Applying Meditation to Therapy

by

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Meditation has enhanced human potential for more than 2500 years. Now, supported by efficacy and neuroscience studies, psychotherapists can confidently incorporate meditation.

Some Research Highlights

People experience wellbeing from meditation, with a significant increase in dopamine and enhanced reward system (Newberg & Iverson, 2003). An added benefit is that meditating therapists feel less stressed (Shapiro, Astin, Bishop, Cordova, 2005).

Not only are people more relaxed from meditation, but they also become more alert and aware. Parasympathetic activity associated with relaxation takes place, as would be expected. Simultaneously, the prefrontal cortex and cingulate gyrus are activated, particularly in the right hemisphere, key areas for attention and alertness (Newberg and Iverson, 2003).

This dual effect also has useful implications for regulating affect with the improved capabilities to moderate the intensity of emotional arousal (Aftanas & Golosheykin 2005).
What Is Meditation?

Meditation offers a pathway to calm awareness and vitality by using attention flexibly. There are both specific and nonspecific benefits. Meditation is a time for sitting quietly, seemingly inactive. From the quiet moment’s emptiness, the meditative state emerges. What seemed at first to be non-activity becomes a unique kind of activity.

Broadly considered, meditation falls into two categories: emptying the mind of thoughts or filling it with chosen thoughts. One approach focuses attention definitely, toward an inner or outer object. The other is indefinite, defocusing attention so that it is not deliberately directed toward an inner or outer object (Simpkins & Simpkins, 2009).

Types of Meditation

Meditation arose out of the rich philosophical traditions of Yoga, Buddhism, Daoism, and Zen, each with unique concepts and methods for mental development.

Yoga has a long tradition that develops mental focus and control. With careful training of attention, people can influence bodily and mental processes, even those that are usually considered automatic. Research confirms these claims (Green, Green, & Walters, 1970). So, like breaking the four-minute mile barrier, we can break through limitations to higher performance.

Ancient Buddhist sutras described mindfulness of body, of feelings, and of objects of thought. Mindfulness involves paying close attention to experiencing moment-by-moment, without forming judgments about it. Mindfulness has great value to therapy by returning clients to their real-time experiencing, for more realistic attunement.

Zen meditation invites emptiness, where the flow of thoughts eventually stops. A resource for calm and confidence is hidden in this empty moment, in just being present. Clients who are troubled with continual disturbances find relief in the moment, like an oasis in the desert. They gain confidence from experiences of mastery that facilitate the process.

Daoist meditations take another approach, an undifferentiated balanced state, in tune with nature, following its course. The world and the person are
always changing, and energy is expressed through this. These meditations use breathing, flowing attention, and body movements to work with this naturally occurring energy to restore balance.

**What Can Meditation Treat?**

An ever-growing body of research shows significant success with treatments that use the many different forms of meditation. Most psychological disorders can be helped, and new applications are continuing to be researched. (Shannahoff-Khalsa, 2006; Siegel, 2007).

**Individualizing Treatments**

When using meditation for therapy, learn to sensitively incorporate the best approach to meet the unique needs of each client. Variations foster different mental abilities, and so therapists should choose the appropriate meditation method to suit the client. For example, Yoga develops the ability to withdraw attention from the outer world and focus it inwardly. Researchers found that experienced yogis exhibited persistent alpha activity even when presented with loud noise and bright lights. Non-meditators could not sustain alpha when distracted (Anand and Chhina, 1961). Therapists might find yoga meditation helpful for clients who are inattentive, ruminate, or over-react.

Zen, by contrast, trains practitioners to be responsive and aware in every moment. Kasamatsu and Hirai (1969) presented trained Zen meditaters with clicking sounds. Each time the click occurred, their brain waves registered a response, as if the sound was heard each time anew. Untrained controls quickly habituated to the clicks. Zen meditation methods can be helpful for clients who engage in obsessive thinking or suffer from entrenched reactions to events.

**Learning and Applying Meditation**

Therapists planning to use meditation with clients should first experience it for themselves. Books, CDs, and DVDs can be helpful, along with training at a meditation center or teaching seminar for individualized feedback and group experience. Meditation can be integrated into treatment as adjunctive to other techniques, or as the primary one. Provide regular meditation periods during
each session and encourage meditation between sessions for a resource that brings therapy into everyday life. Clients might enjoy group-therapy meditation sessions. Practice regularly. You will not only develop a useful tool for clients; you may also enhance your own wellbeing!

The Simpkins’ are psychologists and authors of more than twenty books including *Meditation for Therapists and Their Clients, Simple Zen, Simple Buddhism, Simple Taoism, Self-Hypnosis for Women, Effective Self-Hypnosis, The Dao of Neuroscience, Meditation and Yoga in Psychotherapy, Zen Meditation in Psychotherapy, and Neuro-Hypnosis.*

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