



Venerable Shi Fa Xun from Singapore was ordained in 1992 in Taiwan by Venerable Wu Yin of Luminary Bhikshuni Sangha, where she also went through five years of monastic training in the institute. Upon completion of her monastic training in 1997, Venerable Fa Xun returned to Singapore and began conducting Dharma classes in English and Mandarin for both children and adults. In 2001, Venerable continued to pursue her education by doing a Bachelor of Arts and Education degree at the University of Western Australia. In 2009, she completed her Honours Degree with a thesis entitled “The ‘Other’ Path: The Bhikkhuni Quest for Liberation”. Since then, Venerable has been teaching at various Buddhist centres in Singapore, Malaysia and Western Australia while contributing articles to Buddhist magazines. She is also the author of the book “One Life, Five Precepts”. In 2014, Venerable Fa Xun completed her MA research study on “Mindfulness in Education” with Nan Tien Institute in Australia.

Mindfulness and Loving Kindness In Education

Venerable Shi Fa Xun, M.A.

shifaxun@yahoo.com.sg

ABSTRACT

Mindfulness and Loving Kindness (MILK) is an eight-week program specifically designed for pre-adolescents. It is incorporated into the classroom utilising both the practice of mindfulness and loving kindness. The three key components namely, calming the mind, developing self awareness and developing loving kindness, aim to provide children with the strategies of ‘coming back’ and attend to their experiences with love and care. This study seeks to explore the impact of MILK on pre-adolescent children: whether it brings about emotional wellbeing. The results clearly show a correlation between MILK program and

positive emotions: positive emotions increased and negative emotions decreased. Recommendations are made for future studies in this emergent field of interest.

Introduction

Recent studies have shown that a growing portion of school children display a myriad of social, emotional and behavioural problems that interfere with their learning (Greenberg et al. 2000, p. 2). Increasingly educators are realizing that contemporary education has invested heavily on the ‘outer’ development in the areas such as science and technology and neglected the ‘inner’ development such as emotional wellbeing (Astin 2004, p. 2). In response, many have called for a broader agenda that balances the ‘outer’ and ‘inner’ development by including social and emotional learning into the school curriculum (Greenberg et al. 2003, p. 466); of which mindfulness training is used to help children develop emotional wellbeing.

Research has shown that mindfulness practice does improve attention, creativity and emotional intelligence (see Garrison Institute Report 2005; Meiklejohn et al 2012 for review). Indeed, there is a growing interest in embracing mindfulness training as an integral part in education to help children to cope with academic stress and to enhance educational goals. As such many mindfulness programs have been developed.

Research has found a positive correlation between emotional competency and psychological health (Schonert-Reichl & Lawlor 2010, para. 2) and suggest we should intervene since very few children will manifest serious problem behaviours by the end of elementary school (Schaps and Battistich 1991, p. 129).

Although studies have suggested the effectiveness of mindfulness practice (Semple et al. 2010, p. 219), there are very few research studies on mindfulness practices with children. Also current programs focus primarily clinical population (see Burke 2010; Meiklejohn et al 2012 for review) using breath and body sensation instead of developing ways to promote positive emotions.

The practice of loving kindness and compassion explicitly cultivates positive emotions that lead to wellbeing and happiness. The scientific community is beginning to explore these practices and it's benefits in mental and physical health (Germer & Siegel 2012, p. 19). Also, neuroscience has provided some insight into the correlation between loving kindness meditation (LKM) and wellbeing (The Science of Happiness 2008; Edutopia 2010) suggesting that the practice of loving kindness meditation helps the facilitation of emotional wellbeing. Research suggests that loving kindness is the potential 'useful strategy for targeting a variety of psychological problems' (Hofmann 2011, p. 11). Although LKM could be important for facilitation of emotion regulation and for wellbeing, research has barely begun.

In summary, the applications of mindfulness training in education are limited in that they focus on special population aiming to help with problems than develop ways to promote positive emotions and the explicit element of 'loving kindness' is missing. In view of these limitations, a combined Mindfulness and Loving Kindness (MILK) teaching program was created to facilitate the development of positive emotion in young children. MILK was developed with the assumption that 'mindfulness' practices would be enhanced when integrated along with 'loving kindness' practices. In conjunction with teaching children to

pay attention to the selected focus, the children are also taught to attend to the selected meditation focus with loving kindness and embrace the experience (breath, body sensation or thoughts) with love and care.

This study seeks to examine whether MILK brings about emotional wellbeing - an increased positive emotions and/or decreased negative emotions. It also seeks to encapsulate how all these emotions affect the children.

Theoretical Background

Mindfulness and Loving Kindness

According to the Pali English Dictionary *sati* has the connotation of memory, recognition, consciousness, intentness of mind, wakefulness of mind, alertness, lucidity of mind, self-possession, conscience, self-consciousness (Rhys Davids & Stede 1994, p. 672). Guanaratana, a contemporary monk/meditator highlights that *sati* is an activity that is pre-symbolic. It deals with levels of consciousness that lie deeper than symbolic thoughts, beyond words. The actual experience lies beyond words and above symbols (Guanaratana 2002, p. 149). In all Buddhist traditions, there is a common understanding that *sati* is ‘an intrinsic awareness’ that is non-physical (Dalai Lama in ed. Goleman 2003, p. 212).

This study follows the definition of mindfulness as ‘the awareness that emerges through paying attention on purpose, in the present moment, and nonjudgmentally to the unfolding of experience moment by moment’ (Kabat-Zinn 2003, p. 144). Mindfulness practice is usually directed to a specific ‘anchor’ such as the breath, body sensation or mental content. The aim is to offer a means of ‘coming back’ to the present moment which develops awareness. This awareness leads to clarity and may further lead to reduce reactivity of mind and body which then bring about calmness and stability.

Loving Kindness is a ‘state of mind which aspires that all sentient beings may enjoy happiness’ and compassion, ‘the wish that all sentient beings may be free from sufferings’ (Dalai Lama 2003, p. 67). LKM is a technique to cultivate and habituate the mind to have good will towards self and others especially in the mist of suffering. The commonly used

method is to focus on good will and send good wishes by generating silent phrases such as ‘May I/you be well and happy’, ‘May I/you be free from fear and worry’. It enables one to pay attention to the experience (physical sensation such as tiredness or mental states such as dejectedness) and embrace the moment-to-moment experience with love and care. ‘Loving kindness’ is an unconditional open-heart wish for self/others to be happy and should not be confused with self-centred love, which has the quality of attachment. In this study, loving kindness and compassion are used synonymously since both techniques evoke kindness.

Brain and Emotional Wellbeing

Salovey and Mayer (1997, p. 8) introduced the concept of Emotional Intelligence, which involves the ability to recognize, understand and manage emotions adaptively to promote emotional and intellectual growth (see Goleman 1995 for an extensive treatment of this construct). Studies show that children with behaviour disorders (anxiety, ADHD) show poor emotional skills (Semple et al 2010, p. 220). Other studies on child development also highlighted that significant and/or sustained stress in childhood is likely to impact on their wellbeing (Meikeljohn et al 2012).

The brain being ‘plastic’ responds to positive/negative experiences. The affective environment produces experience-dependent changes in a growing child that mould the brain structure and function (Edutopia, 2010). The amygdala is the part of the brain that detects danger. When it is activated it closes down other parts of the brain to divert all energy to survival mode and the stress hormone floods through every tissue in the body (Carroll & Shaw 2013, p. 91-92)

The pre-frontal cortex (PFC), which is at the front part of the brain, plays an important role in thought and emotional regulation. People who show much activation of PFC also show much diminished activation of amygdala as well as diminished stress hormones. Studies show that there is a correlation between the practice of loving kindness/compassion and PFC (The Science of Happiness 2008). Davidson suggests that loving kindness and compassion are skills that can be trained. Doing so will shape the child's brain, laying the foundations for all future learning, emotion regulation and social functioning (Edutopia, 2010).

Contextual Background

Singapore was colonized by the British and gained its independence in 1965. The education system follows the British pattern and is very result oriented. Since its independence, the education in Singapore has been extremely competitive. This is partly due to the country's lack of natural resources, leading to a heavy emphasis on human capital. As a result it has produced a 'kiasu'¹ society and an education system that is commonly labelled as 'an overheated pressure cooker'. It is common for children's schedule to be packed with 'enrichment classes' in addition to their heavy workload in school. In recent years there has been a worrying trend of young suicide cases (Chia 2013). Lacking resilience, they cannot even cope with the slightest setback in life! In a recent education reform, the Minister of Education (Heng, 2013) has called for a more 'student-centric' and 'values-driven' education system.

¹ Kiasu in the Hokkien dialect of Chinese, mean "afraid to lose"

Research Method and Procedure

This study uses the MILK program to explore the impact/effects of mindfulness and loving kindness practices on pre-adolescent children.

MILK was developed on the assumptions that pre-adolescent are at the development stage when they experience fundamental changes across almost every sphere of life. Also, at this stage, they are old enough to consider the perspective of others and positive development could be cultivated (Schonert-Reichl & Lawlor 2010, para 11).

MILK program is guided by the Buddhist theory of mindfulness and ‘loving kindness’; focusing on both the practices of mindfulness and loving kindness in relation to emotional wellbeing. However, they have been adapted into secular settings in order to respect the multi-cultural and multi-faith context within schools. It was also designed in compliance with the Singapore public school system that demands secularisation.

MILK was particularly developed to suit pre-adolescents. First, the formal meditation sessions were kept short and manageable. Second, because at this age they might not be able to grasp the abstract concepts of mindfulness and loving kindness, the bulk of the lesson was dedicated to the cultivation/practice (direct experience) rather than lecturing. Third, the teaching was adjusted to suit their mental abilities, and primarily related to their current situation, while aiming to make it lively and interesting. For example, loving kindness in the context of school children would mean allowing themselves to rest and relax when the bodies are tired and sending loving kindness to themselves.

There are three key components in this program:

(1) Calming the mind. Students are taught to be mindful of their breathing; using breathing to calm their mind.

(2) Developing self-awareness. Students are taught to be mindful of their feelings, thoughts and emotions.

(3) Developing Loving Kindness. Students are taught to cultivate a positive intra and inter personal relationship through the practice of loving kindness.

A letter was sent to inform parents about the program. A consent form was attached for parents to enrol their children into this program. Parents were informed children could opt out anytime. The procedures used to obtain participants were done in accordance to Ethic approval Board.

Nineteen (19) students, from five different classes participated in this program. They came from year four (aged ten), Chinese Language class. The overall academic performance of these children was low but they had no behavioural problems. They came from middle-income Chinese families. Due to the difficulty in gaining access to school- children, there was no control group; all participants received the same training.

This eight-week program was incorporated into the classroom utilising both the practice of mindfulness and loving kindness that provides children with the strategies of ‘coming back’ and attending to their experiences (tiredness/dejectedness)

Children were trained twice a week for eight weeks. There were two sessions in one day: the first during a twenty- minute -period before the start of school, and the second during the final ten minutes of recess. Hence, there is a total of sixty minutes of training per week.

This program was student-centred and active-based; the bulk of the lesson was dedicated to the students' practice in the cultivation of mindfulness and loving kindness rather than explaining the concepts of mindfulness and loving kindness. The twenty- minute morning sessions (before the school started) starts with mindful breathing. Then students were introduced to a topic followed by a short activity. The topics covered over the eight weeks included: (1) Introduction to mindfulness practice, (2) Knowing the 'present' moment, (3) Developing stability and attention, (4) Awareness of body sensations, (5) Awareness of thoughts and emotions, (6) Introduction to loving kindness, (7) Sending loving kindness to oneself and others, (8) Celebrating success. The morning session ended with a short silent meditation. The ten minutes recess sessions were conducted in the classroom where students sat on the chairs. The instructor guided the meditation; starting with mindfulness of breath followed by LKM by focusing on the silent phrase(s) 'May I/you/all beings be well and happy', 'May I/you/all beings be free from fear and worries'.

During the first week, the children were first taught mindfulness of breathing which is simple and direct. The breathing enabled the children to 'come-back', and calm their mind. Having learnt to stabilize their mind, in the second and third week, they learnt to cultivate awareness through activities such as mindful stretching and mindful eating. On the fourth and fifth week they were taught to develop a positive attitude towards themselves by embracing loving kindness. They were taught to reflect on their meaning, and then generate goodwill and feel the sensation around the heart area. By the sixth week, they were introduced all the topics

and continued to deepen their practice. Mindfulness of breathing was retained throughout the entire program; and the practice of 'loving kindness' increased progressively.

The guided meditations in the recess sessions were experiential and related to school life. For example, when children were tired, they were taught to sit (not doing anything) and observe their breath, attend to their experience (tiredness/dejectedness) with love and care. The silent phrase(s) used to evoke kindness varied depending on situations. For example, in relation to tiredness, 'May I be well and happy' was used; in relation to test anxiety, 'May I be free from fear and worry' was emphasised'. The constant practices throughout the eight weeks conditioned the children to direct their thoughts towards kindness.

Measurement and Instruments

Given that teaching mindfulness in schools is in its infancy stage, it was challenging to find instruments that were appropriate for this program. Since emotions are personal and experiential (subjective), this study chose to measure them through the first person subjective experience.

A logbook with a set of stickers with different facial expressions and the corresponding words that relate to the facial expressions (see Appendix One) were created which served as a diary for students to identify and describe their experiences. Students kept a record of their emotion each time they would come in and out of the class. It was assumed that the images of facial expressions offered a tool for them to identify their emotions as well as gave them the vocabulary for expression.

There are altogether eight positive emotions namely, 'Calm/Peaceful'², 'Happy', 'Excited', 'Confident', 'Attentive', 'Interested', 'Alert', 'Loved'; and nine negative moods namely, 'Frustrated', 'Sad', 'Worried', 'Lousy', 'Upset', 'Oops', 'Inattentive', 'Angry', 'Disappointed'. These emotions were adapted from the PANAS (Watson et al, 1988, p. 1064). They were modified to suit children in school, 'Calm/Peaceful', 'Happy', 'Confident' 'Loved' were included for these were the common emotional states after meditation practice.

At the beginning of the program, the instructor explained to the students the meaning of each facial expression and the students were told to choose only one sticker at a time that

² For simplicity, 'Calm' will be used for the rest of the essay.

represented their emotion and the position to place the sticker in the logbook. In the first four weeks, students were trained only to identify and label their emotion. After the fourth week, students were asked to narrate their experience next to the chosen sticker in the logbook. However, the narrations were optional.

An open, accepting and receptive attitude was maintained throughout the data collection process, making provisions for children to feel safe so that they could freely and genuinely express themselves. The 'Don't Know' sticker was included to allow the child to be unsure of their feeling. Their choice of stickers was not limited to the given set of stickers; they were free to express whatever emotions they had through the words recorded in the logbook. They could also draw other facial expressions and identify them with words, such as 'Sleepy', 'Relaxed' all of which were not within the available set of stickers.

The descriptive element provided the researcher with in-depth understanding of the emotional wellbeing of the children. It was presumed that the method of data collection that allowed children to choose how they felt and narrate their feelings, would yield a more accurate result in comparison to the usage standard questionnaires. In the original PANAS scale, participants were asked to respond to a fixed set of emotions with a standard measuring scale. This would mean that participants have to rate the given emotion regardless of their actual feeling. In contrast, in the present study students were asked to choose one emotion that resembles their immediate emotional state. This would capture the actual feeling and yield more accurate results. Other data collected include letters from students and feedback from teachers.

All the entries in the logbooks by the children who participated in MILK were collated. The stickers were tabulated according to the emotions and the check-in/out periods. The additional emotions that students entered which were not within the set of stickers were classified according to the nature of emotions. For example, 'Active', 'Relaxed', 'Relieved', 'Playful' are classified as 'Other +' for positive emotions; and 'Bored', 'Confused', 'Dreamy', 'Hurried', 'Exhausted', 'Tired', 'Sleepy', 'Scared' were classified as negative emotions. If students were unsure of their emotion they classified them as 'Don't Know', if they were absent or had forgotten to put the stickers in, it was classified as 'Void'. In cases of double entries, only the first entry was considered. Each classification (emotion) in the check-in and check-out sessions was totalled separately. The criteria for classifying positive/negative emotions are whether it leads to positive/negative state of mind, and if there is clarity in this emotion. By counting the stickers, it was measured if there was an increase in positive emotions and a decrease in negative emotions. Next the trend of changes was observed: (a) positive emotions to positive emotions (b) positive emotions to negative emotions (c) negative emotions to negative emotions (d) negative emotions to positive emotions. Finally, the total number of each emotion throughout the whole program was compared in order to explore the changes in emotions after the sessions. Essentially, the frequency of emotions that were experienced by the children through each individual emotion was measured to explore the impact/effects of MILK on children. In addition their narratives in the logbook and feedback letters were analysed, aiming to achieve an in-depth understanding of the emotional wellbeing of the children.

Results

The impact of MILK on the emotional wellbeing of children, focusing on an increase in positive emotions and/or a decrease in negative emotions was the main target of this research.

Charts 1 and 2 are detailed breakdowns of the number of stickers chosen for each emotion when they check-in and check-out respectively. The X-Axis shows the various emotions and the Y-Axis the total number of stickers throughout the entire program. Among the negative emotions, 'Worried' and 'Lousy' are prominent at check-in but drop distinctively from 27 stickers to 7 stickers and 47 stickers to 3 stickers respectively when checking out.

Chart 1: Breakdown of each emotion when check-in

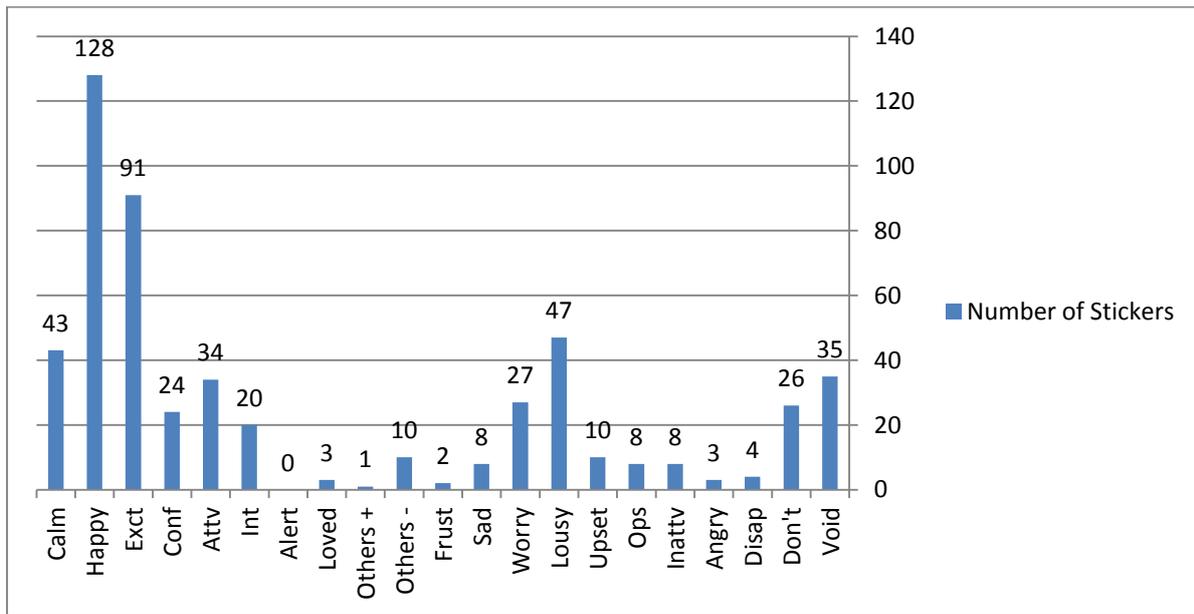
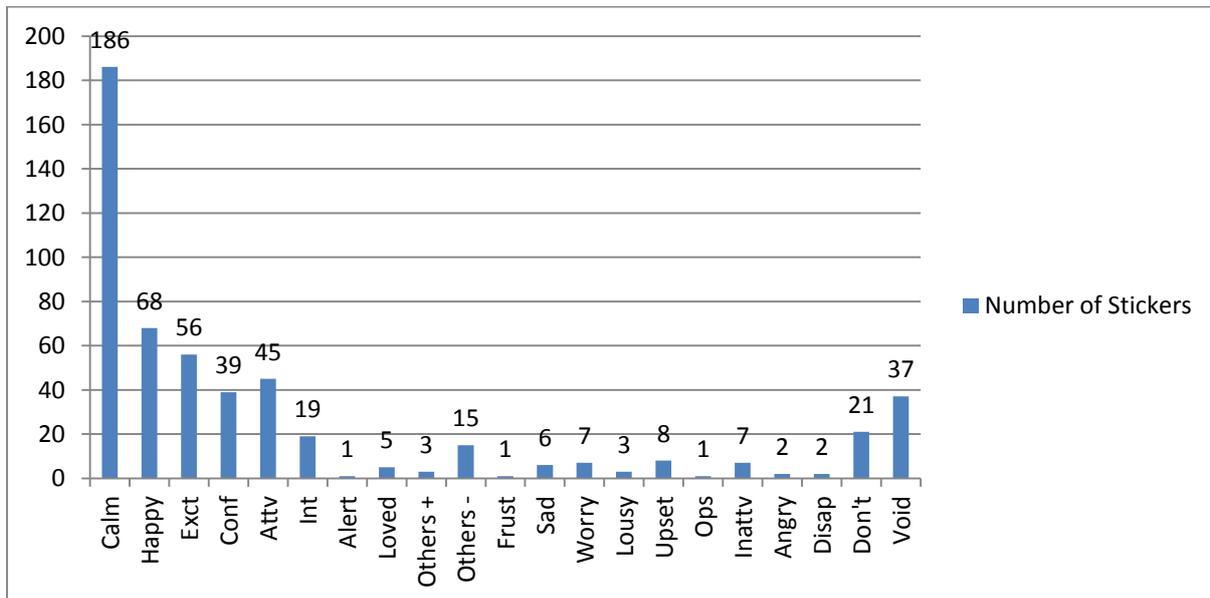


Chart 2: Decrease in negative emotions



There is a total of 344 counts of stickers with positive emotions when checking in and this increases to 422 when checking out; a 23% increase in positive emotions. There is a total of 127 counts of stickers with negative emotions when checking in, and this is reduced to a total

of 52 counts of stickers with negative emotions when checking out; a 59% decreased in negative emotions after the whole program.

Chart 3: Increase in positive emotions

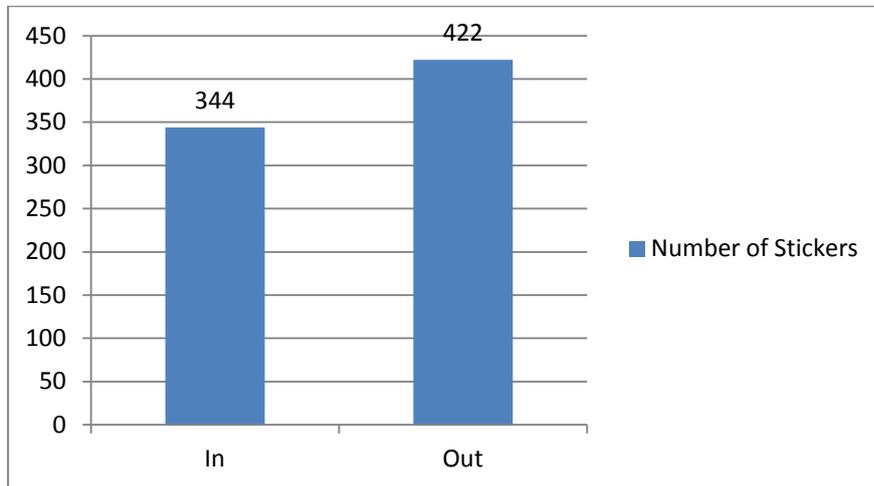
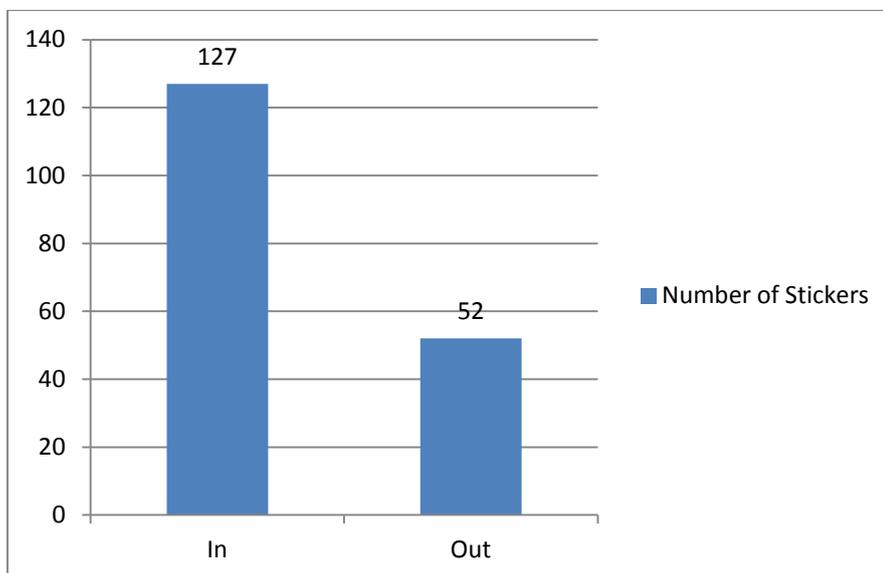
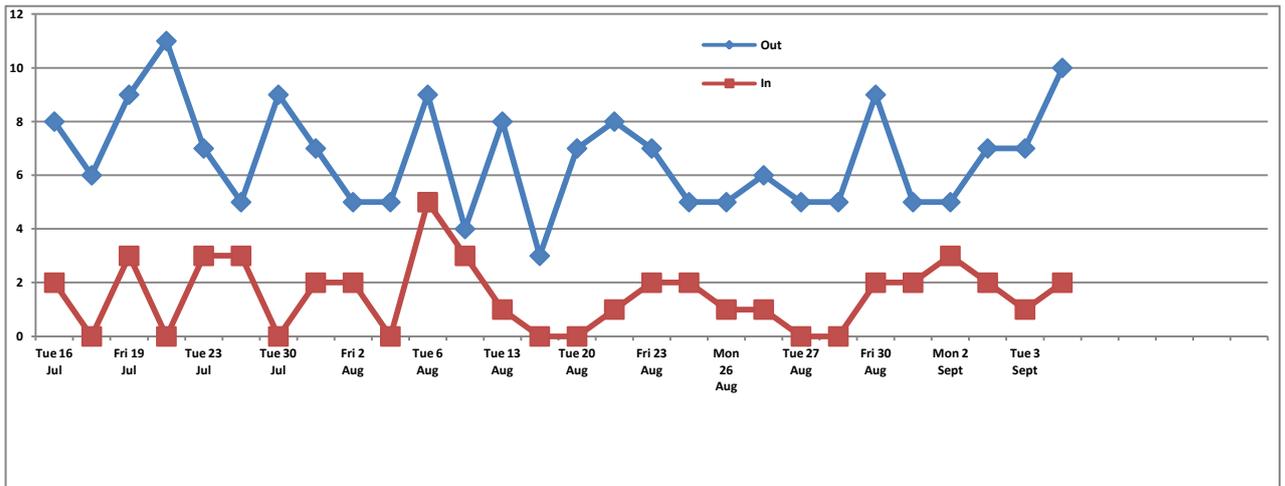


Chart 4: Decrease in negative emotions





Graph 1: Number of Calm stickers of each session

Graph 1 shows the number of students feeling ‘Calm’ when checking in and out of each session. The average number of students who check-in with ‘Calm’ is 1.5 and 6.6 at check-out, an increase of 5.1 stickers. The graph shows a consistent increase in feeling ‘Calm’ after each session.

Overall, the quantitative data shows an increase in positive emotions and a decrease in negative emotions with the shift towards ‘Calm’ being distinctive. Amongst all emotions, the proportion for ‘Calm’ was 8.1% when check in, and shifted to 35% when check out.

Discussions and Implications

Although the quantitative results in this study show that the children are generally emotionally healthy, their narratives highlight some ‘unseen’ problems that are not often obtainable by quantitative data. In the category of ‘Worried’, it’s common cause was that the children were worried to be late for school and the impending school tests/examinations. Below are their narrations.

JH: Because I may be late

JJ: Because at the last 3 periods I have Malay instrument playing exam

YY³: Just done my science test (1), I worry cos I’m late (1)

ZY: might fail my science test

According to a report by Ministry of Social and Family Development, exam anxiety was one of the main causes of unhappiness (stress) among children in Singapore. A greater portion of children fears test/examinations (36%) more than their parents or guardians dying (17%) (Ministry of Social and Family Development n.d). The stress experienced by children may eventually result in a depleted immune system and a cycle of stress (Napoli 2005, p. 104).

While some degree of stress may be helpful for academic achievement; studies show that the brain is built over time; excessive and sustained stress damages the architecture of the developing brain, not only will it impact factors specific to learning, but the wellbeing of growing child as well (Meikeljohn et al. 2012). It could also lead to vulnerable life long

³ The entries are taken from different sessions that are separated by comma. The number in the bracket denotes the number of times.

problems in learning, behaviour and overall health. Daniel Goleman (2006, p. 268) warns that stress

Handicaps our abilities for learning, for holding information in working memory, for reaching flexibility and creatively, for focusing attention at will, and for planning and organizing effectively.

In the category of 'Lousy', the common narrations were sleepy and/or tired.

YW: I feel lousy because I'm very sleepy (1), I'm sleepy.

XY: Tired because just ran to school and wake up too early but still a bit late.

WY: I feel lousy because I am tired (1), Cos I'm tired (1).

JJ: Wake up early in the morning and still feel sleepy.

YY: I'm so tired (1), tired (1).

JH: Cos I just woke up.

When I included the sticker 'Don't Know' to provide the space for children to be unsure of their emotions, it is interesting to note that the children were clear of their 'Don't Know'.

The common narrations were sleepy and/or tired as indicated below.

JJ: Don't know how I feel now.

JJ: feel a bit tired and sleepy.

JJ: I don't know how I feel, so tired.

DS: Simply don't know cos I'm tired.

DS: Cos I'm tired (2)⁴.

The qualitative data show that some children were exhausted. This implies that when the children are exhausted in pursuit of achievement, it becomes much more difficult for them to develop a clear mind-set necessary to achieve their goals. Some even 'shut off' their mind and stop thinking as in the case of JJ and DS. Worse still, they stop having fun and interest in their studies, which is detrimental not only to their learning, but also their quality of life in school.

Because these mental states are felt 'internally', and at this stage, they do not display any behavioural problems, their 'voices' are often unheard and hence their issues are left unattended. This means that these children could be at risk without any display of disorder and are suffering without any help.

In the children's letters, among other adjectives, 'Calm', 'Peaceful', 'Happy', 'Rest' and 'Relax' are the words that the children frequently used. The following statements express their experience.

DS: Thank you for teaching me to love my self [self] and relax,
please come back!

YX: Yes, I like the lesson because it makes me peaceful....I am
managing myself tire.[managing my tiredness]

⁴ There are two entries at different sessions but with the same reason.

WY: 谢谢你教我怎么让自己轻松 (Trans: Thank you for teaching me how to relax myself)

BE: I like mindfulness class because I can learn to keep my mind calm. I like the part where we lie on the floor and rest, that can keep me calm and peaceful. I feel happy and calm every time at home and in school. I can manage myself when I am angry.

XY: I love the mindfulness class ~ I like the mindfulness eating, I am happy and relax at class and at home.

Below are the children's narratives of 'Calm' in their logbooks

JJ: Feel Calm, very calm and happy.

HJ: I feel relax (1), I feel relief (1), It's quiet (1), The class is peaceful (1)

DS: I feel peaceful.

MG: I feel peaceful [be]cause I have a calm heart after meditation.

YX: Cos I'm not tired (1), Cos I am restful (1), Cos I'm happy (1).

YW: Last nite I slept well (1), I feel peaceful because I am calm now (1).

JH: Cos I just meditate.

When HJ came to ask for the sticker ‘relief’, his friend suggested ‘relax’ but he was very firm and specific on having a ‘relief’ sticker. In his letter, he mentioned ‘if I feel tired my aunt/[guidance] will not ask me to take a rest not a [at] all. HJ’s story reflects parenting style in Singapore as well as the children’s yearning. Influenced by Confucianism, Singaporeans value hard work. Some even feel guilty when taking rest. Because taking a rest could be seen as laziness, these exhausted children might not get the rest they need. In this program children were taught ‘not doing’ and to embrace their tiredness and dejectedness with loving kindness. HJ’s ‘relief’ seems to reflect that finally someone has acknowledged and attended to his needs and allowed him to rest. HJ’s experience could be just the tip of the iceberg.

According to Sander’s cognitive-energetic model, the brain is constantly aroused during play (pushing/catching, etc) to respond to stimulus (Tomporowski 2003, p. 318). This implies that energy is lost and the mind is not fully at rest during play. In mindfulness practice, by ‘not doing’ and observing the breath, the breathing regulates the autonomic nervous system (Napoli et al 2005 p. 101) and increases the heart-brain synchronization that allows the body, brain and nervous system to function in harmony (Hart, 2004, para. 14⁵). Accordingly, the brain is either in reactive or receptive mode: when it is un-mindful, it is in reactive mode and enters into the fight-freeze-flight, when it is mindful, it enters the receptive mode and the nervous system relaxes (Germer & Siegel 2012, p. 301). Hence, a program like MILK helps to channel positive energy that nourishes the mind and body, bringing about calmness.

⁵ *Journal of Transformative Education* Vol 2, No. 1, Jan 2004, pp. 28-46.

While mindfulness has the effect of quality rest, it should not be equated to resting. A study comparing mindfulness practice and napping shows an increase in standardized measure of functioning⁶ for those practicing mindfulness and none for those napping (Hart 2004, para. 6). In mindfulness practice, while the mind is relaxed it is also open, focused and alert at the same time. The loving kindness element further enhances this highly efficient state of harmony with warmth and peace. According to Kabat-Zinn (in Goleman ed 2003, p. 197-199), the cultivation of loving kindness enables one to get in touch with the sense of 'self - love'. When the warm feeling arrives out of love, it clears the channel for a deeper sense of wellbeing inside.

With increase in stress and anxiety levels, a program like MILK helps children to channel their energy more positively, building their resilience and strengthening their emotional wellbeing. YW says 'When I am tired I will go to corner to rest for 3 minutes'. YX claims to be managing her tiredness well; BE is able to manage himself when he gets angry; XY will meditate when she is sad; and WZ says he is 'not feeling any sleepy anymore' and will meditate when he gets angry with his brother. All these statements suggest that children are able to use the skills developed during MILK sessions in many situations and life domains, not simply during the session per se.

⁶ The standardized measures included such areas as the ability to reason in novel situations, speed of information processing, creative thinking, and anxiety level (Hart, 2004, for detailed discussions).

Limitations and Future Studies

Given the preliminary nature of this study, results produced are only tentative. There are various limitations. Firstly, this study is limited by its small sample size. Secondly, while MILK indicates a positive shift in its participants' emotions, it only shows the correlation between this program and positive emotions. Without control group comparison, it is not possible to attribute change to the MILK program. Thirdly, my experience as a Buddhist nun and my passion towards the MILK program could have some impact on the result. It is my contention that trainers (teachers) should be trained in mindfulness practice and be practicing mindfulness to be able to teach the program effectively. However, more studies need to be carried out.

Conclusion

As pre-adolescence is a critical point for developing positive emotions and results show a correlation between MILK program and positive emotions, MILK is a potentially promising way of promoting their emotional wellbeing.

As this field is still in its infancy stage; more documentation is needed. The 'additional' emotions collected during this study help us to understand the state of emotional wellbeing of young children which could also be used for further research.

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