Mindfulness Meditation for Caregivers

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What to Expect

• Why me?

• Who are caregivers in Wisconsin

• What impact does caregiving have on the providers of that care?

• What evidence-based interventions exist to help caregivers

• The promise of mindfulness-based meditation
Aging in Place

• Peer-to-Peer Support to Promote Aging in place
Caregivers also promote aging in place

- More than 43 million Americans provide unpaid care to older adults in the US

- This number will grow as older adults want to live in their homes and lack the resources they need to pay for care

- This is a particularly significant issue in minority communities who are disproportionately impacted by chronic illness and dementia and face financial barriers to engaging assistance and long-term care
Caregivers in the WI
...and this will only grow
Caregiving takes it toll

- Higher mortality
- Cellular and physical changes
- Reduced quality of life
- Greater
  - emotional distress
  - Depression
  - Anxiety
  - Social isolatin
Some caregivers have it harder
Caring for the Caregiver
What do we know?

• Types of interventions
  • Psychoeducational
  • Supportive
  • Respite care
  • Psychotherapy
  • Multicomponent

• What works best?
The promise of mindfulness meditation
How does it work?

Mindfulness Practice

- Emotional Flexibility
- ATTENTION
- Cognitive Flexibility

Non-Judging Awareness

- Physical Wellbeing
- Behavior
- Mental Wellbeing
Preliminary data is good

- Two small randomized controlled trials
- Urban, homogeneous populations
- In-person, up to eight 2.5 hour weekly sessions with ½ day retreat
- Good outcomes
  - Reduced reported stress
  - Better mental health
  - Reduced depressive symptoms
Our objective

• To develop a more accessible and feasible mindfulness intervention by refining an existing mindfulness-based stress reduction (MBSR) program delivered over the internet and evaluating the feasibility of conducting a randomized controlled trial of its impact on the well-being of diverse caregivers in two different regions of the country.
Aims

- **Aim 1:** To adapt an existing 8-week online MBSR program to address the specific needs of caregivers of older adults in variety of caregiving contexts. We will modify the MBSR program using input from experts in the field.

- **Aim 2:** To evaluate the feasibility of recruiting and retaining a diverse sample of caregivers from an urban and rural region in the US into a RCT of the impact of our MBSR program on the physical and mental health and resourcefulness of caregivers immediately post-participation and 6-months after participation.

- **Aim 3:** To evaluate the feasibility and value of measuring the impact of our MBSR program on stress, psychological health, and resourcefulness of caregivers to older adults immediately post-participation and 6-months after participation.
### Table 1. Session Summary of the Draft Mindfulness Meditation for Caregivers Eight-Week On-line Course.

<table>
<thead>
<tr>
<th>Weekly Session</th>
<th>Brief summary of Exercises and Targeted Caregiving Issue</th>
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<tbody>
<tr>
<td>1. “Automatic pilot” and its relation to stress.</td>
<td>Introduction to basic concepts and techniques of meditation; how to be ‘present in the moment’; acceptance and non-judgment; awareness of the tendency to make assumptions and judgments of experience; how automatic thoughts can distract from being ‘present’.</td>
</tr>
<tr>
<td>2. Barriers to a mindful, skillful response to situational cues.</td>
<td>Sitting meditation, brief ‘urge surfing’ meditation, ‘noticing triggers and craving’ exercise and discussion; use of meditation to interrupt automatic responses and respond mindfully, especially in face of caregiving stress and empathy.</td>
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<tr>
<td>3. Mindfulness in everyday life.</td>
<td>Mini-meditation and walking meditation; exercises advancing skills in being ‘present’ and in skillful response to situational cues; ways of integrating meditation into daily life – use of brief meditative techniques to cope with stressors and discomfort.</td>
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<tr>
<td>4. Staying “present,” especially in challenging situations.</td>
<td>Yoga meditation; discussion of high-risk situations for stress and physical exhaustion and how meditation can help cope; exercises using yoga and mini-meditation to cope in high-risk situations; use of brief meditation techniques in daily life, including their integration into one’s usual response to everyday challenges.</td>
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<tr>
<td>5. Balancing acceptance and skillful, mindful change.</td>
<td>Sitting meditation, mini-meditation and walking meditation; focus on acceptance, especially of difficult experiences (e.g. witnessing the pain of your loved one); ways of coping with problematic relationships that add stress to the caregiving situation; Relationship between acceptance and working toward change.</td>
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<tr>
<td>6. Are thoughts facts?</td>
<td>Sitting meditation, emphasis on thoughts via ‘thought-labeling’ exercise; learning one’s own thought patterns; recognition that thoughts are often triggered ‘automatically’ and are not necessarily an accurate reflection of oneself or reality; how a thought pattern may lead to inaction.</td>
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<tr>
<td>7. Self-care and Life balance</td>
<td>Mini-meditation and sitting meditation; discussion of one’s own warning signs of physical and emotional risk; meditation as a means to recognize and cope with warning signs and creating individual ‘action plans’ (e.g. identifying ‘support network’), practicing mini-meditation in the context of these plans.</td>
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<tr>
<td>8. Balanced living and what has been learned.</td>
<td>Body scan, mini-meditation and sitting meditation; reflection on what has been learned from the course; ways that subjects can incorporate meditation into daily life; achieving and maintaining ‘life balance’ to better take care of oneself; use of meditation to help maintain life balance.</td>
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</tbody>
</table>
Figure 4. Timeline of Study Participation, Contact, and Data Collected for Individual Study Participants

<table>
<thead>
<tr>
<th>Time</th>
<th>0 Months</th>
<th>2 Months</th>
<th>5 months</th>
<th>8 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Contact</td>
<td>In-person Interview</td>
<td>In-person Interview</td>
<td>Reminder Phone Call</td>
<td>In-person Interview</td>
</tr>
<tr>
<td>Data Collected</td>
<td>All Study Variables</td>
<td>All Study Variables</td>
<td>None</td>
<td>All Study Variables Excep: Demographics</td>
</tr>
</tbody>
</table>
Outcomes

• Quality of life
• Health status
• Symptoms of Anxiety and Depression
• Loneliness
• Self-efficacy
• Resilience
• Social support
• Caregiver burden
• Resourcefulness
Study sites

• Ministry Door County Medical Center

• Lifespan-Rochester
Future goal

• To use our experience and the study protocol developed in this trial to conduct a larger RCT of the impact of this online MBSR program on the health and well-being of diverse caregivers of older adults across the US. Our aims are:

• A feasibly implemented and disseminated mindfulness–based intervention that improves caregiver health, well-being, and resourcefulness could be very high impact;
Thank You

- Christine Wisniewski
- Jody Rowe
- Steven Flowers
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- Richard Chappell

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