Notice It

What the Research Says About Mindfulness, Meditation, Stress and Attention

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2026 Edition | Free chapters 1 to 3

Chapter 1: The Wandering Mind

Before asking whether mindfulness helps, it is worth asking what it is meant to change. One famous study measured how often minds wander and how people feel when they do.

WHAT THE STUDY DID

The authors built smartphone technology to sample people's ongoing thoughts, feelings and actions through the day (Killingsworth and Gilbert, 2010, Science).

WHAT THEY FOUND

People were thinking about something other than what they were doing almost as often as they were thinking about what they were doing. And doing so typically made them unhappy.

WHAT TO TAKE FROM THIS

Two findings in one sentence of results. First, wandering is common: almost as often as being on task. Second, it went with feeling worse. That is the problem mindfulness practice aims at: bringing attention back to the present.

LIMITS

The abstract we read is only two sentences long and gives no figures: no number of people, no percentages, no size of the unhappiness. We therefore quote none. The study shows a link and does not by itself show that the wandering caused the unhappiness; people may also wander when they are already unhappy. It does not test mindfulness. Later chapters do.

HABITS TO TRY

These are practical suggestions, not findings from the study.

Check in three times a day. Ask: what am I doing, and what am I thinking about?

Note whether they match. A tally of "here" and "elsewhere" is enough.

Name what pulls you away. Planning, worry, replaying.

Come back gently. No self-criticism is needed.

Do it on routine tasks first, such as washing up or walking.

A WORKED EXAMPLE (INVENTED FOR PRACTICE)

A woman sets three phone reminders asking, "Where is my mind?" On the first day she finds her mind was elsewhere at two of the three, both times on a work email. She notes how she felt each time. It is her own tally, not the study.

PRACTICE EXERCISE

For one day, tally three check-ins: here or elsewhere, and a mood score from 1 to 10.

KEY POINTS

A smartphone sampling study found people's minds were off the task almost as often as on it, and that this typically made them unhappy. The abstract gives no figures, and the link is not proof of cause.

Chapter 2: Does Mindfulness Therapy Work?

Many reviews of mindfulness-based therapy gave inconsistent results. A large analysis tried to settle it.

WHAT THE ANALYSIS DID

The authors say mindfulness-based therapy (MBT) has become a popular form of treatment but that existing reviews disagreed. They searched two research databases up to May 2013 and included 209 studies with 12,145 people (Khoury, Lecomte, Fortin, Masse, Therien, Bouchard, Chapleau and colleagues, 2013, Clinical Psychology Review).

WHAT THEY FOUND

Mindfulness-based therapy was moderately effective in before-and-after comparisons (72 studies; Hedges' g = .55) and compared with waiting-list controls (67 studies; g = .53). Compared with other active treatments the effect was smaller (68 studies; g = .33), and smaller again against other psychological treatments (35 studies; g = .22). It did not differ from traditional cognitive behaviour therapy or behavioural therapies (9 studies; g = -.07) or from drug treatments (3 studies; g = .13). The authors conclude that MBT is effective for a variety of psychological problems, especially for reducing anxiety, depression and stress.

WHAT TO TAKE FROM THIS

The result changes with the comparison. Against doing nothing, the effect was moderate. Against other treatments it was smaller, and against CBT it was about the same. In other words, mindfulness therapy worked about as well as established treatments, not better.

LIMITS

Many of the studies were of people with specific conditions and of therapy delivered by trained teachers, not of someone reading a book. The drug comparison rests on only three studies. Hedges' g is a standard effect-size number, where about 0.2 is usually called small and 0.5 moderate. This book is general education and not treatment. If you have anxiety or depression, a qualified professional can advise.

HABITS TO TRY

These are practical suggestions, not findings from the analysis.

Think of mindfulness as one tool among several.

If you want a structured course, look for one led by a trained teacher.

Compare yourself. Rate stress from 1 to 10 for two weeks before you start.

Give it a fair trial. The studies typically used courses lasting weeks.

Keep other supports in place, such as sleep, exercise and friends.

A WORKED EXAMPLE (INVENTED FOR PRACTICE)

A man records his stress score for two weeks (average 7), then joins an eight-week course. At the end he scores 5. He notes that exercise was also part of his routine, so he cannot be sure which helped. It is his own record, not a study.

PRACTICE EXERCISE

Rate your stress daily for a week. Write the average. You will use it as a baseline in later chapters.

KEY POINTS

A meta-analysis of 209 studies (12,145 people) found mindfulness-based therapy moderately effective against waiting lists (g = .53) and about as good as CBT (g = -. 07 difference), with smaller advantages over other treatments. It worked especially for anxiety, depression and stress.

Chapter 3: What a Careful Review Found

Not every review is as upbeat. A review in a major medical journal looked only at trials with active comparison groups, which is a harder test.

WHAT THE REVIEW DID

The authors wanted to tell clinicians what the evidence says about the health benefits of meditation. They searched eight databases and did hand searches for randomised trials with active controls, which guard against placebo effects, up to November 2012. From 18,753 citations, they included 47 trials with 3,515 participants. They graded the strength of the evidence on risk of bias, precision, directness and consistency (Goyal, Singh, Sibinga, Gould, Rowland-Seymour, Sharma, Berger and colleagues, 2014, JAMA Internal Medicine).

WHAT THEY FOUND

Mindfulness meditation programmes had moderate evidence of improving anxiety (effect size 0.38 at 8 weeks, interval 0.12 to 0.64; 0.22 at 3 to 6 months, interval 0.02 to 0.43), depression (0.30 at 8 weeks, interval 0.00 to 0.59; 0.23 at 3 to 6 months, interval 0.05 to 0.42) and pain (0.33, interval 0.03 to 0.62). There was low evidence of improvement in stress and distress and in mental-health quality of life. For positive mood, attention, substance use, eating habits, sleep and weight, the evidence was low that there was no effect, or insufficient to say. There was no evidence that meditation programmes were better than any active treatment, such as drugs, exercise or other behavioural therapies. The authors conclude that meditation programmes can give small to moderate reductions in several negative dimensions of psychological stress, and that stronger studies are needed on positive mental health.

WHAT TO TAKE FROM THIS

When compared against a real alternative, the effects were small to moderate and tended to shrink between 8 weeks and 3 to 6 months. The evidence was strongest for anxiety, depression and pain. For attention and sleep it was weak or absent in this review.

LIMITS

The review includes trials up to 2012. A later published comment exists on this paper, and we have not read it. The authors graded much of the evidence as low. The participants were adults from clinical populations. This is not medical advice.

HABITS TO TRY

These are practical suggestions, not findings from the review.

Expect small to moderate change, not a transformation.

Judge it against alternatives. A walk or a talk with a friend may do as well.

Check again after a few months, because effects shrank in the follow-up.

Use it for stress and low mood, where the evidence was best, rather than expecting benefits everywhere.

Keep a record. Your own scores are the real test.

A WORKED EXAMPLE (INVENTED FOR PRACTICE)

A reader compares two plans: ten minutes of mindfulness a day, or ten minutes of walking. She tries each for three weeks and scores her stress each evening. The two weeks come out close. She keeps both. It is her own record, not a study.

PRACTICE EXERCISE

Pick one comparison you can run for two weeks each, such as mindfulness against a walk, and score your stress daily.

KEY POINTS

A review of 47 trials (3,515 people) with active controls found moderate evidence that mindfulness programmes eased anxiety (0.38), depression (0.30) and pain (0.33) at 8 weeks, shrinking by 3 to 6 months, and no evidence they beat active treatments. The evidence on attention and sleep was weak or absent.

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