experience of craving is an essential tool in promoting awareness and acceptance of psychological and physiological reactions to substance withdrawal. Specific relapse prevention strategies (teaching effective coping skills, enhancing self-efficacy, challenging positive outcome expectancies, educating about the abstinence violation effect) in conjunction with the client instituting a regular mindfulness practice, provides an opportunity for the client to form an association between being mindful with the implementation of relapse prevention skills.

The identification of high-risk situations for relapse remains a central component of the treatment. Clients are trained to develop a system for recognizing early warning signs for relapse and increasing awareness of substance-related cues, such as people and places that have previously been associated with substance use. The addition of mindfulness provides clients with a new way of processing situational cues and monitoring one’s reaction to environmental contingencies. Clients are taught to observe pleasant and unpleasant sensations, thoughts or feelings, and they are encouraged to accept them without judgment. A major element of the mindfulness training involves teaching clients to direct their attention to the breath in order to calm and focus the mind. Linehan (1993) describes this aspect of mindfulness as “wise mind.” Ultimately, the heightened awareness and acceptance of thoughts and sensations in high-risk situations will result in more adaptive ways of responding to situational cues and a decreased probability of relapse. Repeated exposure to being mindful in high-risk situations without giving into the temptation to engage in substance use or acting impulsively in the presence of substance-related cues will lead to increased self-efficacy and the counterconditioning of the positive and negative reinforcement previously associated with the effects of an addictive substance.

Challenging positive outcome expectancies and educating about the abstinence violation effect remain a major focus of the treatment once the individual has reached their treatment goal. Within the context of mindfulness, clients are encouraged to maintain their focus and awareness on the present moment; thereby letting go of past events (e.g., a violation of abstinence) and not living toward, or making decisions based on, future events (e.g., the expectancy of euphoria after consuming a substance). In addition, praising clients for their efforts, validating the challenge of mindfulness practice, and recognizing small steps toward positive change will help build client self-efficacy.

**DISCUSSION**

In the past 10 years, mindfulness-based approaches have received considerable attention in the empirical literature and popular press, although the core of these approaches dates back to the ancient practice of Buddhist meditation. We believe that the synthesis of relapse prevention and mindfulness meditation techniques as a treatment for addictive behaviors will provide a more robust and durable treatment. Preliminary data provides initial support for the effectiveness of one type of mindfulness practice in reducing alcohol and drug use, and substance use-related problems, however future studies will need to evaluate the efficacy and effectiveness of mindfulness-based relapse prevention as a treatment for addictive disorders. Likewise, investigations on the mechanisms of action in mindfulness-based relapse prevention may be carried out by comparing relapse prevention, relapse prevention + mindfulness (mindfulness-based relapse prevention), and mindfulness-only in a randomized controlled trial. The addition of mindfulness-based techniques may ease the arduous process of behavior change and serve as an effectual adjunct to existing treatments.

To the extent that mindfulness-based interventions are equally effective as other empirically validated approaches (e.g., CBT, contingency-management, motivation enhancement, 12-step facilitation) mindfulness meditation may provide an alternative to these more cost-prohibitive treatments. Meditation is inexpensive (i.e., Vipassana courses are free), widely accessible, and possibly more acceptable than more Western forms of treatment. The process of
incorporating a mindfulness practice and learning to accept and tolerate urges is comparable to the process of building a repertoire of coping skills within relapse prevention therapy. Both techniques require practice and continued learning, whereby people develop their skills through a succession of lapses followed by prolapce. The use of mindfulness skills may ease this learning curve and enhance long-term success, providing support for the old adage that "slow and steady wins the race."

REFERENCES


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