Garland’s book is a hybrid between a scholarly work that details the conceptual framework of MORE (Mindfulness-Oriented Recovery Enhancement) and a treatment manual, which explicates how to conduct MORE sessions with clients who have substance dependence problems. MORE is based on mindfulness conceived both as a set of “contemplative practices as well as . . . the distinct psychological states and traits cultivated by these practices” (p. 3). However, contrary to the author’s claim, MORE is not innovative “in the sense that it combines mindfulness techniques with principles drawn from cognitive therapy and the positive psychology literature” (p. 5). Numerous authors such as Kabat-Zinn (2011); Segal, Williams, and Teasdale, (2002); and Watts (1975) have developed mindfulness-based therapy models with emphasis placed on cognition. Garland’s approach is unique because it is brain-based and focuses on substance-related disorders, especially substance dependence.

MORE is rooted in the stress-vulnerability model and attends to relapse as a central problem for recovering people and counselors. Garland’s clients are taught an array of coping skills including sensory awareness, cognitive reappraisal, emotional regulation, stress dampening, savoring, shifting attentional bias, decreasing neural and emotional reactivity, and thought suppression. Savoring is an especially pertinent and novel construct that Garland describes in great detail. In his chocolate exercise, savoring is used as an antidote to craving. In one sense, savoring approximates what Glasser (1976) called “positive addiction.” Savoring involves full sensory awareness and functions as a form of enactment by which the client becomes aware of cravings and his or her capacity to control them.

Mindfulness-Oriented Recovery Enhancement for Addiction, Stress, and Pain should be viewed in the larger context of mindfulness-based cognitive therapy as a contribution to the literature. However, practitioners need to be cautioned that the evidence-base, while promising, is far from conclusive.

To his credit, Garland provides a nine-page synopsis of quantitative and qualitative research on MORE. In one study of recovering alcoholic-dependent individuals in a therapeutic community, Garland and his colleagues found that MORE reduced participants’ stress levels by 30% when compared to participants in a comparison support group. Participants in MORE also
engaged in significantly less thought and emotion suppression compared to members of the support group. Research has demonstrated that thought and emotion suppression may actually increase a recovering person’s vulnerability to relapse.

In the same study, MORE participants demonstrated, through the use of a spatial cueing task, a significant decrease in alcohol attentional bias when compared to participants in the support group. Garland, Gaylord, Boettiger, and Howard (2010) noted that individuals who showed the greatest increase in thought and emotion suppression also showed the greatest decrease in alcohol attentional bias.

Garland’s references include 15 citations of his own works. A quick literature search by this author uncovered two additional citations not found in Garland’s book. Nonetheless, the body of evidence supporting MORE is limited. Most of Garland’s works have been published within the past 2-3 years with one article published in 2007. Several articles were in press when Mindfulness-Oriented Recovery Enhancement for Addiction, Stress, and Pain was published.

If used in clinical practice, MORE should be qualified as an experimental treatment that may or may not benefit the client. Given its practical, experiential focus, social workers should find MORE to be easily adaptable to rural practice settings with a diverse clientele. Social work educators who are preparing students for practice with addictions in rural settings will want to use the MORE treatment exercises in class because they are potentially powerful as teaching-learning tools.

References


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