

A Mindful Approach to Perceived Stress for Older Adults Receiving Rehabilitation Services in Long-term Care (LTC)

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Mindfulness has reliably been shown to create positive outcomes for mental and physical health, including stress reduction. Research literature includes preliminary examination of mindfulness practice in rehabilitation settings; however, further investigation is warranted. According to a scoping review, some of the strongest findings utilizing mindfulness with rehabilitation were for improvements in adaptation, such as decreased stress. Pearlin's Stress Process Theory provided the theoretical framework for our current study. These theories are well aligned with prior findings in mindfulness and rehabilitation, as well as with the intent of this pilot study.

The purpose and aims of this pilot study were to develop, administer, and evaluate a modified mindfulness program focused on cultivating a mindfulness practice for older adults in rehabilitation in long term care, to reduce their perceived stress. These outcomes positively affect the residents as well as the facility's staff who care for the residents.

A sample of 9 residents age 65 and older were recruited in a Geriatric Workforce Enhancement Program partner skilled nursing facility. Inclusion criteria for participants included residents receiving any type of therapy (e.g., physical therapy, occupational therapy, speech therapy), with an anticipated length of stay inclusive of the treatment period of the mindfulness intervention, and cognitive capacity to participate. A cognitive function score (CFS) of 1-2 in the minimum data set (MDS) was used verify this.

A mindfulness intervention was developed and administered by a CITI trained, qualified mindfulness instructor, in coordination with the principal investigator and the rehabilitation therapy director of the skilled nursing facility. Modifications to a standards mindfulness course we were made based on knowledge, research, and professional experience of the intervention development team. Frequency and duration of classes was modified to fit the population and setting. A mindfulness series was delivered for one hour, three times a week, for three weeks, for a total of nine sessions. As this is a pilot study, no control group was used.

One-hundred percent of eligible participants consented to the research; both attendance and retention percentages were above the 75% standard. Demographically male and female genders were represented, White and Latinx races were represented, and there was a variation of education that ranged from less than high school to a bachelorette degree. While this pilot research could not by definition be fully powered, Non-parametric tests for Cohen's Perceived Stress reveal statistically significant results (p< 0.001).

These preliminary research findings will inform a larger pragmatic trial in statewide partner nursing homes to test preliminary effectiveness in regard to and stress reduction. Research to develop tele-health options for mindfulness intervention delivery is also merited, particularly given the current climate of increased in long term care. While this study began prior to the COVID-19 pandemic, its findings are now even more relevant in gerontology.