Abstract

This study discusses how to use information on mindfulness and its applications as a method for coping with difficult emotions in order to prevent a relapse of drug addiction. Mindfulness practices, while supporting healthy development, also reduce stress, improve well-being, and provide emotional balance. Its use in substance abuse treatment is quite new. Mindfulness helps one to be able to cope with their state of mind in the moment of stress related to substance withdrawal by supporting learning and well-being, and by enabling a direct relationship to be established among self-awareness, self-control, and emotion regulation. In the working group of this study on the prevention of substance abuse relapse, sessions consisted of experimental exercises and discussions. The objective is to keep key points such as the person’s current experiences, relapse, improvement or lifestyle in the center of the discussion. The attention of the participants, through mindfulness application, is a continual in “the moment” review of their surroundings and can prevent them from getting lost in their history. As another strong side of the program, the importance of an individual addressing one’s self before judging or being made to feel guilty is gently encouraged in these applications. In this way, difficulties that emerge in the practice are assessed not as failures but as a sign of tendencies related to the mind, and people’s motivations are protected by normalizing the difficulties they experience. Perhaps the most crucial point of the mindfulness-based relapse prevention program, unlike other therapies, is that labeling in any manner is not performed. Instead of people experiencing the worth of being forgiven, people are required to only observe and accept. Through all of these practices, the target is to ensure a person becomes more aware and accepting towards their actions.

Keywords: Mindfulness • Substance abuse • Difficult emotions • Emotion regulation • Relapse prevention
Conscious awareness (mindfulness) is a way of care guidance received from the basic traditions of Eastern meditation. In Western culture, it has also begun to be increasingly discussed and implemented (Kabat-Zinn, 2000). Mindfulness is characterized as the focused acceptance of a person's attention in the current moment before judgment (Brown & Ryan, 2003; Kabat-Zinn, 1994; Linehan, 1993).

Nyanaponika Thera (1972) defined consciousness as “our perceptions, the state of being clearly aware and focused only on what’s indeed going on in successive moments and our inner world. Mindfulness is an important insight technique that contributes to emotion regulation, bringing balance when strong sets of emotions arise; it increases the awareness of mental processes at the same time as it provides training in awareness and taking care of what is currently happening (as cited in Cole, Martin, & Dennis, 2004).

Mindfulness is thought of as awareness of the emotions one is experiencing when defined in the sense of mindfulness of self, whereby one can notice their individual needs and desires, their expectations, and the power and potential of self-development that is in their ego (Dizen, Berenbaum, & Kerns, 2005).

This means that people who have mindfulness can keep their disturbing negative characteristics under control while working to consolidate their positive sides. An individual who is aware of their emotions can become a happy and productive person by establishing healthier relationships in their daily life, thus being able to make life more meaningful (Koçak, 2002). One will be more successful in their relationships with an environment that can realize their psychological needs.

Many factors are effective on an individual’s level of development. An individual can show their interaction in the case of either positive or negative behaviors. An individual must balance their ability to keep their cognitive processes under control (Gray, 2004).

People pull themselves back in environments where they have negative experiences or that threaten their self-esteem; this situation is an indication of awareness of the process of self-control (Crocker, 2002).

Emotion regulation, which contributes to major social and emotional skills, is one of the fundamentals that mental health is built upon. The definition
of emotion regulation makes reference to the skill of being able to generally notice one’s emotions and appropriately manage them. Skills specific to emotion regulation include the ability to notice the feelings one is experiencing, the ability to define the specific emotion and its intensity, the constructive expression of emotion, and withstanding distress or distress tolerance (Cole et al., 2004; Davidson, Jackson, & Kalin, 2000).

In mindfulness, our minds have been likened to a pot of water and our emotions have also been compared to the wind. Whenever the wind blows, the water on the surface ripples while the water underneath is hidden. Here the harmful emotions that are clearly seen on the surface of the water are particularly difficult. The waves that made harmful emotions and the turbulence that follows cause us to feel upset and bewildered. Applications of mindfulness, while giving our mind permission to clearly reflect on the surface of the water, allow us to see our emotional turbulence and become calm. This is a way of communicating emotions. While giving attention to emotions, identifying them may reduce emotional responses as well as increase clarity and emotional balance. This application offers the ability to confront emotions that cause discomfort, which may lead to depressive states or “acting out” (substance abuse or violence); it offers the development of skills that can tolerate these emotions (Silvia, 2002).

**Mindfulness Practices**

In mindfulness practices, the attention of the mind is targeted a certain way; it is purpose that can be in “the moment” with a clarity that doesn’t bear judgment. Many short exercises can be taught such as physical examination, becoming aware of one’s thoughts and feelings, and applications of love and compassion. Applications of love and compassion help an individual to be able to show compassion for themselves and for others. In studies on the impact of mindfulness training in adults, many benefits were seen such as the expansion of studies on bodily emotions in the direction of meditation, breathing exercises, and care, as well as advances in emotion regulation care (Lazar, Kerr, & Wasserman, 2005).

Mindfulness practices offer the ability to improve durability when encountering disturbing emotions which can cause a number of behavioral responses such
as harm to one’s self or others. Also in practicing mindfulness, one attempts to return to a single subject through constant attention while consciously distancing one’s self from all distractions, thereby strengthening the attention. Many benefits have been observed in the direction of increased positive mood and immune system functions, a decrease in depression relapses, an increase in empathy, reduced substance use, increased motivation, healthy adolescent development, an increase in student academic achievement, decreased levels of stress, awareness of one’s emotions, and a decrease in problems arising from people suffering from anxiety problems (Shapiro, Brown, & Biegel, 2007).

Mindfulness-based stress reduction (MBSR; Kabat-Zinn, 1990), one of the mindfulness applications, is perhaps the most frequently used and studied method in mindfulness training. MBSR is an 8-week group enterprise and was designed to encourage and teach the use of awareness in everyday life. Individuals learn the three basic techniques of mindfulness: mindful breathing (concentrating on the feeling of taking a breath at the same time as other bodily sensations; allowing clear thought processes and emotions), body scan exercise (mindfulness applications applied to various parts of the body), and emotional stretches involving slow or extended series of yoga poses (Felver, Doerner, Jones, Kaye, & Merrell, 2013).

In the scope of numerous studies on mindfulness-based stress reduction courses, learning mindfulness skills revealed benefits in adults. These skills were proven to be effective at reliably reducing the symptoms of anxiety and depression and increasing their self-regulating behavior and positive emotional state (Brown & Ryan, 2003).

Mindfulness-based cognitive therapy (MBCT), a version of MBSR, fuses the concepts of traditional cognitive therapy and mindfulness. MBCT teaches one to be mentally aware of the response patterns that contribute to individual deterioration and pathology, and how to use cognitive-behavioral techniques in order to then handle these patterns and combat them. Both of these programs mentioned above are quite intensive; individuals come together in a group once a week for 2½ hours for training and discussion. For the past 30 years, MBSR has investigated a variety of clinical and non-clinical samples in the mindfulness environment (such as hospitals and community mental health centers) through controlled observational studies. In these studies, the evidence that has been presented suggests that MBSR can be an effective venture for cases such as
stress (Shapiro, Schwartz, & Bonner, 1998), major depression (Teasdale, Segal, & Williams, 1995), chronic pain (Kabat-Zinn, Lipworth, & Burney, 1985), and fibromyalgia (Kaplan, Goldenberg, & Galvin-Nadeau, 1993). In a meta-analysis of MBSR’s health benefits, the average magnitude of the treatment effect was reported as .49 (Grossman, Niemann, Schmidt, & Walach, 2004).

Another area of use for mindfulness applications is treatment for drug addiction. Addiction is a specific condition in which a person, in spite of attempting to quit many times from a substance they have used, cannot quit; they gradually increase the dosage, and withdrawal symptoms appear when usage is stopped; usage continues in spite of seeing the damage it does; and a large portion of time is spent searching for the substance (Ögel, 2001).

Substance use and addiction in Turkey, as well as all over the world, is known to be a growing problem. In Turkey, it is extremely difficult to identify the problems caused by addictive substances that are used for therapeutic purposes (Doğanavşargil, Sertöz, Coşkunol, & Şen 2004). The literature throughout the years has shown a significant increase in the frequency of drug use in Turkey, even though Western countries have higher percentages of drug use. Parallel to the increase in the frequency of drug use, the onset age of drug use has been dwindling and adolescents make up the risk group in terms of substance abuse disorder (Siyez, 2010, as cited in Siyez, Gürçay, & Yüncü, 2012).

Drug users have been observed with lower pain-threshold levels. When quitting a drug, it is difficult for a person to pass the observed withdrawal period. Underneath this intensity lies the inability to cope with problems (Ögel, 2001). Withdrawal is when a substance that has been used extensively for a long time is cut off or reduced in use, when the substance level decreases in the blood and tissues, resulting in physiological and cognitive symptoms and accompanied by behavioral changes that disrupt harmony. People with these unpleasant withdrawal symptoms try to escape from these symptoms or provide relief by using the substance again. The withdrawal symptoms that occur vary according to the substance used. These withdrawal symptoms can be life-threatening.

Thanks to mindfulness applications, the negative emotional state that grows in a person who has developed emotion regulation is prevented from feeling the distress and pain that is experienced. A person can manage the feelings that
occur and can improve their well-being. In order to increase mindfulness, various applications and meditation techniques are used. The techniques that are used provide the benefit of helping organize a person’s mood and states of distress and anger. Snap responses, aggressive and rebellious behavior, excitability, being withdrawn, and various behavioral problems have been observed in people who use drugs. In order to avoid the negative changes that a person experiences, performing mindfulness applications is considered to be a great benefit. Its intended purpose is to manage awareness of the mind in a defined manner.

In the mindfulness-based relapse prevention program, individuals are encouraged on the topic of trust and to examine their experiences. This practice encourages participants to be able to see their mental habits and behavioral patterns; it encourages them in the direction of discovering what is right for them by observing their own experiences (Bowen, Chawla, & Marlatt, 2010).

The main objective is the observation of direct experience, and this is useful when one is able to raise awareness in moments when the attention is weaker, repeatedly making the distinction between responses, which provides them with their initial experience (Bowen et al., 2010).

In this program, the person must have the experience and understanding of mindfulness, and at the same time, to gain experience, they take part in being the therapist, gaining experience in the treatment of substance abuse. Otherwise, as Kabat-Zinn said, “From the individual history of practice and the history of teaching, performing mindfulness-based preventative studies carries the risk of returning one to a caricature of conscious awareness as the radical is converted, kidnapped at the core,” (as cited in Bowen et al., 2010).

Conflict is not involved in programs derived from the 12-step program; in reality, there are overlaps in the approach to issues, including acceptance, releasing personal control, and prayer and meditation as well. However there have been disagreements on some points. As an example, Alcoholics Anonymous (AA), Narcotics Anonymous (NA), and the philosophical foundations of other 12-step approaches are a combination of spiritual models and the illness of addiction is seen as substance abuse and drug addiction as a chronic, progressive disease of the brain. Addicted individuals, or those who abuse, are encouraged in the direction of stronger involvement in terms
of support, and to accept “weaknesses,” encountering the common labels of “addict,” “alcoholic” or disease. In this approach, contrary to the use of positive or negative labels and being asked to identify with them, one is instead asked to accept the experience without attributing any values, to only observe. In addition, the program includes cognitive-behavioral relapse intervention components that focus on strengthening the development of individual coping skills, discovery of the behavioral and cognitive precursors of substance abuse, and increasing self-confidence. The objective of all of these applications is to strengthen a person's choices, in a sense, so that one can be more aware of their actions, more accepting, and more compassionate (Bowen et al., 2010).

The most basic difference between this and the 12-step model is seen in the approach of staying away from the substance (abstinence). To be able to participate in AA or NA, abstinence is the ideal target in the program, although this decision and the search for the conditions for staying away from the substance are left to the participants. This is because it is a relapse prevention program based on conscious awareness, a complementary treatment program; the participants have already undergone treatment and their goals are clear. The ideal group size has been determined to be between six and twelve participants. It is administered as a closed group of eight weekly sessions (Bowen et al., 2010).

The first randomized control study of this program was performed at the Addictive Behaviors Research Center at Washington State University. In this study which designated eight sessions, the sessions included topics such as grief and loss, initiative, self-confidence, goal setting, rational thinking, and relapse prevention skills (Bowen et al., 2010).

In addition, the results gave hope to the validity and acceptability of the program. In the four-month follow-up study, compared to the desire levels of those in standard treatment, those who had received complimentary treatment were found to have significantly reduced levels of craving. Additionally, an increase in acceptance and acting with awareness were observed (Bowen et al., 2010).

Lastly, the total number of days where there had been alcohol or drug use was seen to drop in the participants of both cases. However, the number of days where substance use occurred was found to have dropped quite significantly in the mindfulness group; at the end of the eight weeks, the average use in the
mindfulness group had been .06 days while the standard complementary therapy group's average had been 12.06 days. These differences also continued for the two months following treatment (2.08 days of use in the mindfulness participants and 5.43 days for the standard complementary treatment group); in the fourth month, however, the days of use in the mindfulness group began to approach the level of those in the standard complementary group (Bowen et al., 2010).

Although the end results were encouraging, a follow-up phase on the weakened effect of treatment should strongly be considered. The situation can be attributed to the confusing environment that the participants in the mindfulness-based program experienced as they returned to the standard care group after completing their program. For example, if there is awareness of craving and compulsion before being accepted, these groups can give importance to strategies such as avoiding an unpleasant experience or distraction. Therefore, in mindfulness-based relapse prevention programs, the continuance of approaches and support are important in the stage after treatment (Bowen et al., 2010).

**Results and Discussion**

Mindfulness is a psychological method of treatment based on meditation techniques and on paying attention to this “moment” removed from criticism (Kabat-Zinn, 1994). In daily life, we come to a state that is frequently ignored, feeling emotions that subtly change. With awareness of one’s movements and physical position, your mind and body are brought to the same place at the same time. It is surprising that the mind at the present thinks about another place or thing, rarely thinking of the place where the body is. Literally embodying awareness, observations are realized through direct sensory experience without words such as touch, sound, sensation, smell, sight, and so forth (Kabat-Zinn, 2000).

Through mindfulness training, a person can understand and express themselves more comfortably by providing emotion regulation. This situation provides the benefit of improving the quality of life. In the results of the research, effects were observed through the mindfulness programs such as an increase in empathy, a decrease in states and thoughts of depression, a decrease in substance use, and a decrease in the level of stress.
With the new use of mindfulness in substance abuse treatment together with the research performed above, the developments show promise. In substance abuse, the relapse prevention program is “now” centered, not reflecting on judgment according to results, and the attributes of mindfulness practices that have been developed are acceptable. The resulting experimental goal is to ultimately be satisfied with a now-centered focus, curiosity, modesty, and compassion. Therefore, it has not only been found to be effective in creating a space that supports discovery and development, it additionally is effective at bringing warmth and flexibility to the program, allowing the participant a clear approach as well (Bowen et al., 2010).

The mindfulness-based approach does not force showing “goals” in its approach. Mindfulness-based practices encourage individuals to become familiar with their own thoughts, emotional responses, and behavioral patterns. Repeat substance abuse is seen as a common process during the change, and it is considered as an opportunity for learning rather than as a failure or return to the beginning (Bowen et al., 2010).

Substance abuse is becoming more widespread in Turkey and the world with each passing day, and its negative results threaten our future. After all that has developed, treatment is a situation that has power. Interventions that can be performed before addiction develops gain importance with each passing day of addiction prevention programs. That’s why addiction prevention is always more successful and more beneficial economically and socially. It is felt more applications and investigations are needed in this context on the use of mindfulness applications in substance abuse treatment.
Kaynakça/References


