2019) in finding that levels of dispositional mindfulness can increase during activities not explicitly created with that objective. To portray how participants framed mindfulness, I introduced a metaphor of playing tennis, whereby each stroke and element of play represented a different type or way participants used mindfulness. This was specifically used to depict the interwoven ways participants spoke of mobilising and understanding mindfulness as when discussing mindfulness, they often integrated multiple elements that were explored in different themes and subthemes.

The first theme, *Attentional Awareness*, captured how participants understand and practice mindfulness. Participants' talk of attentional awareness aligns with a large body of research including conceptualisations of mindfulness (Bishop et al., 2004; Shapiro et al., 2006) and studies that utilise MBPs (Chiesa & Serretti, 2009; Crane et al., 2017; Keng et al., 2011; Renshaw et al., 2017). This analysis elaborates on the current literature by

incorporating two distinct and specific attentional components to their practice: *introspective* and *exteroceptive attention*. I adopted these phrases from the cognitive attention literature (Farb et al., 2013a,b; Fox et al., 2012; Liottel et al., 2001) as there is not a cohesive term for these practices within the mindfulness literature. This theme adds breadth of understanding to existing literature through unpacking participants' cognitions during their practice.

The second theme, *Metacognitively Mindful*, unpacks the many ways participants perceive how they view their thoughts, answering how participants both understand and mobilise mindfulness. This conceptualisation of metacognition aligns closely with the concepts of re-perceiving (Shapiro et al., 2006, 2009) and decentering (Fresco et al., 2007). These concepts describe one's ability to metaphorically step back from their thoughts to reflect on them. Through utilising metacognition, participants adopted and, at times, struggled to incorporate acceptance of their thoughts into their mindfulness practice, reflected by two sub-themes. While adopting acceptance into mindfulness practices is commonly explored within the conceptualisations of mindfulness (Bishop et al., 2004; Kabat Zinn, 1994; Shapiro et al., 2006) and within MBPs (Hayes et al., 2004; Linehan et al., 2001; Segal et al., 2002), limited literature has explored challenges around this.

Additionally, participants spoke of metacognitively adopting impermanence to aid acceptance, and at times struggling with impermanence which was reflected in two further sub-themes. Discussion of impermanence aligned with the concepts of cognitive diffusion (Fletcher & Hayes, 2005), decentering (Allen et al., 2009), and metacognitive insight (Bishop et al., 2004; Norman et al., 2019). Impermanence is also a core concept within Buddhist literature (Kalupahana, 1975; Kong, 2009) so in many ways this sub-theme was not surprising. To date, challenges with impermanence have not been comprehensively explored in the literature. This lack of literature emphasises the need for further research to understand

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the challenges and adverse effects associated with mindfulness (Britton, 2019; Coronado-Montoya et al., 2016; Dimidjian & Segal, 2018; Lomas et al., 2015).

The final sub-theme in the second theme, *metacognitive control*, unpacked how, through utilising metacognitive processes, participants perceived they had increased control of their thoughts. Of particular interest within this sub-theme was that some participants suggested that with increased metacognitive control they also perceived increased control in their behaviours. This suggests an increased sense of agency. In summary, this theme built on the current literature and provided in-depth accounts of meta-cognition. However, it also emphasises the need for more comprehensive research, particularly surrounding challenges associated with mindfulness. Current literature does not pay much attention to adverse experiences of individuals who practice mindfulness. In not doing so, the literature is at risk of being reductionist in its representation of experiences of mindfulness.

The third theme, *Mindfully Processing and Problem Solving*, captures participants' beliefs that mindfulness includes both problem solving and the processing of thoughts. This theme contributes to answering questions of how and why participants practice mindfulness. Participants described applying both attention and metacognition techniques to particular challenges or issues they faced to understand and decide how to move forward and resolve their challenge. The sub-theme, *Mindfulness as a Coping Mechanism*, depicts participants' explicit talk around applying mindfulness related techniques to improve their ability to cope with challenges. This theme is somewhat unsurprising as MBPs are often framed and marketed to relieve unease (Hayes et al., 1999; Kabat-Zinn, 1990). Further, previous qualitative research with health-care professionals has described similar themes where mindfulness was also framed as a way to process, problem solve, and cope (Marthiensen et al., 2019; Nugent et al., 2011). As the first qualitative study to report this conceptualisation of mindfulness using non-medical staff, these findings build on the existing narrative that

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mindfulness can be perceived and mobilised to process thoughts, problem solve, and help cope.

The final theme, *Part of Everyday Life*, encompasses how participants understand mindfulness to be more than a standalone activity. This theme aligns closely with the theory of dispositional mindfulness (Brown & Ryan, 2003; Lau et al., 2006) which refers to a level of mindfulness every individual holds throughout their daily life. Specially, the sub-theme, *“It’s a lot more than what you originally think it is”*: *Shift in Understanding Mindfulness*, explores a shift in conceptualisations of mindfulness that occurred with increased practice. Initially, the participants perceived mindfulness as an activity to do at one point but over time incorporated elements of their mindfulness practice (explored in earlier themes) into their daily life. This sub-theme in particular highlights the importance of understanding experienced practitioners’ accounts and perceptions of mindfulness. Finally, Self-responsibilised Well-being, also known as healthism (Crawford, 1980) was discussed. Participants perceived an increase in autonomy over their well-being and felt able to act in accordance with their values. A recent descriptive qualitative analysis of interviews with post-cancer EAs reported similar findings (Lathren et al., 2018). Interestingly, Lathren et al. (2018) did not explore the notion of healthism in the context of their results, which perhaps is due to differing epistemological and ontological positionings when reading the data. Attempting to unpack the actual and real levels of participants’ talk using a CR lens, I adopted a slightly more critical stance when interpreting participants’ talk on self-responsibilised well-being. Through mobilising mindfulness, participants perceived increased autonomy over their well-being due to increased dispositional mindfulness and a sense of control of their thoughts. This shift in perception aligns with neoliberal ideas of responsabilisation (Davies & Bansel, 2007; Purser, 2019; Purser & Loy, 2013; Walsh, 2016, 2018). Overall, this theme explored why

participants continue to practice mindfulness and how their ideas of what mindfulness is have changed over their course of practice.

Implications

These results have both theoretical and practical implications. The vast majority of previous research has been quantitative in nature, utilising quantitative pretest posttest designs of MBPs with adult samples. These studies largely focus on measurable outcomes of these MBPs rather than understanding participants' conceptualizations of mindfulness. Further, there is limited research using EA samples with most literature of this life stage utilising MBPs with student samples (Bamber & Schneider, 2016; dos Santos et al., 2016; Kerrigan et al., 2017; O'Driscoll et al., 2019) and some with non-student samples (Donovan et al., 2019; Lathren et al., 2018; Li et al., 2019; Monshat et al., 2013). To date no study using EA samples has included follow up data or sought to understand how mindfulness is incorporated into the lives of participants. The present study contributes to the literature by emphasising the need for more diversity within the literature and argues that, through employing qualitative methodologies, we can gain a deeper understanding of mindfulness. Specifically, this study begins to fill a gap in both the EA and wider mindfulness literature through thematically analysing how a sample of EAs from NZ understand and mobilise mindfulness removed from an MBP setting.

The findings of this thesis build on how mindfulness is understood by those who practice it, particularly outside MBPs. In general, mindfulness was understood to be beneficial for improving well-being, aligning with the MBP literature (Bamber & Schneider, 2016; dos Santos et al., 2016; Kerrigan et al., 2017; O'Driscoll et al., 2019). However, this thesis adds to the literature by gaining more in-depth accounts of the underlying cognitive

processes that are considered mindful and how, when, and why it is mobilised by a sample of EA.

As literature evidenced and participants confirmed, EA is a group that experiences poorer well-being and increased psychological distress (Arnett, 2000; Fleming et al., 2014, 2020a,b). While this thesis primarily focuses on mindfulness, it also contributes humanistic accounts of challenge during emerging adulthood to the literature. These accounts of emerging adulthood build on the existing literature and can be used in conjunction with other bodies of work to emphasise the struggles in this life stage. This can be helpful for individuals' understandings and when informing policy that is aimed at improving this life stage's well-being as, prior to creating policies, the issues needs to be comprehensively understood. This is not to say this thesis alone can contribute to policy but when combined with other modes of research it may contribute.

There is a clear need for feasible interventions to improve well-being and prevent ongoing psychological distress in this population. Despite at times finding mindfulness challenging, participants generally advocated that mindfulness could be beneficial for others to learn at a younger age. The consensus was that this would be beneficial as mindfulness can aid coping with adverse experiences and maintaining good mental health, aligning with the majority of the literature.

My study provides a reminder of the importance of diversifying methodologies in order to gain a more in depth understanding of how mindfulness is conceptualized by those who practice it. While there are clear benefits of the MBP pretest posttest designs, there is need for more diverse research, particularly regarding how mindfulness is integrated into westernised lifestyles and the longer-term effects this has on individual well-being. Without understanding the longer-term effects and implications of developing and incorporating a mindfulness practice into daily life, it is difficult to draw conclusions as to whether

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mindfulness and MBPs are in fact beneficial for people to engage in. This study builds on the narrative that having a mindfulness practice has the potential to enhance one's well-being. However, it also highlights the importance of capturing in-depth accounts in order to gain a more complete picture of one's experience that perhaps is harder to capture using survey data. While this study captures accounts of how a sample of EAs understood and mobilised mindfulness, I acknowledge that my analysis is only one way to interpret the data which emphasises that my analysis may not be generalisable to other samples and populations.

Limitations

By focusing on mindfulness in westernised settings, my literature review holds potential limitations. As mindfulness stems from Eastern traditions and remains popular in many non-western societies, it is possible there are relevant studies I have not reviewed due to only being able to review English papers. Additionally, while I acknowledge the origins of mindfulness stem from Buddhist traditions, I did not comprehensively review the literature on mindfulness within a Buddhist context. This was primarily because this was not the focus of the current study and there is such a breadth of existing (quantitative) literature within a westernised setting. EA samples were also difficult to identify in the literature, mainly as participant ages were often not stated. Arnett (2000) also frames EA as a life stage rather than age, meaning emerging adulthood could potentially span over the studies 18-25 age range. Finally, as most of the existing literature used quantitative methods I was limited with the amount of qualitative literature I could include in the study. Despite these limitations, I attempted to locate my qualitative thesis within the current body of work around mindfulness.

As outlined in the methods chapter, I encountered some challenges during recruitment. Although some organisations agreed to circulate my research flyer, most declined as they reported not having EAs attend their organisation. This highlights the possibility that at least

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within formal organisations, mindfulness is not often practiced by EAs. Due to this challenge in recruitment I opted to post flyers physically and in the virtual community through university groups and notice boards in the Auckland region. This was a more successful method of reaching potential participants and is primarily how I located my sample. My sample was predominately made up of those who identified with NZ European ethnicities, and most were female. Notably, this sample is not representative of the multi-cultural NZ population (Statistics New Zealand, 2020). The sample did have somewhat diverse occupations with approximately half identifying primarily as students with the other half in full-time employment. However, students were overrepresented compared to the general population (Statistics New Zealand, 2018). To capture a representative sample of the diverse NZ EA population would require a much larger, and possibly longitudinal study which was not possible due to time constraints of a master's thesis. The aim of qualitative research is not to capture a representative sample (Braun & Clarke, 2006, 2014, 2016) as there is a need for programmes and services to improve EA's well-being, however, research is needed with more culturally diverse samples prior to recommending mindfulness as a way to improve well-being.

I acknowledge that the limited adverse effects reported in this study may largely be due to my sampling methods. As I recruited participants who self-identified as currently practicing mindfulness, I possibly excluded potential participants who used to practice mindfulness but had stopped due to adverse experiences. Nevertheless, I sought to create a rounded picture of mindfulness, including questions of adverse experiences in my interview schedule which was reflected by two sub-themes in my analysis. The gap on adverse experiences is still one that needs attention and future research should focus on this potentially by recruiting mindfulness practitioners who have stopped practicing mindfulness due to adverse experiences.

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Reflecting on the initial interviews, I recognised participants had challenges in articulating their definition of mindfulness. By asking how their understanding relates to Kabat-Zinn's (1990) definition, participants appeared more able to speak to their interpretation of mindfulness. One possible critique of adding this quote is that it may have influenced participants' opinions when defining mindfulness. To minimise this potential influence, I explicitly stated that everyone's understanding of mindfulness is different and that I was interested in participants' beliefs. While participants appeared comfortable comparing and contrasting their understanding of mindfulness to Kabat-Zinn's (1990) definition, it may have influenced how participants defined mindfulness and therefore be a potential critique of this research.

I set out to understand what mindfulness was to EAs, how they mobilised it and integrated it into their life. I chose to adopt qualitative methodologies for my thesis in an attempt to gain a more in depth understanding of participants' accounts of mindfulness. While this was an appropriate way to gain insight into unpacking my research question, with qualitative methodologies there is a limit to generalisability of results, especially with smaller samples (Braun & Clark, 2006, 2014, 2016). With particular reference to qualitative research, the analysis of interviews is my interpretation which means it is one version of interpreting the data that is shaped by my own ontological and epistemological understandings. While I maintained reflexive practices during this research process, I acknowledge that it is impossible (and was not my intention) to entirely remove myself as the researcher from the process. However, this means that the analysis is ultimately influenced by my interpretation of mindfulness and my experience of the research process. Therefore, while this thesis allows insight into how a sample of EAs practice and understand mindfulness, generalisability of this analysis is met with caution.

Future Directions

The current literature primarily employs mindfulness-based programmes utilising quantitative methods in a pretest posttest study design. This thesis contributes to diversifying the literature by thematically analysing interviews with EAs who practice mindfulness outside of MBP settings through a critical realist lens. However, further research using qualitative methodologies is necessary as there is still a need to understand the human experience of practising mindfulness within other populations. This research is particularly important with both experienced and non-eurocentric individuals as these, along with many other factors, may impact one's understandings of mindfulness. This call for differing demographics is particularly important as most studies today use eurocentric individuals living in urban environments (Bamber & Schneider, 2016; Eberth & Sedlmeier, 2012; Khoury et al., 2015) narrowing the breadth in research and, therefore, the applicability of mindfulness to diverse populations. Additionally, there is some urgency for studies to investigate adverse experiences of mindfulness as this is a particularly under-researched area that has important implications for practitioners and MBP administrators alike (Britton, 2019; Lomas et al., 2015; Wong et al., 2018). As the current sample of EAs had a mindfulness practice, it is unsurprising they found it beneficial. However, the challenges reported in the theme *Metacognitively Mindful* emphasise the need for more research on adverse experiences of both experienced practitioners and those who have stopped practising mindfulness. Through diversifying the mindfulness research in future studies, the literature will become more robust and result in an increased understanding of the strengths and limitations of mindfulness.

There is a need for future research to unpack the intersection of mindfulness and spirituality. Several participants reported that learning mindfulness impacted their spiritual and religious practices, particularly for those who associated with branches of Christianity. While unpacking this was beyond the scope of this thesis, it speaks to a gap within the

literature that is especially relevant in an NZ context where holistic health models are essential for understanding Māori well-being (Bernay et al., 2016; Devcich et al., 2017; MOH, 2015). As a major deficit in NZ healthcare is spirituality (MOH, 2015), incorporating mindfulness may potentially benefit both clinicians and clients alike. However, before making recommendations, comprehensive and culturally relevant research is needed.

With emerging adulthood identified as a challenging life stage, there is a need for accessible, adaptable, and engaging ways for EAs to improve their well-being. The current study asked if mindfulness could be one mechanism that may be beneficial to this population through qualitatively interviewing individuals in this life stage who had a current mindfulness practice. While there is a need to investigate other potential ways to improve EAs' well-being, some literature suggests mindfulness may be beneficial to this population. To date, the existing mindfulness literature using EA samples have utilised student or medical populations. This study contributes to diversifying the literature by interviewing a more general sample of EAs. Through thematically analysing interviews, four themes and 11 sub-themes unpacked how participants understood and mobilised mindfulness. These themes primarily positioned mindfulness as a broad and encompassing term with a variety of elements that ultimately enhance one's life.

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Appendices

Appendix A

Core Elements of Buddhism

Table 3

The Elements of the Eight-Fold Path

(Aich, 2013; Bodhi, 1994; Huxter, 2015; Maex, 2011).

<u>Focus of elements</u>	<u>Element number</u>	<u>Description</u>
Panna (wisdom and discernment)	1	Samma ditthi: Right view, of the four noble truths The “four noble truths” are an underlying belief system of suffering and impermanence that are threaded throughout Buddhism (Hanh, 2002; Kalupahana, 1975). <ul style="list-style-type: none"> - Dukkah: The experience of suffering is inevitable. - Samudaya: There is always a cause to suffering which is mostly due to attachment, craving or desire. - Nirodha: It is possible to stop the experience of suffering through overcoming attachment. Through mastering this one experiences liberation of Nirvana which means living with liberation, freedom and non-attachment. - Magga: The path to the cessation of suffering is through completing the Noble Eight Fold Path.
	2	Samma sankappa: Right resolve or thought This is seen as the desire to overcome feelings and thoughts of hatefulness, ignorance and attachment.
The following three elements focus around Sila (morality or virtue)	3	Samma vac: Right speech This consists of using words in a way that does not cause suffering to others including abstaining from gossip, using hurtful language and lying.
	4	Samma kammanta: Right action This includes the five precepts. These include abstaining from killing or harming others, stealing, misusing sex and not consuming intoxicants such as alcohol or drugs.

Sila (morality or virtue) (continued)	5	Samma ajiva: Right livelihood Living in a way and choosing an occupation that allows you to work in a way that is honest and where you do not cause harm to humans or animals.
The final three focus around Shila and Samadhi (morality and concentration or meditation respectively) which include the five precepts*	6	Samma Vayama: Right effort Living in a positive way consciously generating wholesome mental states while overcoming and eventually avoiding negative cognitions and mental states. For example feelings of attachment, jealousy and anger.
	7	Samma Sati: Right mindfulness Awareness of one's own mental and physical state including thoughts, consciousness.
	8	Samma Samadhi: Right Concentration The meditation to achieve a higher level of consciousness that increases insight and leads to the realisation and the certainty of imperfection and impermanence.

**The Five Precepts*

Concurrent with the three universal truths is “the five precepts”: the basic moral or ethical code for all Buddhists. These include refraining from any one or more of the following acts: taking a life; stealing; acting unchastely; speaking falsely; and drinking intoxicants. Although these precepts do vary between Buddhist traditions, they maintain a core theme of not acting in a harmful way towards oneself or others. The no-harm principle is particularly perpetuated in the Shila and Samadhi (morality and concentration) elements of the eightfold path as this is where the skills of observing, not judging or attaching, and letting go of your thoughts are taught. Without learning to observe one's thought pattern, and in doing so develop self-awareness, it would be near impossible to not cause harm to oneself or others as thoughts are believed to drive behaviour (Maex, 2011). Shila and Samadhi are the seventh step in the eightfold path, thus Buddhist practitioners will have already learnt significant skills before attempting mindfulness practice. This highlights the importance of contextualising mindfulness within Buddhist origins.

Through understanding the basic principles of Buddhism, it is evident that mindfulness is an important part of a belief system centred on alleviating suffering and not doing harm. This cultural and historical context allows a deeper understanding of mindfulness as an eastern tradition, as well as highlighting the parts of the secular western practice where Buddhist tradition is interwoven.

Appendix B

Interview Schedule

Intro:

- Thank for time (**whanaungatanga** – introduce who I am and who they are sharing their story with
- Gain consent
- Emphasise confidentiality
- Interested in what they have to say / no right or wrong answers ☺
- Their choice what they want to say/disclose, if they would prefer to not share something that is okay

“paying attention, in a particular way: on purpose, in the present moment, and non-judgementally” (Kabat-Zinn, 1994)

This is a common definition of mindfulness – does that fit your definition of mindfulness?

- **Is there anything you would like to add, or expand on this at all?**

1. Could you tell me how you came to be practicing mindfulness?

- How did you find out about mindfulness?
- **What was going on in your life when you started practicing mindfulness?**
- What made you want to start practicing mindfulness?
- **Did you ever come across Buddhism when you were learning about mindfulness? What are your thoughts and experiences around this?**
 - Do you feel it is important or necessary to learn about Buddhism when you learnt about mindfulness?
- What kind of information did you access? How did you find this?
- Do you think there is adequate and accessible information for other people who want to start practicing mindfulness? Why/why not?

2. There are lots of ways to practice mindfulness, how do you practice mindfulness?

- What does a normal day look like for you when it includes mindfulness?
- What do you do before or after mindfulness practice?
- Is this how you usually practice or do you sometimes use other techniques?
(can prompt: mindful activities, guided/unguided meditations)
- Has the way you practice mindfulness has changed since you first started practicing?
How?

3. What do you wish you knew when you first started practicing?

4. What does mindfulness/being mindful mean to you?

5. How you think mindfulness has impacted your life?

THE MINDFULNESS UMBRELLA

Positive effects of mindfulness

6. **What do you feel are the positives/benefits of practicing mindfulness?**
[ask for elaboration]
 - When do you think practicing mindfulness can be helpful?
 - How do you think practicing mindfulness impacts your mental health and well-being?
7. **How does your mindfulness practice effect your life even when you are not actively practicing?**
 - Do you ever apply mindfulness techniques? [ask for elaboration]
 - How do you incorporate into your life?
8. **What specifically about mindfulness do you find helpful?**
 - What do you think it is about your practice that causes you to feel this way this?
9. **Can you give me an example of a specific time or event when you found mindfulness to be particularly helpful?** [ask for elaboration of why]

Why do you keep practicing mindfulness?

10. **Do you see mindfulness as something you will continue to do in the future?**
11. **What was your life like before you started practicing mindfulness compared to how it is now?**

Negative effects

12. **Have you had any experiences where mindfulness practice hasn't gone 'right', or hasn't been helpful?** [If yes, ask for elaboration]
13. **More generally, can you thinking of scenarios where it would be difficult or unwise for you to practice mindfulness?** [ask for elaboration of why]

OR

Are there times where you think it would be difficult to practice mindfulness?

- I am wondering, what *did/would* you do in that situation that *you found to be/might find* helpful?

Other youths' views on mindfulness

14. **What do you think other people think about mindfulness?**
 - what do you think they are right or wrong? Why/why not?**Do you think people who are in a similar age/stage of life think this also? Why/why not?**
 - Do you think may people around your age know about mindfulness?
 - Do you think practicing mindfulness is common?**Who do you think mindfulness is the most beneficial for?**
 - Do you think there is a group of people mindfulness might not be beneficial for?

Final ideas:

THE MINDFULNESS UMBRELLA

We have talked about a number of things today and I am wondering if there was anything you felt we hadn't covered or anything further thoughts or experiences you might like to add? I really appreciate you taking the time to talk to me, I found what you had to say really interesting.

How are you feeling / do you feel okay ending the interview here?

Reiterate confidentiality

Appendix C

Research Flyer



ARE YOU BETWEEN THE AGE OF 18-25?

DO YOU PRACTICE MINDFULNESS?

We want to understand people's experiences
and perspective of mindfulness/ meditation

We would like to invite you to take part in a
single 60-90 minutes interview

**A \$20 voucher will be given as
a token of appreciation**


FOLLOW US ON SOCIAL MEDIA
@IS.YOUR.MIND.FULL

If you are interested, please contact Vicky:
isyourmindfull@gmail.com or 021 272 6452

This project has been evaluated by peer review and judged to be low risk (4000021310). Consequently, it has not been reviewed by one of the University's Human Ethics Committees. The researcher(s) named in this document are responsible for the ethical conduct of this research.
If you have any concerns about the conduct of this research that you want to raise with someone other than the researcher(s), please contact Professor Craig Johnson, Director - Ethics, telephone 06 3569099 ext 85271, email humanethics@massey.ac.nz.

Appendix D

Participant Information Sheet



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**YOUNG PEOPLE'S EXPERIENCES AND PERSPECTIVES OF MINDFULNESS
INFORMATION SHEET**

Researcher(s) Introduction

My name is Vicky Francis. I'm a master's student in the school of psychology at Massey University. My supervisors are Dr Heather Kempton and Dr Octavia Calder-Dawe. Heather is a Senior Lecturer at Massey School of Psychology with research experience in cognitive psychology and mindfulness /meditation, and Octavia is a Research Officer at the SHORE and Whāriki Research Centre, researching young people wellbeing.

Project Description and Invitation

You are invited to take part in a study that aims to understand young New Zealander's experiences and perspectives of mindfulness. There is little research on mindfulness in this age group with research to date looking at school-age children and more mature adults. This research will collect data through semi-structured interviews to gain an in-depth understanding of each participant's experiences

Benefits of this research

By participating in this research, you have the opportunity to share your experiences and views on mindfulness (anonymously). This will help inform those who teach mindfulness to youth and young adults. Mindfulness and meditation have become common throughout western society, but little research has been conducted on people who practice it in their everyday life or in a young-adult/ youth age group. This research aims to cover these current gaps in the literature.

Project Procedures

Participation in this research consists of a single interview lasting around 60-90 minutes which will be conducted at a suitable and agreed upon location. The interview will be voice recorded to ensure I collect accurate data to be analysed. You have the right to ask for the recording device to be turned off at any time, and you have the right to decline to comment at any time. If you wish I can also send you a copy of the recording.

The information you provide me will be kept confidential and identifying information will be removed from transcripts to ensure confidentiality is maintained in publications.

In the unlikely event you feel the need for extra support due to our conversation; I am happy and able to assist you in accessing support services.

Te Kunenga
ki Pūrehuroa

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www.massey.ac.nz



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Data Management

Your identity and information you provide me will be confidential. Pseudonyms will be used and identifying information will be removed in transcripts and quotes used in the thesis to ensure participant anonymity. Recordings will be kept on a password protected hard drive that only the research team (myself and supervisors) has access to. Recordings will be saved for five years before being permanently deleted. Findings from the research may be published and presented at conferences.

If the researcher feels the participant is at risk of harming themselves or others, the researcher has the right to break confidentiality to ensure the participant can get the help they need.

Participant's Rights

You are under no obligation to accept this invitation. If you decide to participate, you have the right to:

- Decline to answer any particular question;
- Withdraw from the study at any time up to two weeks after the interview;
- Ask any questions about the study at any time during participation;
- Ask for the recorder to be turned off at any time during the interview;
- Provide information on the understanding that your name will not be used unless you give permission to the researcher;
- Be given access to a summary of the project findings when it is concluded.

Project Contacts

If you have questions about the research, please feel free to contact the research team.

Researcher:

Vicky Francis

Phone: 0212726452

Email: isyourmindfull@gmail.com

Academic supervisors:

Dr Heather Kempton

School of Psychology, Massey University, Albany Campus

Phone: (09) 414 0800 ext. 43103

Email: h.buttler@massey.ac.nz

Dr Octavia Calder-Dawe

School of Health Science, Massey University, SHORE Centre

Phone: (09) 414 0800 ext. 41335

Email: o.calder-dawe@massey.ac.nz

This project (4000021310) has been evaluated by peer review and judged to be low risk. Consequently, it has not been reviewed by one of the University's Human Ethics Committees.

The researcher(s) named above are responsible for the ethical conduct of this research.

If you have any concerns about the conduct of this research that you wish to raise with someone other than the researcher(s), please contact Prof Craig Johnson, Director, Research Ethics, telephone 06 356 9099 x 85271, email humanethics@massey.ac.nz.

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Appendix E

Template Of Email For Potential Participants

Kia ora [name]

Thanks for getting in touch and expressing interest in my research!

I am wanting to interview people aged 18-25 who practice mindfulness to get a better understanding of their experiences and perceptions of mindfulness. I have attached a copy of the flyer and the information sheet for you to have a read through, if you have any questions please feel free to contact me.

I am planning on doing interviews from the [date] and I can have interview rooms available in Albany, Takapuna or Central Auckland. If these do not work for you, please let me know and we can potentially arrange another location.

As I am hoping to interview those aged 18 to 25 who have a current mindfulness practice, I was hoping you could let me know your age and how long you have practiced mindfulness for?

If there are particular days/times that work for you please let me know

Look forward to hearing from you,

Kind regards,
Vicky

Appendix F

Written Consent Form



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YOUNG PEOPLE'S EXPERIENCES AND PERSPECTIVES OF MINDFULNESS **PARTICIPANT CONSENT FORM – INDIVIDUAL**

I have read and I understand the Information Sheet.

I have had the details of the study explained to me, any questions I had have been answered to my satisfaction, and I understand that I may ask further questions at any time.

I have been given sufficient time to consider whether to participate in this study and I understand participation is voluntary and that I may withdraw from the study up to two weeks after the interview.

- I agree to the interview being sound recorded.
- I would / would not like to be sent a copy of my sound recording.
(please circle)
- I agree to participate in this study under the conditions set out in the Information Sheet.
- I understand my data and my identity will be kept confidential by the researcher with no identifying information being used in publications.
- I understand that the researcher has an obligation to break confidentiality if I express current risk to myself or others.
- I agree for the data to be stored for 5 years after recording on a password protected hard drive.
- I would / would not like to receive a copy of the research findings
(please circle).

Declaration by Participant:

I _____ hereby consent to take part in this study.

Signature: _____ Date: _____

Te Kunenga
ki Pūrehuroa

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www.massey.ac.nz

Appendix G

Demographic Sheet



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YOUNG PEOPLE'S EXPERIENCES AND PERSPECTIVES OF MINDFULNESS **PARTICIPANT DEMOGRAPHIC QUESTIONNAIRE**

Kia Ora,

To help us describe our sample in our reports we would appreciate some information about you.

Please only answer the questions you feel comfortable answering.

How old are you? _____

How would you define your gender identity? _____

What is your pronoun preference? _____
(e.g. he / she / they / it etc.)

What sex do you identify with? _____

What ethnicity(s) do you identify with? _____

Do you have a current disability? Yes / No

If yes, please let us know if there is anything we can do to help with the interview process

What is your occupation if you have one? _____

How did you hear about this study? (please circle)

Social Media / Fly on Notice Board / Word of Mouth / Other: _____