

Knowledge on Mindfulness Meditation among the Elderly- A Descriptive Study

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Abstract.

Background: The Mindfulness meditation training is uniquely relevant to older adults who are at increased risk of experiencing both cognitive and physical issues. Educating older adults on appropriate strategies and approaches of mindfulness meditation will assist them to develop and sustain healthier habits as they age. Hence this study is designed to assess the knowledge of elderly people on mindfulness meditation.

Objective: To assess the knowledge of Mindfulness meditation.

Methodology: A Descriptive Research Approach is used. 10 participants who had no chronic disability were chosen through Nonprobability Purposive Sampling Technique. Data was gathered using self-structured administered Questionnaire. In order to establish the reliability of the tool, the test-retest method was used and the Pearson's correlation coefficient was found to be 0.99.

Result: As a result it was found that almost 50 % of the elderly were not knowing about the Mindfulness Meditation technique and its benefits.

Conclusion: Results shows that the majority of the patients in Geriatric homes had poor knowledge on Mindfulness meditation.

Keywords: Assess, knowledge, Mindfulness meditation, Geriatric homes.

Introduction and Background

Long life with a healthy life, longevity is the biggest achievement of a century. The life expectancy has been raised all over the world with people aged above 60 years. Ageing is the natural, normal, universal and inevitable biological phenomenon. Ageing is also defined as the process of deterioration, in the functional capacity of an individual. Various studies have shown that participants have found positive effects of mindfulness meditation instruction on pain, sleep and attaining well-being in older adults suffering from chronic pain.¹ The elderly persons are getting an ever-greater proportion of the entire population, with the proportion of the very old (80 years and above) growing the foremost rapidly.

Mindfulness life interventions are effective in reducing depression of the elderly persons.² Increasing anticipation and better health in adulthood are a serious success and represent a possible in terms of working power, qualification and knowledge that societies got to use productively. The "active ageing" experience shows that older people who are integrated into society have a higher quality of life and a longer and healthier life.³ Mindfulness meditation is a ability which can be mastered and has consistently been effective in reducing stress and managing pain when practiced in a controlled manner.

Though, it is not a "method" for reducing stress and controlling pain; rather, it is an improved way of living life. Initially, people purposely keep attention on their way of breathing as a way to promote their attentiveness. The occurrence of equilibrium, internal calmness, and non-reactivity of the mind is encouraged by consistent, everyday practice.

Recognition of numerous research and scientific data shows that mindfulness-based interventions offer clinically significant improvement for individuals with many significant issues, including depression, anxiety, pain and

stress.⁴

The research carried out by FadelZeidana Susan KJ Diamond cZhanna David b Paula Goolkasianb showed that continuing mindfulness meditation improves managerial working and therefore the capacity to endure focus has not been extensively tested, the results of brief mindfulness meditation training. In comparison to a lively control group, the study showed whether brief preparation for meditation affects cognition and mood. Once four sessions of either meditation preparation or taking note of a published book, members without previous meditation practice were tested with measurements of mood, vocal ease, optical coding, and memory. In improving mood, both strategies were successful, but exhaustion, anxiety, and increased consciousness were decreased only by brief meditation instruction.⁵

Mindfulness is a related feature of consciousness that has long been assumed to enhance well-being. A theoretical and empirical study of the role of attention in psychological well-being is supported by this research. The event and psychological science features of the area unit of the dispositional conscious Attention Perception Scale (MAAS) are illustrated. Associate degree experience-sampling research indicates that self-regulated behavior and optimistic emotional states are predicted by each dispositional and state carefulness. Finally, a clinical intervention analysis of cancer patients indicates that carefulness over cancer patients will improve over time related to decline in mood disturbance and stress.⁶

Some studies have shown that we offer our encounters with an elderly patient with depression attributed to a rise in physical illnesses. In addition, the World Health Organization had a trauma-derived concern to undergo a surgical procedure.⁷ Few studies concluded that the cognitive intervention program of mindfulness was successful in improving sleep with moderate cognitive disabled elderly patients.^[8] Mindfulness meditation based his training offers the option to alter the ADLs so that actual time action which leads to central focus of all individual understandings and communicating with the confused elderly patient.⁹ Based on the above studies and reviews, the researcher felt that assessing the knowledge on mindfulness meditation among the elderly people would help in reducing the anxiety, stress, feeling of loneliness, depression, social isolation, morbidity levels, so as to make them aware of the various interventions that would help them in encouraging & practicing mindfulness meditation and help develop a healthier society at last.

Hence, the present research work is intended to assess the knowledge of the elderly people of Pune city on mindfulness meditation.

Objectives:

- To assess the knowledge on Mindfulness Meditation among the elderly people.

Material and Methods:

A Descriptive Research design with quantitative approach was used. 10 samples who had no chronic disability were selected by Non-Probability Purposive sampling technique. Study tools has two parts; Section I; demographic data including age, gender, education, occupation, marital status, bears expenses of geriatric home, no. of children, duration of stay, reason for coming to geriatric home, lifestyle practices before coming to geriatric home, present physical condition, how often meditation, attended any meditation programs before were included. The second section included a self-administered structured questionnaire. The Self-administered structured questionnaire consisted of 30 questions which were divided into 3 sections consisting about 10 questions in each domain; the participants answered and the researcher marked the answer in few and some answers were marked by the participants themselves. The scoring embodied; if the score is between 0-10 then the participant is said to have poor knowledge, if the score is between 11-20 the knowledge is average, Good knowledge suggested that the score is between 21-30. Experts validated the tool, the reliability was found to be 0.99.

FINDINGS:

Section- I

Description of samples characteristics in frequency and percentage.

n=10		
DEMOGRAPHIC VARIABLE		%
AGE		
60-65 years		30
66-70		20

71-75 years		30
Above 76 years		20
GENDER		
Male		20
Female		30
EDUCATION		
Primary		20
Secondary		80
OCCUPATION		
Retired		40
Private service		20
government service		40
MARRITAL STATUS		
Unmarried		20
Widowed		80
WHO BEARS EXPENSES OF GERAITRIC HOME		
Self		10
Son, daughter in-laws		60
Charity by relatives		30
NO. OF CHILDREN		
Self		10
Son,daughter,in-laws		60
Charity by relatives		30
DURATION OF STAY AT OLDAGE HOME		
Self		10
Son,daughter,in-laws		60
Charity by relatives		30
REASON FOR COMING TO OLD AGE HOME		
Choice		80
force		20
LIFESTYLES BEFORE COMING TO OLD AGE HOME		
physical exercises		20
meditation		20
none		60
PRESENT PHYSICAL CONDITIONS		
Independent		90
Compelled For activities		10
FREQUENCY OF MEDITATION		
Never		70
Several times a month		10
Daily		20
ATTENDED ANY MEDITATION PROGRAM BEFORE		
Yes		20
No		80

Table 1: Distribution of demographic data in Frequency and Percentage

30% of the elderly people had age 60-65 yearly. 80% of them were females. 80% of them had secondary education. 40% of them had government service, and 80% of them were widowed. 60% of them had their son, daughter, in-law bearing their expenses. 80% of them came by choice in old age home and 90% of them were independent and 10% of them were compelled for activities. 70% of them never meditate.

Section-II

Analysis of data on knowledge of Mindfulness meditation among the elderly people in Geriatric homes.

n= 10

level of knowledge	F	%
Poor Knowledge (score 0-10)	5	50
Average Knowledge (Score 11-20)	5	50
Good knowledge (Score 21-30)	0	0

Table 2: Data related to knowledge on Mindfulness among the elderly in Geriatric homes.

The overall result depicted that 50% of the elderly people had poor knowledge (score 0-10) and 50% of them had average knowledge (Score 11-20) regarding mindfulness meditation.

Discussion:

In this current study a Descriptive research design had been used. Through Purposive Sampling Technique 10 samples were selected with no chronic disability. A written and informed consent was obtained. The participant answered by marking the answers on the questionnaire.

In the present study, 30% of the elderly people had age 60-65 yearly, 20% of them had age 66-70 years and 20% of them had age 71-75 years. 20% of them were males and 80% of them were females. 20% of them had primary education and 80% of them had secondary education. 40% of them were retired, 20% of them had private service and 40% of them had government service. 20% of them were unmarried and 80% of them were widowed. 10% of them were doing themselves their expenses of geriatric home, 60% of them had their son, daughter, in-law bearing their expenses and 30% of them had expenses through charity by relatives. 30% of them did not had children, 10% of them had one child, 30% of them had two children and 30% of them had more than two children. 40% of them were staying for less than 6 months, 30% of them were staying for 6 months to 1 year in old age home, 10% of them were staying for 2 to 3 years in old age homes and 20% of them were staying for more than 3 years in old age home. 80% of them came by choice in old age home and 20% of them were forced to come to old age home. 20% of them were doing meditation, 20% of them were doing physical exercise and 60% of them did not follow any lifestyle practices. 90% of them were independent and 10% of them were compelled for activities. 70% of them never meditate, 10% of them meditate several times and 20% of them meditate daily. 20% of them had attended meditation program before.

A study was conducted to assess the impact of meditation on healthy ageing — the current state of knowledge and a roadmap to future directions. The knowledge scored higher with people those had undergone training on mindfulness meditation 40%, 40% had poor knowledge and 20% had average knowledge on mindfulness meditation. There is growing indication that meditation-based training in several dimensions facilitates safe ageing. This review précises current facts on the impact of meditation training on healthy ageing in the fields of emotion, cognition (with specific focus on processes of attention) and the maintenance of relevant brain structures.¹⁰

Similarly a study was conducted on Mindfulness and older adults. This small research study was conducted with four older individuals who attended occupational therapist-run mindfulness classes. During the classes, focus groups took place, and follow-up interviews were carried out a year later. For data analysis, Interpretative Qualitative Analysis was used. The results showed that this method was readily adopted by all four participants, believing it was particularly suited to their age group. While they all reported good experiences during the courses,

they were either too sick to be interviewed one year on or realized that life events had stopped them from staying conscious. The study concluded that it is advised to use mindfulness-based therapy with older people, but further research in this field is required.¹²

Conclusion:

The findings indicate that the questionnaire was an efficacious strategy in assessing the level of sleep among the elderly people residing at selected Geriatric homes. The self-structured administered questionnaire was an acceptable and appropriate method for assessment of the knowledge on Mindfulness meditation.

Conflict of Interest -Nil

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Ethical Clearance-: Institute Research committee permission obtained and also sub committee IEC Permission obtained. Written consent has taken from each participants.

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