

The Impact of a Mindfulness-Gestalt Based Counseling Group on Undergraduate College Students

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Abstract

The purpose of this study was to examine the effects of a Mindfulness-Gestalt-based Counseling Program on students' mindfulness skills and aspects of well-being. Gestalt psychotherapy considers mindfulness as part of its therapeutic model, both of which contribute to the development of awareness. A growing number of studies of Mindfulness-based interventions (MBIs) have shown positive outcomes for students' mental health and well-being. An intervention program was conducted on a sample of 208 undergraduate students who completed four self-report questionnaires: the Mindfulness, Attention, and Awareness Scale (MAAS), the Positive and Negative Affect Scale (PANAS), the Satisfaction with Life Scale (SWLS), and the Subjective Happiness Scale (SHS). Two assessments were conducted one week before and one week after the completion of the ten-week intervention program. One hundred forty-seven (147) participants took part in the "Personal Development" intervention program and sixty (60) formed the control group. The groups did not differ on any of the pretest measures. The results suggest that the Mindfulness-Gestalt-based Personal Development Group program had a positive impact on the participants' levels of awareness, positive affect, life satisfaction, and subjective happiness. These findings could contribute to both the outcomes of mindfulness gestalt-based interventions and the development of future interventions to support students' academic lives.

Keywords

Gestalt, Mindfulness, Counseling Intervention, Well-Being, College Students

1. Introduction

Higher education is designed to support students in their academic lives and to enable them to succeed in adulthood. Higher education students often experience stress and anxiety as they adjust to the challenges of their academic and personal lives. For this reason, the United Nations has identified youth (15 - 24 years of age) as a period of vulnerability worldwide and has made it a priority for multiple interventions (UNESCO, 2013). Higher education needs to expand its reach and promote the “development of the whole person” (Shapiro et al., 2011) which includes the development of socioemotional competencies as well as academic skills. Since college students are exposed to high levels of stress, it is important to develop interventions to reduce stress and increase well-being (Bajaj et al., 2022; Miller et al., 2022; Xiong et al., 2022). Research on the Greek student population has shown that the majority has low Life Satisfaction (Paschali & Tsitsas, 2010; Tsitsas et al., 2019). Academic life is a time of increased vulnerability to mental health problems. Today, the capacity of counseling centers is overloaded in responding to students’ mental health needs as the demand for counseling center services increases (Chiodelli et al., 2022). Consequently, the challenge for college counseling centers is to apply intervention programs to larger groups of students to support and prepare them for productive and successful adulthood. With this in mind, implementing a mindfulness-based intervention (MBI) could be an alternative model, adjunct to mental health services, for undergraduate students aiming to promote and support personal growth needs (Dolbier et al., 2022; Shapiro et al., 2011). Such needs reflect the need for growth and self-actualization and not a lack of skills and/or competencies. On the other hand, mindfulness meditation and gestalt therapy GT are seen as complementary systems to personal and spiritual development, assisting the process of becoming a whole (Declan, 2013; Geller, 2003; Gold & Zahm, 2022). GT is an appropriate approach for a healthy population (Corey, 2017) that affirms and draws upon the human capacity for growth through interpersonal contact and insight (Skottun & Krüger, 2022).

1.1. Mindfulness

Mindfulness is an inherent capacity of the human organism, a capacity for attention and awareness (Brown & Ryan, 2003; Kabat-Zinn, 2003), and is a basic human ability to be Present and Aware (Siegel, 2018). Mindfulness is defined as the act of “paying attention on purpose, non-judgmentally, in the present moment” (Kabat-Zinn, 1994: p. 4) and “keeping one’s consciousness alive to the present reality” (Hanh, 1975). Mindfulness, a part of innate ability, is also an integral process of development that can be enhanced through training, practice, or psychotherapy (Brown et al., 2007). Mindfulness facilitates the uncovering of inaccessible emotional and psychological themes (Brown & Ryan, 2003) and provides mental and physical health, psychological well-being, insight, relationships, and social interaction quality (Brown et al., 2007). Mindfulness begins as an ac-

tual technique (formal or informal), but it evolves into a way of being in the world (Kabat-Zinn, 1994). Mindfulness, is entering clinical practice as an “assimilative integration” (Walsh & Shapiro, 2006: p. 227) and has been integrated into several psychotherapeutic approaches; each approach designs interventions based on their fundamentals, goals, and strategies. Mindfulness practices simultaneously increase participants’ awareness, and meta-awareness (sampajañña in Buddhist psychology) which refers to awareness as a process and specifically the capacity to detect distraction when it occurs (Dunne et al., 2019; Segal et al., 2007).

Research on the effects of mindfulness has gained popularity in recent years, and (MBIs) become mainstream in Western countries (Goldberg, 2018; Mace, 2007). Mindfulness is negatively correlated with psychological distress (Baer et al., 2006; Bowlin & Baer, 2012; Kiken & Shook, 2012); has been recommended as a key aspect of well-being (Carmody & Baer, 2008; Vasudevan & Reddy, 2018) and MBIs have been effective in improving the quality of life in healthy populations (Khoury et al., 2015). MBIs have been theoretically and empirically linked with psychological well-being (Brown & Ryan, 2003; Keng et al., 2011). They are, also, effective in improving many biopsychosocial conditions, contribute to greater health and well-being (Ie et al., 2014; Kabat-Zinn & Davidson, 2015; Zhang et al., 2021), as well as leading to a deepened capacity for meaning-making and psychological growth (Garland et al., 2015; Garland & Fredrickson, 2019). Galante et al. (2021) claim that MBIs may be more effective than other preventive interventions. More studies have shown that mindfulness is an important predictor of positive affect (Lopez et al., 2016) and lead to better responses to negative stimuli. In addition, life satisfaction improves with meditation and MBI (Fredrickson et al., 2008, 2019; Kok, Waugh, et al., 2013), and MBIs are related to increases in positive well-being.

Given that university students are exposed to high levels of stress, MBIs on undergraduate students are found to be appropriate (Shapiro et al., 2011) to promote cognitive and academic performance, mental health in academic settings (Chiodelli et al., 2018, 2022; Galante et al., 2020; Winzer et al., 2018), to prepare students for their future careers (De Vibe et al., 2018; O’Driscoll et al., 2017; Regehr et al., 2013; Shapiro et al., 1998) and to facilitate the development of the Whole Person throughout their academic lives (Shapiro et al., 2011). Research supports the psychological benefits of MBIs in students, including promoting their well-being (Canby et al., 2015; De Vibe et al., 2018; Keng et al., 2011; Rosky et al., 2022; Van Gordon et al., 2014; Wingert et al., 2020; Xiong et al., 2022). Furthermore, findings show that MBI can promote mental health in individuals with high self-discipline and diligence (Bowlin & Baer, 2012), increase adaptive coping (De Vibe et al., 2018; Finkelstein-Fox et al., 2018), decrease cognitive and emotional reactivity, and negative affectivity (Gu et al., 2015; Keng et al., 2011; Schumer et al., 2018), regulate behavior (Brown et al., 2007) and develop psychological flexibility (Birtwell et al., 2019; Keng et al., 2011) to ameliorate psychological health (Tomlinson et al., 2018).

1.2. Gestalt Therapy

Awareness is the core of the GT. GT work with the phenomenology of awareness (Perls et al., 1951), focusing on the awareness of the obvious (Yontef, 1993), is a therapy of situation (Wollants, 2012), encourages the clients to “stay with” as it is in the Here and Now provoking interoceptive exposure. GT emphasizes the importance of the immediacy of experiencing full, authentic functioning (Brown et al., 2007) by attending to the immediate, embodied (sensory and perceptual) experience (Gold & Zahm, 2022). GT aims to enhance and deepen awareness of the self in interaction with the environment as both an internal and an external phenomenon, and promotes the development of openness and sensitivity towards the perception of situations. GT is future-oriented and encourages the person to take the risk and responsibility to act in a way that best satisfies his or her needs in the present situation, through increased self-regulation and self-support (Skottun & Krüger, 2022).

Mindfulness and GT aim to increase awareness and complement each other (Declan, 2013). GT was the first psychotherapeutic approach to integrate mindfulness “as part of its therapy model” (Barlow, 1983; Crocker & Philippson, 2005; Doelger, 1978; Elliot & O’Neill, 2005; Gold & Zahm, 2018, 2022; Kennedy & Tang, 2009; Truscott, 2010; Zhang, 2019) and can be considered a transpersonal approach (Naranjo, 1978; Williams, 2006). GT focuses on presence in “relaxed” attention, rather than effortful, control-oriented attention, and cultivates an open and accepting attitude toward experience. This attitude enables the creation of a “fertile void”, from which what is salient spontaneously emerges. This is key to healthy self-regulation (Brown et al., 2007). According to Perls (1973), healthy organisms form clear and vital gestalts or perceptions that emerge from the ground; this figure-ground interrelationship provides meaning (Yontef, 1993) and leads to resolving an experiential field into a meaningful world; it is the way one contacts and perceives reality, without losing her/his individuality by making sense of things (Wheeler & Axelsson, 2015). Perception, then, is an active function, and interpretations have already taken place at the heart of the act and process of perception (Wheeler & Axelsson, 2015). Allowing experiences to be lived as they are, positive and/or negative (Spagnuolo Lobb, 2013; Yontef & Jacobs, 2005), triggers the process of change. This attitude toward one’s experience is sufficient to activate the person’s innate homeostatic function (Corey, 2017). Homeostasis, activated by awareness, leads to a new creative adjustment. Change from GT occurs not merely as an intellectual shift but also as a shift in bodily lived experience (Cannon, 2009). Self-awareness leads to self-regulation, and helps people to find a new perspective, to regain his/her creativity, spontaneity, and vitality in making contact, to make creative adjustment in contact boundary with its environs, and to achieve the natural processes of healing (Brownell, 2010). The natural processes of healing, self-regulation, and self-support are consistent with Taoist philosophy (Doelger, 1978; Williams, 2006). GT is a widely used form of psychotherapy. It has been studied extensively for its impact on psychological health (Raffagnino, 2019), it maximizes conditions the conditions under which

personal growth can occur (Gold & Zahm, 2020; Yontef & Fuhr, 2005) when it has been prevented or limited, within the context of satisfying interpersonal contact and authentic relatedness (Gold & Zahm, 2008) as a result of increasing self-awareness (Spagnuolo Lobb, 2013).

1.3. Purpose of the Current Study

In the present study, in response to students' needs and as a contribution to Gestalt research, we integrated a mindfulness-gestalt based student intervention program into the curriculum to support students' personal development. We seek to examine the findings of this study in line of MBI, beyond limitations, such as the scarcity of available quantitative data of GT (Brownell & Roubal, 2019; Roubal et al., 2016) and the heterogeneity of the implementation of MBIs (Chiesa & Malinowski, 2011). Although GT advocates for an increase in empirical evidence, relevant research is relatively recent (Greenberg, 2016). GT-based interventions for students are based on qualitative data (Öztürk, 2019) except for scarce quantitative assessments (Arip et al., 2013; Khor, 2019; Sari & Tagay, 2016). Therefore, the present study aims to fill the gap and assess the quantitative impact of a GT "Personal Development Counseling Group" on students' mindfulness skills and their well-being.

The study examines whether college students' mindfulness skills and aspects of well-being improve as a result of a group counseling program designed by the researchers. The Gestalt counseling "Personal Development Group" had a four-core focus in its design. We hypothesized that supporting students would increase mindfulness while reducing negative affect and improving positive affect. In addition, the counseling program should improve participants' satisfaction with their lives. The final effect on group participants related to increases in subjective happiness.

2. Methods

2.1. Study Design

This study was conducted in Athens, Greece, and included an intervention group and a control group of undergraduate students. The intervention group consisted of undergraduate students who opted for and participated in a "Personal Development Counseling Group" developed by the researchers and based on mindfulness and GT, while the control group consisted of those who had neither opted for nor participated in any counseling group offered by the Counseling Center of the University. Therefore, the study followed a randomized pretest-posttest design with a control group.

2.2. Participants

Participants were 208 undergraduate students from a University of Athens, Greece. The only prerequisite was the ability to communicate in Greek verbally and in writing. The sample consisted of 148 participants in the intervention

group and 60 participants in the control group. In terms of gender representation the two groups were similar, the mean age was 19.8 years (SD = 1.8 years) for the control group and 19.7 years (SD = 2.9 years) for the intervention group ($p = 0.869$) (Table 1).

2.3. Research Tools

The present study used four psychometric tools to obtain a complete picture of the impact on students' well-being, as Lucas (2007) proposes that it is often necessary to measure multiple components of the broad construct. Some self-reported well-being markers were assessed including cognitive judgment and emotional evaluation, which allows individuals to evaluate their own lives were assessed (Diener et al., 2006). The Satisfaction with Life Scale was used for the cognitive evaluation of life satisfaction in different areas (Diener et al., 1999) and the Subjective Happiness Scale was used to measure the way that people (happy or unhappy) perceive, interpret, and think about life events (Lyubomirsky & Tucker, 1998). Vela et al. (2017) support that the Satisfaction with Life Scale (SWLS) and Happiness Scale (SHS) are adequate tools to evaluate students' counseling services; As Diener (1994) suggests to measure positive emotions, and the emotional response of well-being aptly by the use of the Positive and Negative Affect Scale; affect includes moods and emotions (Diener et al., 1999). Lyubomirsky et al. (2005) suggested that positive affect is a reflex of positive evaluation of many different areas.

Participants' mindfulness, attention, and awareness were assessed using the Greek version of the Mindfulness, Attention, and Awareness Scale (MAAS) (Mantzios & Wilson, 2013), originally developed by Brown and Ryan (Ryan & Brown, 2003). It comprises 15 items answered on a 1 - 6 Likert type scale (almost always - almost never) to assess the responders' mindfulness levels during their daily activities (e.g., I find it difficult to stay focused on what is happening in the present.). Cronbach's α of the MAAS in the present study was 0.82. The Coefficient alpha for the Greek version of the scale was $\alpha = 0.84$.

Positive and negative effects on the participants were assessed using the Positive and Negative Affect Scale (PANAS). This scale included 10 items to assess

Table 1. The demographic characteristics of the participants (N = 208).

	Group		<i>p</i>
	Control N = 60	Intervention N = 148	
	N (%)	N (%)	
Age, mean (SD)	19.8 (1.8)	19.7 (2.9)	0.869 [‡]
Gender			
Men	18 (30)	44 (29.7)	0.969 ⁺
Women	42 (70)	104 (70.3)	

[‡]Student's t-test, ⁺Pearson's χ^2 test, ⁺⁺Fisher's exact test.

the responders' positive state and 10 items to assess the responders' negative state (e.g. "Active," "Disturbed"), scored on a 1 - 5 (not at all-totally) Likert type scale (Watson et al., 1988). Respondents were asked to rate the extent to which they had experienced each particular emotion during the past week. The Greek version of the Positive and Negative Affect Scale used in this study was developed by Daskalou and Sygkollitou (2012). Cronbach's α for the Greek version is α 0.79 for the negative, 0.71 for the positive affect, in the present study was 0.71 for the positive affect sub-scale and 0.70 for negative affect subscales, respectively.

Life satisfaction was assessed using the Greek version of the Satisfaction With Life Scale (SWLS), (Diener et al., 1985; Malikioti-Loizos & Anderson, 1994). This scale uses five items to assess respondents' overall life satisfaction levels (for example. If I could live over, I would change nothing), scored on a 1 - 7 Likert type scale (1 = Strongly Disagree - 7 = Strongly Agree). The Coefficient alpha for the Greek version of this scale is α 0.82; in the present study, it was 0.81.

Finally, the participants' subjective happiness was assessed using the Greek version of the Subjective Happiness Scale (SHS) (Karakasidou et al., 2016; Lyubomirsky & Lepper, 1999). This scale has seven items scored on a 7-point Likert type scale to measure the respondents' subjective well-being (e.g., Compared to most of my peers, I consider myself: 1 less happy - 7 more happy). Cronbach's α for internal consistency was 0.78. The Coefficient alpha for the Greek version of the scale was α = 0.84.

2.4. Intervention

The intervention was carried out through 10 weekly sessions of 90 minutes delivered to groups of 15 (± 2) participants. The context of the intervention program based on GT counseling group (Brownell & Roubal, 2019) was a "Personal Development Group" Program, developed according to GT' foundations and methods: developing awareness, dialogic relating, working in the here and now, phenomenological practice, embodied awareness, experimental attitude and mindfulness practices as a meditative experiment. To foster intrapersonal awareness, meditation exercises and mindfulness practices were integrated to enhance interpersonal contact, dialogue, and sharing within the group. Each session, lasting 90 minutes, had the following structure: 1) short sharing in the group "check in", 2) introduction concerning the theme and the plan of the session, 3) Gestalt experiment as well as mindfulness practices, 4) sharing in dyads or triads, and 5) sharing and exchanges in the whole group. The aims of each session are listed in **Table 2**.

2.5. Procedures

This study was not randomized to avoid information diffusion, which can occur in settings where intervention and control group participants have any relationship. Thus, the intervention and control groups attended different study courses so that information diffusion could be restrained. All potential participants were

Table 2. Aim of session.

1 st meeting	Consent to participate, completion of pre test
1 st session	Fostering communication skills. Raising awareness of being Present/Absent in the situation
2 nd session	Raising awareness of an external/internal stimuli
3 rd session	Perception of and distinction among sensory modalities “exteroceptive” “proprioceptive”, “interoception”. Embodied awareness of emotions
4 th session	Perception through senses: listening, touching, tasting
5 th session	Fostering phenomenological observation and listening skills.
6 th session	Self-awareness skills on inner strength: freshness, grounding, clarity, balance
7 th session	Illuminating personal emotion: Perception, recognition and identification of emotions
8 th session	Explore unconscious bias and meaning
9 th session	Explore unknown potentials and spiritual values
10 th session	Farewell, separation and closure of the group
Last meeting	Completion of post test

adequately informed before participation, and signed informed consent forms. The intervention group participants had previously completed a form to participate in an experiential workshop that was included as part of their curriculum, while the control group participants were asked to participate in a study carried out at the university. Two hundred undergraduate students were invited to participate in each group, making a total of 400 students. Of these, 200 participated in The “Personal Development” group being offered by the University’s Student Counseling Center. These constituted the intervention group. The remaining 200 were undergraduate students from Greek University who had not participated in any counseling group. One hundred eighty-nine students consented to participate in the intervention group and 85 participants in the control group. Of these, 148 intervention and 60 control group participants completed both baseline and endpoint assessments and were further analyzed. A flowchart of the study is presented in **Figure 1**.

2.6. Statistical Analysis

Data analysis was performed using SPSS statistical software (Version 23.0 for Windows). Continuous variables are presented as mean and standard deviation (SD). Categorical variables are presented as absolute and relative frequencies. For the comparison of proportions, the chi-square and Fisher’s exact tests were used. The Student’s t-test was used to compare the mean differences between the two groups. Differences in changes in study subscale scores during the follow-up period between the two study groups were evaluated using repeated measures

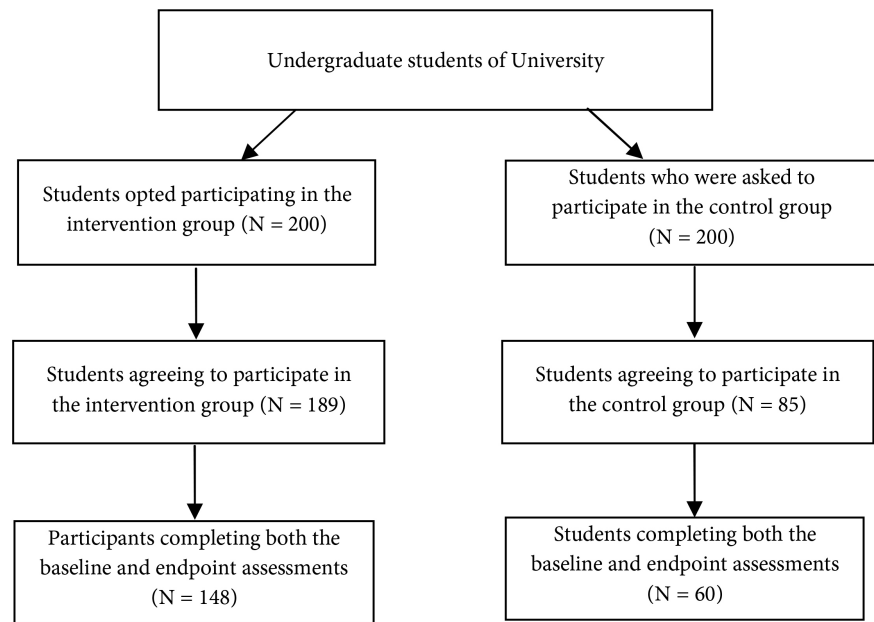


Figure 1. The study flowchart.

analysis of variance (ANOVA). All p values reported were two-tailed. Statistical significance was set at $p < 0.05$.

3. Results

Regarding the differences between the two groups at baseline, there were no statistically significant differences in the instrument scores at the baseline assessment, as indicated in **Table 3**. **Table 3** shows changes in the Satisfaction with Life Scale (SWL), Subjective Happiness Scale (SHS), Mindfulness Attention, Awareness Scale (MAAS), and Positive Negative Affect Scale (PANAS) during the follow-up period for both the intervention and control groups. Scores on the Satisfaction with Life Scale, Subjective Happiness Scale, Mindfulness Attention, Awareness Scale, and Positive Negative Affect Scale improved significantly only in the intervention group, resulting in better scores compared to the control group at post measurements. The differences between the two groups at the endpoint assessment were statistically significant in all cases, in favor of the intervention group. The overall change in the aforementioned subscales was significantly different between the two groups, as indicated by the significant interaction effects of the analyses. In addition, all interaction effects between time groups showed significant improvement for the intervention group, in contrast to the control group, which remained unchanged.

4. Discussion

The present study investigated whether the “Gestalt Personal Development Group Program” was effective in increasing undergraduate students’ levels of awareness and improving different parameters of well-being and found that the participants of the intervention program applied in this study were generally

Table 3. Repeated measures analysis of covariance comparing prechanges to postchanges in mindfulness, satisfaction of life, subjective happiness and positive, negative affect for MBI and control group, controlling for interval between data collection points.

		Pre	Post	Change	P^2	P^3
		Mean (SD)	Mean (SD)	Mean (SD)		
SWL	Control group	19.5 (6.4)	19.6 (6.7)	0.1 (4.8)	0.826	0.001
	Intervention group	19.6 (6.0)	22.6 (5.9)	3.0 (5.4)	<0.001	
	P^1	0.883	0.002			
SHS	Control group	16.3 (4.2)	16.3 (4.0)	0.0 (3.6)	0.929	<0.001
	Intervention group	16.5 (4.9)	19.6 (4.1)	3.1 (4.6)	<0.001	
	P^1	0.750	<0.001			
MAAS	Control group	53.1 (11.0)	53.4 (13.0)	0.3 (7.1)	0.822	0.016
	Intervention group	53.2 (10.5)	57.1 (10.7)	3.8 (10.7)	<0.001	
	P^1	0.966	0.035			
Positive affect PANAS	Control group	24.3 (5.5)	24.1 (6.5)	-0.2 (4.9)	0.850	<0.001
	Intervention group	24.2 (5.9)	29.0 (5.1)	4.8 (6.6)	<0.001	
	P^1	0.970	<0.001			
Negative affect PANAS	Control group	30.1 (5.5)	30.1 (6.1)	0.0 (5.5)	0.955	<0.001
	Intervention group	30.2 (6.2)	26.3 (5.6)	-3.9 (7.3)	<0.001	
	P^1	0.886	<0.001			

¹ p -value for group effect; ² p -value for time effect; ³ p -value for interaction-effects reported include differences between the groups in the degree of change (repeated measurements ANOVA).

effective in developing the awareness and well-being levels of undergraduate students.

The study, primarily, explored whether the experimental and control groups were equal concerning the awareness levels assessed through the Mindful Attention Awareness Scale (MAAS), and their different aspects of well-being were assessed using the Satisfaction with Life Scale (SWL), Subjective Happiness Scale (SHS), and Positive Negative Affect Scale (PANAS). Analysis of the pretest results showed that the groups were similar in terms of all variables.

Regarding the first research question of the study, the results showed that the mindfulness skills of the intervention group, but not those of the control group, were enhanced. The results of the first hypothesis are in line with the results of previous studies on MBI reporting an improvement in awareness levels (Brown & Ryan, 2003; Canby et al., 2015; Chiodelli et al., 2018; Crowley et al., 2022). The results of the present study are also in agreement with the results of GT-based intervention research, which reported the personal development of university students (Arip et al., 2013; Öztürk & Yüksel, 2015) and enhancement of levels of

awareness (Öztürk, 2019).

The second research question focused on whether there was a significant difference between the pre-posttest score averages of the Gestalt counseling “Personal Development Group” and the dimensions of the Positive and Negative Affect Scale in favor of the post-test assessment, namely, reduce negative affect and improve positive affect. Given that the study’s results showed a decrease in negative affect and an increase in positive affect, the second hypothesis was accepted. These results are in line with previous studies that demonstrated that mindfulness is associated with an increase in positive affect (Brown & Ryan, 2003; Fredrickson et al., 2017; Keng et al., 2011; Rosky et al., 2022; Schumer et al., 2018).

Regarding the third research question, we hypothesized that “Personal Development Group” participants would show an increase of posttest score average life satisfaction after the sessions. The third hypothesis was confirmed, as other MBI’s presented similar results (Cohn et al., 2009; Dawson et al., 2020; Fredrickson et al., 2019; Keng et al., 2011; Kok, Coffey, et al., 2013; Kok, Waugh, et al., 2013; Ryan & Brown, 2003).

The fourth research question asked whether there was an improvement in mean scores for Subjective Happiness on the post-test assessment for the participants in the intervention program. The research results were also consistent with those of previous studies (Bajaj et al., 2022; Crowley et al., 2022).

This mixed mindfulness-GT-based intervention led to significant effects in all aspects of well-being examined, with the strongest effect on the PANAS-Positive subscale. The literature states that positive emotions improve positive social connections (Fredrickson et al., 2017) and increase resilience and life satisfaction (Cohn et al., 2009; Fredrickson et al., 2017). Mindfulness is an important predictor of positive affect (Lopez et al., 2016). As the future is embedded in the here and now, positive emotions help prepare organisms for future challenges (Lyubomirsky et al., 2005) and serve critical adaptive purposes (Fredrickson et al., 2017).

As GT emphasizes that awareness occurs in the contact boundaries (Skottun & Krüger, 2022), in between otherness and leads to self-awareness. Meditation experiments help enhance intrapersonal and interpersonal relationships because members become more open and more relaxed to relate and connect with themselves and others (Gold & Zahm, 2022). Relational Mindfulness Treatment is an appropriate practice and individual and relational practices are compatible (Marek & Lukes, 2018; Surrey, 2005).

MBI and GT are compatible and complementary in enhancing mindfulness, and despite the criticism Perls has received, as Segall (2005: p. 157) concludes, expanding the scope of mindfulness can be an important curative factor in a variety of therapies. GT interventions focus on awareness of the situation and are intended to facilitate well-being directly by living moment-to-moment sensory contact with current experience without interpretation. Subjective experiences are less threatening when individuals take responsibility for their needs and can improve their emotional well-being (Leung & Khor, 2017). Allowing the expe-

rience to be lived as it is, positive and/or negative (Spagnuolo Lobb, 2013), leads to insight and innate homeostatic function (Corey, 2017). Insight allows individuals to trigger the process of change and readjust to their environment as a creative adjustment. From the Gestalt relational perspective, creative adjustment is embedded in potential structural changes that cannot be interpreted as cognitive or behavioral changes (Gold & Zahm, 2022; Skottun & Krüger, 2022). Therefore, the GT group facilitated adaptation and leads to personal growth and well-being of participants (Khor, 2019).

5. Limitation and Further Research

The findings indicate that the mindfulness-GT-based “Personal Development Group” intervention is an effective service offered by the counseling center. However, the present study has several limitations. First, all data were self-reported by participants and may have been influenced by their positive experiences in the group but not by the intervention. Yalom and Leszcz (2005) indicated that the well-being experienced by members of an intervention group may be due to the attention received from the facilitators and the perceived support and relatedness among group members. Another limitation of this study is that the principal investigator served as a consultant to the intervention group. Therefore, it is possible that the mindfulness group (GT) reported higher scores on the various self-assessment instruments of well-being to please her. This risk was reduced by using confidential participant codes and explaining that none of the investigators would ever know which students participated.

Based on the results and limitations of the present study, some suggestions are proposed for future studies. The first suggestion relates to the counselor. For future studies, we would suggest that there should be more than one consultant(s) for the intervention group, and that the same person should serve as both the researcher and the counselor. The second suggestion relates to the timing of the assessments. Follow-up assessments are needed to reach reasonable conclusions regarding the sustainability of the observed effects. Another suggestion for future studies is to provide information of the technique’s *modus operandi*. In particular, qualitative data could shed light on this gap and provide additional information about the effects recorded (Greenberg, 2016). A fourth suggestion for future studies is superiority trials, which examine an intervention in comparison to an already-known beneficial intervention (Christensen, 2007). For this intervention to be considered beneficial, it is essential to test its effects compared to other potentially beneficial interventions for the mental health of the general population (e.g., CBT).

6. Conclusion

Nowadays, university counseling centers have witnessed an increasing demand to respond to students’ mental health needs and MBIs counseling programs designed to train the “whole person,” which led to significant beneficial effects in-

cluding better academic performance, which would arise from students with greater levels of psychological well-being. This study presents the effects on undergraduates' students' well-being regarding a mixed MBI and GT "Personal Development Group". It contributes to the implementation of akin programs that improve the provision of services in the field of university counseling centers but also as a part of students' academic curriculum. Further research on both topics is proposed.

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Ethics Approval

All procedures of this study were performed under the ethical standards laid down in the 1964 Declaration of Helsinki and its later amendments or comparable ethical standards. All persons gave informed consent before inclusion in the study.

Conflicts of Interest

The authors declare no conflicts of interest regarding the publication of this paper.

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