



Review

Metacognitive model of mindfulness

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ABSTRACT

Mindfulness training has proven to be an efficacious therapeutic tool for a variety of clinical and nonclinical health problems and a booster of well-being. In this paper we propose a multi-level metacognitive model of mindfulness. We postulate and discuss following hypothesis: (1) mindfulness is related to the highest level of metacognition; (2) mindfulness depends on dynamic cooperation of three main components of the metacognition (metacognitive knowledge, metacognitive experiences and metacognitive skills); (3) a mindful meta-level is always conscious while the other meta-cognitive processes can occur implicitly; (4) intentionally practiced mindfulness decreases dissociations between awareness and meta-awareness; (5) components of mindful meta-level develop and change during continuous practice. The current model is discussed in the light of empirical data and other theoretical approaches to mindfulness concept. We believe that presented model provides some helpful avenues for future research and theoretical investigations into mindfulness and the mechanisms of its actions.

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1. Introduction

Mindfulness is a phenomenon which has drawn the attention of many scientists and clinicians over the last decade. The reason for the great interest in mindfulness lays in numerous benefits that come from practicing it. These positive effects have been found in various areas of human functionality: emotional, cognitive, behavioral and interpersonal (Brown, Ryan, & Creswell, 2007). The important role mindfulness plays in health and well-being gives rise to the question: how does it work?

The substantial growth of scientific investigations on mindfulness has been observed from several decades, but as a psychological or spiritual phenomenon it has been well-known and practiced for more than two thousand years, particularly in Eastern cultures. Mindfulness is one of the pillars of the Buddhist tradition and its philosophical and religious interpretation is vast (Kuan, 2008). The abundance of meanings related originally to the term ‘mindfulness’ makes its psychological definition very difficult to pin down. Up until now, there are two main approaches which have suggested a slightly different understanding of mindfulness: the clinical psychology approach (see Baer, 2003 as an example) and the self-determination theory approach (SDT, see Brown & Ryan, 2003 as an example).

The first trial to define core aspects of mindfulness without referring to a religious context was run by Jon Kabat-Zinn (1982), and it is the most popular and prominent of the existing definitions. Kabat-Zinn introduced mindfulness to clinical practice and defined it as “the awareness that emerges through paying attention on purpose, in the present moment, and non-judgmentally to the unfolding of experience moment by moment” (Kabat-Zinn, 2003). In SDT, mindfulness is defined as “open or receptive awareness and attention (...) which may be reflected in a more regular or sustained consciousness of ongoing events and experiences” (Brown & Ryan, 2003). Although both descriptions of mindfulness have a superficial similarity, operationalizations of the concept are different. The way mindfulness is induced or measured in both contexts suggests differences in ways they are understood on a deeper level. Tradition originated in Kabat-Zinn’s work emphasizes the intentional character of the mindful state. In other words, it assumes that mindfulness is not a natural state of mind and needs to be consciously induced and practiced. In turn, the SDT approach put the emphasis on individual differences in the frequency of mindful states in an everyday life among people with or without any meditational experience. As such, SDT does not exclude, but it also does not require intentional effort to evoke mindfulness – under favorable conditions (e.g. curiosity, intrinsic motivation) one can become mindful spontaneously. While it was Kabat-Zinn’s definition that was the base for the present model of mindfulness, in the next sections we describe this conceptualization in broader frames of metacognition. We believe that this meta-cognitive perspective has potential to create a bridge between two mentioned approaches to mindfulness.

The main purpose of this article is to present a meta-cognitive model of mindfulness and its implications for understanding the processes and mechanisms involved in mindfulness. Therefore, firstly, we discuss the links between mindfulness and meta-cognition based on the existing theories and neuroscientific research. Then, we describe a proposed meta-cognitive model of mindfulness and discuss the five main hypotheses which emerge from it. To conclude, we present some of the model’s implications for future investigations.

2. Mindfulness as a metacognitive phenomenon

Reference to metacognition has implicitly appeared in the classical definition of mindfulness (Kabat-Zinn, 2003), which describes it as a state of consciousness that results from being aware of continuous changes in the content of consciousness: perceptions, emotions, images and thoughts. In our opinion it imposes at least two levels of cognition: (1) the lower level which refers to the *qualia* (basic qualities of experience such as perceptions) occurring in the present, and (2) the higher level constituted by awareness of the flowing *qualia*. In other words this definition assumes dissociation between object and meta-level of cognition described by Schooler (2002) (see also further sections of this article). Relating mindfulness to conscious, intentional regulation of attention implicates executive functions (e.g. inhibition, switching attention) as an important element of the construct (Bishop et al., 2004; Holas & Jankowski, 2013; Shapiro, Carlson, Astin, & Freedman, 2006). As Fernandez-Duque, Baird, and Posner (2000) argued, conscious regulation of cognition (i.e. deliberate use of various executive functions that control attention as it occurs during mindfulness) directly refers to metacognitive skills. Other popular explanations of mindfulness also lead to the metacognitive model of this phenomenon. For example Teasdale, Segal, and Williams (1995) (see also Teasdale, 1999a,b) proposed the term ‘metacognitive insight’ to describe a (meta)experience of one’s thoughts, emotions, and sensations perceived as “events in the mind, rather than as direct readouts on reality” (Teasdale, 1999a, p. 147). Metacognitive insight (called in later works a metacognitive awareness or decentration; see Fresco et al., 2007) is facilitated by mindfulness training and significantly reduces a risk of depression relapses (Teasdale et al., 2002; Watkins, Teasdale, & Williams, 2000). In the Metacognitive Model of Psychological Disorder proposed by Wells (2000, 2009) the basic feature of mindfulness is meta-awareness – objective awareness of flowing internal events, primarily

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