**Interventions**

Articles testing the applied science and implementation of mindfulness-based interventions


Boe, O., Hagen, K. (2015). **Using mindfulness to reduce the perception of stress during an acute stressful situation. Procedia-Social and Behavioral Sciences.** [link]


Evans-Chase, M. (2015). **If they like it they can take it with them: A mixed methods look at the use of internet-based instruction of mindfulness meditation with incarcerated youth. Advances in Social Work.** [link]


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Highlights by
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AMERICAN MINDFULNESS RESEARCH ASSOCIATION

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Journal of Evidence-based Complementary & Alternative Medicine. [link]


ASSOCIATIONS
Articles examining the correlation and mechanism between mindfulness and other variables


study of college students in shanghai. International Journal of Environmental Research and Public Health. [link]


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**METHODS**

Articles developing empirical procedures to advance the measurement and methodology of mindfulness

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**REVIEWS**

Articles reviewing content areas of mindfulness or conducting meta-analyses of published research


**TRIALS**

Research studies newly funded by the National Institutes of Health (AUG 2015)

COG Analytics, LLC (J. Obermayer, PI). *Mobile mindfulness based smoking cessation*. NIH/NCI project #1R43CA195849-01. [link]

Rush University Medical Center (J. Burns, PI). *Mechanisms of psychosocial chronic pain treatments*. NIH/NINR project #5R01NR013910-03. [link]

University of Massachusetts Amherst (S. Bernecker, PI). *Crowdsourcing mental health with a web-based peer-delivered intervention*. NIH/NIMH project #5F31MH103927-02. [link]


University of Utah (E. Garland, PI). *Targeting military opioid misuse with mindfulness-oriented recovery enhancement*. NIH/NIDA project #5R34DA037005-03. [link]
Highlights
A summary of select studies from the issue, providing a snapshot of some of the latest research findings

Nearly a quarter of veterans returning from combat deployment suffer from post-traumatic stress disorder (PTSD). While the Veterans Administration treats many of these veterans with prolonged exposure or cognitive processing therapy, dropout rates remain high (30-44%) and up to half of those receiving therapy fail to improve. There is a need for new therapies that are well tolerated and effective. Polusny et al. [JAMA] tested the impact of MBSR compared to Present-Centered Group Therapy (PCGT) on PTSD symptoms in a randomized, controlled trial.

Participants were 116 mostly Caucasian, male, and predominantly Vietnam era veterans with PTSD who were recruited from the Minneapolis VA Medical Center and randomly assigned to either MBSR or PCGT, a group treatment focused on resolving current life problems. Participants completed checklists assessing PTSD symptoms, depression, quality of life, and mindfulness (FFMQ) at baseline and again at 3, 6, 9, and 17 weeks. Additionally, participants were interviewed by clinicians before and after treatment and again at two-month follow-up to obtain independent evaluations of diagnoses and symptom severity.

Dropout rates were lower than previously observed with either prolonged exposure or cognitive processing therapy, but the dropout rate was significantly higher for MBSR (22%) than for PCGT (7%). Self-rated PTSD severity improved for both groups from baseline to two-month follow-up, but the average improvement was significantly greater for MBSR (9 points) than PCGT (3 points) participants (Cohen’s $d=.40$). Clinician symptom ratings showed significantly greater improvement for MBSR participants (Cohen’s $d=.41$). MBSR participants also reported significantly greater improvements in mindfulness and quality of life. Increases in mindfulness were significantly associated with improvements in PTSD ($r=-.46$), depressive symptoms ($r=-.44$), and quality of life ($r=-.42$). Using a 10-point improvement as the cut-off for a clinically meaningful effect, more MBSR (49%) participants improved than PCGT (28%) participants.

This experimental study demonstrates MBSR to have a modest but clinically meaningful impact on PTSD symptoms when compared to a more conventional group therapy. The relatively low dropout rate suggests that MBSR may also be better tolerated than other frequently used PTSD treatments for veterans. Study limitations include fewer treatment hours for controls (13.5 hours) than MBSR participants (26.5 hours) and a relatively short follow-up period.

Skilled athletes must retain focus and maintain bodily awareness while resisting distractions. Using functional magnetic resonance imaging (fMRI), Haase et al. [Frontiers in Behavioral Neuroscience]
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explored whether a Mindful Performance Enhancement, Awareness, and Knowledge (mPEAK) intervention improved elite athletes’ bodily awareness and examined the underlying brain patterns associated with improved awareness.

Seven young adult, male members of the USA BMX cycling team underwent fMRI scans before and after participating in a 7-week mPEAK intervention. The intervention included traditional mindfulness practices along with didactic presentations on topics such as mindfulness, mind-wandering, self-compassion, and self-criticism. Athletes were assessed before and after training on measures of bodily awareness, emotional awareness, and mindfulness (FFMQ).

Following mPEAK training, the athletes significantly improved their abilities to identify feelings (Cohen’s $d = 1.1$), self-regulate distress by attending to the body (Cohen’s $d = 1.5$), trust bodily sensations (Cohen’s $d = 1.0$), and describe emotions (Cohen’s $d = 0.8$). Right insula and left anterior cingulate cortex (ACC) activation increased after mPEAK training during the time periods when athletes were anticipating restricted airflow. The magnitude of increased ACC activation during anticipation periods correlated with increases in the ability to describe emotions ($\rho = .78$).

There was also a negative association between increased insula activation during periods of recovery from restricted breathing and the ability to identify feelings ($\rho = -.76$). Decreased functional connectivity was observed following mPEAK training between the right medial frontal cortex and ACC and the posterior cingulate cortex, a brain structure associated with mind-wandering and self-referential thinking.

This pilot study suggests that an adapted mindfulness-based training is associated with greater attention to bodily sensations, feelings, and increased neural processing while anticipating and recovering from the distractions associated with restricted breathing. Future research is needed to clarify whether this increased bodily focus translates into improved athletic performance. The study is limited by a small sample size and the absence of a control group.

During fMRI scanning, athletes engaged in a computer-assisted attentional focus task while breathing through a mouthpiece that could variably restrict airflow making breathing more labored and effortful. At various times during the task they were given visual cues about the likelihood of future airflow restriction, so that the fMRI measured the brain changes associated with anticipating, experiencing, and recovering from restricted airflow.
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**Events & Conferences**

**Rotman’s Leadership Renewal Retreat**

Rotman’s Leadership Renewal Retreat provides participants with two and a half days to step outside their environment and their usual way of thinking and use new lenses to distinguish and seize opportunities for themselves and their organizations. Leaders with reflective ability are better equipped to see change, disruption and conflict as opportunities for generative thinking and innovation. Through experiential training, reflection and conversations with similarly motivated senior executives, Rotman’s Leadership Renewal Retreat is designed to provide you with skills, discipline and courage to reframe yourself and your role.

**INFO:** For details visit http://www.rotmanexecutive.com/renewalretreat

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**INFO:** For details visit http://www.bodynbrain.com

**Search Inside Yourself in LA!**

Developed at Google and based on neuroscience research, SIY uses mindfulness practice to train emotional intelligence skills, leading to resilience, well-being, and centered leadership. In the midst of complexity, it’s about finding the inner capacity to create, thrive, and lead. Backed by leading experts in neuroscience and mindfulness, SIY is changing thousands of lives in over a dozen countries. October 2-3 at University of Southern California in Los Angeles.

**INFO:** Registration and details at SIYLosAngeles.eventbrite.com

**Research & Education**

**Funding for Mindfulness Teachers and Researchers: Now Closed**

The American Mindfulness Research Association (AMRA) Professional Development Award program is now closed. This competitive grant provides $500 awards to promising researchers and teachers for their commitment to excellence in mindfulness research and practice.

**INFO:** For details visit http://goamra.org/about/grants/

**Books & Media**

**New Book! Mindfulness for Teachers**

Based upon the author’s extensive experience as a mindfulness practitioner, teacher, teacher educator and scientist, this book offers valuable research-based information about how mindfulness can help teachers manage the stressful demands of the classroom, cultivate an exceptional learning environment, and revitalize teaching and learning.

**INFO:** http://amzn.com/0393708071

**Mindful Medical Practice: Clinical Narratives**

Patricia Dobkin’s new book, forwarded by Ron Epstein, showcases how mindfulness enhances clinician-patient relationships while adding depth and meaning to their work. Each chapter, authored by physicians or allied professionals, provides therapeutic insights across a broad spectrum of specialties and settings in five countries.

**INFO:** Go to http://www.springer.com/us/book/9783319157764

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