

Session 4: Training in Mastery of the Mind #3 — Medication Mindfulness

Activating the Spiritual self in the medical system

Even when obstacles crowd in,
the path to Nibbana can be won
by those who establish mindfulness
and bring to perfection equipoise.
(Samyutta Nikaya I, 48)

Therapeutic Goals of Session 4: The primary therapeutic goal of this session is to begin a dialogue concerning the link between spiritual well-being and physical and emotional health. Clients will learn that taking a spiritual path through life affects every area of their lives, including their medical care, and that failure to follow medical recommendations is inconsistent with being on a spiritual path because it can harm themselves and others. They will learn how to use their training in mastery of the mind, specifically the practice of mindfulness, to help them follow medical recommendations, including taking HIV-related medications exactly as prescribed.

Instruction to Therapist: The format of each session is essentially the same. Each session begins with a renewal of clients' commitment to their Spiritual Path, and 5 minutes of meditation. For this you will need a timer. The meditation period at the beginning of each session will provide you with an opportunity to repeat the instructions for *anapanasati* meditation taught in Session 2; it will also provide clients with the opportunity for additional practice and to clarify any misunderstandings they may have about the technique which they are expected to practice daily at home.

Welcome, Commitment, and Meditation

- Renewing commitment to spiritual path
- In-session practice of meditation on the in and out breath (5 mins)

Example of therapist script: Hello, 'name'. Welcome to the fourth session of spirituality therapy. That you made the effort to be here tells me that you are committed to your spiritual path, is that correct? [Therapist asks for client's continued commitment to the therapy]. Before we do our review of last week's session, let's begin by practicing our meditation on the in and out breath. As you know, your mind has a spiritual center where you can go to experience your true spiritual nature [or, depending on client's beliefs, to be with God or a Higher Power]. We don't usually experience this in our daily lives because the mind has a tendency to wander here and there; it is never still enough to experience its center. This is the monkey mind that we have talked about in our sessions, and it is this monkey mind that can get us into a lot of trouble. An untrained mind that is allowed to wander freely can get caught up in whatever thought or mood touches it. This means that it can readily get swept away by the addict self. That's where meditation comes in – it helps us concentrate – to focus all our attention on this

still, silent place that is within each of us where we can experience our true spiritual nature. In the meditation technique we do here, you are learning to focus single-mindedly on the sensations around the nostrils caused by the in- and out-breath. This area around the nostrils and above the upper lip where you first feel the touch of the breath as it enters and leaves the body is your anchor. It is called an anchor because it helps you to remain centered during emotional storms, and it prevents you from getting swept away by strong currents of craving and aversion. The technique is very simple, but it does take a great deal of effort and practice to train the monkey mind to stay focused on one thing. Are you ready to work hard?

[Therapist's provides detailed instructions to client]:

- . Sit with back straight, feet flat against the floor, hands on your lap
- . Close your eyes (therapist checks that client is comfortable doing this)
- . Just breathe normally through your nose
- . Focus your attention on the area around your nostrils and above your upper lip and concentrate on the changing sensations in this area caused by the breath as it passes in and out of your nose. Do nothing else, just keep your concentration fixed there in this small area where you first feel the touch of the breath as it goes in and as it goes out – this is your anchor.
- . If your mind wanders away, just note 'mind wandered away,' and then firmly bring your attention back to your anchor. See if you can experience the gentle touch of the breath around the nostrils and upper lip as it enters and leaves the body. Keep your attention fixed here.
- . If you have difficulty concentrating, try the technique I showed you that we called "Just one breath at a time". At the beginning of each breath, commit yourself to carefully observing the changing sensations caused by just that one breath alone. Then fix your attention firmly on your anchor for just for that one breath, then the next, and the next. Continue doing this, taming the monkey mind, one breath at a time.

We'll do this together for 5 minutes. I'll let you know when the time is up.

[Therapist sets a timer and meditates with the client for 5 minutes. When 5 minutes have elapsed, therapist asks client for feedback in order to ensure that client was able to experience the sensations around the nostrils and that s/he was successfully able to return the attention to the anchor each time the mind wandered away. This is the therapist's opportunity to correct any misunderstandings about the practice and to provide additional tools to clients who are having difficulty maintaining their concentration on the breath.

For example,

- a) if client has difficulty experiencing any sensations, expand the focus of attention to include the inside of the nostrils and top of nose. If client experiences sensations, but loses them during meditation, instruct client to take one or two short, sharp breaths, so that sensations can be clearly felt. Then instruct client to return to normal breathing.
- b) if client experiences sensations, but has difficulty with mind wandering, therapist provides additional concentration techniques, as follows:
'It sounds like you're doing well detecting sensations caused by the in and out breath; it's your monkey mind that's giving you the trouble, is that right? Don't be discouraged. Everyone has difficulty at first. You are only just beginning to become aware of your wandering monkey mind – this is an important step – it is the beginning of insight. With awareness of the monkey mind, comes the motivation to work hard to train it. You probably never realized before how difficult it is to train your mind. Remember that it is the monkey mind that will get you in trouble, so just keep working hard to train it. Be

persistent. Each time the mind wanders away from the anchor, bring it back gently but firmly. Just as when you are teaching a child to stay away from what can cause it harm, train your mind gently but firmly to stay away from thoughts and feelings that can activate the addict self. Keep bringing the mind back to the anchor over and over again. If you find that you continue to get lost in your thoughts, you may count your breaths at the end of the out breath. Breathe normally, and count each breath after you have experienced the sensations caused by that in and out breath. Say the number silently to yourself just before the breath turns to come back in, like this:

Breathe in, Breathe Out, Count 'One'.

Breathe in, Breathe Out, Count 'two'.

Breathe In, Breathe Out, Count 'three', and so forth up to 10.

While breathing in and out normally, keep your focus on the sensations caused by the touch of the breath, don't focus on the numbers you are counting. If your mind wanders away before you reach the number 10, begin again at number 1. Once you have reached 10, stop counting, and focus on the sensations caused by the touch of the in and out breath without counting. Then, if the mind wanders away again, you can begin counting up to 10 again. Let's try that now just to make sure you get the hang of it.

We'll just do it for 10 breaths. I'll talk you through it. Sit up straight and close your eyes. Breathe normally through your nose and bring your attention to your anchor – the area around your nostrils above your upper lip where you can feel the touch of the breath as it goes in and out. Now silently, with me, begin counting the breaths at the end of the out breath. As before, you are going to continue focusing on the sensations as you breathe in and out, the only difference is that at the very end of the out breath, just before it turns to come back in, count silently. Let's begin:

Breathe in, Breathe Out, Count 'One'.

Breathe in, Breathe Out, Count 'two'.

Breathe In, Breathe Out, Count 'three',

Breathe In, Breathe Out, Count 'four',

Breathe In, Breathe Out, Count 'five',

Breathe In, Breathe Out, Count 'six',

Breathe In, Breathe Out, Count 'seven',

Breathe In, Breathe Out, Count 'eight',

Breathe In, Breathe Out, Count 'nine',

Breathe In, Breathe Out, Count 'ten',

When you are ready, open your eyes. Do you think you can do this at home if you have difficulty concentrating?

Remember, counting is just a tool to help you get your concentration back. Don't get caught up in the counting. It's your anchor, not the numbers, that you are training your mind to focus on during your meditation practice.

Review of previous session

Brief review of concepts covered in previous session:

- Mastery of the Mind – Effort, Mindfulness, Concentration
- Addict self intrusions are to be anticipated, not sign of failure

- Become aware of addict self-intrusions and identify their component parts – this takes vigilance, and is a sign of progress
- Interrupt the flow of the addict self intrusion; then refocus your mind on your spiritual self
- Equanimity is the quality that will restore the balance of your mind.

Instruction to Therapist: In this segment you will provide a brief review of the previous session’s content. This should include the key concepts outlined above.

Example of therapist script: Let’s begin with a quick review of where we left off last week. In our first session together we talked about the need to replace the addict self with the spiritual self and that we were going to help you do this with three kinds of training – training in mastery of the mind, morality, and wisdom, as well as with daily practice of 14 spiritual qualities. Then, in the second session, we began the training in mastery of the mind. We talked about how important it is to take back control of the mind from the addict self which goes on auto pilot and ultimately always leads to suffering. That’s where mastery of the mind comes in with its three components -- effort, mindfulness and concentration. Then, last week we continued the training in mastery of the mind with an emphasis on handling addict self intrusions. We talked about how becoming aware of the addict self intrusions is not a sign of failure, but is actually a sign that you are on the right path, because you can’t change what you are not aware of. You learned that breaking a habit means breaking it down into its parts, and you learned to break down the addict auto pilot by identifying the addict thoughts, feelings, and behaviors that are associated with drug use and other harmful behavior. You also learned how to interrupt the addict self auto pilot using techniques such as thought stopping, and how to refocus on your spiritual path, for example, by reciting your prayer or affirmation. You also worked on another spiritual quality – equanimity, and learned that one way to regain your equanimity in daily life is to become aware of your oneness with the beauty of everything around you. You learned that by strengthening your equanimity, you can restore the balance of your mind whenever the addict self tries to intrude. So, let’s talk now about how that went for you during the week.

Completion of at-home assignments:

- “Coach” role
- Discuss experience with at-home assignments:
 - Did client place self-affirmation/prayer index cards around home and use them to refocus on Spiritual path after addict self intrusion?
 - Did client do the Spiritual Stretch daily?
 - Did client practice mindfulness (stop 3 times daily to be mindful of addict self-schema activation)?
 - Did client practice daily meditation on the in and out breath?
- Identify specific examples of how the spiritual quality assigned last session (equanimity) was experienced and expressed by client during the week.

Discussion of last week’s at-home practice assignments: Let’s go over your assignments for last week. Remember I’m your coach, so I’m going to be checking in with you every week. It’s important that you be honest with me about your practice so that I can help

you stay on track and keep your spiritual muscles strong. Do you think you can do that? During the week you were going to practice the spiritual quality 'equanimity' – that means restoring the balance of your mind. We wrote a special affirmation/prayer on cards to help you and you were going to put them around your house so that you could interrupt the addict self and refocus on your spiritual path. How did that go?

[Therapist ensures that client remembers his/her affirmation/prayer.]

How about your other training exercises?

Have you been doing your daily spiritual stretch?

[Note: If client has not done stretch daily, review technique and suggest involving a family member].

Have you been remembering to do your three times daily check-ins to see if your addict self is active? What was your cue? How is that working for you?

[Note: If client did not do check-ins three times every day, discuss appropriateness of the cue being used. Emphasize the importance of frequent self check-ins to increase awareness of the addict self; no awareness, no progress.]

Have you been practicing your meditation on the in and out breath -- your assignment was to practice for 15 minutes every day, were you able to do this?

[Note: if client reports having difficulty, review technique, location, and posture, emphasizing the importance of diligent practice for training the monkey mind.]

You are doing a good job strengthening your spiritual muscles of strong determination, effort, and equanimity with your daily practice.

[Note to therapist: The goal of this discussion is to encourage practice, while helping clients to identify their own spiritual qualities. Therefore, if client has not practiced, therapist asks client to describe a situation during the week and to identify instances of effort, strong determination, and equanimity – the three spiritual qualities covered so far in treatment. You can also suggest that they keep their signed Commitment in a conspicuous place and read it frequently.]

You're doing good work. I really appreciate your being honest about where you are having difficulty. This shows me that you are not allowing the addict self to sabotage your practice. Keep up the good work!

Instruction to Therapist: Once you have reviewed the previous session and the at-home assignment for the previous week, you can begin providing the new material. As shown below, introduce the new material to clients in discrete segments to facilitate learning. Repeat key concepts frequently, and integrate the new material with what you already know about clients' addict and spiritual self schemas, and their spiritual or religious beliefs. For this session, it is also helpful to be familiar with the client's HIV-related medical regimen.

New Material: Mastery of the Mind #3 -- Medication Mindfulness

Background Information. Upon learning that they are infected with HIV, many drug users find themselves feeling overwhelmed by the complex system of health care that they must now navigate, and quite unable to assume the new role that is now required of them, which is that of a compliant medical patient. Faced with the stress of a chronic, potentially fatal medical condition, drug users are likely to resort to their primary coping

strategy which is to use illicit drugs. Drug use, of course, not only further damages their health, it also contributes to the spread of HIV through sharing of drug paraphernalia and unsafe sexual practices. Because of their drug using lifestyle, drug using clients living with HIV are also likely to have a great deal of misinformation about the virus and its treatment that could potentially influence their health care decisions. Many, especially those with no perceivable symptoms, may have difficulty understanding how HIV is harming them. They may also have quite unrealistic expectations about treatment, and if they are being prescribed medication for HIV, may be unaware of the adverse consequences of not taking their medications exactly as prescribed.

If you are asking yourself ‘what has all this got to do with spirituality?’, keep in mind that the primary goal of the 3-S therapy program is to help clients create a self-schema for relieving suffering that can prevent harm to themselves and others in every aspect of their daily lives. Non-adherence to medical recommendations by clients living with HIV can cause harm not only to the client, but also to others with whom the client shares drug paraphernalia or has unprotected sex.

Clearly, adherence to medical recommendations by addicted clients living with HIV will be influenced by which of the client’s self-schemas is activated. We know that the addict self schema, with its focus on self-medication and immediate gratification, is unlikely to be conducive to strict adherence to medical regimens, especially if the regimen includes taking medications that have unpleasant side-effects. A spiritual self-schema, on the other hand, with its focus on remaining mindful, and its insight into impermanence (including unpleasant side-effects) is more likely to be conducive to adherence. The goal of this session therefore is to help addicted clients living with HIV activate a self-schema – the spiritual self -- that can help them make healthy lifestyle choices, including taking medications as prescribed. For clients living with HIV who are not currently being prescribed HIV-related medications, the session can provide an opportunity for clients to practice activating their spiritual self-schema in the context of taking other prescribed medications or their daily vitamins, in readiness for the time when their health care provider prescribes HIV-related medications. For clients not prescribed medications, this session can be tailored to help them adhere to other medical recommendations, such as maintaining a healthy lifestyle with respect to nutrition and exercise, and communicating effectively with health care providers.

Segment 1 – HIV and its treatment

- Addict self intrusions occur more frequently when stressed and can interfere with adherence to medical regimens
- Living with HIV is a major source of stress
- People living with HIV have to assume the role of ‘patient’ in a health care system that may require them to follow complex medical recommendations, including taking medications, some of which may have unpleasant side-effects
- Strict adherence to HIV-related medications is essential; poor adherence can result in the emergence of medication-resistant strains of the virus that can be transmitted to others

Instruction to Therapist: Begin this segment by informing clients that this is the final session in training in mastery of the mind which includes three of the eight components of the Eightfold Path -- right effort, right mindfulness, and right concentration. Let them know that today they will be using their training in mastery of the mind specifically to help them protect their health and to get the most out of their medical care. Be sure to remind clients of the previous session on addict self intrusions, specifically how the addict self is most likely to intrude into their daily life when they are feeling stressed. Point out that HIV is probably a major source of stress for them right now. Having HIV means having to cope with a complicated medical system; it also requires having to take on the demanding new role of medical patient which requires skills that clients may lack because of their addictive lifestyle. For example, being a medical patient requires punctual attendance at medical appointments, adherence to possibly complex medication regimens, and tolerance of sometimes unpleasant side-effects. Clients will agree that being a good medical patient is inconsistent with the often chaotic addictive lifestyle that seeks immediate gratification and has a very low tolerance for discomfort. They may also be aware that the stress of having HIV activates the addict self and that the addict self sabotages their medical care. When the addict auto pilot is turned on, all they are concerned with is trying to avoid the stress by getting high. This is the habit pattern of the mind that gets activated automatically whenever they feel overwhelmed; therefore, they need to strengthen their spiritual self so that it gets activated in times of stress instead of the addict self. Unlike the addict self, their spiritual self will be motivated to stay on its spiritual path and do whatever is necessary to relieve suffering and prevent harm, and this includes taking care of their physical health. Let them know that in this session they will learn how to use their training in mastery of the mind to help them activate their spiritual self in medical contexts so that they can get the most out of their medical care. You will begin by ensuring that every client has at least some basic knowledge about HIV and its treatment so that you can correct any misunderstandings.

HIV attacks T-cells, specifically CD4 cells, which are an important component of the body's immune system that defends it against infection. Once the person is infected with HIV, the virus multiplies by continually making copies of itself. The number of copies of HIV that can be detected in the infected person's blood is called the "viral load". As more copies of HIV are made, the viral load increases, and more virus becomes available to attack the immune system. This relentless process is reflected in an ever decreasing CD4 count. With the immune system severely compromised in this way, the person becomes vulnerable to AIDS-related opportunistic infections that can ultimately cause death. Up until a few years ago there were few, if any, treatments available that could keep the viral load under control, and so most HIV-infected persons succumbed to AIDS within approximately 10 years. Now, however, there are combinations of medications available that can reduce viral load and maintain, or even increase, CD4 counts. However, these medications are not a cure by any means. In fact, even if the medications reduce the viral load to a level that HIV can no longer be detected using current blood tests, this does not mean that the virus has been eradicated or that the patient can stop taking the medications. This fact is often misunderstood by patients and can cause them to resume engaging in behaviors that spread the virus or to stop taking the medications because they think that they no longer have the virus. When working with

your clients you will therefore need to emphasize that medications need to be taken indefinitely, and that even if the medications are successful in causing the virus to become undetectable in their blood, they can still transmit HIV to others. The good news for patients is that for those who respond well to medication, HIV can be viewed as a chronic, rather than fatal, medical condition. The bad news is that these medications can be difficult to take. The patient may be required to take many different pills, several times a day, some with food, some on an empty stomach, some needing refrigeration, some not. And, unless 90-95% of doses are taken exactly as prescribed, the virus will not be controlled. The problem here is that not only will the virus continue to make copies of itself if the patient doesn't take the medications exactly as prescribed, but that the stage has now been set for new medication resistant forms of the virus to emerge. These medication resistance virus not only harm the patient who didn't take the medication as prescribed, but can harm others because they can be spread to anyone with whom that patient shares drug paraphernalia or has unprotected sex. There is now evidence that these medication resistant viruses can even be spread to someone already infected with HIV. This is called "superinfection". Therefore, even if HIV-positive clients are taking their medications as prescribed, they can potentially be reinfected with another strain that does not respond to medication by engaging in any high risk behavior. The upshot is that whether a person is newly infected or already infected with HIV, his or her treatment options are greatly diminished if they engage in high risk behavior with an individual infected with HIV who is not taking medications as prescribed. Because strict adherence is essential, many health care providers will attempt to evaluate their patient potential for non-adherence before prescribing, thus further limiting the treatment options of drug users who are more apt to be nonadherent.

To summarize, the major points that you will want to get across in this segment is that medication adherence is absolutely crucial and that medication resistant forms of the virus can be spread to others. Then end the segment by reviewing your clients' current medication regimen and by discussing your clients' experiences with these medications.

Example of therapist script: This is your third session that focuses on training in mastery of the mind. In previous sessions we've talked about the three components of disciplining the mind -- effort, mindfulness, and concentration, and we've talked about how the addict self is a habit pattern of the mind that we can easily get trapped in and harmed by if we are not mindful. Last session we talked specifically about how the addict self can intrude in your daily life and can cause harm to you and others. Today we are going to talk specifically about how to prevent the addict self from interfering with your medical care, and how to use your spiritual self and the three components of mastery of the mind (effort, mindfulness, and concentration) to help you get the most benefit from it. Having HIV usually means having to take on a new role – the role of medical patient. Being a patient in the health care system can be pretty stressful, can't it? And, as we discussed last week, stress can be an invitation for the addict self to make an appearance, so we want to help you do whatever you can to prevent this from happening. Let's begin by going over some of the basics about HIV, so that we are on the same page when we talk about medical care.

As you know, HIV increases by making copies of itself, and it is these copies that attack and destroy your immune system, specifically cells called T-4 cells, that protect your health. So, when your health-care provider tells you what your viral load is, he or she is

telling you the number of copies of the virus that you have in your blood, and when he or she tells you your CD4 count, that's the number of this particular kind of T-cell that you still have in your immune system. Usually what happens with HIV disease is that as your HIV viral load increases, your CD4 count decreases, and your immune system gets weaker until it is no longer able to defend you from infections and cancer – that's when HIV has progressed to AIDS. So, whenever your doctor thinks it's appropriate, he or she will probably prescribe medications that may be able to reduce the amount of virus you have in your blood so that you can keep your immune system strong and stay healthy longer. These medications aren't a cure, but for some patients they can lengthen life substantially. If your doctor recommends that you take these medications, you have to be seriously committed to taking them exactly as prescribed. Do you know what can happen if you don't take these medications exactly as prescribed? [Therapist ensures that client understands the risk for emergence of medication resistance virus, and the recent findings that these new strains can be transmitted to others, including to the client him or herself.] The virus is very clever. If you miss taking a dose you provide the virus with the opportunity to make copies of itself that won't respond to the medication. Then these new strains of the virus go on to make more copies of themselves until soon your viral load is back up again with a virus that doesn't respond to these medications. So that's one reason for always taking these medications exactly as prescribed. Another reason is that this new strain of the virus that doesn't respond to the medication can now be transmitted to other people. That means that if you have sex or share drugs with someone who has this particular strain of the virus, you can get it even if you have been careful to take your medications as prescribed. Or if you were the person not taking your medications as you should, you could give the new strain of HIV to someone else (someone who already has HIV or someone who didn't have it before). That's why you must never have unsafe sex or share drug paraphernalia even if your partner is also HIV-positive. When someone who is already infected with HIV is reinfected with a new strain of HIV that's called 'super-infection.' Have you been informed of this already? You understand then how extremely important it is to take medications exactly as prescribed.

Another thing you should remember is that even if your doctor tells you that the medications were successful in reducing your viral load to undetectable levels, this does not mean that you can no longer transmit the virus to someone else. The virus can be in other body systems beside blood and can still be transmitted.

[Therapist gets as much information as possible about the clients medical care, attitudes towards medical recommendations, and level of adherence. Examples of questions follow:

Are you currently being prescribed any medications?

If yes: What are the names of the medications and what are they for? How many of each of these medications are you supposed to take each day and at what times of the day are you supposed to take them, with meals or not with meals? What memory aids do you use to remind you to take your medications (examples: posting a reminder note in a conspicuous place; keeping the pill container in a convenient place -- near refrigerator if medications are to be taken with food, on bedside table if taken before bed).

Do you experience any side-effects? How do you cope with these side-effects? Have you ever missed any doses? When are you most likely to miss doses? What is the most difficult part of following your medication regimen? How do you feel about taking

medications? Do believe these medications are helping you? Do you know your CD4 count and your viral load? Do you know if the medications you take have improved your CD4 count or reduced your viral load? [Note to therapist: Inability to answer these questions could suggest poor adherence.]

If no (not prescribed medications): Do you currently have a health care provider? Is this someone who treats you specifically for HIV or for general health care issues? What's his/her name? How often do you see him/her? When is your next scheduled visit?

[Therapist ensures that client has an HIV health care provider, that is seen regularly, and if not makes the appropriate referral.]

Segment 2 -- The addict self and HIV

- The role of HIV-positive patient in the medical system can be overwhelming, and can activate the addict self-schema
- Activation of the addict self-schema is not conducive to adherence to medical recommendations.

Instruction to Therapist: Having ensured that your client has a basic understanding of HIV infection and its treatment, you will review ways in which the client's addict self schema can become activated in the context of receiving medical care for HIV. As discussed previously, the stress of having to navigate a complex medical system can activate the addict self. And, of course, once the addict self is activated, following medical recommendations will probably be the furthest thing from your client's mind. So, use this segment of the session to help your clients increase their awareness of how addict self thoughts, feelings, and behaviors are completely incompatible with following medical recommendations, and how it could potentially interfere with and even sabotage their own medical treatment. Be specific.

Example of therapist script: Do you think there's a difference between how the addict self and the spiritual self would think about following medical recommendations?

[Therapist waits for client's response.]

The addict self is all about immediate self-gratification -- it self-medicates, right? It doesn't bother with rules and recommendations, it does whatever will make it feel good. Well, that can be a big problem for someone being treated for HIV because we all know what the addict self does when it feels sick – it uses drugs, right? And, what happens if the HIV medications have side-effects? The addict self would probably either stop taking the medications or use illegal drugs or alcohol to make you feel better. Either way, that's bad news. How might the addict self interfere with your ability to follow your doctor's recommendations?

[Therapist has client focus on a specific medical recommendation (i.e., following a specific medication regimen) and consider how the addict self could sabotage, or already has sabotaged, adherence].

Segment 3 – Mastery of the Mind in Medical Contexts

- Use ‘mastery of the mind’ (i.e., effort, mindfulness, concentration) to improve adherence to medical recommendations -- create medication mindfulness rituals to activate the spiritual self
- The spiritual self is mindful, grateful, willing to ask for help
- The spiritual self, with its insight into impermanence, can also help client cope with side-effects and other unpleasant physical symptoms
- The spiritual self’s commitment to do no harm to self or others precludes engaging in behaviors that can transmit medication-resistant strains of the virus to self or others

Instruction to Therapist: In the next segment you will explain how clients can use the training in mastery of the mind, with its three components -- effort, mindfulness, and concentration -- to help them follow medical recommendations and get the most benefit from their medical treatment. Ask them to notice the difference between how their spiritual self and their addict self interacts with their health care provider. Explain that when their spiritual self is active they will be more likely to follow medical recommendations because their spiritual self is concerned with preventing harm to self and others. Introduce the spiritual quality to be worked on today and during the week, which is **gratitude**, and show clients how they can create medication mindfulness rituals that can not only help them remember to take their medications, but can also make the very act of taking of medications an occasion for connecting with their spiritual nature. If your clients are not currently being prescribed medications for HIV, you can recommend that they use the medication mindfulness ritual for taking other medications that are currently prescribed, or for taking their daily vitamins. They should begin by mindfully placing each medication, or vitamin, in front of them, noticing its color and texture. Some clients may wish to begin with a prayer for healing and end with a prayer of gratitude, some may wish to light a candle or simply bow their heads. Whatever ritual they perform, they should use this opportunity to conduct a ‘Self Check-In’ to ensure that their Spiritual self is activated, rather than their addict self. They should then take each medication mindfully, noting any sensations that arise. Work with each client to create a ritual that is personally meaningful. Then make sure that clients know what they should do if they experience side-effects. Emphasize that they are to notify their health care provider if they experience side-effects. However, if, having done this, clients are told that these side-effects are to be expected and need to be tolerated, describe how they can activate their spiritual self and use their training in mastery of the mind to handle any unpleasant side-effects caused by the medication. For example, they can use the ‘observe and name’ technique that was described in the previous session for handling addict self intrusions. Using this technique, clients simply observe the various unpleasant sensations that arise, name them, and then, knowing that they are impermanent, let them pass away without engaging them or identifying with them. After discussing how to handle side-effects, explain how their spiritual self can also help them stay on a spiritual path and protect their health when in high-risk situations; for example, by preventing them from engaging in behavior that could result in super-infection or in spreading medication resistant virus to others. End the segment by talking about the value of activating the spiritual self whenever they have an appointment with their health care provider; teach clients specific strategies for better communication, and contrast these strategies with

those used by clients with their health care provider when their addict self schema is activated.

Example of therapist script: Let's talk about how training in mastery of the mind, with its three components of effort, mindfulness, and concentration, can help you to adhere to medical recommendations and get the maximum benefit from your medical care.

When you practice mastering your mind through effort, mindfulness, and concentration, you learn to focus your complete attention on what is happening in the present moment. You become single-minded. This ability to concentrate can be of great benefit when you are on a complicated medication regimen. When you practice mastering your mind, you also develop the wisdom to see that nothing is permanent. This insight can help you whenever you experience side-effects or any unpleasant symptoms. Of course, you should tell your doctor if you experience side-effects, but if you are instructed to continue taking your medications, let your spiritual self and its training in mastery of the mind, remind you that 'this too shall pass.' Another quality of your spiritual self that can help you is its willingness to reach out for help, if needed; unlike the addict self, your spiritual self has the ability to trust, and, if ever it became necessary, it would be willing to surrender to the care of others. Your spiritual self also stems from a place of deep gratitude; it will remind you to be grateful for these medications that can prolong your life. This gratitude can also help you to follow your doctor's recommendations.

What we are going to do now is to make taking medications a ritual for the activation of your spiritual self. We call this the Medication Mindfulness Ritual.

[Note to therapist: If client is not currently prescribed HIV-medications, suggest that the client practice performing the following ritual and activating the spiritual self when taking other prescribed medications or daily vitamins.]

[Therapist and client, together, create a Medication Mindfulness Ritual]:

1. Conduct a self check-in to ensure that the spiritual self is activated.
2. If it is consistent with your spiritual/religious beliefs, consider this to be an opportunity for grateful worship; begin with a brief prayer, light a candle, bow your head, or simply focus your attention on your anchor and meditate on the in and out breath for the count of 5, take this opportunity to acknowledge the healing power of your spiritual nature.
3. Take out each medication mindfully, count out the appropriate number of pills, and place each pill in front of you. Do not take medication one at a time directly from the bottle, as you may forget which ones you have already taken. (If you use a pill organizer, activate your spiritual self each time you fill it.)
4. As you pick up the medication bottle/container or pill organizer, notice how it feels in your hand. Notice its weight. As you open the lid, notice the sensations of your fingers tightening around it. As you hold each pill in your hand, observe its color, its shape, its texture.
5. Mindfully experience each sensation that arises in your body as you swallow each pill.
6. At the end of your medication mindfulness ritual, give thanks for the medication – make the effort to fill your heart with gratitude not only for the medications that may prolong your life, but also for the opportunity to train your mind to walk a spiritual path.

[Therapist describes how to cope with side-effects]:

If you experience any unpleasant side-effects, inform your doctor. If you are told that these side-effects are to be expected and tolerated, let your spiritual self help you cope with them using the 'observe and name' technique that you learned in the last session for interrupting the addict self. When you experience a side-effect, meditate on the sensations you may find to be unpleasant – name them – really investigate them, penetrate them with your focused mind; notice where these sensations begin and end, whether they are hot or cold, sharp or dull. By doing this, you will see that these sensations are actually made up of many other smaller sensations that are actually constantly arising and passing away. Observe them, name them, and allow them to pass away. Don't identify with them by reacting to them; become a detached observer. These sensations are not you or yours; they are just fleeting sensations that arise and pass away, arise and pass away. As you observe and name them, allow yourself to find equanimity in their impermanence.

[Therapist describes how to cope with high risk situations]:

When you are in situations in which you are at risk of engaging in drug or alcohol use, unsafe sex or sharing of drug paraphernalia, call upon your spiritual self's commitment to do no harm to self or others, to do the following:

- remind yourself that if you engage in this risky behavior you could become re-infected (also called superinfection) with a strain of HIV that can't be treated with medications, or you could infect your partner with such a strain.
- remind yourself that protecting your immune system is of utmost importance right now, and that doing anything that can jeopardize it, like taking drugs or drinking alcohol, conflicts with the purpose of taking the medications that are meant to help restore your immune system.

[Therapist describes how to communicate effectively with health care providers]:

When you have an appointment to see your health care provider, it is important to go with your spiritual self, and not your addict self, activated, as follows:

Remember that a visit with your health care provider is time limited ...

When speaking :

- organize ahead of time what you want to say
- write down issues you wish to raise and questions you wish to ask
- be clear and precise (do not digress; time is limited)
- speak clearly and sufficiently loudly
- ask person if your questions and concerns were understood

When listening:

- pay close attention
- ask questions
- take notes or ask for the information to be written down for you
- ask for information to be repeated if it is not understood
- summarize what has been said to you to ensure you understood correctly

Be mindful of your body language:

- make eye contact
- ensure that your posture, facial expression, and tone of voice show your commitment

Notice the difference between how it feels to interact with your health care provider in the role of your spiritual self rather than your addict self. Your health care provider will notice the difference. Remember, respect is a two-way street.

Is there anything else your spiritual self could do to help you following medical recommendations?

Segment 4 -- Experiential component

- Gym metaphor: exercise spiritual muscles.
- Resistance training: Overcoming Obstacles to Adherence with the Spiritual Self.
Note: If client is currently being prescribed medications, the therapist selects a scenario from those listed below that is most relevant to the client's life circumstances. If client is not currently being prescribed medications, therapist and client role-play client's next medical appointment in order to practice activating the spiritual self in that context.

Instruction to Therapist: This is the segment in which you help clients exercise their spiritual muscles and demonstrate their mastery of the mind, specifically the effort, mindfulness, and concentration required to follow medical recommendations. In today's exercise you will help clients activate their spiritual self in order to overcome obstacles to medication adherence. You will do this by presenting clients with a scenario in which they are at risk for forgetting to take their medications. You will then ask them to tell you how they can overcome each of the obstacles in the scenario by activating their spiritual self (e.g., by using mastery of the mind -- effort, mindfulness, and concentration). Together, you and the client will then identify which spiritual muscles clients used in their efforts to adhere to medical recommendations (e.g., gratitude). You can either select from the list below whichever one of these scenarios is most relevant to your client's life circumstances, or you can create one of your own based on personal knowledge of your client's medication regimen and the circumstances that tend to place him/her at greatest risk for non-adherence. If your client is not currently being prescribed medications, you can use this segment to role-play how your client will attend his or her next medical appointment mindfully, with you playing the role of health care provider, and the client playing the role of a patient whose spiritual self is activated, and who is demonstrating the communication skills described in the previous segment. [Cautionary note to therapist: if you do play the role of client's HIV health care provider, do not provide medical advice. Rather, use the role-play to encourage client to demonstrate his/her mindful communication skills.]

Scenario #1

Imagine that you have to be in court all day today. While you are at the courthouse, you will need to take your medication. However, the medication must be taken with food. You will bring your medication with you. Describe to me what you would do to make sure you take your medication at the proper time and according to the special instructions, and how you would activate your spiritual self to help you.

Therapist coaches the client, as needed, with the following questions:

1. Does plan involve keeping the medications easily accessible at courthouse?
2. Does plan include using memory aids?
3. Does plan include preparing the medication ahead of time (putting it in medication organizer)?
4. Does plan allow for special instructions (with food) to be followed?
5. How does the plan demonstrate mastery of the mind -- effort, mindfulness, concentration?
6. How does the plan use your spiritual muscles (e.g., gratitude), or ability to ask for help?
7. Is the plan realistic? [Therapist considers feasibility of plan and gives client appropriate feedback.]

Scenario #2

Imagine that you arrive at the clinic to get your methadone and you realize you forgot to bring your HIV medications with you. You need to take the next dose in an hour with food and another dose this afternoon with food. You already have your whole day planned. First, you plan to get your methadone, then do some errands, and go to visit a friend. It is very important that you take your medications as prescribed but you are very busy. Describe to me what you would do in this situation, and how you would activate your spiritual self to help you.

Therapist coaches the client, as needed, with the following questions:

1. Does plan involve rearranging the day's plans to go home and get the medications?
2. Does plan allow for morning medication to be taken with food?
3. Does plan allow for afternoon medication to be taken with food?
4. Does plan involve keeping the necessary medications easily accessible throughout the day?
5. Did client problem solve any transportation and/or logistical problems and thus get home in time to take all medications as prescribed?
8. How does the plan demonstrate mastery of the mind -- effort, mindfulness, concentration?
9. How does the plan use your spiritual muscles (e.g., gratitude), or ability to ask for help?
10. Is the plan realistic? [Therapist considers feasibility of plan and gives client appropriate feedback.]

Scenario #3

Imagine that you have been invited to spend the night at a friend's house. This person does not know you are HIV-positive or that you need to take medications. The medication you take at night needs to be kept refrigerated. You would like to be discrete but it is very important that you take your medications. Describe to me what you would do under these circumstances, and how you would activate your spiritual self to help you.

Therapist coaches the client, as needed, with the following questions:

1. Does plan involve keeping medication cool (e.g., in an ice chest)?
2. Does plan make it easier for them to remember to take their medications?
3. Does plan call for preparing the medication ahead of time (poured it into a container)?
4. Does patient disclose to friend that s/he needs to take medications and does patient elicit friend's support and/or assistance with adherence?
5. Does plan allow for special instructions to be followed?
6. How does the plan demonstrate mastery of the mind -- effort, mindfulness, concentration.
7. How does the plan use your spiritual muscles (e.g., gratitude), or ability to ask for help?
8. Is the plan realistic? [Therapist considers feasibility of plan and gives client appropriate feedback.]

Example of therapist script: It's time now to exercise your spiritual muscles and do some resistance training. So I want you to use this opportunity to practice drawing upon the three components of mastering the mind – right effort, mindfulness, and concentration -- and the spiritual quality of gratitude. To do this, I'm going to give you a scenario in which it might be difficult to take medications and I want you to tell me how you will use your spiritual self and its mastery of the mind to overcome the obstacles presented and to prevent the addict self from intruding. [Therapist selects the most realistic scenario from the three provided above, or creates a different one based on specific medications and specific obstacles to adherence identified by the client.]

Note: If the client is not currently being prescribed medications, this experiential segment may be used to role-play attending an appointment with a health care provider mindfully. You will play the role of the health care provider and the client will act as if attending with his/her spiritual self activated, demonstrating mastery of the mind (effort, mindfulness, concentration) and spiritual qualities (e.g., gratitude) using the tips for effective communication described earlier. (Do not provide medical advice during this role-play.)

At the end of the work-out, identify the spiritual muscles/qualities demonstrated by the client and how they will help him/her get maximum benefit from medical care.

Segment 5. At-home practice assignments

- Continue: Daily 3-S stretch
- Continue: 3 times daily self-schema check-ins (with cue)

- Continue: Meditation on the in and out breath daily for 20 minutes (increasing 5 minutes each session to 60 minutes by treatment completion)
- Continue: Use self-affirmation/prayer to refocus after an addict self intrusion
- New: Use the medication (or vitamin) mindfulness ritual
- New: Spiritual quality assigned -- **gratitude**

Instruction to Therapist: In this segment of the session, clients are given their at-home assignments. They are reminded that being on a Spiritual path requires strong determination, effort, and equanimity (the spiritual qualities that were assigned in previous sessions), and that they are to continue the at-home assignments previously assigned in addition to the ones you will be assigning today. Be sure to refer clients to the page in the Client Workbook on which the at-home exercises for today are written, and then go over each one to ensure that clients understand what is to be accomplished during the coming week. The client is to continue their daily Spiritual Stretch, the 3 times daily self check-ins, and their daily meditation on the in- and out-breath. The length of daily meditation is increased as appropriate. This will depend on how clients are progressing. Keep in mind that the goal is to have clients meditating for one hour each day by the end of treatment. They will also continue reciting their spiritual self affirmation or prayer, so it is important that the therapist make sure that the client remember what prayer/affirmation they had chosen. Once the usual routine is reviewed, the new assignments are added. The new Spiritual quality to assign in this session is **gratitude**, and the new assignment is to follow medical recommendations and to perform a medication mindfulness ritual every time they take their medications. For clients not prescribed medications, the assignment is to use their medication mindfulness ritual when taking their daily vitamins. End the segment, as always, by asking for clients' commitment to completing their at-home assignments and staying on their spiritual path.

Example of therapist script: The session is almost over. Let's go over your training schedule for the week.

Continued: You will continue your daily spiritual stretch and your mindfulness practice of checking in with yourself three times a day to see what habit pattern of the mind is currently active. Use your cue [... name cue, e.g., medication taking time...] to interrupt yourself three times a day. You will also continue your in- and out-breath meditation practice – if you can, increase the amount of time that you practice to 20 minutes each day. [Therapist assigns length of daily practice to client's progress in treatment] You will also continue using your self-affirmation to refocus on your spiritual path whenever the addict self tries to intrude.]

Added: Your new assignment for the week is to **use the medication mindfulness ritual that we created together during this session.** [If client is not prescribed HIV-medications, therapist recommends that client use the mindfulness ritual that was created in session for taking other prescribed medications or for taking their daily vitamins.]

Your spiritual quality for the week is **gratitude**. You've demonstrated in session that you know what this means. So keep up the good work. You will need it for the coming week.

Commitment: Can you make a commitment to staying on your spiritual path during the week, to do your training in effort, mindfulness, and concentration every day, and to express the spiritual quality of gratitude?

Segment 6 – Summary

Summary of session content to facilitate client understanding:

- Effort, mindfulness, and concentration are the three components of training in mastery of the mind
- Effort, mindfulness, and concentration are all required to follow HIV medical recommendations
- Following medical recommendations exactly is essential for preventing superinfection and the spread of medication resistant viruses
- Activating your spiritual self and creating ‘Medication Mindfulness Rituals’ can help you get maximum benefit from your medical care

Instruction to Therapist: In this segment of the session, you will provide a brief review of the session content in order to facilitate client understanding. The summary for this session should review the training in mastery of the mind with its three components – effort, mindfulness, and concentration – and should remind clients how this training can be used to activate their spiritual self in order to get the most benefit from their HIV-related medical care. Briefly review the process by which medication resistant viruses can emerge and be transmitted to others, and remind clients of the mindfulness practices they learned in session today that they can use to help them follow medical recommendations.

Example of therapist script: Today we have focused on mastery of the mind, specifically using the strong effort, mindfulness, and concentration of your spiritual self to gain maximum benefit from medical treatments for HIV/AIDS. We talked about the importance of following medical recommendations, and how medication-resistant strains of the virus can emerge if you don’t take medications exactly as prescribed. We talked about how to create ‘Meditation Mindfulness Rituals’ and we practiced flexing your spiritual muscles in situations that present obstacles to following medical recommendations. You have done very well.

Segment 7 -- 3-S stretch

- 3-S Stretch with new spiritual quality ‘gratitude’ inserted

Instruction to Therapist: Each 3-S therapy session ends with the spiritual stretch. You will find a diagram of the stretch in this manual and also in the Client Workbook. The goal of the stretch, which is to be performed daily at home, as well as at the end of each session, is for clients to affirm both physically and verbally their commitment to spiritual practice. At each stage in the stretch, which is performed slowly, therapists and clients affirm, aloud, the commitment to the client’s spiritual path and to developing the spiritual quality assigned for the week, in this case **Gratitude**. The words spoken during each part of the stretch are to remind clients that being on a spiritual path requires making their thoughts, words, emotions, actions, and perceptions consistent with the highest spiritual ideals. You will do the stretch with your client at the end of each session so that you can correct any mistakes as the stretch is executed, and ensure that clients know how to do

the stretch at home. Until clients are familiar with the wording, have them repeat each phrase after you. Explain that the stretch is a simple way to begin their day that can remind them to stay on their spiritual path. Remind them that the stretch is one of their at-home practice assignments, and show them once again where they can find it in their workbook. Then do the stretch together and end the session.

Example of therapist script: As gratitude is the quality you will be working on this week, let's end the session by focusing on this quality while doing our spiritual stretch.

[Therapist and client stand and perform the stretch together – see appendix for posture.]

'Today I take my spiritual path. May my thoughts reflect gratitude; may my words reflect gratitude; may my emotions reflect gratitude; may my actions reflect gratitude; may my perceptions reflect gratitude; may I be open and receptive to being grateful. I am my spiritual nature.'

End.

Example of therapist script: Thank you for coming today (client name). I look forward to seeing you at our next session.