

Dr. Elise Bialylew, founder of Mindful in May (mindfulinmay.org) and The Mind Life Project (<u>www.mindlifeproject.com</u>) and author of The Happiness Plan, interviews Mark Williams

Mark Williams

Mark Williams is Emeritus Professor of Clinical Psychology at the University of Oxford. He co-developed Mindfulness-based Cognitive Therapy (MBCT) for prevention of relapse and recurrence in depression, and research has now found that MBCT significantly reduces recurrence in those who have suffered three or more previous episodes of major depression. His previous books include The Psychological Treatment of Depression, Cognitive Psychology and Emotional Disorders, Cry of Pain: understanding suicide and self harm and with Z. Segal and J.D. Teasdale, Mindfulness-based Cognitive Therapy for Depression and The Mindful Way Workbook.

Elise: Welcome Mark to the program. It's a real privilege to have you here, as I was saying offline. I'll show the evidence, your work has been extremely kind of engrossing and relevant to me personally in psychiatry and working with clients in mindfulness and your book as well 'Mindfulness: A practical guide to finding peace in a frantic world' is probably more relevant now than ever. So, thank you for being here.

Mark Williams: Delighted to be here. Thanks, Elise.

Elise: So just to begin with, I would love for you to share with the listeners just a kind of little vignette of how you entered into mindfulness yourself. You have been working in Oxford Mindfulness Centre as professor of psychology, but can you tell us a little bit about how you came to it?

Mark Williams: It all started when three of us, John Teasdale and myself, Zindel Segal, got together because Zindel had been asked to produce a form of therapy, cognitive therapy because we were all doing research in cognitive psychology and cognitive therapy. We're all focused on depression and he'd been asked to do something which would help maintain progress after a treatment. So, to keep people well when they're done, in this case, cognitive therapy. It was thought that some people relapse, and so can we do something to keep them well? Then we met to discuss that, and it seemed that if people had recovered from

cognitive therapy, then the evidence is that they stay pretty well. But what about those people that couldn't get to cognitive therapy that we knew were vulnerable and had many episodes of depression in the past? Could we do anything for them?

Would you actually prevent depression rather than treat depression? And that's where John Teasdale suggested we turn to mindfulness. Zindel and I didn't know what he was really referring to at all. And he talked about John Kabat-Zinn and his work on mindfulness. There was this colleague of mine Marsha Linehan, who I'd met because we both were interested in suicidal depression. She had used mindfulness in her work, so I'd sort of been a bit familiar, and she talked about Thich Nhat Hanh and the miracle of mindfulness and so on. But all of this had sort of gone past me. I was focused on something else. But when we met Jon Kabat-Zinn, he was very interested and thought that, yeah, what he had done with chronic pain could be applied in some way with some modifications to preventing depression. And that's where we all started.

Elise: So, I came upon your research when I was training in psychiatry, and it really was groundbreaking. It was really quite incredible because we had antidepressants and we had psychotherapy, but the research results that you found were quite impressive and valuable for people suffering depression. Do you want to speak about the research that you did, which was significant in this area?

Mark Williams: Well, there are already several treatments for depression, but this was the best preventative work, that is, do something when

people are well and see whether it reduces the risk of a future episode. And to do that, people have to learn the skills, in order to notice the warning signs to steer out of the skid that normally takes them into depression. So, we looked at people who had at least two episodes of depression. All of them about 75 percent had actually three or more episodes, and all of them had antidepressants at some point in the past, but weren't on antidepressants now. But we knew that because of their past history, they would be vulnerable, so we offered them eight weeks of mindfulness based cognitive therapy and followed them up for 12 months after that, so 14 months in total.

And, we found that for people with three or more episodes, it sort of cut the risk of depression in half, then for people with only two episodes, which we can talk about later, it didn't seem to make any difference. It turns out that these people are people who pretty much had a pretty good upbringing and for some reasons, probably because of a life event, they got depressed. But people with three or more episodes are often depressed from a very early life, and they are the most difficult to help usually. The amazing thing was to find that the people who are most difficult to help by conventional means responded best to mindfulness.

Elise: That's really fascinating. I actually wanted to ask you about that because I remember reading the research and thinking, 'why was it that it was the three?' And so, I mean, what does that mean, though? So for people that might be listening to you thinking 'Oh, I've had a I've just had depression for the first time. Should I do mindfulness or not'.

Mark Williams: Well, I think there's now a lot of follow up research on that. So, somebody called Nicole Gershwin did some research and also Anna Beckham has done research to show that two versus three episodes is not what it really was. In other words, you don't have to worry about the number of episodes and think that that's, you know, count up minor episodes and then suddenly I'll be able to do mindfulness. It's actually more to do with the nature of depression. So, if you are depressed, only when something really nasty happens in your life, then that's probably a natural response. And interfering with that in some ways is not necessarily good. So, use mindfulness, perhaps when you feel a little better to stabilise things to give you a bit of insight into what's going on and to give you some self-kindness.

But what research has shown subsequently and Helen Miles' research with John Teasdale, which they published in 2004, was the first to show that it wasn't so much the number of episodes, but it was people who had had a difficult childhood and adolescence. Some a bit traumatic, maybe some abuse, maybe some trauma of another sort and whose depression was related to this difficult childhood and adolescence. And we found the same thing in most of our work and in our trial that we did, which we published in 2014, that people who'd had difficulties early on in their life were the people who responded best to mindfulness. Other people, it wasn't harmful, but it didn't help quite as much.

Elise: Interesting. Before we continue, I'd love to actually get your definition of mindfulness. Everyone can sort of articulate it differently. And then I'd love to kind of dig into, I guess, the mechanics of depression in the mind and then how mindfulness can help that. Like, how are they? What is the antidote? What's mindfulness offering in the way we think and the things that cause depression? So maybe just first, the definition that you like to share?

Mark Williams: Well, as you said, there are lots of definitions. To me, mindfulness means awareness, fundamentally lucid and appreciative awareness. So, it's a kind awareness. And as John Kabat-Zinn has observed, there are ways of cultivating it. So, we all know that we are sometimes more aware than others, and some of us are more aware than other people. But the great thing about mindfulness training is that there is a training we can do to learn to pay attention. And then this awareness can be honed.

Elise: Okay. And so would you like to share a little bit about, I guess, what you know about the characteristics of depression and how it is that you see mindfulness kind of getting in there and helping us to, as you said, skid off or get out of the skid to have a phase that they want.

Mark Williams: One of the things about depression and quite a lot of other mental health problems is that people go through periods where they're fine and then it keeps coming back and depression classically is the most and what seems to happen? So, the question is what puts people at risk? Why are some people vulnerable? And it seems to be

that people differ one from another. We all differ one from another in the impact of a normal, sad mood. So, when we feel sad and downhearted and a bit miserable and a bit tired and exhausted, then the question is, does the sadness just stay as a mood? Or does it begin to activate self-referent thoughts like not just sad but worthless, not just exhausted, but a failure. And you see the difference between the word I'm feeling sad and the phrase I feel a failure. So, when I'm feeling sad, it's just coming and going, but with failure, it means a lot. It's spread into a lot of self- concept, to what are my plans, to my feelings about my past.

So, that's what turns a sad mood into potential depression. Now what many researchers, including Linda Siegel, have discovered is that if you have people who are vulnerable to depression, you can't tell who's vulnerable or not. But if you give them a test like the dysfunctional attitude test, which is things like, I must succeed in everything I undertake or I must be loved by everyone, or it means I'm unlovable. Those are, in a sense, not depressing, but they are quite sort of stressful thoughts to think about. Well, it turns out that when you are not depressed, you don't think those thoughts very much. But some people, even if they are made sad in the laboratory for 10 minutes, suddenly start thinking, I must be loved by everyone or I must succeed at everything. What happens is that for some people, it switches on really easily. And I think that's why people who have been traumatised early in life for very difficult relationships in their teenage years or something or felt like parents did not really love them. Or, you know, they have this underlying sense of failure sort of just under the surface, not very accessible, but then a sad mood instead of just being in sadness activates all of that.

Elise: OK, so then how so? Share a bit about how mindfulness is practised, which is about how awareness can help someone in that situation.

Mark Williams: Well, what mindfulness practice seems to do is to strengthen three qualities namely stability, insight and kindness. Those are the three pillars; it seems to me. Virtually all mindfulness courses at some point or other get to those three things and stability very often very early on with just a body scan sitting or breathing or finding an anchor that stabilises the mind. For many people, that's enough. They say,' that's it, I've really learnt what mindfulness can teach me'. But if you continue, what you gradually find is some insights, insights like, 'Oh, that thought was just a thought. It's not me'. The critical insight is what we call de-centering, which we call the ability to stand back or cognitive diffusion and some people call it the ability to stand back and see your thoughts coming and going like clouds in the sky or leaves on the stream. That's a major insight for some people. It's a major insight.

And then the third pillar is kindness. The sense of, 'Oh well, if I'm a failure' is just a thought, then there's a release of a sort of central, almost a flowering a bud that has been closed up begins to open and you begin to discover, 'Oh, there was something else inside me I never realised, which is something I never give to myself, which is kindness. 'I

might be kind to everybody else, but I never give it to myself'. And that release is something and now you can see how stability, insight and kindness when applied to those moments when a sad mood comes can help you see the warning signs, like 'ahhh, here's sadness'. We've been experimenting with encouraging people to say to themselves, 'It's OK not to like this, it's OK not to like this.' That's natural, not to like it.

So, the not liking of sadness doesn't then sort of send you off into, 'Oh, that's horrible. What's wrong with me?' 'You know, I'm a failure because I should be able to control my kindness.' 'This is just as it is. And if I wait and I am stable, if I can take a breath. If I can experience some kindness, the sadness seems to dissolve a little, oh no, here it comes again. But then it's the same thing. Oh, it feels a little bit better.' So, there's this sort of variation that is cut, which is seen for the first time rather than it's sending off a huge explosion, which then damages us and the people with whom we share our lives.

Elise: So, what you're saying, it's sort of like a tolerance. Do you see it as a tolerance to even like our ability to tolerate our emotions that when emotions come up, there's anxiety or sadness, I mean sadness for depression or anxiety? It's so common for us to want to not be okay with that. It just feels dreadful and we just need to run away from it. So do you see these practices are kind of increasing our tolerance and ability to tolerate these emotions without kind of, I don't know, reacting or running away or avoiding or

Mark Williams: Tolerant would be one word for it. The thing about tolerance is that for some people, tolerance would mean gritting your teeth. I'm being very stoical about it. So, there's another way of looking at it, which is being more accepting about it and turning towards it, but also allowing yourself to run away if that's what you need to do right now. So, there's this sort of flexibility saying, 'I don't have to take this all at once. I can go at my own pace. If it's overwhelming right now, what do I need right now? What else is here for me?'

So, there is sort of a sense of not taking a puritan view of mindfulness, which is right now I've learnt to do this. I must sit here with my teeth. So, there's a sense of movement and flexibility turning towards maybe standing back a little bend, turning from a bit of a distance. But ultimately, it's what? It's what you might call acceptance, not acceptance in the sense of resigning or putting up with, but acceptance in the sense of seeing clearly and realising that this thing that's coming, has not got all the weight that we sometimes put on it when we're feeling that sort of sense and this sense of discovery can be enormous.

Elise: Yeah. In your book, there's so much richness in both. Well, you've written many books, but the mindfulness based cognitive therapy, there was a great line, I think where you said, you know, when you wrote, 'our thoughts are like rumours in the mind. They might be true, but then again, they might not be', which I thought was a wonderful way of explaining. Do you want to elaborate any more on that?

Mark Williams: Well, the analogy that we expand on in the frantic world book is that the rumours that can happen which we now call them fake news, I think. But fake news isn't news. So, there's a book written by a guy called Allport about rumours in the Second World War. It was written in the 1940s, and he was trying to understand why rumours had spread in the Second World War right across America. Often bizarre rumours like the Russians get all of our butter and use it for greasing their guns, or even the Navy have dumped car loads of coffee into the harbour in New York. I mean, and they tried all sorts of things to deal with these rumours and they tried radio stations, but then people would twiddle their radios and only hear the rumour and not the reputation. So that would spread even further. Or they tried to have newspaper articles, but they weren't very effective. So, he was trying to understand the rumour and what he said was it just sort of just goes from one thing to the other and the more imaginative and bizarre the rumour, the more it takes hold.

Now what happens in our minds is rather similar. So, there's sort of an adhesiveness to curious and negative things, and the more negative they are, the adhesive they are. We just can't look away from them. And like rumour, they tend to spread and they tend to get elaborated. So, you start with a sense of sadness and then it goes to a sense of failure. And then you say, 'well, I've never really succeeded at anything'. And then you might remember a time when you didn't get a mark you wanted in a test and then that reminds you of that teacher who said some horrible remark and that reminds you another a friend who walked away and so suddenly you've got a whole elaborate network being

reinforced of, which is a bit like a rumour. So, one of the questions is how can we see that more clearly? And we say, 'Oh, there he goes again. Look, what's happening here?' Be curious about it and once again, a sense of 'what do I need right now? My mind seems to be going off on a rumour. What do I need right now? My mood, for example? Is it just that I'm sad right now? I'm anxious right now. I'm stressed or I may have a big lecture coming up next week or a presentation or I have to meet something difficult and I'm getting anxious about that'. So, it's spreading this rumour. So, curiosity.

Elise: Yeah. I think for me personally, I remember sort of the moment of having that sense of liberation, from thinking in a way from the thoughts when I when I really saw, 'Oh my god, this is first of all, I don't have to like, I have a choice actually in guiding my mind!'. And I think it was Jeffrey Schwartz who I interviewed once, who had a lovely phrase about mindfulness which is somehow about guiding the mind, which I really loved. So, there's a sense that if we have this awareness, we can guard the mind that there's all these thoughts coming that we can actually have a say or some ability to go and actually don't need to follow that thought, which was quite a revolution. And I think that's such a powerful aspect of mindfulness to actually make us realise that we have some level of choice in some ways.

Mark Williams: I think that's really important. The guardian function of mindfulness is often ignored that sometimes there's a sense of needing to say 'Not now. Thank you' in psychology. We do call it thought stopping and stopping was there for a while and then people thought,

'Oh, well, you know, that's great but that's a bit abrupt.' So, it just fell out of favour. But there's sort of a sense in mindfulness. I'm not just saying mindfulness is all about opening and loving yourself and so on, but actually, it's about being very specific. Our mindfulness teacher taught us a lot about mindfulness. She used to say it's a ferocious practice. And I think what she meant is, you know, there really is something quite Zen about, about being able to be very sure and more certain about what you need to protect yourself.

Elise: Yes. Yeah. I just wanted to pick you up on the thought stopping. So that's coming from a kind of psychology arena, but often. And for the listeners that are maybe newer to meditation, there's that misconception that often comes up that you're sitting down, you're closing your eyes, you're breathing. And then like, you're failing because thoughts are coming up or people are thinking that they need to stop thinking, would you say something about that?

Mark Williams: I think it's a really common thought that a lot of people say to me, 'I tried meditation once, I just can't do it because my mind keeps wandering'. And it's exactly the opposite. Mind wandering is what you need. Mind-wandering gives you the training, so it's a bit like gymnasium equipment. If you went to the gym and you paid your membership and then you turned up and you just went into an empty room. You'd be a bit disappointed when you see this, 'I just paid \$50 a month for this and it's just an empty room and there's no there's nothing here to pull or push or, pull this down and run on the nose'. And because that's the training, when you go to the gym, that's how

you train your body. And when you sit in meditation, the gymnasium equipment that comes to you, when it comes to you, you don't have to go and look for it. It's your thoughts, feelings, all these passing plans, all the things you've meant to do. They come and they will continue to come even if you meditate for 30, 40, 50, 60 years, they'll continue to come. And the difference is to see them. And gradually in mindfulness, you learn to see them as they're all grist for the mill. They're all part of the training program. So, when a thought comes up, the sense of relating to it as a thought rather than, 'oh my gosh, yes, the email now where's my where's my smartphone?' And even if you do start to reach for your pocket, for your smartphone, you think, and then you smile to yourself and go, 'Oh, that's just a thought'. Now, sometimes, of course, it may be that, you know, you smell that burning because you've left a panel mate. Often you don't just say, 'Oh, that's a thought'. That's a thought and you've got to go and address it. So not sort of a Ten Commandments, but the idea of thoughts coming up and mind-wandering are what you need. It's where it's not where mindfulness practice finishes. It's where mindfulness practice starts.

Elise: Yeah. And thank you for bringing up that kind of the discernment piece, you know, the non-black and whiteness. I think the classic thing was when I started and it was like I had a sore back or something in meditation and I was thinking to myself, I'm not allowed to move, you know, like, I can't move. But then it's sort of that balancing of pushing your edges and thinking, just how is it to just be with this? But then if you really have bad back pain, you need to be kind and just adjust yourself rather than it being this kind of masochistic practice. But the

line between I think masochism versus increase in your ability to just stay with things, whether they're unpleasant, pleasant is an interesting line.

Mark Williams: Yeah, and only each of us has to decide for ourselves. If you're doing mindfulness, practice regularly about at least three or four or five times a week and then you begin to know where that line is. We begin to recognise it. Nobody has to tell you, you'll say, 'oh, well, I can deal with this or I can't do it'. We're finding it very helpful to notice the feeling tone, to notice, this is unpleasant or this is pleasant. And similarly, actually, if pleasant things happen in practice, sometimes if you feel really, really calm and still, you might say, 'oh, I'm not supposed to feel good', but I don't. Otherwise, I'll become attached and I'll think it's all about relaxation and so on. So, you can even undermine it if it feels good. So, if it feels difficult and painful and a little bit negative to say, 'Oh, this is, this is unpleasant', to recognise that can be really helpful. Just naming it is unpleasant and then pleasant. This is pleasant and it's OK to define pleasant things pleasant, and it's OK to find unpleasant things pleasant. So you can let yourself off the hook.

Elise: Can I ask you just to come specifically to some of the meditation practices and you explore a variety of them in your books with the audios as well? So, can we talk about the body scan for a minute, specifically when people start the body scan? It's the process for those who haven't done it yet, the process of kind of bringing your awareness to different parts of the body in a sequential way and just noticing what's present. Can you explain to the listeners how, because when you

start this, it can be really kind of like 'what am I doing? How is this going to help me in any way, shape or form?' Can you just speak to that?

Mark Williams: So, there are a number of things the body scan does. As you say, you're putting your attention, like the spotlight of attention. You're moving it gradually through the body from the head down or from the feet up, taking 10 minutes, quarter an hour, 20 minutes, half an hour, 40 minutes to do that. So, there's a number of things going on. First of all, you're focusing on your body from the inside and that itself can give you somewhere else to stand rather than being in your mind all the time. Now, the mind will try to get in on the act. It's as if you've got a spring loaded, so you try to focus on your knees or your toes or whatever. And soon the mind starts, gradually you'll recognise, 'Oh my attention isn't in my toes anymore, they're on my knees. And that sense of my attention isn't where I had intended it to be. It is good learning'. You realise that the attention on muscle needs a little bit of perhaps training up so it trains up your attention. But it trains that intention using the body rather than using the mind. And that's really helpful for recognizing that you have two modes. You have a sensory mode and you have a cognitive thinking mode and very often the thinking mode is in charge because we need it to be. That's fine. Sometimes it's called the 'doing' mode, but it's sort of thinking, you know, planning and all those sorts of things you need to do.

So, it's not a bad you. We're not saying it's bad. We're just saying that sometimes it's nice to explore an alternative, and the sensory mode of focusing on the body is what is an alternative mode. It can be a portal

into what we call the being mode. But there's something else about the body scan, which is important. You are focusing on one part of the body, so you're engaging the attention and then you're staying there for a little while noticing what's there. And then at a certain point, you are intentionally disengaging your attention and shifting to another part of the body. Now notice what you've done. You've engaged your attention in one place, you've stayed there for a little while, then you've disengaged your attention and then you shift to something else.

That sort of process of engaging, remaining, disengaging and, shifting, and then again engaging, remaining, disengaging, and shifting. You do that about 30 times in your body scan. That's attentional control training. You're actually learning to control your attention because you need to know how to engage it. You need to know how to sustain it. And you need to know how to disengage attention when you don't want to be on something anymore. Each of those can be quite difficult for all of us. And so, the body scan is giving you a lot of training in just attentional shifting engagements, sustaining and so on, but also going through the body. So, it helps you to be more embodied and less just living in your head all the time.

Elise: And I think in the current time that attentional training of learning how to put your attention somewhere, hold it and then disengage is just crucial because we're being bombarded at the moment and it's kind of up to us to actually refine our capacities to manage all of the all of the things out there. And also, I find even now like in terms of the media that we're being bombarded with in the context of a pandemic. You

know, just noticing what are you taking in and how is that affecting you and when is the time to disengage and shift the attention?

Mark Williams: Yeah. I mean, basically, the media and technology will continue to attract our attention, it's very good at it, and it uses evolutionary, very old mechanisms. I mean, if you've ever been in a bar, on the television above the bar, you know how even if you're talking with your friends and you're interested in what they're saying, if something flickers on the television, you look around. Why? Because it's an evolutionary thing that we need to attend to flickers in the corner of our eye. So, we'll tend to. And you know, the only way we're dealing with that is either turning television off, which isn't going to happen in a bar or just turning away from it.

But the other thing is just to notice it's happening and not give yourself a hard time for it. You get a flicker in the corner of your eye, which is going to draw your attention, and attentional hijacking can go on in your mind as well. So, you have a plan or an email you haven't sent or a memory or an idea or oh, that's good. And that's like a flicker in the corner of your mind that's going to, you know? So, you're absolutely right. We're not going to do anything about that. But it is, as you say, noticing that it's happening and making a deliberate decision to disengage. That's what we have got and that's what we can train to do.

Elise: Can I ask you what you have personally found through all the practices, just as what has been the most helpful or kind of eye-opening practice for you or something that you turn to regularly?

Mark Williams: Well, the body scan is always something I come back to from time to time, and a lot of the new meditations that I've recorded for others often have a body scan component in there. It might be a very short body scan. It might be just five minutes going through the body, but that sense of stability for me is very important. And there have been times in my life when I've decided that the best way of serving my own practice is not to try and decide each morning or each day or each week what practice to do, but do the whole thing just do the same thing for a whole year. And then I don't have to and one year I did the body scan and nothing but the body scan. That was a really good year, and I think certainly my own version of doing that now is to choose one practice for a month and stay with it.

Elise: Yeah, I'm so glad you raised that because often the listeners and participants ask questions about 'how do I know what you know?' There are questions and confusion about what practice should they do and which one is the right one? And how am I supposed to do a different one every day? And I think that when people come to meditation, there is that kind of modern temptation or need for novelty. So, sitting and just doing a breath of meditation or body scan every day for a year is quite unusual for people when they're coming to this. So, is there anything else that you wanted to say about that for people that are wondering, you know, how do I? I mean, obviously, there's the courses that people can do that kind of take them through. But once they finish the course, how do they know? What would you advise?

Mark Williams: Well, I think that there is something about doing the same thing for at least a month, which is useful. And if they want to, they can go through the course doing some of those meditations if they want to. But now, for a whole month instead of week by week, they take maybe one by one they want to explore. They know that maybe they missed that week or they were ill that week. Take that and do it for a month, probably after a week or two. They won't need the guidance they can. They can guide themselves over this. Usually, we provide or there is something that just has bells every five minutes, so you can time yourself through but being silent? And one of the nice things about doing the same thing every day for at least a little while is that the variations in your own mood, in your own capacity to do it in the different times of day you might get to do it or what's happened to you in the world or in your own life.

They can be seen more clearly if you have the same meditation, whereas if you have a different meditation, you know, is it the meditation? It's making me feel so nervous or is it that political announcement that it's making me nervous? And so, if you keep the same one that gives you that sense of continuity, at least for a little while? We've been recently looking at how to provide some structure to people who want to do a second, a second course or two to explore new gateways into mindfulness. And part of what we do at the end of that is to give people a possible program for a year that they can look at and say, Yeah, I could go with that, which involves just going through the fundamentals of mindfulness, but more slowly.

Elise: Oh, wonderful. And people can find that through how?

Mark Williams: Go follow the program. They can find it on YouTube. At the moment, we're calling it 'mindfulness frame by frame'. So that's what you'll find on YouTube 'mindfulness frame by frame'. I have to say, there is another Mark Williams, who's a snooker player, so you might get snooker videos to start with, but if you search mindfulness with Mark Williams 'frame by frame', then you'll find the playlist. Look for the playlist on YouTube, and you can see an eight-session program, which gives new meditations for people to try.

Elise: OK, great. I wanted to ask you this. So, in a slightly different topic around emotions, though mindfulness, you wrote in one of your books, the way we interpret the world makes a huge difference to how we react. This is sometimes called the ABC model of emotions. Would you mind speaking a little bit to that? I'm particularly interested in this idea of the perception and how we kind of misinterpret things, and then that leads to the cascade of the ABC.

Mark Williams: So, the example we tend to use is imagine you're walking down a street and it's not that busy a day, but you see somebody walking towards you that you know, quite well, a friend of yours and you go to wave at them and they just walk past, without apparently seeing you. That's the situation, that's the A. And they C, the end as you walking on goggles. You think 'What have I done to upset them? Why don't they talk to me? Have I lost another friend?' That's a bit much. That's the second time this week that's happened to me and

blew it away. You're feeling sad. If you're disappointed, you might be feeling angry. That's the C. So, you've got the A and the C.

The B that we often miss is that initial thought of that initial interpretation of their behaviour. If our initial interpretation is, 'they didn't see me because they are upset with me or because I've done something to upset them or they think I have'. Then all that's going to follow is sadness and upset and anger or whatever. But the initial interpretation might have been, 'Oh, they're very busy at the moment. Oh, they look very concerned. And I wonder what's wrong with them or if they weren't wearing their glasses?' And then you're not going to feel upset. You might feel concerned. You might run after them and say 'Hi.' But of course, if you thought they're upset with me, you wouldn't have run after them. Would you spend the next five minutes ruminating and worrying so your head would be down, and then you might miss two other people walking towards you because now that your head is down.

So, the ABC model is that there's a situation, there's an interpretation which comes out, which you hardly ever see. And then there's the consequence to C. And what we're doing is we're becoming more aware and this is an old cognitive therapy idea that we need to catch the thought that comes so quickly before it turns into just a general emotion. A friend of mine and I were working in a prison a couple of years ago, and we couldn't use the walking down the streets example, because that's not relevant for the prisoners. So, we came up with a situation, which is similar to that. You're walking on the land in the

prison and you walk past a group of people and after you've gone past, you hear laughter behind you.

Elise: Oh, that's a good one.

Mark Williams: And because, you know, what would you do, what would you feel? And it certainly got them going because they felt paranoid. They felt angry. What would they feel like doing turning round hitting somebody? And it was a really good way where you could really then slow it down frame by frame if you want and say so as soon as you heard the laughter. You know, and then you could explore it. Have you ever been in a group in the prison where you laughed? Yeah. What was going on? Oh, we were sharing a joke. Oh, so there might be some other possibility. Who knows? They might have been laughing at you. You've got to admit that. But they might be laughing at something else. But what was the first thing you felt and what was the only thing you felt and what you know? So, this ABC is about unpacking those moments where you feel down and you've missed what it was that disturbed you.

Elise: And so, can you just relate to how that connects with mindfulness for the listeners? I mean, it's from the cognitive therapy piece, but how does it then integrate with mindfulness or how does mindfulness help that process?

Mark Williams: One of the things that we speculated is which Zindel Segal has now found in further research is that both in cognitive therapy, when it works and in mindfulness when it works, there's

something going on which is common to both which is de-centering, that is this ability to stand back and see your thoughts as thoughts. Cognitive therapy always thought it was changing. It was the change in mission that was important. But actually, that's not true because antidepressants change people's cognition, too. And yet, with antidepressants, people can often be still vulnerable.

And it's not changing what you think, which is reassuring. You don't have to change what you think. You have to see what seems to be therapeutic and healing for people is being able to see these thoughts coming up and not have to change them, but just see them as mental events, as thoughts. And then there's a capacity to just look at them as they go past. Most emotions are not evolved to be very long. Emotions are signal systems. They are signals and the signal needs to switch on. It needs to switch off when the danger is passed. A signal that doesn't switch off isn't a signal anymore. So, emotions evolved to be quite short term, but we've evolved a mind that can really prolong them. So, we're going back to, in a sense, an ability to see this thing coming. Stand back from it a bit. See it going. Sigh of relief.

Elise: Yeah, that's a great thank you for so clearly articulating that and the idea that you don't have to change what you're thinking and sort of wrestle to change that. It's just an orientation and a different relationship that we're having with our thoughts and how much validity and authority we're allowing them. On that note may be sort of the final question before I open it up for you to share anything else that you'd like.

So, this was one of the confusing points that I had that I grappled with a lot when I was first training and had this discovery of, 'OK, wow, even the voice in my head is actually not me'. It's actually thoughts. But then I got really confused because it was sort of like, 'well, how do I know what thoughts are true and what thoughts are not true?' And you know what thoughts you know, if someone has a thought of, 'I'm terrible at this or how do we know? Can you say anything about them?' Okay, thoughts are mental events, but some thoughts are also useful. We're not saying thinking is bad. We're talking about a different relationship. But then how do we know what thoughts to trust and what thoughts not to trust?

Mark Williams: So, it's a very difficult one, and there's no suggestion that thoughts are necessarily not true. So, we're not saying thoughts are not true. We're saying thoughts are thoughts. So, they bring you stuff. It's like a puppy in your mind, bringing you stuff, and some of them are true. So, when you think I need to send an email in the middle of your mindfulness practice, it's not actually an untrue thought. It's actually a thought. And the question is, it's in mindfulness practice. You're offered a choice and that's a critical thing, mindfulness gives you the freedom to choose, not saying right, 'these are all thoughts. So, I'm not going to do anything'. Otherwise, that would be a recipe for passivity.

We wouldn't be here doing your wonderful mindfulness in May work if you were just passive saying, 'Oh, well, you know, I had a thought about helping the world, but it's just a thought'. So, yeah, thoughts are true and valid, but they're not always telling us the truth about ourselves, and they don't always tell the truth about other people as well. So, the question is, how can you discern, is this emotion talking about me or are the best of my situation? Or is this really true? And can I see what's true here? So, it's giving you more choice, more freedom. And with that stability and insight and kindness, giving you the courage to act and when you need to act self, there's somebody bullying you in your life, in your work and in your relationships. You see clearly what's happening rather than just be resigned to it. And seeing the means that you begin to perhaps seek help to check it out with other people. Am I missing something here and so on? And then you take the steps you need to do to free yourself from damaging relationships, damaging jobs and so on. And so, it's not a sort of sense of passivity, but active, a proactive sense of being kind to yourself so you can do what you need to do.

Elise: I think that's a wonderful place to end. Thank you so much for your clarity and sort of precision in explaining all of this. As I said earlier, your work was incredibly impactful for my own personal trajectory and it really quite changed my life and I have no doubt that the listeners will be very interested in following up on your books and the deeper courses that you're offering.

Mark Williams: Thank you very much for this chance to talk about it and for all that you're doing for the world through mindfulness.