



# The Art of Living Mindfully

## *E-Class Handouts*

Presented by the BC Association  
for Living Mindfully (BCALM)

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## Why Am I Taking This Course?

Write a paragraph, or a few, about what brought you to this course and your hopes for what the course might offer you. At the end of the 8 weeks, re-read this in order to gain insight as to the effect the course/practice has had on you.

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## Contract of Commitment

- I am committed to attending all eight sessions of the Art of Living Mindfully course and to doing the meditation practice and home practice exercises required ( up to 30 minutes per day).
- I will leave my judgements at the door and be open to the lessons, challenges and gifts that the experience in the sessions may offer.
- I will honour this as a sacred time and space – committing to a vow of confidentiality regarding any personal content I encounter during the course and maintaining a sense of respect for myself, the other students and the facilitator(s).
- I will endeavour to arrive on time to the sessions and bring with me a sense of curiosity and trust and a commitment to the work required.

**Name** \_\_\_\_\_

**Date** \_\_\_\_\_

**Facilitator(s)** \_\_\_\_\_

## Home Practice Log – Week 1

| DATES | Practice | Minutes | Comments |
|-------|----------|---------|----------|
| Day 1 |          |         |          |
| Day 2 |          |         |          |
| Day 3 |          |         |          |
| Day 4 |          |         |          |
| Day 5 |          |         |          |
| Day 6 |          |         |          |
| Day 7 |          |         |          |

| Calendar of Pleasant Events |                          |                                                                        |                                                            |                                                           |                                                                   |
|-----------------------------|--------------------------|------------------------------------------------------------------------|------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------|
|                             | What was the experience? | Were you aware of the pleasant feelings while the event was happening? | How did your body feel, in detail, during this experience? | What moods, feelings and thoughts accompanied this event? | What thoughts are in your mind now as you write about this event? |
| MONDAY                      |                          |                                                                        |                                                            |                                                           |                                                                   |
| TUESDAY                     |                          |                                                                        |                                                            |                                                           |                                                                   |
| WEDNESDAY                   |                          |                                                                        |                                                            |                                                           |                                                                   |
| THURSDAY                    |                          |                                                                        |                                                            |                                                           |                                                                   |
| FRIDAY                      |                          |                                                                        |                                                            |                                                           |                                                                   |
| SATURDAY                    |                          |                                                                        |                                                            |                                                           |                                                                   |
| SUNDAY                      |                          |                                                                        |                                                            |                                                           |                                                                   |

| Calendar of Unpleasant Events |                          |                                                                          |                                                            |                                                           |                                                                   |
|-------------------------------|--------------------------|--------------------------------------------------------------------------|------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------|
|                               | What was the experience? | Were you aware of the unpleasant feelings while the event was happening? | How did your body feel, in detail, during this experience? | What moods, feelings and thoughts accompanied this event? | What thoughts are in your mind now as you write about this event? |
| MONDAY                        |                          |                                                                          |                                                            |                                                           |                                                                   |
| TUESDAY                       |                          |                                                                          |                                                            |                                                           |                                                                   |
| WEDNESDAY                     |                          |                                                                          |                                                            |                                                           |                                                                   |
| THURSDAY                      |                          |                                                                          |                                                            |                                                           |                                                                   |
| FRIDAY                        |                          |                                                                          |                                                            |                                                           |                                                                   |
| SATURDAY                      |                          |                                                                          |                                                            |                                                           |                                                                   |
| SUNDAY                        |                          |                                                                          |                                                            |                                                           |                                                                   |

## MINDFUL CONSUMPTION

Mindful consumption includes the diet of the body, the diet of the mind and sensory experiences.

What am I consuming through my reading, media, conversations, etc? How does this contribute to my ill-being or well-being?

What have you consumed this week that may be contributing to your level of stress or well-being?

| Nourishing Consumption | Stressful Consumption |
|------------------------|-----------------------|
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## Inviting a Media Fast

In the spirit of a curious exploration of your consumption and its effects on your wellness, invite a '*media fast*' into your life for the duration of the course. The nature and details of this '*fast*' may differ for each person as only you know where your relationship and attachments to media are more *sticky*. Is it news or Facebook, texting or email? Is it Netflix or Twitter, radio or TV? Be gentle but purposeful. What would happen if you did not listen to CBC on the way to and from work? What would happen if you only checked your Facebook or email inbox once or twice a day?



## Home Practice Log – Week 2

| DATES | Practice | Minutes | Comments |
|-------|----------|---------|----------|
| Day 1 |          |         |          |
| Day 2 |          |         |          |
| Day 3 |          |         |          |
| Day 4 |          |         |          |
| Day 5 |          |         |          |
| Day 6 |          |         |          |
| Day 7 |          |         |          |

## Noticing the Events of Your Day

Make a list of everything you do in a typical day (e.g. getting up, brushing teeth, eating breakfast, commuting, etc.), in order.

Then notice the quality of these events – nourishing, depleting, or both. How can you work with your day, given this understanding?

This image shows a blank sheet of white paper with horizontal blue or gray ruling lines. A large, light gray watermark with the word "BCALM" is oriented diagonally from the bottom-left towards the top-right. The letters are bold and sans-serif. The background consists of evenly spaced horizontal lines across the entire page.

## Getting to Know the Patterns in your Life

What habits, or patterns, keep repeating themselves in your life? Patterns of body/physical sensations, behavior/actions, thoughts, feelings/emotion. What beliefs might you hold about these habits that reinforce them in your life?

|                            |  |
|----------------------------|--|
| <b>BELIEFS</b>             |  |
| <b>BODY<br/>SENSATIONS</b> |  |
| <b>BEHAVIOURS</b>          |  |
| <b>THOUGHTS</b>            |  |
| <b>FEELINGS</b>            |  |

## Home Practice Log – Week 3

| DATES | Practice | Minutes | Comments |
|-------|----------|---------|----------|
| Day 1 |          |         |          |
| Day 2 |          |         |          |
| Day 3 |          |         |          |
| Day 4 |          |         |          |
| Day 5 |          |         |          |
| Day 6 |          |         |          |
| Day 7 |          |         |          |

## Random Acts of Kindness and Senseless Deeds of Beauty

*“Remember there’s no such thing as a small act of kindness.  
Every act creates a ripple with no logical end” Scott Adams*

1) This week, make a conscious decision to practice 1 random act of kindness per day. While it is sometimes easier to practice this with your partner, family, or friends, it can also be quite fun and liberating to practice this with people you do not know well! Describe what happened.

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2) Choose 1 day this week that you will move from your heart over your head. How would it feel to act on every kind, loving, or generous impulse that arises within your thoughts? It is often our logic or inner critic that convinces us against a sincere impulse of compassion or empathy. Give change to someone living on the street; compliment someone you think looks nice; offer a hug to someone you think is having a really bad day...etc. Note down what you did, and how it felt.

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## Resource List

What gives you strength and supports you in *being you*? What people, activities and attributes allow you to live *your* truth? Remember that you have internal and external resources. Family and friends, yoga, knitting, or being out in nature might be examples of outer resources. Honesty, humour and compassion might be examples of inner resources.

## What are your resources?

[illegible]

## Slowing Down

Where in your life do you feel rushed?

Write down 3 areas where you feel rushed. With each of these, make a concerted effort this week to purposefully slow down your pace and allow mindfulness and awareness to surface. What do you notice?

| Areas I Feel Rushed | What I notice when I slow down                                                     |
|---------------------|------------------------------------------------------------------------------------|
| <i>In my eating</i> | <i>I notice the tastes and smells of my food more, and I notice when I am full</i> |
|                     |                                                                                    |
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|                     |                                                                                    |

## Home Practice Log – Week 4

| DATES | Practice | Minutes | Comments |
|-------|----------|---------|----------|
| Day 1 |          |         |          |
| Day 2 |          |         |          |
| Day 3 |          |         |          |
| Day 4 |          |         |          |
| Day 5 |          |         |          |
| Day 6 |          |         |          |
| Day 7 |          |         |          |



## Spring Cleaning

Where in your life is there clutter? Perhaps a room in your home? Your office, car, a closet...etc?

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This week's home practice is an exercise in simplifying your physical spaces.

Choose 1 space to focus on simplifying. Choose an area where you spend a lot of time – your car, bedroom, and/or office are examples.

Begin by using the 3 minute breath and become mindful of how you feel when you are in this space. Notice the thoughts that arise in this space, your emotions.

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Begin to take inventory of what is in this space. What in this space has meaning or an important function in your life? What is simply creating clutter?

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Remove everything that does not have meaning or an important function in your life. Put away in a basement, storage room or attic.

Rearrange and organize the things that remain in this space being mindful of how position and place can affect how a room feels.

When you are done, once again become mindful of your thoughts and emotions now.

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At the end of your week, once you have lived in this renewed space without the clutter, make a decision to give away or throw away what you have been storing. The release will feel great!

Is there anything else in that storage space that is creating clutter and has no meaning or function? Perhaps that should go too?

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## Letting Go

We all have things- people, emotions, memories, sensations, possessions.... – to which we feel some attachment. Sometimes these attachments serve us and sometimes they bring us suffering.

List five things that you feel attached to in your life, where the attachment does NOT serve you. How might you be contributing to this attachment and any resulting suffering? Who would you be and what would your life look like if you were able to loosen this attachment?

| Attachment that are not serving me                        | How I contribute to the attachment?                                                             | How would my life look if I was less attached?       |
|-----------------------------------------------------------|-------------------------------------------------------------------------------------------------|------------------------------------------------------|
| <i>Caring so much how I look in front of other people</i> | <i>By changing my behavior and speech according to what I think others will like or respect</i> | <i>Be true to myself and to my values and needs.</i> |
|                                                           |                                                                                                 |                                                      |
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|                                                           |                                                                                                 |                                                      |

## Home Practice Log – Week 5

| DATES | Practice | Minutes | Comments |
|-------|----------|---------|----------|
| Day 1 |          |         |          |
| Day 2 |          |         |          |
| Day 3 |          |         |          |
| Day 4 |          |         |          |
| Day 5 |          |         |          |
| Day 6 |          |         |          |
| Day 7 |          |         |          |

## Meeting Aversion

| <p>This week, notice an unpleasant event – body sensation, thought, emotion or situation. Notice your autopilot reaction – usually one of tension, non-acceptance, wanting it to be over or different. Ask yourself how you may practice a more mindful response using the RAIN tool.</p> |                                                              |                                                                                                                                                                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Unpleasant event                                                                                                                                                                                                                                                                          | Habitual reaction                                            | Recognize, Allow, Investigate, Non-Identification                                                                                                                        |
| <i>Pain in lower back</i>                                                                                                                                                                                                                                                                 | <i>Thinking “now my day is ruined”<br/>Limiting activity</i> | <i>I recognize the suffering that is present at this very moment.<br/>Right now I need gentleness and to remember that I am more than this pain.<br/>This will pass.</i> |
|                                                                                                                                                                                                                                                                                           |                                                              |                                                                                                                                                                          |
|                                                                                                                                                                                                                                                                                           |                                                              |                                                                                                                                                                          |
|                                                                                                                                                                                                                                                                                           |                                                              |                                                                                                                                                                          |
|                                                                                                                                                                                                                                                                                           |                                                              |                                                                                                                                                                          |

## Home Practice Log – Week 6

| DATES | Practice | Minutes | Comments |
|-------|----------|---------|----------|
| Day 1 |          |         |          |
| Day 2 |          |         |          |
| Day 3 |          |         |          |
| Day 4 |          |         |          |
| Day 5 |          |         |          |
| Day 6 |          |         |          |
| Day 7 |          |         |          |

## Gratitude

Take 10-15 minutes to write down all of the things that you feel grateful for in your life. Personal attributes, people, experiences, health...

Begin by taking 3-5 Relaxation Breaths to tune in to yourself and to this moment. Then write with abandon, leaving any judgment or criticism to the side.

[illegible]

## Communicating Mindfully -- practice

This week, when disagreements arise, or when you feel that you are about to speak out or react, take 1-2 deep relaxation breaths and try to practice mindful communication as above using the tool of *Beginning Anew*. Write down how this went. Were you able to respond in a way that you felt positive about? What was challenging?

[illegible]



## Mindfulness in Daily Life

### Eating Meditation

Remember your raisin? For three meals this week, consciously slow down your eating. Before you begin to eat, choose a prayer, an offering of thanks, or simply take a few moments to be grateful for the food that you have; for the many people – farmers, truck drivers, grocery store owners, etc. that made this food possible; and perhaps a moment of mindfulness of those who are not so fortunate in this world. As you begin to eat, be mindful of the full sensory experience of eating. What does the food look like and how does it smell? As you chew, be aware of the tastes and the pleasure of satisfying your hunger. When you eat, just eat. Avoid television, newspapers, books, etc. Light conversation and sharing is fine. Be mindful of when you are full and not eating beyond this point.

What have you learned from this practice?

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### Telephone Meditation

How many times does the phone ring each day? Bring your mindfulness practice here as well. When you hear the phone ring, allow this to be a reminder to take a deep breath in and out. Do this first, before you answer the phone. Before you make a call, again take a few deep breaths to regain a sense of being present. Sit down, and avoid multitasking when you are on the phone. Give your full attention to the person you are speaking with, and the conversation at hand.

How is this practice different from how you normally speak on the phone?

What have you learned from this?

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## Mindfulness in Daily Life Exercise

Choose 1-2 areas in your life to practice mindfulness this week. How did you bring your awareness into this part of your life?

What are some examples? What did you learn?

### Mindful Opportunity #1

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### Mindful Opportunity #2

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Can you think of other areas of your life that can benefit from your mindfulness practices?

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## Home Practice Log – Week 7

| DATES | Practice | Minutes | Comments |
|-------|----------|---------|----------|
| Day 1 |          |         |          |
| Day 2 |          |         |          |
| Day 3 |          |         |          |
| Day 4 |          |         |          |
| Day 5 |          |         |          |
| Day 6 |          |         |          |
| Day 7 |          |         |          |

**To: ME from: ME**

Take some time to reflect on what you've learned and how you have grown through the experiences of this course. Consider writing yourself a letter, describing what this course and practice has offered you and your life. You might list the “take-home” messages or “pearls” that most spoke to you, what you found most challenging, and even some advice you can offer to future ‘you’ who might read this letter some time later...

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