

CONTEMPLATIVE POSITIVE PSYCHOLOGY: INTRODUCING MINDFULNESS INTO POSITIVE PSYCHOLOGY

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A pesar de que mindfulness está integrado en muchos manuales de psicología positiva como una técnica "positiva", apenas se han desarrollado las implicaciones que tiene su uso ni se ha investigado la relación entre mindfulness y bienestar humano. Analizar las principales potencialidades de los dos ámbitos, las posibilidades de integración, así como las posibles contradicciones entre sus mensajes, es fundamental de cara a establecer puentes. Mindfulness es más que una técnica de meditación, lleva implícitos una serie de valores y condicionantes éticos que se adecuan en buena medida con los presupuestos que se proponen desde la psicología positiva, como el desarrollo de la amabilidad, la compasión, y las emociones positivas. El objetivo de este artículo es presentar por un lado aspectos comunes y similitudes, y por otro lado diferencias entre mindfulness y la psicología positiva. También se presentarán los principales estudios que han investigado el papel que tiene mindfulness y las prácticas contemplativas sobre el bienestar humano. Finalmente se discutirá y plantearán futuras líneas de investigación e intervención para acercar ambas propuestas.

Palabras Clave: Psicología positiva, Mindfulness, Meditación, Felicidad.

Although mindfulness is included in many positive psychology manuals as a "positive" technique, the implications of its use have scarcely been developed and the relationship between mindfulness and human well-being has barely been researched. Analyzing the main strengths of the two fields, the possibilities for their integration and the potential contradictions between their messages is essential in order to establish connections. Mindfulness is more than a meditation technique. It has implicit within it a set of values and ethical conditions that coincide to a great extent with the proposed assumptions from positive psychology, such as the development of kindness, compassion, and positive emotions. The aim of this paper is to present, on the one hand, the commonalities and similarities, and on the other, the differences between mindfulness and positive psychology. We also present the main studies that have investigated the role of mindfulness and contemplative practices on human well-being. Finally future research will be discussed and intervention suggested in order to bring the two proposals together.

Key words: Positive psychology, Mindfulness, Meditation, Happiness

Positive psychology has integrated, more or less clearly, contemplative practices such as mindfulness within the range of grounded and empowering techniques of the positive aspects of being human. Despite this, there has been little depth within this movement on its implications and the inconsistencies that exist between mindfulness and positive psychology, and the similarities that can undoubtedly be strengthened in order to build bridges in improving the effectiveness of both ways of understanding human development and the pursuit of psychological well-being.

Mindfulness is defined as a trait or mental state that involves the intentional focusing of the attention on an object (e.g., breathing), while observing thoughts, emotions, and sensations as they emerge in the present moment (Vago & Silbersweig, 2012). Mindfulness training usually starts with a first phase that works on, to a greater extent, the attention focused on an

element, whether in the environment or the body (breathing, feelings, etc.). Then comes a second phase of open monitoring, in which the practitioner places their attention on what is happening at that time, i.e., on the thoughts, emotions and sensations that come up. As for how to practice mindfulness, it is mainly divided into two types: formal and informal practice. The formal practice is where the person has to devote some time to take up a particular position, either sitting in a chair or lying down, and their attention is directed to any phenomenon or object that appears in the present, with the physical sensations being an ideal terrain on which to begin focusing the attention (Cebolla & Demarzo, 2014). The informal practice, on the other hand, involves bringing the attention to daily activities (e.g., eating, showering, etc.), with the aim that the person perform simple exercises of awareness, observation of the senses and attention to what happens in the present moment.

In the field of psychological treatments, incorporating mindfulness, as a primary or supplementary component, has allowed the emergence of treatment programs aimed at reducing different types of symptoms in different groups, and it

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has been shown to be effective in multiple disorders. Several meta-analyses and meta-analytic reviews recently published on the effectiveness of interventions based on mindfulness (IBM) have proven effective in reducing symptoms of depression, anxiety and stress in multiple conditions, such as mental disorders, chronic pain, cancer, cardiovascular disease, personality disorders, addictions, etc. (Gotink et al, 2015; Khoury et al, 2013.) In fact, this learning has been considered as a transdiagnostic therapeutic mechanism (Brake et al., 2016). Relapse prevention in depression is where the greatest successes have been obtained: a recent investigation conducted by Kuyken et al. (2015) and published in the *Lancet*, showed that Mindfulness-based Cognitive Therapy (Segal, Williams, & Teasdale, 2014) significantly decreased the likelihood of a relapse, obtaining better results than using medication.

All these data show that mindfulness is a potential tool for the treatment of various problems. When asked why mindfulness is effective, different authors have investigated the mechanisms underlying its effectiveness (Baer, Smith, Hopkins, Krietemeyer, & Toney, 2006; Shapiro, Carlson, Astin, & Freeman, 2006). In a review by Hölzel et al (2011), the authors proposed five key mechanisms to understanding how the practice of mindfulness influences health: attention regulation, increased body awareness, emotional revaluation regulation, emotional-exposure regulation and changes in the perspective of the self (Cebolla, 2014).

MINDFULNESS IN POSITIVE PSYCHOLOGY

With regards to the relationship of mindfulness with well-being variables, it has shown a positive relationship between the trait mindfulness of a person and positive key self-evaluations such as subjective well-being (Baer, Smith, Hopkins, Krietemeyer, & Toney, 2006), which, in turn, predicts a higher life satisfaction in people with high levels of trait mindfulness (Kong, Wang, & Zhao, 2014). Garland et al. (2015) found that in a sample of patients with cancer, those who scored higher on their tendency to be mindful (mindfulness trait) were more likely to pay attention to the positive experiences, which in turn was related to an improved capacity for regulating everyday stressful events, which impacted on a greater meaning of life.

In the same vein, mindfulness training has been linked to a moderate increase in levels of positive affect (Schroevers & Brandsma, 2010), a greater sense of coherence, especially at the level of life significance (Ando, Natsume, Kukihiro, Shibata, & Sayoko, 2011), improved quality of life (Van Dam, Sheppard, Forsyth, & Earleywine, 2011), greater empathy (Aiken, 2006), greater satisfaction in relationships (Barnes, Brown, Krusemark, Campbell, & Rogge, 2007) and greater hope (Sears & Kraus, 2009). In fact, practitioners of mindfulness meditation are often perceived as happier by external observers (Choi, Karremans, & Barendregt, 2012).

DIFFERENCES AND SIMILARITIES BETWEEN POSITIVE INTERVENTIONS AND INTERVENTIONS BASED ON MINDFULNESS

Despite the inclusion of mindfulness within the paradigm of positive psychology, there are key differences that should be taken into account. Parks and Biswas-Diener (2013) have pointed out that there are three key differences. Firstly, while the aim of mindfulness is for the individual to attend to all experiences, positive and negative, with curiosity and kindness, positive interventions focus exclusively on emphasizing the positive experiences. Secondly, the interventions based on mindfulness (IBM) propose a way of relating to the experiences based on acceptance of them, without trying to change them and with an attitude of non-judgment; while positive interventions are aimed at identifying and expanding the positive experiences, even trying to replace negative experiences with more positive ones. Finally, whereas in mindfulness it is assumed that the problems must be addressed, positive interventions assume that the positive factors make the negative ones less striking, urgent and important for individuals (Seligman, Rashid, & Parks, 2006).

Overall, within positive psychology, mindfulness is seen as a just another healthy practice (Hefferon & Boniwell, 2011). This contrasts with the worldview that professionals trained in mindfulness can have, where the practice can become, in many cases, a way of life that is integrated into the personal, professional and family spheres (Alvear, 2015). Some authors even argue that the ideal motivation to practice mindfulness should be the desire to grow personally, and that there must not be solely a utilitarian reason (e.g., mindfulness as a professional tool) as a motivator (Simon, 2012). Indeed, a *sine qua non* for instructors of different IBMs is the daily practice at both the formal and informal levels (Crane & Elias, 2006).

Regarding the interventions, within the movement of positive psychology, there are many interventions that share some key elements with mindfulness, and this can therefore lead to confusion. The two interventions with which it shares common features are flow and savoring. Stream of consciousness, also known as flow or optimal experience, is a subjective state that people experience, when they are fully involved in something to the point of forgetting the time and the notion of self, while remaining focused on the activity that they are doing. The conditions for the flow state require: (a) a clear objective, (b) immediate feedback to be able to know if we are getting closer or moving away from the objective, and (c) the degree of difficulty of the task to be balanced with the person's ability. Numerous studies reveal a strong relationship between the time a person spends in flow and markers of subjective well-being (Csikszentmihalyi, 1990). The similarities between the mental state of flow and mindfulness seem to be minimally clear, especially those concerning attention to the present moment, the

loss of the notion of self and delayed gratification after having experienced this state of mind (Kee & Wang, 2008). In fact, from the field of psychometrics, some studies indicate a moderate positive relationship between the two constructs (Bervoets, 2013). It has also been observed that IBMs increase the likelihood of experiencing flow in athletes (Gardner & Moore, 2007). The main difference with respect to mindfulness is that in the state of flow the individual is aware of their actions, but they are not aware that they are aware. Also in flow the attention is focused on the goals and not the process itself.

On the other hand, savoring involves the self-regulation of positive emotions by generating, maintaining or increasing them, paying attention to the positive experiences of the past, present or future and, as also happens with mindfulness, the ability to savor differs from one person to another (Bryant & Veroff, 2007). The similarities between savoring and mindfulness occur in relation to the component of savoring focused on the present. In both cases, the attention necessary to experience the present moment is developed. However, the crucial difference arises because in savoring great emphasis is placed on the enjoyment, the positive assessment and the maintaining of this experience, while in the practice of mindfulness, equanimity and non-reactivity are predominant in relation to this experience, whether it is an experience classified as positive or not. One study observed how savoring and mindfulness work independently in their contribution to subjective well-being: savoring was related more to life satisfaction and positive affect, while mindfulness was more related to the way of managing negative affect (Levy & Vella-Brodrick, 2009).

Despite the differences between them, the two movements share key aspects that are worth highlighting and which can build very interesting bridges, for example they both share the fundamental objective of alleviating suffering and increasing well-being, encouraging individuals to seek their own goals, guided by their intrinsic values, the pursuit of enhancing the positive aspects, training in psychological strengths (kindness, compassion, civility, etc.) and the importance of positive emotions.

Another key aspect in the relationship between mindfulness and positive psychology refers to the role it plays as the central pillar of the spiral of positivity (Garland et al., 2011). In this model, it is suggested that the practice of mindfulness is related to an increase in the positive reappraisal of coping and that they both feed back into each other, creating a dynamic growth of positivity. In this sense, through practice, individuals can generate an expanded state of consciousness that would strengthen the interpretations related to coping with stressful events, leading to a substantial decrease in stress. In another model, by Coffey et al. (2010), it was noted that the relationship between mindfulness and personal growth (flourishing), is mediated by the changes that occur with practice, as practice

helps to address and clarify one's own experience, and to manage the negative emotions. Therefore, these models suggest that mindfulness plays an enhancing and catalyst role in positive interventions, as it allows greater adaptive self-observation (based on the present, curious and kind), an improved ability to regulate the attention, provide clarity, break with automatic processing, promote a "self-regulated" conduct that enhances the ability to make decisions and help manage the judgments that may interfere with the effectiveness of positive interventions. In this sense, Moore and Malinowski (2009), found that study participants who reported higher levels of mindfulness showed greater attention and cognitive flexibility in cognitive tests of processing and endurance. They conclude that the cognitive flexibility achieved through the practice of mindfulness helps detect incorrect and harmful cognitive evaluations, which usually go unnoticed and lead to erroneous attitudes (automatic thoughts and dysfunctional attitudes), enabling individuals to increase their general well-being.

There are two fundamental aspects to understanding the difficulties for integrating mindfulness and positive psychology. Firstly, in terms of research, most questionnaires for measuring positive emotions measure especially those linked to high arousal (joy, enthusiasm, etc.), with very few questionnaires including items on concepts associated with mental calm, peace and serenity. In the case of PANAS (Watson, Clark & Carey, 1988), the most widely used measure of affect, these emotions are not included and only the item "concentrate" would apply to any of the variables that can be influenced by the practice of mindfulness.

Another important aspect is related to the construct of mindfulness itself. This is usually understood in most works as a state of mindfulness and non-judgment; however, the implications of the practice of mindfulness go far beyond that. Mindfulness cannot be practiced without the involvement of positive attitudes of kindness, compassion, gratitude, self-awareness and non-judgment, which is also the objective of positive interventions. Moreover, the roots of mindfulness come from *Dharma* (Alvear, 2014), which aims at the pursuit of happiness and the alleviation of suffering.

In *Dharma*, the pleasant life is relegated to the background and it is suggested that happiness comes from understanding the sources of suffering and well-being is understood as a deep sense of serenity and fullness that dominates any emotional state. These bases are very similar to the search for eudaimonic well-being (psychological well-being), which is one of the goals of positive psychology.

THE LINK BETWEEN POSITIVE PSYCHOLOGY AND MINDFULNESS: COMPASSION

Compassion is understood as sensitivity to the suffering of the self and others, with a deep commitment to preventing and

alleviating their suffering (Gilbert & Choden, 2013). These same authors pose compassion as a self-regulatory tool and as a method for increasing well-being and positive mental qualities. In short, compassion is not so much an emotional state reactive to suffering, but a motivation, a *reason* that can focus our lives, which facilitates a greater capacity to organize the mind and behavior (Simón, 2014). According to Paul Ekman (2013), there are different types of compassion: emotional recognition, emotional resonance, family compassion, global compassion, compassion for all sentient beings and heroic compassion.

When we talk about compassion, we are actually talking about two different things: on one hand, the desire for others and oneself to be happy (known as “loving kindness”, or *Metta*) and, secondly, the desire that others and oneself are free from suffering (*Karuna* or compassion). Therefore, we can understand compassion as a motivation, an emotion, or a stable trait. Training in compassion uses mindfulness based meditations to which strategies of imagination are added, focus on bodily sensations of tenderness and affection, and self-instructions. Given this desire for happiness, self-compassion could play a key role as a mediator between positive psychology and mindfulness, as it shares the bases of the two approaches. In fact, a recent study has shown that self-compassion better explains the relationship between the practice of mindfulness and happiness than mindfulness itself (Campos et al., 2016). In other words, the actual practice of mindfulness involves training in kindness and desire for well-being, even when it is not explicit (Kuyken et al., 2015).

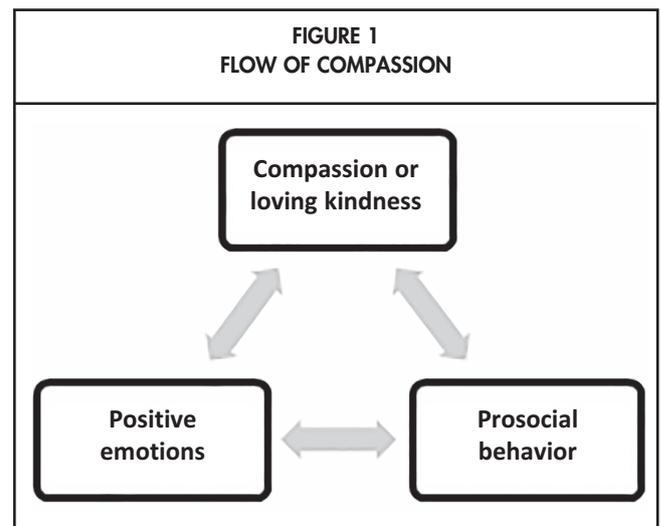
The practice of compassion fosters a feeling of empathy for others when contemplating their suffering, which, in turn, could help us find the motivation to help this person (Simón, 2014). Finally, this prosocial behavior gives us feelings of joy and satisfaction, as we see that we have helped to reduce the suffering of the other person, which facilitates greater compassion, thus closing the circle (Figure 1).

According to Neff, compassion is composed of three factors: kindness, mindfulness, and shared humanity (Neff, 2003). The latter is a key factor of suffering, since the difficulties of others are a common part of our human experience which connects to a technique that has shown great effectiveness in positive psychology, that of gratitude. This shared humanity connects us with the idea of the interdependence of all beings and actions and the importance of others and their actions in achieving one’s goals. Gratitude is understood as a feeling that occurs in relationships when one of the members recognizes the benefit they receive from the other (Lomas, Froh, Emmons, Mishra, & Bono, 2014). For example, it has been observed that the tendency towards gratitude is a key factor that contributes definitively to psychological well-being. The research on compassion has grown exponentially in recent years, generating a similar expectation to that of mindfulness at the

beginning of this century (García-Campayo, Cebolla, & Demarzo, 2016). In a recently published meta-analysis on meditation based interventions that stimulate loving kindness (Galante et al., 2014), a total of 22 studies were found, showing effectiveness in reducing depressive symptoms, increasing self-compassion and dispositional mindfulness, and positive emotions. It is also worth noting, however, that there are still few studies and they lack sufficient sample size in order to draw conclusions. One of the most interesting ones is the study by Fredrickson et al. (2008), which studies the effectiveness of training in meditation based on loving kindness for promoting positive emotions within her broaden-and-build model of emotions (Fredrickson, 2001). It has proven to be a very effective tool for inducing positive emotions, thus increasing the psychological resources that in turn increase the psychological well-being.

INTEGRATING MINDFULNESS AND COMPASSION: INTERVENTIONS BASED ON MINDFULNESS AND POSITIVE PSYCHOLOGY

Recently interventions are emerging that combine mindfulness training together with positive interventions. One is Mindfulness-Based Strengths Practice (Niemiec, 2013), which links the practice of mindfulness with the training in strengths proposed by Peterson and Seligman (2004). This program includes psychoeducation, practicing strengths, reading and homework. At the theoretical level, this intervention proposal offers promising benefits both for those who practice mindfulness, and those who practice strengths training in isolation (Niemiec, 2012). Firstly, it offers individuals a way to manage and overcome obstacles that often arise during mindfulness practice (e.g., distractions or painful sensations). It provides concrete tools to broaden the perspective and deepen the practice, employing specific strengths (such as



perseverance). It also provides the language for capturing the positive statements generated by mindfulness. It facilitates greater self-awareness and potential for change, as it provides greater clarity on one's strengths. Finally, it creates a synergy of mutual benefits that can stimulate a virtuous circle and positive upward spirals. Of particular interest is a recently-published study in which a mindfulness training course is compared to the same training plus three additional practice sessions in loving kindness and compassion, in a sample of patients in treatment for borderline personality disorder (Feliu-Soler et al., 2016), which found that the group of patients who received the support of the loving kindness sessions had higher scores on the scales that measure acceptance of the present moment.

Other mindfulness manuals are beginning to integrate exercises of positive psychology, such as the appreciation of the here and now (exercises savoring everyday activities), exercises of gratitude using all 10 fingers (remember 10 things experienced each day for which you feel grateful) and learning to take care of the self in times of stress. In the latter, individuals are asked to engage in pleasurable activities of self-care that provide a sense of mastery, satisfaction, achievement and control, and they are invited to do these activities attentively (Williams & Penman, 2011).

These practices are also being introduced in the school context. The "Happy Classrooms" program (Arguís, Bolsas, Hernández & Salvador, 2012) developed an educational program that integrates the two approaches and is aimed at students of nursery, primary and secondary education. The objective of this proposal is to enhance the personal and social development of students as well as to promote their happiness, through mindfulness training and education in personal strengths. To do so, activities and resources are provided, to work on the different areas and tutorials. This program is being implemented in over 70 education centers in Aragón as well as in various other regions and in other Spanish-speaking countries.

CONCLUSION

Throughout this article we have described the mechanisms and main characteristics by which mindfulness causes a reduction in negative symptoms and increased happiness in those who practice it. We have also discussed the differences and similarities between mindfulness and positive psychology, ultimately finding compassion to be the bond between the two types of approach. In this sense, this study has demonstrated the role of mindfulness as a catalyst of positive psychology and, even more, considers it to be the central pillar when generating upward spirals of positivity. Compassion and its consideration as a purely positive psychology technique has also been presented, due to its objective of increasing the happiness of the self and others.

However, there remains much work to be done on the integration of positive psychology and mindfulness, since there are limitations and barriers that prevent a better fit of the two approaches. On one hand, it is important to develop more sensitive measuring instruments in positive psychology, to include other positive emotions that are not being measured, such as calm, serenity or peace. On the other hand, we must continue to investigate the development of protocols of joint intervention to increase adherence and to facilitate their application in other clinical settings. At the construct level, it is necessary to continue to investigate the fundamentals and foundations of mindfulness in greater depth, in order to build a conceptual framework that enables us to distinguish clearly between what is and what is not mindfulness. Finally, it is important to conduct research on long-term meditators in order to explore the effect of intensive training on variables of positive psychology. In the future this relationship between mindfulness and positive psychology will strengthen the two, creating a middle ground of contemplative positive psychology.

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