



**MINDFULNESS-BASED COGNITIVE THERAPY
WINTER/SPRING 2026**

**UW Department of Psychiatry
6001 Research Park Boulevard
Madison, WI 53719-1176**

For information, contact Megan Kasdorf at mkasdorf@wisc.edu

**Jack Nitschke's group meets Mondays, 2:30PM-5:00PM
Begins Monday, February 2, 2026 (in-person)**

**Stuart Jones' group meets Wednesdays, 9:30AM-12:00PM
Begins Wednesday, February 4, 2026 (in-person)**

**Afternoon of Mindfulness
Monday, March 9, 2026, 12:00PM-5:00PM**

Mindfulness-Based Cognitive Therapy (MBCT) teaches participants across 8 weekly sessions how to cultivate mindfulness in the context of a personal history of recurrent depression and anxiety. An evidence-based group therapy, MBCT has brought great benefit to many patients in Madison and around the world. Mindfulness is the intentional awareness of what is happening now, held with an open, non-judgmental attitude. A rapidly expanding scientific literature has shown that mindfulness-based interventions have a wide range of benefits: decreases in mood and anxiety symptoms and other physical and psychological stress-related symptoms, and increases in energy, enthusiasm for life, self-compassion, and the ability to relax, manage chronic pain, and cope more effectively with short- and long-term stressful situations.

In particular, the core MBCT model has been shown to be effective in preventing relapses of depressive episodes in patients with multiple recurrences of major depressive disorder. We have extended MBCT to patients with chronic anxiety disorders, which are often similarly recurrent and impairing. Additionally, we introduce self-compassion practices to counter the deeply ingrained punishing and hostile self-attitudes that often accompany and complicate management of recurrent mood and anxiety disorders. The ideal patient for our MBCT groups would be an individual with a mood or anxiety disorder currently in a maintenance phase of treatment, although patients with active mood and anxiety disorders are also welcome.

While mindfulness meditation practice has a wide-ranging capacity to be helpful to many different patients, it is important to appreciate that this group therapy modality focuses on helping patients with recurrent mood disorders and anxiety disorders. Patients not appropriate for MBCT include those with very severe depression and anxiety that substantially impairs cognition, primary trauma-related disorders who have not received evidence-based trauma-focused psychotherapy, unstable personality disorders (such as borderline personality disorder) who have not received relevant evidence-based psychotherapies (e.g., DBT), active substance use disorders, and primary psychotic disorders. Patients with treated bipolar disorder have benefitted from our MBCT groups and are welcome.

ABOUT OUR MINDFULNESS PROGRAM

What is Mindfulness?

Mindfulness is paying attention to the present moment, on purpose, with an open, non-judgmental attitude.

Why is this useful?

Mindfulness has been shown to be helpful with a number of anxiety disorders and decrease rates of relapse of depression in individuals with multiple depressive episodes. There are preliminary studies suggesting that it may help partially responding patients reach remission. There is also some evidence suggesting that patients diagnosed with treatment resistant depression may benefit from mindfulness-based cognitive therapy. The role for these groups is likely particularly powerful for those patients who have at least partially overcome an acute phase of illness and who are transitioning to prioritizing how to stay well in the midst of a chronic, recurrent pattern of psychiatric illness.

What do we do?

In 8 weekly group sessions, we use a combination of guided meditation practice, experiential inquiry, and psychiatrically-oriented exercises to facilitate the cultivation of mindfulness in relationship to depression, anxiety, and well-being. Practices include the body scan, mindful yoga, seated meditation, and self-compassion. We also explore the difficult experiences of depression and anxiety jointly, and help patients to develop plans for recognizing signals of relapse or symptom exacerbation, and tools for responding skillfully. Additionally, we offer an "Afternoon of Mindfulness," a 5-hour mindfulness retreat, that patients find to be of great benefit.

Goals

- To understand what mindfulness is and how to cultivate it.
- To help patients develop a formal and informal mindfulness practice.
- To cultivate mindful awareness of body sensations, thoughts, emotions, and behaviors.
- To use mindfulness to identify unskillful thought patterns, beliefs, and behaviors.
- To develop a skillful relationship with thoughts, emotions, and behaviors.
- To learn to work skillfully and compassionately with difficult emotions and mind states in order to prevent the escalation of mood or anxiety disorder symptoms.
- To appreciate the benefits of sustaining a mindfulness meditation practice after the completion of the group, and knowledge of different resources for supporting ongoing practice.

Continuity Opportunities

In our MBCT groups, we emphasize the importance of ongoing practice to help patients stay well. Patients develop their own mindfulness meditation practice that will happen primarily in the day-to-day settings of their lives. We provide extensive resources for sustaining practice after participation in the group. We also offer monthly mindfulness maintenance groups to provide an opportunity for alumni to continue to explore their practice. Finally, alumni of our program are invited to Days of Mindfulness that are conducted for our subsequent MBCT groups.

INSTRUCTORS



Stuart Jones, MD

Dr. Stuart Jones is a psychiatrist with the University of Wisconsin Department of Psychiatry. Stuart received his medical degree from the Chicago Medical School at Rosalind Franklin University of Medicine and Science in 2011 and completed his residency training here at the University of Wisconsin. Involved with leading mindfulness meditation groups for patients with depression and anxiety at WISPIC since 2015, Stuart is interested in meditation practice as it relates to psychiatric care, psychotherapy and the promotion of psychological health and well-being.



Jack Nitschke, PhD

Dr. Jack Nitschke is a clinical psychologist, neuroscientist, and associate professor in the Department of Psychiatry. His NIH-funded research used brain imaging to answer questions about anxiety, depression, and emotion. His clinical work using psychotherapy spans 30+ years and brings the advances in our understanding of the brain and neuroplasticity directly into his psychotherapy utilizing various evidence-based treatments with adolescent and adult patients suffering from a broad range of mental disorders. In addition, Jack has been an instructor of traditional martial arts in Tae Kwon Do and meditation practitioner since the early 1990's.

SCHEDULE, COSTS, REQUIREMENTS

Group will run for nine (9) week sessions (8 regular weekly sessions + one afternoon of mindfulness) and will typically start in February, June and October. In-person groups are held at Wisconsin Psychiatric Institute and Clinics (WisPIC) at 6001 Research Park Blvd, Madison.

Commitment:

Participants will be expected to commit to at least 6 of 8 classes. Participants will be asked to do homework daily with a goal of 30-60 min per day. Homework consists of mindfulness exercises, which are guided with audio files available on the class website, or CD hard copies on request.

Cost:

Quartz and Medicare A&B will cover this class. Co-pays will still apply. Other insurances may cover this as group therapy depending on the policy and prior authorization requirements. There will be a \$20-60 cost for materials that is out of pocket.

Who Might Benefit:

Research shows patients who have had three or more major depressive episodes who are in remission will likely benefit most from this group. There is some preliminary research to suggest it to be helpful for patients with depression with partial responses to treatment and treatment resistant depression. In our clinical experience, we have found it to be helpful for chronic stress induced depression, dysthymia, and people who suffer with low self-esteem and/or high self-criticism. People with active depression can benefit if there is not a continuous state of depression that impairs the ability to have modest levels of concentration, function and periodic breaks from the negative mind states.

Exclusions:

Those who have active severe symptoms of depression such as impaired thinking, constant negative rumination, psychotic thoughts or hallucinations, high risk of self-harm or such severe motivational problems that they will be unable to do homework assignments. People with a history of severe post-traumatic stress disorder who have flooding, dissociation or psychosis when they are exposed to relaxation or lack of structure for short periods of time. These people may benefit from mindfulness under the careful instruction of their therapist but are likely inappropriate for this group. Severe agoraphobia where the person is likely to miss more than two classes. Patients with active substance use disorders would be better served to address their substance use problem prior to considering group consideration. Additionally, patients with substantially impairing personality disorders, especially poorly compensated borderline personality disorder, are more appropriate for evidence-based treatment modalities like Dialectical Behavioral Therapy (DBT) especially if they have never participated in DBT treatment.

Requirements:

Each person will have an individual interview to review their diagnosis, suitability, and appropriateness of timing for group participation. We are asking people for a substantial personal commitment for eight weeks. This class supports the possibility of growth and change in the context of acceptance and non-doing. This will only happen with regular effort and practice, the majority of which will take place outside the group setting. However, we will gladly help participants adapt the practices to fit into the real conditions of their lives. If the participant needs medication management or safety management, they must have another mental health provider other than group facilitators to manage their medications and any acute safety issues. Participants are asked not to come to class intoxicated and would be asked to leave if under the influence of nonprescription drugs or alcohol.

What to wear:

Please wear clothing appropriate for sitting cross-legged, lying on the floor and doing gentle mindful yoga. If you have your own yoga mat or meditation cushions that you prefer you may bring them to use. We also have these available for participants.