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**THE USE OF MINDFULNESS IN CHILD PSYCHOTHERAPY**

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## **ABSTRACT**

Mindfulness is, according to Semple and Lee (2007, p.17), an individual's practice of living in the present moment. For many years, mindfulness, has been used by adults as a way of mental health self-care. Mindfulness is now used within psychotherapeutic relationships between the therapist and the client. Yet, mindfulness' use with children and within child psychotherapy has been limited.

This library-based research aims to explore what mindfulness is for adults as well as children through its definitions, elements and how mindfulness can be used within therapy. The research conducted examines benefits and challenges to the use of mindfulness with children to prove whether it should or not be used with children and within child psychotherapy. This paper will also look at when it is best to start practicing mindfulness with children and the reasons behind it in order to encourage the use of mindfulness with children in child psychotherapy.

## CHAPTER 1 - INTRODUCTION

In Ireland, one of the main documents for working with children is Aistear. Created by the National Curriculum Framework for Early Childhood Care and Education, Aistear is based for children age zero to six years old and strongly focuses on ways in which, adults working with children can develop on children's mental health and wellbeing. It emphasises, adults working with children, should be encouraging children to express their feelings through play and art and acknowledging children's emotions through caring relationships with them (National Council for Curriculum and Assessment [NCCA], 2009). As the focus on child's mental health in Ireland continues to grow, Greenberg and Harris (2011) expresses a concern, that children are not receiving the experiences of their optimal mental health, as they do not have positive habits towards their body and mind and are therefore are not developing resilience to help themselves to deal with adverse changes that may arrive into their lives, which can result in development of effects on academic performances, violence, substance abuse and obesity (Greenberg and Harris, 2011).

In recent years, the interest in Mindfulness, used as a part of positive mental health development has increased as has the interest in adaptation of Mindfulness techniques to use with children (Shapiro, 2008 cited in O'Toole, Furlong, McGilloway and Bjørndal, 2017). Yet, according to Altman, Briggs, Frankel, Gensler and Pantone (2002, p.1), child psychotherapists are always challenged by trying to develop a coherent technique when it comes to working with children. Therefore, the use of mindfulness with children has not always been incorporated into child psychotherapy. Furthermore, in recent years, the use of mindfulness within child psychotherapy has grown considering researchers are still struggling to define what mindfulness really is and how to measure it's effects (Lee, Semple, Rosa and Miller, 2008) .

The rationale behind the following library-based research is to show how mindfulness is used when working with children and within child psychotherapy, its importance and benefits, in order to encourage the use of mindfulness within all sectors working with children. Therefore, this theoretical research, aims to explore the ways in which mindfulness is used within child psychotherapy through several themes that emerged within the literature found; definition of mindfulness, effects of mindfulness, mindfulness in therapy, role of psychotherapist within mindfulness, creating space for mindfulness, benefits and challenges in using mindfulness with children. An additional emerging theme within the research, discusses in conclusion, whether the use of mindfulness is appropriate to use with children and if so, what should be considered before using mindfulness with children.

## CHAPTER 2 – WHAT IS MINDFULNESS?

Mindfulness, according to Analayo (2014) cited in Brown, Cresswell and Ryan (2015, p.1) to this day, still has no set definition. Yet, it is known, that mindfulness originated from Buddhist traditions, which according to Mace (2007), mindfulness's meaning can be translated into "awareness or bare attention" (p.7). Similarly, Dr. Jon Kabatt-Zinn according to Willard and Saltzman (2015, p.5), who popularized mindfulness and gave the definition as Michie (2014) declares, of "paying attention to the present moment deliberately and non-judgementally" (p.2). However soon after, there was a development of many more definitions to what mindfulness is. Bodhi (2011) cited in Brown et al (2015), argues it is having a "clear eyed attention to the workings of mind, body and behavior" (p.1). Whereas Brown and Ryan (2004) cited in Black (2011) proclaims, mindfulness is an open and receptive paying attention to and being aware of what is occurring right now in this moment. Furthermore, Shapiro and Carlson (2009) in Black (2011) highlights mindfulness as a need to be "intentionally attending in an open, accepting and discerning way to what is happening now".

With no yet set definition on mindfulness but a few contradicting each other, to get a better understanding of what mindfulness is, Willard and Saltzman (2015, p.5) divides mindfulness by how it is done, stating there are two elements to it, that is the formal practice; engagement in guided or self-guided exercise and then the informal practice; which is applying what you have learnt from your formal practice into your daily life routine. Which Zarbock, Lynch, Ammann and Ringer (2015, p.4) explains by stating formal exercises include, all the different types of meditation such as the ones that focus on your breath, the body and any mindful movement, whereas, the informal exercises are those mini oases of mindfulness that can be done throughout the day such as putting the pressure on one leg and noticing how it feels comparing to when there is no pressure put on it. Furthermore, Willard

and Saltzman (2015, p.5) emphasises, mindfulness is not to be treated as an any way of form of relaxation, as in fact, throughout mindfulness individuals are constantly working on being aware of how they are in a present moment which Kinder (2019, p.5) states human beings need, as our minds are constantly busy with many thoughts throughout the day, pleasant and the not so pleasant ones which can make us be distracted and feel overwhelmed by them. Therefore, considering all the definitions above, mindfulness according to Snel (2013, p.2) is about, becoming aware of what is happening in the present moment through which individuals stop interacting with those overwhelming thoughts that may interrupt them throughout the day. Thus, being beneficial for individuals according to Willard and Saltzman (2015, p.5) by empowering them to choose their behaviours and choose the way they respond to the environment and individuals around them, rather than quickly reacting on their feelings and thoughts.

Regarding children, Kinder (2019, p.6) states, mindfulness is just a very big word for a very simple idea for children to, according to Snel (2013, p. x) not just be body present but be fully present in the moment. Amy Saltzman cited in Willard and Saltzman (2015) defines mindfulness in a child friendly language by stating “Mindfulness is paying attention, here and now, with kindness and curiosity so that we can choose our behaviour” (p.5). Whereas, Kinder (2019, p.6) describes mindfulness to children as paying attention with care to each moment at a time. Furthermore, Snel (2013, p.2) proclaims mindfulness for children should be a friendly and provided with open willingness for children to become aware and understand, what is going on around them. Kinder (2019, p.6) declares children can easily do this, by paying attention to their senses of what they can hear, smell, see and taste in a current moment. Likewise, Burdick (2014, p.12) states, with a help of an adult, children can learn to be mindful by being asked to pay attention to the external environments

and immediate surroundings around through mindful listening, mindful breathing; in and out, mindful seeing, touching, tasting and even motion. As a result, allowing them to become aware of what is happening in the present moment meanwhile developing their senses.

Children can learn to practice mindfulness based on, as Siegel cited in Hawn and Holden (2011, p. xv) states, adults knowing how to practice mindfulness through which they can model how to be mindful and teach mindfulness to a child. Mindfulness, when practiced or taught to children as Burdick (2014, p.12) emphasises, can be similar to adults, but adults need to be able to adapt their mindfulness techniques to fit the different ages and abilities of children meanwhile consider that children's thinking is more concrete. Children according to Burdick (2014, p.12) are more imaginative so mindfulness should be practiced using creativity, imagination and play to keep them interested in it. Therefore, when for example teaching children how to take mindful breaths you may ask them to smell a flower for inhaling and blow the candles for exhaling. Likewise, Snel (2013, p.xiii) declares, children can be pretend to be "sitting like a frog" to make it seem like mindfulness is a game, a role-playing adventure rather than a duty. These are ways that will help children slow down, focus on being in the present moment, which as Snel (2013) highlights many children do not tend to do as they always have too much to do and "too little time to just "be"" (p. 4).

### **CHAPTER 3 – BENEFITS AND CHALLENGES OF PRACTICING MINDFULNESS WITH CHILDREN.**

There are many benefits to practicing mindfulness for adults and children.

Brown and Ryan (2003) cited in Ditrich, Wiles and Lovegrove (2017, p.58) declares, mindfulness benefits individuals through increasing their general wellbeing. Likewise, Hawn and Handel (2011, p.10) states, mindfulness allows individuals to achieve their own fulfilment of life and happiness and therefore it is an essential part of life. This is because through mindfulness, according to Brown and Ryan (2003) in Ditrich et al (2017, p.58) individuals reduce their irrational thinking and their anxiety.

In fact, according to Chiesa and Serretti (2009) cited in Ditrich et al (2017, p.58), mindfulness allows individuals to develop or increase development of empathy and self-compassion within themselves. It can according to Moore and Malinowski (2009) cited in Ditrich et al (2017, p.59), encourage self-regulation of emotions that children may be feeling. Therefore, practicing mindfulness with children that are feeling insecure in their self-image, who are either withdrawing or drawing attention to their self-image, can help them to gain a more positive self-image and as Snel (2013, p.5) states, this can help them to conquer the behaviour that may arise from feeling insecure about their self-image or abilities, such as pleasing others or bullying.

Furthermore, Mindfulness according to Snel (2013, p.5) can be beneficial towards children's problem solving skills, as it allows them to stay in the present moment and think before responding, giving children a different approach to dealing with their real life issues rather than for example reacting to how they feel, by emotionally storming off or acting impulsively. It allows them to pause and think before they respond. Increasing as

Brown and Ryan (2003) cited in Ditrich et al (2017, p. 281) announces, their self-control abilities as they become self-aware through mindfulness, which can lead to withholding the unnecessary responses to their negative feelings or thoughts. Therefore, children practicing mindfulness, reduces according to Ditrich et al (2017, p. 58), the likelihood of reactions given to daily stresses and can conquer the development of depression, anxiety and related medical symptoms or physical pains and it enhances quality of relationships, children may have with their peers or family members.

Mindfulness can also, according to Kinder (2019, p.8) aid children's attention to grow stronger, because during mindfulness individuals focus on one thing at a time. They focus for example on their breathing or what they can hear in the present moment. This can lead to as Ditrich et al (2017, p.59) proclaims, reducing the amount of mind wandering within classroom and home environments. Therefore, even children, who are diagnosed with attention deficit hyperactive disorder, dyslexia or autism, according to Snel (2013, p.5) can benefit from mindfulness, as mindfulness allows them to slow down, be present and focus in the moment. In contrast, Zeidan et al (2010) cited in Ditrich et al (2017, p.58) highlights, this may be due to the enhancement of mood that mindfulness provides which leads to better cognitive functioning within children therefore ability to better focus.

Although there are many benefits from practicing mindfulness, mindfulness can be challenging for some individuals. Zarbock et al (2015, p.172) emphasises mindfulness is something that must be practiced regularly, as only those who regularly practice mindfulness will benefit from it. Therefore, it's time consuming and requires daily commitment, effort and as Snel (2013, p.x) indicates, it is something that needs to be continuously tapped at and

deepened through continuous practice which some individuals may feel they do not have ability to do so and may find this a challenge.

Furthermore, Greco and Hayes (2008, p.7) states, the society and culture children live in, plays a difficulty for children practicing mindfulness too. The society and culture children live in, as Greco and Hayes (2008, p.7) highlights, does not teach them to stay in the present in the moment, to feel emotions and to feel hurt because their caregivers have never been taught how to do this themselves. Therefore often, according to Greco and Hayes (2008, p.7), children's caregivers may ask their child to stop crying as they themselves are incapable of dealing with their own emotions around their child crying, therefore diminishing that expression of emotions within the child.

Yet overall, as Children grow, they learn from their primary educators, their own caregivers. Therefore as Hawn and Holden (2011, p.70) highlights, it is important that the adults around them practice what they are aiming to preach, therefore, they need to allow the expression of emotions within the present moment and give time to practice mindfulness with the children. As for children to be able to practice mindfulness themselves, their families, especially caregivers must act out as role models and be involved in the practice of mindfulness as given from therapist too. Greco and Hayes (2008, p. 7) highlights this importance of adults being involved in therapy and mindfulness as a way of children not to be getting conflicting messages meanwhile working through their own ability to be mindful within therapy. Yet, this can be a challenge, as Hawn and Holden (2011, p.xviii) states, caregivers, can get caught up working away in their full-time jobs and be unable to provide time for therapy or mindfulness with children as well as to practice mindfulness themselves to be fully present around their children.

When practicing mindfulness with a child, an adult needs to consider that each child is different and therefore as Brems and Rasmussen (2019, p.288) proclaims, adults need to consider the age the child is, the developmental stage he or she is at and whether they understand what to do or not in order to be mindful, which can be a challenge too, as mindfulness requires asking children to focus and pay attention. Therefore, as Marshall (2015, p. 73) declares, many of the formal mindfulness techniques may not be ideal for some individuals, as they can lead to the individual's mind wandering off and even falling asleep. Important is so, to find out what works for that individual child which can be done creatively through art or play (NCCA, 2009). On the other hand, Burke (2010) cited in Berms and Rasmussen (2019, p.288) states, children as young as 4 years old are capable of engaging themselves in mindfulness practices, once they are enjoyable rather than being like as Snel (2013, p.xiii) states, a duty or a chore. Brems and Rasmussen (2019, p. 288) states mindfulness can be therefore, adapted from standardised mindfulness techniques for adults to ones that are suitable for children through for example having shorter sessions of mindfulness practice and making them more creative and imaginative.

## CHAPTER 4 - MINDFULNESS WITHIN PSYCHOTHERAPY

Germer, Siegel and Fulton (2013, p.24) proclaims that, the number of therapists that focus on mindfulness within psychotherapy has increased. The integration of mindfulness skills into any therapeutic approach according to Brems and Rasmussen (2019, p. 288) is crucial when working with adults as well as children, as a child practicing mindfulness skills can increase child's ability to engage, prepare for and comply with what is happening in the therapeutic relationship and therefore will lead to better treatment outcomes as symptoms will more than likely lessen and the engagement with the relationship with treatment and therapist activates.

Mindfulness can be integrated into therapy so, through breaking mindfulness down into 3 core elements: attention; that is having an ability to keep client's attention on what is happening right now in the present moment so that his or hers mind will not drift, attitude; that is the therapist's must to be curious, show openness and acceptance and then lastly through intention; which is what directly affects mindfulness practice and reasons why a therapist is using mindfulness with the client (Shapiro et al, 2006, cited in Bruce, Manber, Shapiro and Constantino 2010). On the other hand, Johanson (2006, p.24) states that some therapists use mindfulness without the need of this and without knowing they are actually using mindfulness within therapy.

In fact, Germer et al (2013, p. 25) declares, mindfulness underlies all types of therapies, as it's not a model of therapy itself, whereas Johanson (2006, p.24) explains, therapists use mindfulness within all different therapy types including Gestalt and Psychoanalysis. Gestalt therapist according to Rosenblatt (1975) and Pessó (1969) cited in Johanson (2006, p.24), ask clients to focus on the present moment just like in mindfulness,

meanwhile they use their body to create psychomotor movement. Whereas Freud, founder of psychoanalysis, according to Kris (1982) cited in Johanson (2006, p. 24), uses free association to focus on the present moment with the client, which can be understood as an attempt to transcend those limitations of ordinary consciousness that are unconsciously structured. Overall, Safran (2003) cited in Johanson (2006, p.25) declares, there is a common ground between mindfulness and other therapies, such as psychodynamic and psychoanalysis is the effort of the therapist and client to get to the pure experience of what the client felt and is feeling right now.

Additionally, in the recent years, there has been a development of behavioural and cognitive therapies and as Greco and Hayes (2008, p. 3) states, there has been adaptations made to Acceptance and Commitment Therapy (ACT), Dialectal Behaviour Therapy (DBT), Mindfulness Based Cognitive Therapy (MBCT) and Mindfulness Based Stress Reduction Therapy (MBSR) in order for them to be able to be applied to children and adolescents. Baer (2006) tried out a 12-session therapy of Mindfulness Based Cognitive Therapy for children (MBCT-C) cited in Greco and Hayes (2008, p.67-68) where children practiced mindful hearing, tasting, seeing, touching and how to integrate mindfulness into everyday life per session, separately to suit their attentional capacity and multisensory learning. Proving the use of mindfulness with children is possible. On the other hand, Semple and Lee (2007, p.84) highlights, prior the use of MBCT-C with children, important is to conduct an interview with both the child and their caregivers to figure out child's strengths and their symptoms too. In summary, clarifying that therapist role is to adapt mindfulness into therapy in a way that it suits a certain child's abilities and encourages them to want to be mindful.

Additionally, creating space for mindfulness is important and just like therapy, mindfulness will never become successful without a safe space given to the client. According to Greco and Hayes (2008, p. 69) mindfulness interventions require this creation of safe space as well as confidentiality even if it is with children. Whereas, Porter, Bramham and Thomas (n.d) states, there is a need for creating a space that is comfortable and suitable for client's wellbeing by adjusting air movement, lighting, temperature of the room, allowing air movement within the room, providing client with personal space and also cognitive stimulation.

Equally to the environment mindfulness is conducted in, a therapist plays its role when it comes to mindfulness. Therefore, a therapist must themselves practice mindfulness in order to as Germer et al (2013, p.24) states, to be present with the client and to teach clients the right mindfulness skills so that the client can be able to then to practice mindfulness at home, between therapy sessions, as mindfulness needs to be continuously practiced and one hour a week is not sufficient. In case of children a therapist may show children's caregivers how to practice mindfulness so that they can get involved too and therefore continue practice of mindfulness within home environment on daily basis for the best benefits of a child.

## **CHAPTER 5 - DISCUSSION – THE USE OF MINDFULNESS WITH CHILDREN**

The previous three chapters explored mindfulness as well as its benefits and challenges. Despite these, it's only reasonable to conclude this research with whether mindfulness is appropriate to use with children and whether it should or not be used within child psychotherapy.

### **5.1 IS MINDFULNESS APPROPRIATE TO USE WITH CHILDREN?**

Mindfulness as it got popular in recent years, there was a huge amount of research concluded on its use with adults. Yet, there has been very little research done out on mindfulness with children and although, benefits of using mindfulness with adults were verified through research which led to the notion of that mindfulness being appropriate to use with adults, the appropriateness of use of mindfulness with children is continued to be questioned (Thompson and Gauntlett-Gillberth, 2008). In contrast, there has been a progress made and more growing interest is found in research in mindfulness with children (Zoogman et al, 2014, cited in Crescentini, Capurso, Farlan and Fabbro, 2016). Furthermore, the little amount of research and studies conducted around use of mindfulness with children, has shown that, the use of mindfulness with children is appropriate and has in fact, a positive effect on children and their psychological and emotional wellbeing (Biegel et al, 2009, cited in Crescentini et al, 2016). Additionally, it has a beneficial affect on children's learning too (Weare, 2012). In fact, as Weare (2012) proclaims, the overall consensus of studies of mindfulness being used with children shows no negative effects or any reports of harm being caused through it (Weare, 2012).

In contrast to this, it is important to include children's voice. As Article 12 and Article 13 in the United Nations Convention on the Rights of the Child states, children have the right to their own opinion, to form views on matters affecting the child and are free to express ideas of all kind and thoughts (childrensrights, 2010). Therefore, children should have a choice and an ability to voice their opinions in regards to practicing mindfulness. Furthermore, research found, declares, children easily accepted the mindfulness approaches and mindfulness was found feasible (Semple, Lee and Miller, 2006, cited in Thompson and Gauntlett-Gilberth, 2008). Likewise, another study found children really liked mindfulness and accepted it well too (Harnett and Dawe, 2012, cited in Weare, 2012).

Importantly, the purpose of mindfulness for both adults and children is the same. According to Semple and Lee (2007), it is to "practice living in the present" (p.17). Yet, how mindfulness is practiced with children and with adults should be different, therefore, it is important that adults wanting to practice mindfulness with children, do not treat children as "little adults" (Thompson and Gauntlett-Gilberth, 2008). As Benson (2020, p.196) declares, there is a huge difference between adults and children in regard to, their developmental level, age and program objectives. Concluding, mindfulness can be used with children, once it is adapted to them, to their abilities, with creativity and imagination, it will more than likely be enjoyable for them.

## **5.2 WHEN IT IS BEST TO START PRACTICING MINDFULNESS WITH CHILDREN?**

According to Dunning et al (2019) cited in Benson (2020, p.197) the earlier adults start practicing mindfulness with children the better for the child, because the early stages of cognitive development mixed in with mindfulness can be a “sweet spot” also known as the optimal time for children to learn how to self-regulate. In fact, there is no stated, restriction on what age adults should practice mindfulness with children as children are naturally mindful (Erwin and Robinson, 2016). Important is to note, that many of the research concluded around children practicing mindfulness are carried out on healthy primary school children (Zoogman et al, 2014, cited in Crescentini et al, 2016). Therefore, as Benson (2020, p.196) declares, it is difficult to make any conclusions on children’s use mindfulness or what age it should be practiced from yet. Additionally, the definition of mindfulness according to Semple et al (2009, p.16) has not yet been fully clarified by researchers due to many contradictions between definitions from different sources. Therefore adults wanting to practice mindfulness with children may not be as eager to practice mindfulness with children as they do not know how to describe mindfulness to children in the first place and that is a big challenge before they even begin the practice (Erwin and Robinson, 2016). In contrast, because children are naturally mindful, which makes it easier for adults to practice mindfulness with them, there should be no need for defining mindfulness for them (Erwin and Robinson, 2016).

Yet, as Semple and Lee (2007, p.84) states it’s important for caregivers of the child to know what mindfulness is and the impact mindfulness has on a child and to provide them with an introductory class of what mindfulness is, so that as Hawn and Holden (2011, p.70) caregivers can practice it themselves at home as well as practicing it with their child.

### **5.3 SHOULD MINDFULNESS BE USED IN CHILD PSYCHOTHERAPY?**

The research around the use of mindfulness with children is limited and according to Greco and Hayes (2008, p.64) there has been also, very little evaluation or development in regards of use of mindfulness within child psychotherapy, in fact a lot of the research around mindfulness based treatments in psychotherapy are based on adults. Although, the evidence from research around adults practicing mindfulness and the benefits it has on them is so strong, it is difficult to say, the same about children due to the lack of research done on mindfulness being practiced in child psychotherapy (Thompson and Gauntlett-Gilbert, 2008). Yet, there is a lot of research that state mindfulness is something that can be taught to children (Thompson and Gauntlett, 2008).

Child psychotherapists can, therefore, teach children mindfulness through the practice of mindfulness with them as far as they consider child's developmental stage when implementing mindfulness within the psychotherapeutic relationship (Jha, 2005, cited in Thompson and Gauntlett, 2008). Therefore, there is a need, for adaptations to be made which will also consider children's young age and the idea of that children are not adults (Lee, Semple, Rosa and Miller, 2008). As children, unlike adults, have less developed memory and attentional capacity which must be taken into consideration prior to practicing mindfulness with them (Posner and Petersen, 1990, cited in Lee et al, 2008). This does not mean, same therapies that were used with adults as a part of mindfulness, cannot be used with children, as Greco and Hayes (2008, p. 3) highlights, once adapted to each child they can be used with children too.

Mindfulness Based Cognitive Therapy for Children (MBCT-C) according to the research conducted, is one that is preferably used by child psychotherapists and according to Semple and Lee (2007, p.84), before being used with a child, there is a need for identifying if mindfulness based therapy is appropriate for the child through an interview with a child and their caregivers. Semple and Lee (2007, p.84) state it includes looking at children's strengths and symptoms and explaining what MBCT-C is as well as the impact mindfulness will have on a child to the caregivers. This is so that as Greco and Hayes (2008, p. 7) children can practice mindfulness at home with their parents too as well as in therapy.

Importantly and in conclusion, as mindfulness is something that can be used within child psychotherapy, it should not be something children have to do. Adults working with children, such as child psychotherapist should consider ensuring that children do not view mindfulness practices as prescriptive experiences, like a chore, which fixes a problem or enhances some abilities but something they want to experience and something that is enjoyable within their natural state of well-being (Erwin and Robinson, 2016). Child Psychotherapist, just as other adults working with children, should therefore consider making mindfulness, creative and imaginative for a child and do it through art or play (NCCA, 2009). It should not be viewed as intervention that is added into psychotherapy, as children are naturally mindful and through viewing mindfulness as a treatment we miss the opportunity to recognise this and the countless ways children focus, wonder, engage and also connect with the natural environment mindfully (Erwin and Robinson, 2016). Therefore the role of the therapist within child psychotherapy, should be to practice mindfulness with a child through supporting child's natural state of joy, wonder and engagement or else to move out of their way so children, themselves can experience the world mindfully (Erwin and Robinson, 2016).

## CONCLUSION

This research concluded, showed that mindfulness means the same for adults as for children. The importance of, as Snel (2013, p. x) highlights to be fully present in a moment and as Zarbock et al (2015, p.172) states, regular practice is at its key whether it is through formal or informal practice leading to many benefits. Practicing mindfulness with children, benefits their psychological, social, emotional, academical, mental health wellbeing and has no negative impact on them (Weare, 2012).

Yet, this research also has shown that how mindfulness is used to practice with adults cannot be the same with a child. Therefore, adaptations are a requirement to suit each child. These adaptations must consider each child's holistic development, their age, strengths, symptoms and also child's voice and choice on whether the child wants to practice mindfulness.

The lack of research within the area draws in a conclusion, that many child psychotherapists may not be keen to use mindfulness with children as Benson (2020, p.196) highlights, it's appropriateness is still not validated and so therefore it is too early to jump into conclusions of whether mindfulness is something that should be used within child-psychotherapy. Therefore, this library-based research calls for the need of further continuous studies and research around use of mindfulness with children within psychotherapy and outside of therapy to be carried out in the future which will possibly lead to mindfulness being seen as appropriate and more likely used technique with children. Therefore, leading to many children benefiting from mindfulness and reaching their optimal mental health (Greenberg and Harris (2011).

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