

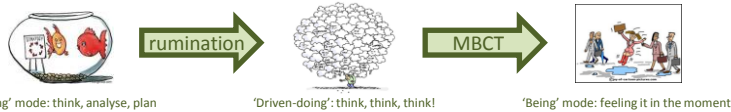
# “I don’t have an issue with sadness any more.”

## Exploring transformation in the experience of sadness after Mindfulness-Based Cognitive Therapy: An IPA case study

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### Introduction: MBCT and sadness

According to MBCT theory (Segal et al., 2013), it is the nature, not the strength, of responses to emotional challenges such as sad mood that drives vulnerability to depressive relapse. MBCT aims to cultivate a shift away from responses driven by a cognitive-intellectual mindset, which can lead to rumination and relapse, towards a more accepting, experiential way of being with sadness.



Recent qualitative (Malpass et al., 2012) and quantitative (Farb et al., 2010) research is consistent with MBCT theory. However, the only study to date that has directly investigated this theoretical mechanism found that unhelpful cognitive and affective responses were not, in fact, attenuated after MBCT relative to control (Kuyken et al., 2010). Nevertheless, the relationship between immediate responses to sad mood and subsequent relapse was disrupted for the MBCT group, raising the question: **What is it about the experience of sadness that can change after MBCT, and how does it help?**

### The study aimed to:

- Investigate the experiential features of sadness after MBCT in fine-grained detail.
- Document dimensions of change both in the nature of sadness itself and contextual factors.
- Consider how qualitative data may fruitfully integrate with experimental approaches.

### Methodology

**Interpretative Phenomenological Analysis (IPA)** was selected for this study for its emphasis on idiographic detail, lived experience and personal meaning-making around experiences of personal significance. Our case study approach permitted an in-depth exploration of changes in the experience of sadness over time for our interviewee-collaborator, Isa (a pseudonym).

### Interview

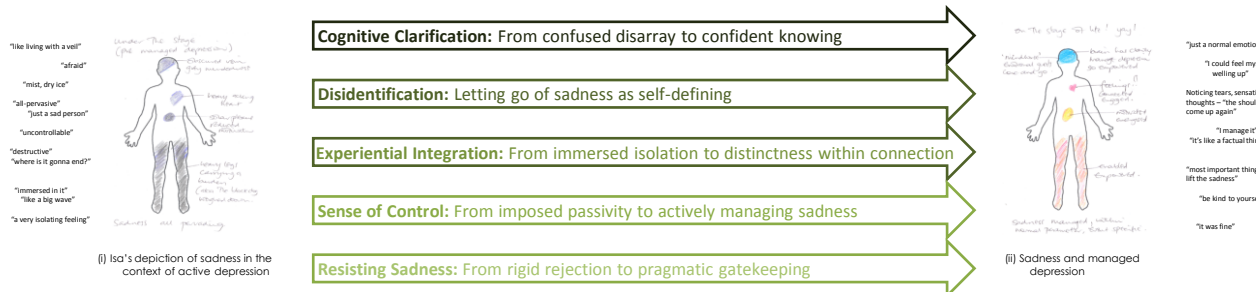
A qualitative-phenomenological interview lasting approximately one hour was used to collaboratively explore Isa's experience of sadness after MBCT. The overarching questions guiding the interview were: How does sadness feel and (how) does it change after MBCT? Within this general domain, the precise questions used were open and prompted by Isa's relationship to the topic, in order to explore the aspects of sadness of greatest significance to her. Isa's account took the form of a life story narrative, tracking change in the meaning and nature of sadness as her resilience to depressive relapse developed.

### In a nutshell

- The experiential qualities of sadness following MBCT were explored in a case study using IPA.
- Radical changes in how sadness is experienced and the affective-existential context in which it arises were articulated in Isa's account.
- Transformation was instigated by explicit understanding about depression and the formation of a personal narrative.
- People may respond to different aspects of MBCT depending on whether their natural orientation to experience favours conceptual, sensory or affective information.
- For some, MBCT may be more effective if offered after counselling or narrative-based therapy to support personal meaning-making on a "life story" timescale.

### Analysis: How does sadness feel after MBCT, and how does it change?

**Overview.** The overarching process of change in Isa's experience of sadness was affective clarification leading to profound transformation in her relationship to sadness and depression. Key strands of this change are captured in the five themes presented below. At heart, the process of clarification for Isa concerns the conceptual and experiential disentanglement of sadness, self and depression. This disentanglement enabled her to relate separately to depression and sadness and manage each effectively.



### For the future - what's new?

- Experiential features of sadness before and after MBCT.** Isa's account highlighted a number of experiential dimensions that differ between sadness occurring in the context of depression and in the context of wellbeing that are not typically captured in clinical-experimental research; for instance controllability, vastness, clarity, temporal precision and acceptability.
- Dimensions of change in the affective-existential context of sadness.** Contextual factors are rarely acknowledged or measured in current experimental research on depression, emotion and mindfulness. However, the ability to understand, delineate, actively engage with sadness and, crucially, disidentify from it, were vital elements in Isa's growing resilience.
- How qualitative data may be fruitfully integrated with experimental approaches.** Theoretically-attuned qualitative research can elaborate on unexpected experimental findings (e.g., Kuyken et al., 2010), uncover novel dimensions of key phenomena and highlight important areas of individual variation in therapeutic responses to MBCT.

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