

Mindfulness-Based Cognitive Therapy: An Effective Counselling Tool for Enhancing Adolescents' Psychological Well-Being

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Abstract

This paper explores mindfulness-based cognitive therapy (MBCT) as a potent tool for boosting adolescents' psychological well-being. Adolescence is a crucial development phase that brings about multifaceted changes and challenges that significantly impact well-being and mental health. Inadequate management of these emotional strains can lead adolescents towards behaviours detrimental to their psychological well-being. The study recognizes the pressing need for effective strategies to address the psychological dilemmas faced by adolescents amid prevailing issues like violence, poverty and stigma. Combining cognitive behaviour therapy with mindfulness strategies, mindfulness-based cognitive strategy emerges as a promising intervention. It aims not to alter specific conditions but to encourage a transformative lifestyle and mindset towards thoughts and emotions. With its foundation in an 8-session group program initially designed for recurring depression prevention, MBCT's applicability has expanded across various psychiatric conditions. It is primarily on mitigating relapse among individuals prone to depression and anxiety by fostering a new approach to dealing with mental states. Consequently, this review suggests MBCT as a valuable alternative to traditional psychotherapy for adolescents in enhancing their psychological well-being.

Keywords: Mindfulness-Based Cognitive Therapy, Effective Counselling Tool, Adolescents, Psychological Well-Being

Introduction

The period of adolescence is a transitional period between childhood and adulthood. The stage is a period of physical, cognitive, social and emotional changes that involve experimentation and risk-taking (Ogunsesan et al., 2023). The transition from adolescence to adulthood is a critical period for every individual. Adolescents experience some critical changes during this transition. During the adolescence stage, physical changes in distinct parts of the brain bring about individual cognitive and behavioural changes (Chu & Mak, 2020). This stage differs in terms of demands and responsibilities. They are saddled with many responsibilities, spend more time with peers, and live outside parental care. These multidimensional changes influence their well-being and mental health. When these emotional tensions are not minimised, they might engage in activities that threaten their psychological well-being (Chu & Mak, 2020). How adolescents cope with stress or emotional tensions depends on their differences or personality disposition. As a result, any adolescent witnessing psychological unrest may develop psychological distress (Olasoji et al., 2022). Psychological well-being is about lives going well. Psychological well-being can be defined as positive feelings, good self-esteem, and the absence of negative feelings (e.g., symptoms of depression or anxiety) (Sado et al., 2020). It combines feeling good and functioning effectively (Olayiwola-Adedoja et al., 2024).

Psychological well-being combines positive affective states such as happiness and functioning with optimal effectiveness in individual and social life (Ogunsesan et al., 2023). Thus, an adolescent with stable psychological well-being is expected to feel happy, capable, well-supported and satisfied with life with little or no mental stress. Meanwhile, it can be said that psychological well-being is a set of features involved in positive human functioning that includes several resilience-related aspects such as maturity, purpose in life, and self-efficacy, among others. Based on the eudemonic perspective, the most frequent criterion of psychological well-being is linked to the

individual's sense of self-acceptance, which can be defined as a central feature of mental health as well as the characteristics of self-actualisation, optimal functioning and maturity (Kosugi et al., 2021).

However, various attempts have been made to alleviate the psychological problems of adolescents, yet this is far from been solved. In this study, it was perceived that mindfulness-based cognitive therapy could be an effective counselling tool capable of handling psychological challenges among adolescents. The therapy has been gaining momentum in recent years in solving some psychosocial problems. Mindfulness-based cognitive therapy (MBCT) combines features of cognitive behaviour therapy. It is a counselling technique for the prevention of psychological problems such as self-esteem, anxiety, and aggression (Ogunsesan et al., 2019). It can be used for a series of mental illnesses. Rather than modifying or tackling specific ailments, the MBCT encourages clients to adopt a new way of life and relate to their ideas and feelings (Kawakami *et al.*, 2020). Mindfulness-based cognitive therapy (MBCT) was developed to reduce relapse in persons with recurrent depression and anxiety and those vulnerable to episodes of depression and anxiety. MBCT includes simple breathing meditations that can aid adolescents to become more aware of the present moment, including getting in touch with moment-to-moment changes in the mind and body.

Mindfulness-based cognitive therapy (MBCT) also includes psycho-education on depression and anxiety and several exercises from cognitive therapy that demonstrate the association between thinking patterns, styles, feelings and behaviour, and ways individuals can look after themselves when they feel overwhelmed by low mood or anxious thoughts (Musa et al., 2021). Adolescents with depression and anxiety symptoms often have the recurrent experience of trauma, loss, and uncertainty, resulting in hopelessness, internal stigma, and in many cases, self-loathing and low self-esteem. Many would either have been denied therapy in the past or not benefitted from therapy because of insufficient adaptations. Mindfulness-based therapy also offers many adolescents with psychological problems new ways of seeing old problems and by so doing, changing the relationship they have with the everyday care of life. MBCT can help adolescents recognise and observe more clearly patterns of the mind and to create distance from thoughts that would otherwise affect their mood in an unhelpful way (Musa et al., 2021).

Mindfulness-based cognitive therapy relies more on reducing experiential avoidance by enabling individuals to become aware of and normalize emotions and bodily sensations without engaging in any futile effort to challenge and rid themselves of these experiences (Musa et al., 2021). This process relies less on a verbal exchange between a therapist and client which some adolescents with psychological problems find difficult. There is little emphasis in MBCT as in conventional CBT on changing thoughts associated with beliefs. The focus is on systematic training, to be more aware, moment by moment of physical sensations and of thoughts and feelings as mental transient events in any given moment; letting go of these thoughts and sensations without getting caught up by them. Such abstract notions are simplified and made more concrete for the client. MBCT relies more on promoting radical acceptance of oneself, which is the catalyst for change. MBCT is mostly skill-based, offering clients a range of strategies that will enable them to be more receptive and flexible and have greater control over their behavioural and emotional responses to events in their lives (Musa et al., 2021).

MBCT is now a generally accepted, evidence-based treatment approach for psychological disorders such as depression, anxiety and insomnia (Chukwuere, Pienaar & Sehularo, 2020). Meta-analytic studies have shown that MBCT is the most effective treatment for chronic depression but has shown limited efficacy in people with fewer than three episodes of persistent chronic depression (Chukwuere et al., 2020). Emerging research into the efficacy of different methods of mindfulness as a therapeutic technique for adolescents is encouraging. The effectiveness of these stand-alone interventions has been demonstrated in the treatment of aggression in individuals with mild to moderate individual disability in a group setting, in the care of sex offenders, and as a ward-based program for medium-secure attack care in women (Shearin & Brewer-Mixon, 2020). The goal of the MBCT programme is for people to draw on existing research and clinical studies that indicate that mindfulness-based approaches and

strategies can lead to behavioural modifications and stable psychological well-being (Shearin & Brewer-Mixon, 2020). Mindfulness-based cognitive therapy (MBCT) is expected to alleviate some psychological problems of adolescents such as addictions, substance abuse, anxiety and other behavioural and emotional issues.

However, earlier research had been conducted on the effectiveness of mindfulness-based cognitive therapy among depressed individuals with disabilities in Nigeria (Musa et al., 2021). Yet, information regarding MBCT as an effective tool for adolescent psychological well-being remains sparse, variant, and inconclusive across the empirical studies. Hence, this study deems it fit to fill the existing gaps. Therefore, efforts geared towards investigating mindfulness-based cognitive therapy as an effective counselling tool for enhancing adolescents' psychological well-being in Nigeria necessitate this study.

Objectives of the Study

- (a) To assess the impact of MBCT on various dimensions of psychological well-being among adolescents, including emotional regulation, self-esteem and resilience
- (b) To determine how MBCT contributes to reducing symptoms of anxiety, depression and stress in adolescents and explore its effectiveness in enhancing overall psychological health
- (c) To measure improvements in mindfulness skills following participation in an MBCT programme

Concept of Psychological Well-being among Adolescents

Psychological well-being consists of self-acceptance, positive relationships with others, autonomy, environmental mastery, a feeling of purpose and meaning in life and personal growth and development (Chukwuere, Pienaar & Sehularo, 2020). Psychological well-being is attained by achieving a state of balance affected by both challenging and rewarding life events. Psychological well-being is multidimensional and includes both emotional and cognitive elements. Mahlo and Windsor (2021) considered well-being in terms of positive effect as opposed to negative effect. Chukwuere et al., (2020) further stressed that satisfaction with life refers to a global appraisal of well-being. The emergence and growth of positive psychology has led to an increase in well-being research, which has produced two theoretical approaches: hedonic and eudaimonic (Musa et al., 2021). The hedonic view reflects the notion of well-being as an outcome, consisting of an internal state of pleasure or happiness, and focuses on subjective well-being. From this perspective, well-being is defined in terms of experiencing high levels of positive effects, low levels of negative effects, and a high degree of satisfaction with life (Ibiamet al., 2020). The eudaimonic view on the other side, posited that well-being consists of more than just happiness. Eudaimonic theories consider that not all desired outcomes that a person might value would lead to well-being when they are achieved (Ibiamet al., 2020).

From this point of view, well-being is not an outcome or final state, but a process of fulfilling human potentials (Mahlo & Windsor, 2021). It concerns positive functioning and the development of capacities and virtues. In this field, Ryff's multidimensional model of psychological well-being has received the most empirical support (Shearin & Brewer-Mixon, 2020). According to this approach, well-being is made up of six dimensions: autonomy, or the ability to regulate our behavior, resist social pressure, and follow our convictions, even if they go against the general opinion; environmental mastery, or the ability to manage the context and daily activities; personal growth, which includes a continuous process of developing our potential, the ability to be open to new experiences and the feeling of improving over time; positive relationships with others, defined as the establishment of close, trusting and meaningful bonds with others, as well as showing concern for the well-being of others, and the expression of empathy, affection and intimacy; purpose in life, or setting objectives and goals which give meaning and direction to our lives; and self-acceptance, or the ability to have a positive attitude and feelings of satisfaction and acceptance of ourselves, including both our good and bad qualities (Ibiamet al., 2020). Each of these dimensions represents what it means to be healthy, optimal functioning, and articulates the different challenges that people face in their effort to achieve positive functioning (Shearin & Brewer-Mixon, 2020). In other words, people try to view themselves positively although they are aware of their limitations (self-

acceptance), seek to maintain satisfactory interpersonal relationships (positive relations with others), develop a sense of self-determination and personal authority in their interaction with the context (autonomy), make the most of their talents and abilities to achieve their goals (personal growth), manage their environment to meet their needs (environmental mastery) and find meaning in the effort they make and the challenges they encounter in life (Odgers et al., 2020).

Oguntuase and Sun (2022) offered an alternative multidimensional model of psychological well-being that was derived from theoretical discussions of optimal aging, positive functioning and normal human development. The psychological well-being scales assess individuals' appraisal of themselves and their lives across six conceptually distinct realms of psychological functioning (Obi & Bewei, 2020). These aspects of psychological health include self-acceptance, the capacity to see and accept our strengths and weaknesses; personal growth, realizing our talents and potential over time; positive relations with others; autonomy; environmental mastery; and finding purpose in life by having goals and objectives that give life meaning and direction. Oguntuase and Sun (2022) referred to this construct as positive mental health. Meanwhile, measurement and promotion of adolescent well-being is a desirable social and political objective (Ibiam et al., 2020). Psychological well-being of adolescents means being content with life and understanding an abundance of positive emotions when joined with the absence of psychopathology. According to Renwick et al., (2022), it has been confirmed that the power of well-being scales to predict outcomes, for example, longevity, physical health, quality of life, criminality, drug and alcohol use, employment, earnings and pro-social behavior.

Concept and Use of Mindfulness-based Cognitive Therapy

Mindfulness-based cognitive therapy (MBCT) is a type of psychotherapy that involves a combination of cognitive behavioral therapy (CBT), meditation and the cultivation of a present-oriented, non-judgmental attitude called mindfulness (Ibiam, Bekomson & Angioha, 2020). MBCT was developed by therapists Zindel Segal, Mark Williams, and John Teasdale, who sought to build upon cognitive therapy. They felt that by integrating cognitive therapy with a program developed in 1979 by Jon Kabat-Zinn called mindfulness-based stress reduction (MBSR), therapy could be more effective. MBCT is an approach to psychotherapy that uses cognitive behavioral therapy (CBT) methods in conjunction with mindfulness meditative practices and similar psychological strategies (Arimie & Azuonwu, 2022). Recently, mindfulness therapy has become of great interest to the scientific and medical community in the West, leading to the development of many new innovative approaches to mental health. One such approach is the relapse-prevention treatment for individuals with major depressive disorder. A focus on major depressive disorder and attention to negative thought processes such as false beliefs and rumination, distinguishes MBCT from other mindfulness-based therapies (Ibiam et al., 2020).

Mindfulness-based stress reduction (MBSR), for example, is a more generalized program that also utilizes the practice of mindfulness. MBSR is a group intervention program, like MBCT, that uses mindfulness to help improve the lives of individuals with chronic clinical ailments and high stress. CBT-inspired methods are used in MBCT, such as educating the participant about depression and the role that cognition plays within it. MBCT takes practices from CBT and applies aspects of mindfulness to the approach. This process aims to aid an individual in disengaging from self-criticism, rumination, and dysphoric moods that can arise when reacting to negative thinking patterns. Like CBT, MBCT functions on the etiological theory that when individuals who have historically had depression become distressed, they return to automatic cognitive processes that can trigger a depressive episode (Alichee et al., 2021). The goal of MBCT is to interrupt these automatic processes and teach the participants to focus less on reacting to incoming stimuli and instead accepting and observing them without judgment. Like MBSR, this mindfulness practice encourages the participant to notice when automatic processes are occurring and to alter their reaction to be more of a reflection.

Concerning development, MBCT emphasizes awareness of thoughts, which helps individuals recognize negative thoughts that lead to rumination. It is theorized that this aspect of MBCT is responsible for the observed clinical

outcomes. Beyond the use of MBCT to reduce depressive symptoms, a meta-analysis done by Alichee *et al.*, (2021) supports the effectiveness of mindfulness meditation in reducing cravings for individuals with substance abuse issues.

Techniques in Mindfulness-Based Cognitive Therapy

Mindfulness-based cognitive therapy builds upon the principles of cognitive therapy by using techniques such as mindfulness meditation to teach clients to consciously pay attention to their thoughts and feelings without placing any judgments upon them. There are several mindfulness techniques and exercises that are utilized as a part of MBCT.

Some of these include:

Meditation: People may practice guided or self-directed meditation that helps them gain a greater awareness of their body, thoughts and breathing.

Body scan exercise: This involves lying down and bringing awareness and attention to different areas of the body. People usually begin at their toes and move up through the body until they reach the top of the head.

Mindfulness practices: Mindfulness involves becoming more aware of the present moment. It could be practiced during meditation, but people can also incorporate these activities into their daily activities.

Mindfulness stretching: This activity involves stretching mindfully to help bring awareness to both the body and mind.

Yoga: MBCT may also encourage people to practice different yoga poses that can help facilitate mindful stretching of the body. Clients may be taught what is known as the three-minute breathing space technique, which focuses on three steps, each one minute in duration: observing experience, focusing on breath and attending to body and physical sensations.

Scope of Mindfulness-Based Cognitive Therapy

Mindfulness-based cognitive therapy can be effective for individuals who have experienced multiple episodes of depression. While it was originally developed to treat depression, it has also been shown to be effective for other uses including:

- i. Anxiety disorders
- ii. Bipolar disorder
- iii. Depression associated with medical illnesses
- iv. Low self-esteem
- v. Unhappiness
- vi. Depression-relapse prevention
- vii. Treatment-resistant depression

Applications of Mindfulness-based Cognitive Therapy

The MBCT program is a group intervention that lasts eight weeks, or in eight sessions. During these eight weeks, there is a weekly course, which lasts two hours and one day-long class after the fifth week. However, much of the practice is done outside class, with the participant using guided meditations and attempts to cultivate mindfulness in their daily lives (Oguntuase & Sun, 2022). MBCT prioritizes learning, how to pay attention or concentrate with purpose, in each moment and most importantly, without judgment. Through mindfulness, clients can recognize that holding onto some of these feelings is ineffective and mentally destructive. MBCT focuses on individuals recognizing and be aware of their feelings instead of focusing on changing feelings. Mindfulness is also useful for the therapists during therapy sessions.

MBCT is an intervention program developed to specifically target vulnerability to depressive relapse. Throughout the program, patients learn mind management skills leading to heightened meta-cognitive awareness, acceptance of negative thought patterns, and an ability to respond in skillful ways. During MBCT clients learn to neutralise

their negative thoughts and feelings, allowing the mind to move from an automatic thought pattern to conscious emotional processing. MBCT can be used as an alternative to maintenance antidepressant treatment. Although the primary purpose of MBCT is to prevent relapse in depressive symptomatology, clinicians have been formulating ways in which MBCT can be used to treat physical symptoms of other diseases, such as diabetes and cancer (Obi & Bewei, 2020). Clinicians are also discovering ways to use MBCT to treat the anxiety and weariness associated with these diseases.

Theoretical Foundations of Mindfulness-based Cognitive Therapy

Psychological unrest of adolescents has become a menace in the society. MBCT was developed as a therapy to prevent relapse in clients with previous episodes of depression. This development was based on cognitive models of vulnerability to depression (Obi & Bewei, 2020). In addition, ideas and concepts from Buddhist philosophy played an important role for the development of mindfulness-based interventions, e.g., Mindfulness-Based Stress Reduction (MBSR) and subsequently MBCT. The efficacy of MBCT focuses on encouraging clients adopt a new way of being and relating to their thoughts and feelings, while placing little emphasis on altering or challenging specific cognitions. The “Bayesian brain theory” has grown in popularity over the last few decades and is presently one of the most influential theories in cognitive neurosciences. Bayes’ theorem dates back to the 18th century and was developed by the Presbyterian priest Thomas Bayes in 1763. In a cognitive science context, it can be understood as describing how “beliefs” should be updated when one receives new information. Bayesian brain theory were of the view that the brain uses probability theory, and specifically Bayes’ theorem, to infer the states of the world that give rise to the sensory inputs it receives. The use of Bayesian theory for explaining perception has a long history in cognitive science and neuroscience. It dates back to work by Helmholtz in the late 19th century suggested that perception corresponds to “unconscious inference. According to a Bayesian view of perception, the brain creates and continuously updates a model of the external world (including the physical environment but also the body), based upon past experience and homeostatic needs (Obi & Bewei, 2020).

Meanwhile, Bayesian theories of brain function are expressed in terms of formal cognitive process models, such as predictive coding and active inference, which have increasingly been used in recent years to describe and understand psychiatric disorders (Arimie & Azuonwu, 2022). An analysis of the concepts underlying MBCT in terms of these models may therefore open up potential new ways of understanding why MBCT is effective in preventing relapse of depression. Furthermore, because Bayesian models like predictive coding make concrete suggestions of how these cognitive mechanisms are implemented physiologically, it may be possible to derive concrete and experimentally testable predictions about the neurophysiological processes that mediate MBCT effects. MBCT considers cognitive reactivity and an overly strong engagement in the doing mode (or more specifically, the employment of the driven-doing mode) as central risk factors for the relapse of depression. MBCT specifically targets these risk factors by encouraging the patients to; cultivate a different mode of mind (the being mode) and reduce cognitive reactivity.

MBCT as an Effective Counselling Tool for Adolescents Psychological Well-being

The primary goal of MBCT is to help clients with chronic depression learn how to avoid relapses by not engaging in those automatic thought patterns that perpetuate and worsen depression. Empirically, mindfulness-based cognitive therapy helps to prevent depression recurrence as effectively as maintenance antidepressant medication did. MBCT utilizes elements of cognitive therapy that help clients recognize and re-assess their patterns of negative thoughts and replace them with positive thoughts that more closely reflect reality. This approach helps clients to review their thoughts without getting caught up in what could have been or might have occurred in the future. MBCT encourages clarity of thought and provides the tools needed to more easily let go of negative thoughts instead of letting them feed your depression.

Much like cognitive therapy, mindfulness-based cognitive therapy operates on the theory that if you have a history of depression and become distressed, you are likely to return to those automatic cognitive processes that triggered

a depressive episode in the past. The combination of mindfulness and cognitive therapy is what makes MBCT so effective. Mindfulness helps clients observe and identify feelings while cognitive therapy teaches how to interrupt automatic thought processes and work through feelings in a healthy way. The above statement was in tandem with a study by Oguntuase and Sun (2022) who revealed that mindfulness-based cognitive therapy can reduce the severity of depressive symptoms as well as help reduce cravings for addictive substances. Thus, MBCT was found to be effective in treating clients who are currently experiencing mild and severe depression and enhancing adolescent psychological well-being.

Implementation of Mindfulness-Based Cognitive Therapy (MBCT)

MBCT is the practice of paying attention in a particular way, on purpose, in the present moment and non-judgmentally. Mindfulness-based cognitive therapy (MBCT) combines a form of meditation with elements of cognitive therapy (Segal et al., 2002). This paper has shown how the MBCT program can be implemented by the therapist to the client for about 8 weeks for a period of 2-hour 15-minute group-training sessions.

Table 1: Summary of activities for implementing Mindfulness-Based Cognitive Therapy (MBCT)

Sessions	MBCT Practices	What is expected to learn
Week 1	Familiarization	The counsellor will introduce himself as a facilitator and other supporting personnel. Participants will be welcomed, and the introduction will be done by one another in a friendly manner.
Week 2	Automatic Pilot	Participants will be enlightened about the programs in detail, and they will be given a chance to ask any questions concerning the program. Participant's details will be taken for record purposes.
Week 3	(Acting without conscious awareness)	The counsellor will explain what depression is, its negative effects, and why it should not be allowed to relapse.
Week 3	Dealing with barrier	Clients will be taught how distraction and rumination will lead to an automatic pilot.
Week 4	Mindfulness of breath and body	Clients will be taught the characteristics of mindfulness like being non-judgmental and focusing on one thing at a time.
Week 5	Awareness of attachment and aversion.	Clients will be given homework to write on things that make them depressed.
Week 6	Acceptance of thoughts and emotions as fleeting events.	Clients homework will serve as a yardstick for the discussion.
Week 7	Decentering and re-perceiving.	Clients will be taught how to deal with those barriers.
Week 8	Awareness of signs of relapse, and develop more flexible, deliberate responses at time of potential relapse.	Clients will be taught about deep meditation and provide an insight into the nature of the mind and its causes such as awareness of how temporary things are and help individuals to become less disheveled in their ruminations.
	Awareness of intention as a skill for dealing with future depression.	Clients will be taught how mindfulness decreases depression and increases greater sensitivity.
		Clients will be taught about breathing meditation awareness.
		Clients will be taught how breathing meditation can decrease depression
		Clients will be asked to practice breathing meditation for 30 minutes after training. Different concentrative meditations will be taught how to pay attention to a single object such as body parts, and how to focus their attention on breath, body, and emotion.
		Clients will be taught how to be sensitive and observant of the activities around them.
		Clients will be taught to be creative and innovative.
		Clients will be taught not to be sentimental in their thoughts, emotions, and expectations.
		Clients will be taught how to accept thoughts and emotions at

fleeting events.
Patients will be taught how to accept their thoughts in a non-judgmental and relaxing of self-criticism.
They will be taught on how to prevent negative emotions and reactions in a distinct way.
Clients must be equipped on how to decenter their negative thoughts and feelings from automatic thought patterns to conscious emotion processing.
Clients will be taught an awareness of intention as a skill for dealing with future depression.
They will be taught that mindfulness is not an unconscious act.
Clients will be taught how to avoid working on autopilot without actual involvement of their minds.
Clients will be taught how to reflect on the effect of the therapeutic session.
Clients will be engaged in a rehearsal session to assess their competency.
Post-intervention measures can be taken for the all the participants.

Conclusion

The transition of life from adolescence to adulthood is a critical period. Adolescents experience some critical periods in life. These multidimensional changes influence their well-being and mental health. When these emotional tensions are not minimized, adolescents might engage in activities that threaten their psychological well-being. Mindfulness-based cognitive therapy (MBCT) is a counselling technique for the prevention of psychological problems such as self-esteem, anxiety, and aggression which can be used for a series of mental illnesses. Rather than modifying or tackling specific ailments, the MBCT encourages patients to adopt a new way of life and relate to their ideas and feelings. Mindfulness-based cognitive therapy (MBCT) has been developed to reduce relapse in persons with recurrent depression and anxiety and those vulnerable to episodes of depression and anxiety. It can be concluded that the efficacy of MBCT focuses on encouraging patients to adopt a new way of being and relating to their thoughts and feelings while placing little emphasis on altering or challenging specific cognitions.

Recommendations and Suggestions

Based on the findings of this review, the following recommendations were made:

MBCT may be offered as a viable alternative to pharmacotherapy for the treatment of depression and anxiety. MBCT encourages the acceptance of what is in the present and helps clients distinguish their thoughts and judgments. Nevertheless, further studies may be carried out on mindfulness-based cognitive therapy as an effective counselling tool for enhancing adolescents' psychological well-being in Nigeria.

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