

Mindfulness for Therapists: How Buddha's Brain Can Help You Become a More Effective Clinician

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Clinton Power: Hello, this is Clinton Power from AustraliaCounselling.Com.Au. It is my very great pleasure to be here today with Dr Rick Hanson, who is a neuropsychologist and author of “Buddha’s Brain: The Practical Neuroscience of Happiness, Love, and Wisdom” which is now being printed in 21 languages. His other book is called “Just One Thing: Developing a Buddha Brain One Simple Practice at a Time.”

He’s the founder of the Wellspring Institute for Neuroscience and Contemplative Wisdom and an affiliate of the Greater Good Science Centre of UC Berkeley. He’s been an invited speaker at Oxford, Stanford, and Harvard and taught in meditation centres worldwide.

Rick’s weekly e-Newsletter which I always look forward to reading, is called “Just One Thing” has over 37,000 subscribers. You can sign up for his newsletter at his website which is at RickHanson.Net.

Welcome, Rick. It’s lovely to have you on the call.

Rick Hanson: Great, Clinton! Greetings to Australia! As we were talking offline, my brother lives there. I’m a major fan of the country and I have a lot of heart connection with Australia and its people.

Clinton: Thank you very much. Well, I’ve titled this talk today, “Mindfulness For Therapists: How Buddha’s Brain Can Help You Become a More Effective Clinician.” I’d love to know a little bit about your journey as a therapist. How did you become to be interested in eastern traditions as a therapist?

Rick: Yeah, I actually started out with an interest in the eastern traditions and then about 10 years later I got interested in becoming a therapist. My initial encounter was with the

eastern traditions, in general Buddhism in particular. It was in 1974, I was young and I had long hair and gold-rimmed glasses, I play a wind flute out on the hills, meditating. I thought I was very groovy.

But slowly but surely, some wisdom sank in, anyway, in my 30s I started training as a therapist and became a psychologist. After that, I got more and more interested in integrating the neuroscience stream with the contemplative wisdom stream into the psychotherapy stream. Because to me when if you just imagine the centre of three circles: neurology, psychology, and contemplative practice right at the centre of those three circles, there's a lot of good value.

I think it moved me personally in that regard. I've just always been interested in the deep causes of things and also I've been interested in effectiveness. What's the roof of the issue and what's really going to make the most difference to make it better?

And so to me, brain science combine with contemplative wisdom offer a phenomenal manual of the deep structure of the mind as well as a toolbox for making efforts overtime to use the mind, to change the brain, to benefit the mind. That lead me down my path and I've used it personally of course, as well as in my practice.

Clinton: I'm curious to know what did you discover when you started to bring in mindfulness practice personally and with your clients?

Rick: I'd be honest that often clients resisted them, which was interesting. I was trained in part psychoanalytically, so I try to pay attention to the whole idea of transference, the frame and what's it like for a client for a therapist to start teaching some particular skill or method. Let alone a skill or method that has some kind of woo-woo eastern religious connotations in the

minds of so many people. What's that actually like? I think it's important to pay attention to that.

I also found that much of traditional psychotherapy is mindfulness via other words. So if you think about Freud's notion of the observing ego or the analyst's evenly hovering attention or the principle of psychoanalysis of analytic neutrality, a lot of that is very much about—it's very akin to or harmonious with or the synonymous with really, a lot of language about mindfulness. So I got that.

And then I also got that talking about mindfulness in its own right in a way that demystified it and made it very ordinary- the once nice thing about some knowledge about the brain is that it'll let you talk about something like mindfulness in a very matter of fact way. In a way that often appeals to people frankly often men, not always, but people in general who are very practical and need some kind of physical material, scientific explanation for things and they'd be much more motivated to it.

So when I speak of mindfulness in this way, I found that people were naturally much more interested in it and were willing to try it out. I mean, the basic idea of observing is good. But as we know there are these additional factors. They're not pure mindfulness, but are very associated with it such as an attitude of acceptance or friendliness or a quality of compassion or kindness toward oneself altogether.

As people began using those more and more, the fruits are juicy. They like the rewards and will then motivate them further to keep doing it.

Clinton: So you're saying you had to find a way to language it a little bit differently depending on the population you were working with?

Rick: Yeah, I found myself talking about I would say—I wouldn't even use the word mindfulness sometimes. I'm talking about paying attention, where you are able to step out of the movie of your life and observe it from 20 rows back with popcorn going, "Wow! That's intense!" which is really different than being glued to the screen. Everybody understands that difference, right?

I think there are basically four ways as therapists we get our clients one way or another to do anything that's useful. One is that we just implicitly draw them into it. So for example, like other therapist would I would encourage moments of mindfulness in the therapy hour. I would talk with people about for example, what are you experiencing, what's under the surface of what you're experiencing, and then I will draw their attention to the meta-cognitive, meta-attentive aspects of this.

What are you noticing about this process of stepping back from your sensations your feelings, your desires, your thought processes? What are you noticing about your mind as a kind of parfait with multiple layers, and then looking down below the surface, what's that like for you? Just that kind of ordinary language without dropping in the "M" word, let alone the "B" word for Buddhism. Just simply the M word alone, I found that really went well.

And it will also bring in to bear in any kind of any performance capacity. I mean in my own view is that psychotherapy is a lot of things, but essentially, it is about learning and unlearning. The question then becomes how to learn well. Well, learning is a matter of acquiring competence. It's about getting good at things.

I think there's no way around that. I think that some therapists and some schools some traditions tie themselves in verbal knots trying avoid accepting the reality. They were endlessly

influencing our clients and they are endlessly trying to pursue goals of one kind or another. The only pragmatic question is how is it going? In other words is it going well or badly? So in that context talk about how people endlessly appreciate the fact that if they want to get good at riding a bike or using chopsticks— Can you hear me?

Clinton: Yes, I can hear you.

Rick: Okay, great. Sorry we had a little wobble on the internet. But I was just saying that people also appreciate that anytime they're learning anything, like I said riding a bike, using chopsticks, the latest version of Windows- to do that, they have to step back from what they're doing and observe what they're doing and reflect on what they're doing and just be with what they're doing. And then they're going to go, "Oh!" The same is true with my mental reactions and getting competent with my mind not just my chopsticks.

Clinton: I love your metaphor of the movie theatre, because we can all relate to seeing a movie theatre with popcorn, and just kind of encouraging people to step back and observe and develop an awareness of what they're doing and how they're doing it as well. It's a lovely metaphor.

Tell us about studies. Are there any studies about the efficacy of therapists that cultivate mindfulness for themselves and maybe perhaps try to use it in sessions but do practice mindfulness personally?

Rick: That's interesting, Clinton. There are a lot of studies on bringing mindfulness-based methods in one form or another, both very formal trainings like MBSR as well as more informal or adapted protocols. There is a lot of research on the benefits of that as well as the benefits of meditation which is the epitome really of a mindfulness practice.

There are a lot of studies on the benefits of that for physical health conditions, for mental health conditions, and for ordinary well-being as well as studies on the ways in which some kind of personal mindfulness practice can help improve clinician effectiveness and reduce clinician burn out.

I'm not specifically aware of any studies that have been done on psychotherapist's effectiveness through mindfulness training, but I'm sure there have been. I'm sure that studies have been both on what's called "trait mindfulness." In other words our disposition, our basic quality, as well as "state mindfulness." In other words, the degree to which we enact mindfulness in our therapy or that we can train in mindfulness.

So just a small point here, if people want it they can go on my website, www.RickHanson.Net and go to the tab called "Media" and then down to "Slide Sets." That's a repository of almost all the slide sets of everything I've ever taught including many, many workshops for therapists. Including a slide set for a workshop I did for psychiatrists on the benefits of mindfulness in clinical practice. And because this is was for the medical profession, there was a very high bar I needed to meet in terms of the research that I sited there.

If people want it, it's bulletproof. They can go to that slide set. I think I also posted on my website a set of citations that relate to what's in the slide set and they can use that as however they like. It's freely offered material which really substantiates my point here about the power of mindfulness and clinical practice. I mean, it's interesting to appreciate.

It's a simple fact that if a large pharmaceutical company like Merck or Pfizer could patent MBSR or patent meditation or patent any kind of mindfulness-based intervention, we would be seeing ads for it all night long. I'm assuming on Australian television—for sure on

American television we'd be seeing these ads all night long, touting the benefits of mindfulness or meditation for all kinds of physical health conditions as well as mental health conditions, too.

Clinton: Yes, and thank you for sharing that resource. I imagine that was a tough crowd presenting to psychiatrists. So thank you.

[Interposing]

Rick: I like tough crowd. It was good. It put me on my toes. But you're right, yeah. If I could interrupt you, sorry, I've been in the profession formally for about 25 years, informally for about 35 years. I've seen this kind of—often this feeling of being second class citizens in the world of mental health as therapists, psychologists, counsellors, mental health professionals of various kinds, social workers.

The truth is—honestly, the tools in our toolbox, the psychotherapeutic, the mental tools, the psychological tools as opposed to the physiological physical tools that are in the physicians or psychiatrist tool box, the tools that we have are generally much more powerful than the tools that are available in the physician's box. And much, much research has supported that.

There's a kind of lie floating around that mental health interventions are somehow a last resort or a sort of poor cousin in the healthcare field. Actually, we have the most powerful tools of all. I think it's really important to have confidence in what are tradition or discipline know and in confidence in the tools to our disposal.

Clinton: That's such a great point. Part of what inspired me to contact you, Rick, and speaking about this is—I know in my personal practice my own meditation practice is really—I

guess in a way kept me sane over many years working with clients. I don't know—I probably would have burnt out as you mentioned before many years ago without it.

What are some of the benefits you see for therapists developing contemplative practices, and maybe can both developing a mindful approach to their life and their work?

Rick: Well, several come immediately to mind. One is that by being by training in mindfulness, number one, we develop greater steadiness of mind. That's a fundamental aim of mindfulness training is to be able to sustain—it's anyone could be mindful for a single exhalation.

Even a whole breath, but do 10 of those in a row. Do 10 of those 10 in a row which is a little over 5 minutes for most people. That is really challenging, which is quite striking if you think about it. It's a really low bar. Pay attention to a 100 breaths in a row and yet anyone who has tried to do it, me included, appreciates how humbling it is to make that effort. One thing that happens is that we develop greater steadiness in mind which is fundamentally necessary to be a therapist, to be able to sustain attention to our clients including hour after hour if we have a full practice.

The second thing that mindfulness does is it trains us in metacognition. In other words, paying attention to attention. We're much more able to track the movements and the subtle shifts in our own focus and put in little corrections as we go. That too, I think improves therapeutic efficacy.

Third benefit, mindfulness is the foundation of equanimity. By becoming more aware of our own internal reactions and the process in our client, we are able to build up a growing

quality of equanimity, so that we can stay connected with our client, and present with our client.

We can lean into them emotionally, if not physically, while at the same time, not being not being knocked about by their reactions.

This is a good segue to a very important point and one that I'm actually doing some writing and I'll be doing some teaching about. I think mindfulness—I'm sorry to utter the heresy here—I think mindfulness has gotten overrated in the field of psychotherapy and in contemplative practice, especially, Buddhism in the west in the last several decades.

I think mindfulness is critically important of the three great movements or undertakings when we're dealing healing, distress, and dysfunction, or everyday well-being or personal growth or spiritual practice. I think the three great undertakings. To be with what's there, to be aware of it, to be mindfully present with it, to experience the experience, feel the feelings, know ourselves and investigate beneath the surface, that's incredibly important.

But also, it's important to remove or release or let go of or gradually abandon or prevent or uproot what's problematic in the mind, not just be with it but get rid of it, frankly. And then third degree of movement is to build a positive factor, often to replace of the negative one that we release.

In effect if the mind were like a garden, mindfulness is like being aware of the garden without being disturbed by it. That's fantastic! But we also need to pull weeds and plant flowers in the garden of our mind and our for our brain. So to me, all three of these are really, really important.

I think mindfulness is the most important of all. It's foundational. It's the basis of the other of two. You can't pull weeds or plant flowers without being aware of that process. On the other hand, mindfulness alone is often spoken of as if that's all you need. As if it has some kind of magic power.

Mindfulness alone does not have magic power. For one, in itself is not equivalent to love, joy, or bliss, or realisation because mindfulness is just mutual, basically. Also, while sometimes mindfulness lets you release negative things, pull those weeds, sometimes the weeds go away when you're just aware of them. You just keep witnessing them. After a while, they just somehow pass away.

Great! But does that always happen? Often, it doesn't happen. And mindfulness alone will not ever plant flowers other than mindfulness flowers in the garden of your mind. So to me, all three are really, really necessary. Interestingly, for in contemplative practice, that's where I think the full toolbox is available to people.

In my own contemplative practice, I would say it's been very important for me to cultivate wisdom that has to do with the recognition of the transient nature of things, that things are coming and going all the time, and the ways that they're interconnected. So that any moment of existence has this kind of frothy, foamy quality in which it arises and disappears as fast as we recognise it.

That helps us increasingly see things in perspective and not get our knickers in a twist, and not get so caught up with things that are difficult not keep chasing after things that are going away inevitably whether it would be pleasurable or painful. The other thing that

contemplative practice can do is it really helps warm the heart. It can really help bring qualities of compassion, kindness, and love more the forefront of our consciousness.

In part, because we have taken in the good again and again and again of planting those flowers in the garden of our mind. So those aspects of contemplative of practice which by the way contemplative practice does not have a monopoly on. There are many ways to develop those wholesome qualities obviously not just contemplative practice. But contemplative practice is a very, very powerful way to do that.

When we develop those, then we can sustain mindfulness with our clients because we're not so rattled. We got more equanimity and we have more care and compassion for them, and therefore, we're able to stay present longer. Sorry about that long answer, but that was a lot I want to say.

Clinton: That was a great answer. Just making a reflect on early on in my career how I suffered from a lot of anxiety. I work with a lot of couples. I think I have seen that transformation that equanimity. I'm able to hold myself and lean into the client. I think my own meditation practice has been an important part of that process- I'm able to manage and regulate my anxiety much more with this high conflict couples.

I'm curious to know, in terms of neuroscience, is neuroscience showing that mindfulness is helpful in the therapist-client relationship in particular around attunement?

Rick: Well, that's interesting. I'm sure there are studies in that specific regard in terms of attunement. I'm just not aware of them. I will mention a resource that I really appreciate that others may like as well. It's called "Mindfulness Research Monthly." It's put out by an academic called David Black. You can just Google that out.

That is a fantastic way and also it's freely offered. Every month it's the latest digest of all the studies that are done. What's interesting—I've been tracking this for a while, initially, there might be a couple of dozens studies that month. Now, they're pushing 100 studies a month on mindfulness. The field is really exploding here. So I'm sure there are some good research there.

It would just make sense that becoming—there is research by the way, I should say this. As people become more attuned to themselves through, let's say, a mindfulness practice, the result of that is that they build up layers of cortex. They literally build probably tens of millions of new synapses and capillaries bringing oxygen and glucose, they're little resources that the brain needs.

Even though the brain is 2% to 3% of bodyweight, it uses 20% to 25% of the metabolic supplies in our blood. It runs hot. It's always busy, it's working so much. People who routinely do a mindfulness practice and tune into themselves, build up layers of cortex in the part of their brain called the insula. They're two of them inside the temporal lobes of both sides.

The insula is really the place in the brain at the highest level of architecture in neuromental processing that produces a map of oneself. It's the foundation of self-awareness. It's in the insula that we really form a very high level of map of what's going on in our body at any moment in time as well as what we're feeling especially, our deeper gut feelings.

Interestingly, studies have shown that people who routinely tune-in to themselves develop a thicker insula and second, they become empathic to the emotions of other people. They become more attuned to the feelings of others. Not just attuned to the actions of others.

That's what those mirror like networks are about which to me is an important but lesser important aspects of empathy, tracking the physical movements of the other person. But being able to attune to their emotions to the insula or attract frankly in the third component of empathy, through theory of mind faculties in the pre-frontal cortex, to be able to track their thoughts, their motivations, their dynamics, their attitudes or personality factors and so forth.

Anyway, to be able to track all that is really important and tuning in to oneself builds up layers in the insula which then lets us resonate with and be attuned to the emotions of others in proportion to the degree to which those layers of cortex were thickened in the insula. So that's a very good foundation in research that speaks directly to your question.

Clinton: It's fascinating. So the brain in a way is actually growing.

Rick: Yeah, it's literally like building a muscle, and for better or worse. The brain is constantly changing its structure. The only question is it for better or worse.

Clinton: Yes. So maybe let's touch on therapists that maybe have high case loads, very challenging clients, what are some simple mindfulness approaches that maybe a therapist can have running in the background when they're working and maybe feeling the effects of their stress and anxiety.

Rick: Well, first off, I think there's actually a lot in our tradition. There's a kind of phenomenon of "old wine and new bottles." I'm old enough and I've been in the field long enough that I've seen various cycles where teachings that were in the 30s in the last century actually or in the 50s of the last century have been kind of repackaged with new language. But it's pretty much very familiar stuff.

For example, if you think about people like Carl Jung in terms of the upper reaches of human potential or Abraham Maslow, the self-actualisation and so forth, that was very much about positive psychology. But now, in the last 10-20 years, there's been this resurgence of interest in positive psychology. But it was not invented in the last 10 or 20 years.

In terms of mindfulness, being mindful to oneself so that one doesn't get burned out in a busy practice, I think about the attention and psychoanalysis to counter transference, to appreciating one's own reactions. For example, anxiety to a difficult or hostile couple which gets me too because I'm a softy and so a little bit anxious by nature.

So the attention to one's own counter transference reactions to situations is a kind of inner mindfulness. In addition, I like the idea of being able to find refuge, because if we don't have—if you think about attachment theory, if we don't have a secure base, it's difficult to go out and explore.

It's hard to assert one's self. It's hard to be fully present over there if we don't feel like we have a secure base over here. And obviously, to put for a year and a half old child that secure base hopefully is a secure attachment relationship with various caregivers that's becoming increasingly internalised.

As adults, how do we as therapists find our own secure base our own place of refuge while dealing with difficult people? Or people who are not difficult but what they're feeling is difficult which is why what I'm really trying to say. So for myself, I will often—when I'm feeling—when I'm starting to that tracking on my own reactions, noticing that I'm getting really sleepy, or just sort of keyed up or discombobulated by what's going on with the couple I'm

seeing or the individual I'm seeing or the kid I'm working with because I have a large mixed practice, one thing I'll do is I'll try to come back to centre.

I'll try to recall a felt sense in my body when I was peaceful or calm or I felt strong. I'll call up, for example times, I've spent rock climbing or times I spent with my wife who totally loves me and I feel really loved and so I can re-access those felt experiences, activate them so they become mental states.

And then because they're more present in my awareness, I can then go forward with my client in a stronger, clearer, way.

Clinton: That's wonderful. That's something that you can really do in the 'here and now', as you're observing yourself as you are being mindful of your reactions. I like that idea of just calling on those states and the experiences that are stored in your memory, you're not making them up.

Rick: That's right. I've been thinking a lot lately, probably related to what I'm writing now, about activation and installation and reactivation. That cycle is so much of what we do in psychotherapy. We try to help clients activate positive states or when they do we try to slow things down so they can stay with that particular state of mind.

Because especially, these days we have a growing understanding that mental states become neural traits. So we're trying to help them *stay* with that positive mental state long enough to install it, so there's learning, right? And I think there's no way around it. I mean the brain is constantly activating states and it's constantly installing states.

Neurons that fire together wire together. Question is of course is it for better or worse? To kind of see this in a clear-eyed way, demystified way has been very helpful to me.

Clinton: I love your whole teachings around taking in the good as well. It's something I use a lot in my practice, but helping clients really expand states. Particularly working with couples noticing when couples miss each other, they miss the kind of good stuff that's coming to them from their partner and kind of catching that and getting them to expand that.

So I like the whole philosophy behind that and it's really effective to see that play out when you help a client catch it and stay with it.

Rick: I know like I was saying earlier I lost my track a little bit, these four ways that therapist teach things essentially or draw- help good things happen one is we just do it in a flow but the second is we actually name it to people. We actually say, "By the way," this is my quick version of this, "the brain has a negativity bias."

What that means is that it registers just like that [clicks fingers]- negative experiences. The positive ones, unless they're million dollar moments have ordinary memory systems. That means you have to stay with it a dozen or so seconds straight for it to transfer from short-term memory buffers down into long-term storage. But how often do we actually do that?

It's quite rare- so positive experiences flow through the brain like water through a sieve but negative ones [sound] get caught every time. That's why it's really important. A dozen seconds at a time privately. No one needs to know you're doing this. It's top secret. A dozen seconds at a time.

A handful of times today, when you're having a good experience, a mild one probably, stay with it and then sends it in a time when it's sinking in. So that's the second way, we teach it to people. And I find people love this method because it's positive, it makes sense, they get

it. I use my phrase “the brain is like Velcro for negative experiences, but Teflon for positive ones.” They go, “Yeah, it’s like that.”

The third thing we do is we explicitly do it with them in the session. So for example, they’re having a positive experience, we might say something like, “Hey let’s stay with this for a moment here. I’ll maybe even be quiet for a moment. I won’t stare at you or anything. We’ll take half a minute get a sense of this really growing into you. Like water into a sponge or if you’re a kid like a jewel into the treasure chest in your heart.” So that’s the third way, we do it with people.

And then the fourth way, we help good things happen as therapist is we encourage people to do things outside of sessions. Whether explicitly like the CBT homework, sheets or things like that, or in this case like with a little practice at the end of the night before going to sleep or maybe at a meal.

Let me be clear, this is not the power of positive thinking. Because positive thoughts have almost no traction. What is traction in the brain are emotions and sensations particularly sustained, whole body, personally relevant emotions and sensations. That’s what really has traction, that’s what sinks in.

Second, gratitude alone doesn’t do that much for people because if you don’t feel it for 10, 20, 30 seconds in a row [sound] 3 seconds of gratitude, it’s a nice 3 seconds. But as far as the brain is concerned that may as well would not have happened at all.

Clinton, for me this perspective on how does learning occur and how can we maximize learning in a frame of psychotherapy with attention to things like transference and all that stuff, it’s taking me to a very humbling place. Because it has made me realise how much of my own

efforts and how many of my clients hard-one efforts may as well never have happened as far as structure building the brain is concerned. Very humbling.

And so once burned, twice shy, I try to learn my lesson and I practice what I preach. I started paying a lot more attention to the registration process whereby learning as it were sticks to people's ribs rather than just flowing through them like water through a sieve.

Clinton: And I'm hearing there Rick, you're really highlighting the importance of experiential, you're really kind of capturing that, and doing it with your client, staying with the experience so you that can both savour it in a way.

Rick: I know. And I'll admit it to myself, maybe I'm not the only therapist in the world that's like this, I've really come to appreciate that my brilliant ideas or my clever languaging of my client's issues has a little benefit. Once in a while it really lands.

But to quote a psychoanalyst from the 30s, and I don't think it's coincidental that it was a woman, she said, "The patients does not need a new idea. The patient needs a new experience." Because we don't suffer our ideas, we don't suffer our cognitions. We suffer the emotions and sensations and desires these cognitions lead to.

The cognitions themselves are just passing thoughts, right? So yes, it's important to change cognitions, but the point of changing cognition is to change sensations, emotions, and desires. And oftentimes, the cognitions actually are the tail of the dog that if we can get people to shift their experiences, as you said the experiential, the embodied aspects, we help them activate and install a new set of sensations, emotions, and desires, their cognitions will follow.

Clinton: It's beautiful. I love that praise, it's fantastic. And something just to keep in the background of when you are talking about ideas and concepts with clients, thinking how we can actually make this come alive between us.

Rick: Yeah, I mean little detail another one where—I think neuroscience doesn't have much to offer to a lot of psychotherapy. For example, if you're reading an article or listen to someone talk, even me, god forbid, and you can just replace the neuro speak with ordinary, perfectly fine psychological terminology, there's no value added really, going neurological.

What's the value added? If you're a neurologist or a neuroscientist and you're interested in the mapping of mental and neural activity, okay, getting a correlation has value. But otherwise, for example, if ever I'd say, "You know, they got looked to me cross-eyed and I got really mad." Or I said, "That guy looked to me cross-eyed and my amygdala lit up."

How does that add value to say my amygdala did? So I think there's a fair amount of 'huey' when it comes to bringing neuroscience in a psychotherapy world and a certain amount of—honestly, it's a way to seem impressive. But there are still some places where I think neuroscience has really made some contributions and one of them is to highlight certain key things, like, as we were speaking, the importance of experience, of embodied approaches, in terms of deep learning.

Another highlight is to appreciate the importance of moderate arousal. Because in moderate states of energisation or vitality, and by arousal I don't mean erotic arousal, obviously, moderate arousal is involve with moderate levels of dopamine, a neurotransmitter, associated sometimes with stress that moderate levels of neurophenephrine are basically fine.

Neurophenephine dopamine tracks rewards, it doesn't usually give us the experience of pleasure or joy or reward, but it tracks reward. And when it dips that does help us feel bad and creates craving. So with dopamine, moderate arousal attracts moderate dopamine. Then neurophenephine moderate states of arousal lead to moderate states of alertness and orienting and paying attention.

Well, dopamine and neurophenephine promotes synaptic formation. In other words, dopamine and neurophenephine as neurotransmitters promote the building of new structure. They promote neuroplasticity. Well, if we want to help our clients learn things or change or grow or shift or have learning stick to the ribs, if they are kind of inert, low energy, slow. "Yeah, doc. I just spent another week like all weeks."

Or we the therapist or I'm the therapist droning along about my analysis of their issues and whatever, there's no energy in the room. No energy means no dopamine and no neurophenephine. So I've gotten much more alert to using humour, waving my arms, doing things, going for a walk outside of the building sometimes, getting clients more involved, getting them to do silly things, joking around more with them, anything sometimes to get the energy out because that promotes learning.

Clinton: Yes. I'm so enjoying our conversation and I'm so appreciative of you giving up of your time today, Rick. Just to kind of close off, are there any resources you can recommend? I know you've touched on a couple in your talk for therapists who maybe want to pursue more mindfulness approaches are looking into this whole area.

Rick: Great! By the way, Clinton, it's been an honour actually to have this chance to talk with you and through you hopefully to other people.

Well, there's a lot that's been done around mindfulness in psychotherapy and the mindful therapist for example. So Dan Siegel has done a lot of good work there. I'm blanking on the name of the other one of his colleagues, it'll come to me. I know Bonnie Badenoch has done a lot. Ronald Siegel has done tremendous on mindfulness and psychotherapy—Chris Germer.

I think my own material, my two books as well as freely offered resources on my website, go there as well. I think if I could just add to it one more thing is to broaden the notion of mindfulness to include contemplative practice in general and to bring in honestly, the great many people to have a theistic component to their mindfulness practice.

In other words, for them there's a dimension of prayer. It's really important here. And so unless one is doing it explicitly, Christian psychotherapy, let's say or something, like, that maybe in a different tradition. Obviously, it's inappropriate to present ourselves as a religious teacher to a client.

But to be open-minded about the role of prayer in the life of many, many people or a theistically referenced in reference to the divine by whatever name or concept or no name at all, to appreciate the importance of that I think it's ecumenical in the best sense of the word and inclusive as well. It's kind of a diversity issue. If we exclude from the big 10 of psychotherapy people whose mindfulness is rooted in a very theistic tradition, they were leading people on.

And I'll say one last thing, just to kind of sum up here. There's no replacement for personal practice. There's some momentum if you have a decent base of mindfulness in yourself you can get away with.

I think of this famous piano player, I wish I could recall his name, he was a man, he said, “If I do not practice”—he practice three to five hours a day, world-class concert pianist, very famous. If I could remember his name, you’ll recognise him. But anyway, he said, “If I do not practice one day, I notice it. If I do not practice two days in a row, my wife notices it. And if I do not practice three days in a row, the whole world notices it.”

It’s a little bit like that. So I think we can sometimes get away with it, a little bit of slipping and sliding. But then we need to get back on the horse, so we need to build up our personal momentum of practice.

I personally, have taken kind of a vow to meditate every day at least one minute or more. And occasionally, it’s one minute before I fall asleep, usually better. Try that, I aim for 45 minutes a day. But I really encourage people do your own practice bit by bit.

As they say in Tibet, “if you take care of the minutes, the years will take care of themselves.” So if we just bring our quality of mindfulness to the minutes of our day, both some formal minutes in our day, the years will take care of themselves.

Clinton: Well, thank you, Rick. You’re really are a breath of fresh air in the world of psychotherapy. Could I also recommend to those people that are viewing- on your website, RickHanson.Net, you have a wonderful store there and I certainly send many of my clients, and I’ve purchasing myself- your audio books. You have a number of audio books there with lovely practical meditations that anyone can use for clients and practitioners. So thank you.

Rick: Thank you for saying that, and there are lot of free material there as well.

Clinton: Well, thank you. I really appreciate your generosity and your time. I hope we can speak again sometime, Rick.

Rick: Anytime. Australia! Go Australia!

Clinton: Thank you, bye for now.

Rick: Take care.

Clinton: See you.

[END OF VIDEO]