

MBIR™ Evidence Position Statement

Mindfulness-Based Inner RePatterning™

Version 1.0

Issued by MBIR International

Purpose

This document outlines the evidence base for Mindfulness-Based Inner RePatterning™ (MBIR™) and explains the principles that underpin its development, application, and future evaluation.

MBIR™ is committed to practising and teaching in a manner that is evidence-informed, trauma-informed, ethically responsible, and continually evolving through research, practitioner experience and client outcomes.

MBIR™ recognises that no therapeutic model should rely solely upon tradition, anecdotal experience or theoretical assumptions. Equally, the absence of extensive direct research on a newly developed methodology should not be interpreted as evidence that the approach is ineffective.

Important Note

MBIR™ is an evolving therapeutic methodology. This statement describes the evidence base informing the model's development. It should not be interpreted as a claim that any component or the complete MBIR™ methodology has been independently validated through clinical trials. MBIR International is committed to ongoing research, evaluation and continuous improvement.

The MBIR™ Evidence Framework

MBIR™ is informed by four complementary forms of evidence:

1. Scientific Research

MBIR™ draws upon established findings from neuroscience, affective neuroscience, Polyvagal Theory, interpersonal neurobiology, mindfulness research, memory reconsolidation, attachment theory, trauma research, emotional regulation research, and cognitive and behavioural sciences.

2. Clinical Expertise

MBIR™ has evolved over many years of clinical practice, encompassing thousands of therapy sessions. The model incorporates observations gathered through work with clients presenting with trauma, anxiety, chronic stress, attachment injuries, complex emotional difficulties, performance issues, limiting beliefs and emotional regulation challenges.

3. Practitioner Experience

Certified practitioners contribute valuable practical knowledge regarding implementation, adaptations, professional judgement, client suitability, outcome observations and ethical application.

4. Client Outcomes

Client feedback provides an important source of information regarding perceived effectiveness, safety, accessibility, therapeutic experience and areas requiring further refinement.

An Integrative Model

MBIR™ represents an integrated therapeutic framework combining principles from multiple established areas of psychological and neurological understanding into a coherent clinical process.

Research Position

MBIR™ recognises that direct research evaluating the complete MBIR™ methodology is currently emerging. MBIR International actively encourages independent research, practitioner-led research, case studies, outcome evaluation, collaboration with academic institutions and publication of findings where appropriate.

Scope of Evidence

MBIR™ adopts an evidence-informed approach, selecting interventions based on theoretical plausibility, existing scientific literature, clinical expertise, ethical practice, and ongoing evaluation.

Commitment to Continuous Improvement

MBIR™ International is committed to regularly reviewing emerging scientific literature, updating training materials, encouraging reflective practice, maintaining high professional standards, promoting ethical innovation and supporting future research.

Ethical Responsibility

Practitioners are expected to avoid overstating evidence, communicate honestly with clients, work within their scope of practice, recognise individual differences and integrate professional judgement with client preferences and current knowledge. MBIR™ is not a substitute for appropriate medical, psychiatric or psychological care where such intervention is required.

MBIR International Position

MBIR™ International believes that effective professional practice arises through the thoughtful integration of current scientific understanding, clinical expertise, practitioner competence, client experience and ethical responsibility.

Further Reading

Readers are encouraged to explore literature on trauma-informed practice, Polyvagal Theory, affective neuroscience, interpersonal neurobiology, mindfulness research, memory reconsolidation, attachment theory, emotional regulation, neuroplasticity, and compassion-focused approaches.

Document Information

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