

## Mindful Kindness Matters!

I wonder how often loneliness is the most discouraging and painful part of living with disability, pain, aging or chronic illness. We all need people who really see and value us. I find it useful on a regular basis to reflect on what Our shared human predicament is that the mind of even good and kind caregivers is subject to forgetting where we are and therefore not being fully present with others when we are with them - not being mindful. We change the bed, or give a sip of water or do whatever needs to be done, but we don't make eye contact—or any contact—with the “I” behind the eye. When this happens, I fear that we are experienced by the individuals we care for as someone “just covering a shift” without not really connecting with them. I was given an important reminder of this when I overheard a blind and disabled woman I support talking to a fellow worker: “John, are you still here? I mean it feels like you're talking to me but you're not really hearing me”.

I find it useful to reflect on a regular basis on what my life would be like without meaningful interactions. As someone once said, how would I feel if I woke up one morning to find strangers around me instead of my family? What if I asked where my family was and was told, “Don't worry, we are covering their shift”?

I suspect that all of us are guilty at times of being with another but not really being present with them, offering support the way we usually drive our car: put the key in the ignition and arrive at our destination. Who drives the car when our mind is someplace else?

Who is offering support when our mind and heart are someplace else?

## Mindlessness – The Fundamental Cause of Exclusion

I feel that one of the most misunderstood tragedies that took place when we ‘institutionalized compassion’ is how we have set-up artificial barriers that **exclude** many people who have a developmental disability, mental health disorder or dementia from being able to realize their fullest potential to have a personally fulfilling and socially useful life.

Much has been written about the problem of exclusion and the army of dedicated family members and professionals who have for years promoted inclusive policies, services and allocation of financial resources is most encouraging. This resource, in its own humble way hopes to add to the momentum of this vital movement. My contributions, I hope will be to help most others to better understand why and how the problem exists at its most fundamental level. Given that it is important to fully understand the nature of one's prison if we are ever to break out of it, this understanding is, I believe critical.

Although the causes for exclusion are multi faceted, one of the most critical that is not sufficiently explored is the consequences of the mindless mind. In chapter 1 below I will discuss in detail this problem of the mindless mind and give a practical and relatively easy solution in a skill set that will be taught called B-FIT Mindfulness.

Changing living environments, government policies, social attitudes, work and educational opportunities to promote social inclusion is essential. These necessary societal changes however, **without** a fundamental and radical shift to mindful emotional maturity to facilitate unconditional and authentic egalitarian relationships will continue to keep all of us locked in exclusion prison. I believe that progress has been painfully slow because it is only through doing major surgery on the mindless mind that real inclusion will become the ‘no big deal’ norm that is essential to ensure equality for everyone at every level of our society.

As will be discussed in Chapter 1, the person who is mindless as described by Albert Einstein “experiences himself, his thoughts and feelings as something separated from the rest – a kind of optical delusion of his consciousness. This delusion is a kind of prison for us. Our task must be to free ourselves from this prison by widening our circle of awareness and compassion to embrace all living creatures and the whole of nature in its beauty. The striving for such achievement is, in itself, a part of the liberation and the foundation for inner security”.

As a result of the ‘delusion’, people with developmental disabilities and dementia etc. are instantly experienced as different by our survival conditioned brain’s architecture. Different to the mindless mind always means separate and separate generally means ‘fear them’ and/or a threat, unless of course one’s radar gives security clearance to a known friend or family member. This survival conditioning has been evolving for over a hundred thousand years. It is subtle but significant and I believe it is at the root of maintaining the exclusion status quo in spite of many, many good people’s best intentions and even wills to want it otherwise. I would suggest however that strong intentions, will power and even good values trying to compete with the mindless mind’s deep, deep neural pathways of survival is truly a modern day ‘David and Goliath’.

The ‘sling’ weapon that every David requires is the present moment awareness of the subconscious ‘different and separate’ that unknowingly creates this prejudice in otherwise good caring people. The B-FIT Mindfulness practitioner immediately kills the prejudice and replaces it with normal acceptance. Mindfulness research from every reputable neuroscience lab around the world supports this conclusion.

**Chapter 1 below not only shows beyond all doubt how the mindless mind is the fundamental problem that encourages exclusion and less than optimal care and support services for many individuals, but also shows how to make it otherwise.**

As we mindfully and emotionally mature, our awareness of our shared needs to be respected, to be understood, to have meaningful roles and to be loved guides more of our intentions and behaviours during the time we spend with the individuals we are caring for or leading. This more mature “who”—the person who is present when we offer mindful support—lets the individual really know that we’re here for and with them, no matter what! When we stay mindful like this, supported individuals feel hopeful, secure and cared *about*—not just supported and cared *for*. These are the important elements for self-healing and self esteem that is vital to everyone.

Mindfully paying attention to another is being fully alert, fully aware and fully present. We pay attention to every little thing we do. This more conscious way of connecting also dissolves our sense of separateness from each other and enables us to experience each other beyond our roles, survival instincts, personality, intellect, abilities and even behaviours. Being together in this way awakens both the caregiver and the care recipient to the realization that we are valued unconditionally and that we are never alone because we are always connected by our deeper true nature of spirit - where we are all the same.

Jean Vanier’s wisdom in *Becoming Human* is surely asking of us nothing less than to have the courage and commitment to evolve into people who see and experience all others unconditionally. We must learn to progress toward full mindful emotional maturity.

There is a lack of synchronicity between our society and people with multiple disabilities and long-term needs. A society that honors only the powerful, the clever and the “winners” necessarily belittles the weak. It is as if to say to be human is to be powerful.

Those who see the heart only as a place of weakness will be fearful of their own hearts. For them, the heart is a place of pain and anguish, of chaos and of transitory emotions. So they reject those who live essentially by their hearts, who cannot develop the same intellectual and rational capacities as others.

We can give people the gift of their dignity. We can help others just by the way we listen to them and speak with them. We can show them by our own trust that what they have to communicate is important and good.

A society that encourages us to break open the shell of selfishness and self-centredness contains the seeds of a society where people are honest, truthful and loving. A society can function well only if those of within are concerned, not only with their own needs and of those who immediately surround them, but for the needs of all. Each one of us, I believe, is on a journey towards this openness where we risk to love.

*Jean Vanier*

JEAN VANIER is the founder of *L'ARCHE*, an international network of communities for people with intellectual disabilities. He has written a number of books and received numerous awards in recognition for his contribution to society, including the Companion of the Order of Canada. In 2006, Vanier received the prestigious Beacon Fellowship Prize for his lifelong commitment to the care, well-being and independence of people with disabilities worldwide.

## **Difficult Emotions and Challenging Behaviours**

On occasion, some care recipients will require help to peacefully process difficult emotions and/or challenging behaviours. MEMMC trains leaders to be able to help caregivers to remain safe and keep care recipients safe and to be highly respectful and responsive to care for—not clash with—individuals who need firm, yet sensitive verbal and physical redirects.

Our human and health services sectors have come a long way in care and support for individuals who are experiencing challenging behaviours, including non-violent interventions and persuasions etc. I think, however, that the unintended mindless and therefore stressful reactions of many interveners and persuaders still too often results in recipients experiencing emotional trauma, because of the workers' emotional stress at the time. **It is just not enough to tell a worker to stay calm and not be stressed.** This is a learned skill that must be taught. Effective redirecting must be a firm but conscious process, not a mechanical tactic or strategy.

It all begins to work together. Once the mindful, emotionally mature leaders and caregivers truly integrate MEMMC insights and skills into their best practices, their new-found self-awareness, peaceful actions and self-assurance activates positive intentions. This results in the calm and well-being of both supporter and supported. In these interventions, the support or healthcare worker's deeper natural quality of empathic compassion has great potential to transform difficult feelings and behaviours into more manageable ones.

With typical Non-Violent Crisis Intervention, today's use of mindless and therefore sometimes powerful redirects and physical restraints sow the seed of tomorrow's agitation, anger and or aggression. Think about this. A highly distressed individual becomes aggressive because he is afraid of or agitated by something in his environment; in response, he is powerfully redirected or physically restrained, which makes him even more afraid and agitated. The next time he experiences the trigger that caused his initial aggressive reaction; he will also trigger this new fear and become even more agitated. Thus, using the CCS process facilitates both today's and tomorrow's more harmonious care and support activities.

**These moments of offering optimal care and support at times of challenging behaviours can also truly be valued as an opportunity for caregivers to practise compassion and therefore emotionally mature on our path to wholeness —or, as Jean Vanier would say, to “become more fully human”.**

## **Building Personal Capacity for Optimal Service**

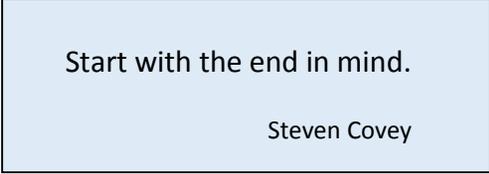
Evidence-based research informs us that optimal holistic care and support has all of the following components:

1. Is respectful, yet effective; patient, yet efficient; kind, yet practical and firm as required
2. Is as safe as possible for all persons involved.
3. Ensures the individual’s best possible experience of
  - De-escalation of difficult behaviours
  - Healthy expression of emotions
  - Physical well-being
  - Feeling secure and connected (not alone)
  - Communicating needs
  - Learning, maturing and healing
  - Self-respect
  - Spiritual fulfillment
4. Is a conscious manifestation of a family’s and agency’s vision and values.

Consider for a moment the list of experiences in #3 in the list above. Too often we forget that the leaders’ or caregivers’ own personal and professional growth and emotional maturing will have a critical impact on the emotional well-being of the individual supported. This could be in a way that goes far beyond responding effectively to their daily and special needs e.g. medical, nutritional and safety.

It is difficult to achieve a desired outcome if we don’t begin with that outcome clearly in mind. The following graphic describes the intended outcomes of successful completion of this MEMMC training experience. The outcomes are described in terms of the supported individual’s

service experience. To be willing and able to consistently offer the higher levels of service, the leader and the healthcare or human services worker requires advanced stages of personal and professional emotional maturity. For those workers not yet sufficiently developed, it will be the leader's maturity that will guide the best interactions. Both must move beyond even being a good, caring and responsible worker to become a values-based worker who is mindful/conscious, emotionally mature, and consistently able to connect consciously.



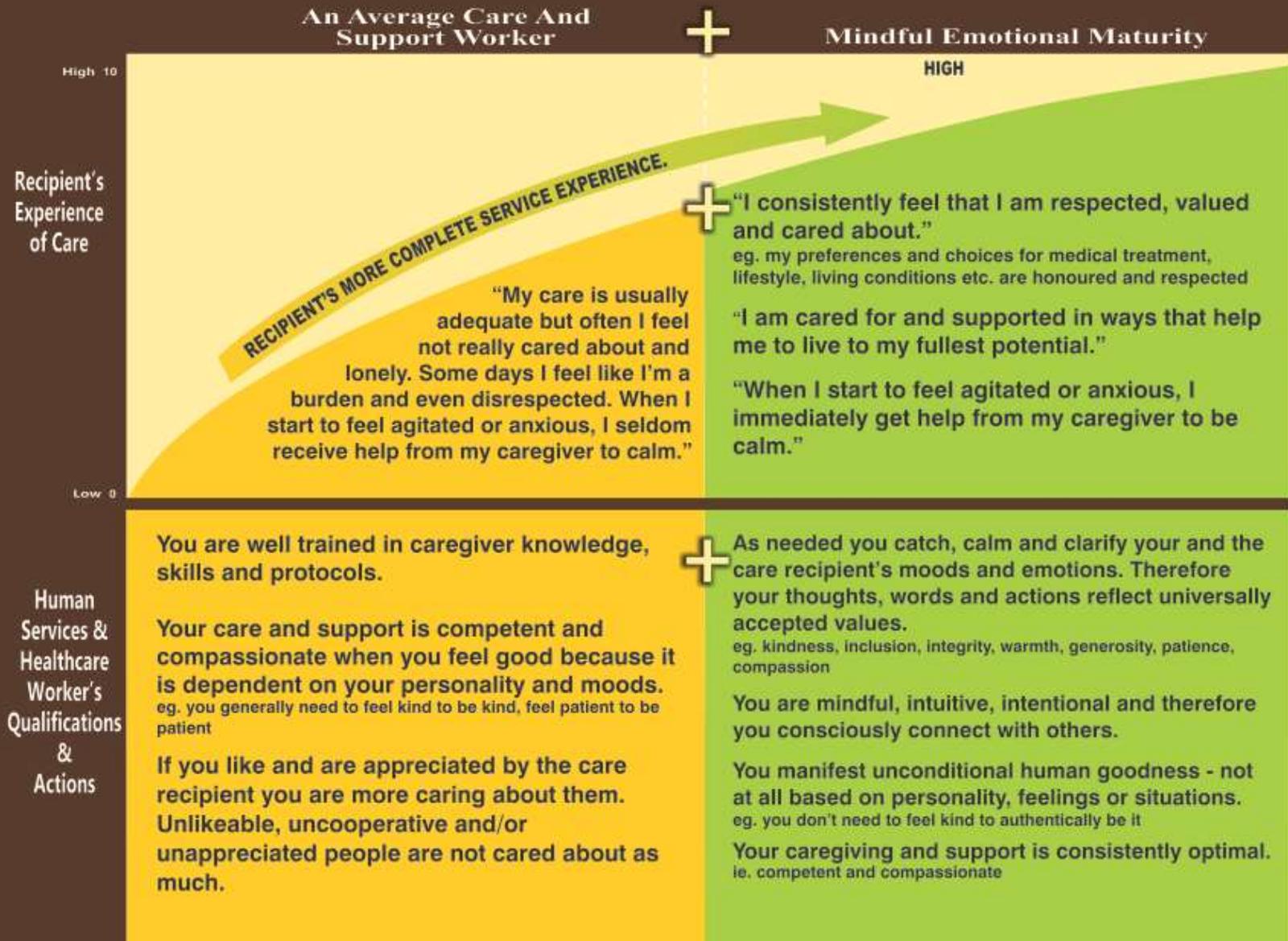
Start with the end in mind.

Steven Covey

Personal and professional emotional maturity may develop naturally in some exceptional caregivers. Fortunately, it can also be developed through formal training and practice. In this graphic, the higher mindful and emotionally mature stage marks observable and measurable qualities and their related measurable service delivery outcomes and experiences.

# OPTIMAL CARE and SUPPORT

## Depends On The Caregiver's Mindful Emotional Maturity



## Summary – How MEMMC Significantly Improves Quality of Services & Increases Worker Safety by Reducing Behavioural Incidents

Most of the existing leader development and worker core competencies, behaviour management and values type training programs offer important and useful insights and skills. As mentioned above, MEMMC has been specifically developed to round out/complete other agency capacity building and certification programs including conventional training for PSW, DSW and nurses, etc. The following four components of MEMMC complete these essentials.

### **1. Completing the Learning Process – internal human development**

In most conventional leadership and worker development programs, much of the teaching focus is telling and showing participants what to do, why to do, and how to do. These are of course very important and necessary best practices learning strategies. To these skills, primarily through experimental learning, MEMMC adds the necessary ‘internal’ human development like for example emotional self regulating/self control and actual development of kindness and compassion.

Without this final step of learning, most leaders and workers are expected to, as the Nike motto says “just do it” e.g. just stay calm when you are being threatened and just be kind when you don’t feel like it. Oh, if leadership and caregiving were so simple that only a combination of good what to do and wanting to do was enough. Look around – often it’s not happening except with some exceptional caregivers who are mindful and emotionally mature.

### **2. Quality of Life and Behavioural Incident Prevention**

As leaders and workers mindfully and emotionally mature, environments like long term care facilities and community living supported homes are less stressful and more positively focused for both workers and residents/patients. This results from actually learning and integrating the 5 essential human competencies into one’s personal and work life. Caregivers now come to work less stressed and manage on the job stress much more effectively.

### **3. The CCS Process**

The simple 5 step conscious care & support process offers leaders and workers a structured automatic way to respond to all situations. As referenced above, this is how emergency responders and aircraft pilots are trained in the ABCs that must be followed every time they respond to a situation. This is one way that the most effective emergency responders and pilots stay cool, calm and collected under extreme pressure and stress. Caregivers must have similar guidelines that when combined with these internal human resources will avoid the emotion hijacks that often result in escalating - not de-escalating situations.

### **4. Strong Emphasis on Kindness and Compassion Development**

Research from numerous sources including Harvard Medical School, (reference bibliography) tell us and show us how unconditional kindness can be taught and learned. This requires however, different training than just exposure to values clarification exercises and advocating being a good person. To be authentically kind and compassionate, especially when a caregiver is over worked, unappreciated and/or threatened, it is essential for us to know how to regulate our autonomic fear, freeze, fight or flight nervous system and then to be able to activate the vagus nervous system of compassion. Mindfulness is the researched and 'proven beyond all doubt' internal skill that achieves this outcome for anyone who learns and practices it.

In a very practical sense, compassion, care, kindness and mindfulness are critical to residents' and patients' physical, mental and spiritual well being. Primarily only attending to physical or medical needs leaves residents and patients vulnerable to more dis-ease and disease. This contributes to dis-ease and disease in care and support workers as well. It is a costly lose - lose in every sense.

MEMMC is critical because many caregivers who are technically well-trained often still lack the personal and professional emotional maturity and mindfulness to compassionately and effectively care for residents, patients and clients etc., especially when they must be efficient as well. This resource will help ensure that caregivers will:

- consistently offer authentically compassionate and effective 'best practices' service, even when it feels difficult;
- regulate your own emotions when under stress, for example, when individuals supported are agitated, angry and/or aggressive;

- effectively apply the MEMMC mindful emotional energy balancing strategies to calm and deescalate challenging behaviours and difficult emotions;
- effectively utilize the very important processes of mindful intentionality and intuition;
- experience optimal fulfillment from the meaningful care and support that you do offer;

- Assist leaders to develop trusting relationships with staff that encourages them to offer optimal services especially when they are working independent of supervision.

These changes in turn will contribute to respectful, kind, safe and cost effective service through:

- consistent high-quality care and support;
- fewer staff / team member conflicts;
- less emotional trauma to supported individuals from less than optimal service during times of stress;
- less agitation, anger and aggression in individuals supported;
- less worker physical harm and/or burnout, freak-out or tune-out.

I know of no more encouraging fact than the unquestionable ability of men and women to elevate their life (and the lives of others) by conscious endeavours.

*Henry David Thoreau*