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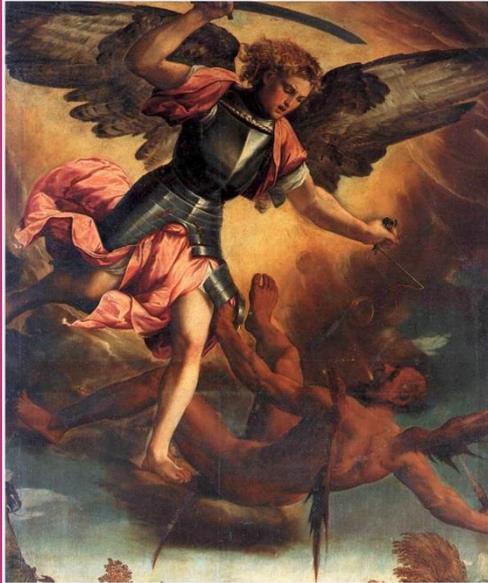
The Effectiveness of Mindfulness-Based Intervention in Enhancing Self-Compassion among Older Adults

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Abstract

Research has shown that there is a relationship between self-compassion and well-being among older adults, and that lack of self-compassion leads them to self-suffering, isolation and negative self-judgment, which affects their well-being. To address this, the current study attempts to determine whether the mindfulness-based intervention could enhance self-compassion among older adults. Results have revealed that participants in mindfulness training increased their level of self-compassion. The findings are significant for guidance counsellors, psychologists, social workers and older adults and caregivers.

Keywords: Older Adults, Self-Compassion, Mindfulness-Based Intervention

La eficacia de la intervención basada en mindfulness para mejorar la auto-compasión entre adultos mayores

Resumen

Las investigaciones han demostrado que existe una relación entre la autocompasión y el bienestar entre los adultos mayores, y que la falta de autocompasión los lleva a la autocompasión, el aislamiento y el juicio negativo, lo que afecta su bienestar. Para abordar esto, el estudio actual intenta determinar si la intervención basada en la atención plena podría mejorar la autocompasión entre los adultos mayores. Los resultados han revelado que los participantes en el entrenamiento de atención plena aumentaron su nivel de autocompasión. Los hallazgos son significativos para los consejeros, psicólogos, trabajadores sociales y adultos mayores y cuidadores.

Palabras clave: adultos mayores, auto-compasión, intervención basada en la conciencia plena

1. INTRODUCTION

Older adults, as a developmental period, are filled with many challenges. Early developmental theorists, particularly Erickson, believed that much of life is spent preparing for the middle adulthood stage and the last stages of the life span (David, 2014; Sernadela et al., 2016). Some recent studies on self-perceptions of aging have found that those with more positive self-perceptions will have better functional health over time than those with more negative self-

perceptions of ageing, considering the baseline measures of functional health, self-rated health, age, gender, loneliness, race, and socioeconomic status Holding negative perceptions of ageing at baseline is associated with a decrease in self-reported performance in activities of daily living, an increased number of illnesses, decreased self-reported physical functions, self-rated health and increased risk of mortality.

The fact that the proportion of older people and global life expectancy has increased over the last few centuries Lindgren (2016) likely raises the demand for old-age care. Thus, it is very important to find a direction to help older adults with resources for positive ageing. It is likely that self-compassion is one such factor because recent studies have found that self-compassion plays an important role in the well-being of older adults.

The construct of self-compassion, conceptualized by Neff et al. (2007), offers an alternative approach to thinking about well-being derived from Buddhist ideas over 2000 years old (Neff et al., 2007). Self-compassion, as defined by Neff et al. (2007), has three components which mutually influence and engender each other, namely, self-kindness, awareness of common humanity and mindfulness. An individual with self- compassion is able to view the self with gentleness and kindness even in the face of failure and pain; he or she is also able to experience feelings and emotions without pushing them away or becoming completely overwhelmed by them. Furthermore, the individual sees that all human beings can fail and experience pain.

The self-compassion construct has already caught attention and has shown great promise, demonstrating positive associations with numerous current markers of positive psychological functioning and well-being. For instance, Neff et al. (2007) found that self-compassion was significantly correlated with positive health outcomes such as less depression, diminished anxiety and greater life satisfaction. Also, Neff et al. (2007) discovered that self-compassion was positively associated with goal mastery and emotion-focused coping strategies. Neff et al. (2007) found that self-compassion had a significant positive association with self-reported measurement of happiness, optimism, positive affect, wisdom, personal initiative, curiosity and exploration; agreeableness, extroversion, and conscientiousness.

Self-compassion has also demonstrated negative associations with depression, anxiety, and rumination, as well as negative performance goals and avoidance-oriented strategies (Neff et al., 2007), with negative affect and neuroticism in addition (Neff et al., 2007). Most of the above-mentioned findings indicate that the higher the level of self-compassion one experiences, the more positive one feels about oneself and the lower the level of psychopathologies such as a self-negative attitude. Recently, some researchers who have tried to determine if there is a relationship between self-compassion and well-being of older adults have uncovered many interesting results. For example, self-compassion was found to moderate the relationship between physical health and subjective well-being in a way that individuals who have poorer health will benefit the most from being self-compassionate.

Participants with self-compassion reported being less bothered by the use of assistance than those low in self-compassion. Those older adults with higher self-compassion displayed greater psychological well-being even when they also had high stress or poor health (Smith, 2015). Self-compassion in older adults was found to be positively correlated with age, positively and uniquely related to psychological well-being, thus moderating the association between self-rated health and depression (Homan, 2016). Psychological well-being in the elderly can be increased by increasing religiosity and self-compassion in life. Self-compassion predicted positive responses to ageing and that self-compassionate thought explained the relationship between trait self-compassion and emotional tone as well as the belief that one's attitude helped them cope with age-related events (Allen & Leary, 2013; Khalil et al., 2019).

Most of these results suggest that interventions designed to increase self-compassion in older adults may indicate a fruitful direction for future applied research. Recently, there has been a good amount of interest in the mental health benefits arising from mindfulness (Brown & Ryan, 2003). Mindfulness, which involves bringing a certain quality of attention to the moment by moment experience, lies at the heart of Buddhist meditation practice and psychology (Germer et al., 2005; Razavi et al, 2015). Psychotherapy patients are increasingly seeking psychotherapists who understand their meditation practice; therefore, most therapists are familiar with meditation as a relaxation technique. Mindfulness practice brings about many psychological and mental health benefits.

2. LITERATURE REVIEW

Mindfulness was found to be beneficial to the mind and body. A 2006 qualitative study followed the effects of one year of Transcendental Meditation on ten middle school students. Themes that emerged from individual interviews with students included a greater ability of self-control and improved social relationships, as well as better academic performance. Other investigators have evaluated the benefits of Yoga as well. Investigators found Sahaja Yoga Meditation, an awareness practice related to mindfulness, to be an effective intervention for children with ADHD and their families. Results included an improvement in the self-esteem of the children, a reduction in their ADHD symptoms, and an improved relationship between parent and child.

Mindfulness intervention brings positive changes to children and adolescents with psychological disturbances. In one 6-week study with anxious children, teachers reported an improvement in academic functioning and decrease in symptoms of anxiety in the children. Mindfulness intervention for several adolescents with conduct disorder resulted in a significant decrease in aggressive behaviour. They reported benefits from mindfully returning their attention to the soles of the feet during distressing situations. Mindfulness-based cognitive therapy significantly reduced observable internalizing and externalizing symptoms. Over 80% of children and parents involved in this study thought that schools should teach mindfulness. In a recent

study for adolescents with ADHD, mindfulness training significantly reduced symptoms associated with their disorder.

Mindfulness intervention is also helpful in educational settings. A study of first and third-grade children which involved a 12-week program of breath awareness and yoga showed improvements in children's attention and social skills as well as decreased test anxiety in children. Another program that combined elements of MBSR and tai chi for a small group of middle school students in a 5-week program found that students experienced a significantly increased sense of calm, connection to nature, and improved sleep after going through the training (Wall, 2005). Two pilot studies conducted through UCLA's Mindful Awareness Research Center indicate improvements in self-regulatory abilities among preschool and elementary school students who participated in an 8-week mindful awareness practices training program. Specifically, children who were initially less well-regulated showed the strongest improvements subsequent to training.

3. METHOD

This study made use of The Pre-test and Post-test Control Design. Participants were randomly assigned to one of two conditions: Experimental group or Control group (Yang et al., 2019; Soo et al., 2019). The studies made use the long form of the Self-compassion scale (SCS) consisting of 26 items, constructed by Neff et al. (2007), which is free for researchers to use (Neff, http://self-compassion.org).

The scale is a self-attitude construct designed to measure the level of self-compassion among adult and adolescents, whose ages range from 14 years and older. The scale measures three components of self-compassion on six separate subscales: Kindness Versus Self-Judgment, Common Humanity Versus Isolation, and Mindfulness Versus Over-identification. This scale proved to be psychometrically sound.

Coding Key: Self-Kindness Items: 5, 12, 19, 23, 26 versus Self-Judgment Items: 1, 8, 11, 16, 21; Common Humanity Items: 3, 7, 10, 15 versus Isolation Items: 4, 13, 18, 25; Mindfulness Items: 9, 14, 17, 22 versus Over-identified Items: 2, 6, 20, 24. Subscale scores are computed by calculating the mean of subscale item responses. To compute a total self-compassion score, reverse score the negative subscale items before calculating subscale means - self-judgment, isolation, and over-identification (i.e., 1 = 5, 2 = 4, 3 = 3. 4 = 2, 5 = 1) - then compute a grand mean of all six subscale means. Researchers can choose to analyze their data either by using individual sub-scale sores or by using a total score. Average overall self-compassion scores tend to be around 3.0 on the 1-5 scale, overall score can be interpreted accordingly: A score of 1-2.5 for overall self-compassion score indicates one is low in self-compassion, 2.5-3.5 indicates one is moderate, and 3.5-5.0 means one is high. Note that higher scores for the Self-Judgment, Isolation, and Over-Identification subscales indicate less self-compassion, while lower scores on these dimensions are indicative of more self-compassion.

The current mindfulness intervention program (MIP) consisted of ten sessions. Each session lasted for one and a half hours, two sessions per week. The participants in the experimental group received the mindfulness training program that aimed to help them become mindful of themselves physically, mentally, emotionally, relationally and spiritually. There were five (5) major techniques included in the program: (a) body scan, a process of moving attention from head to toes, observing sensations in the different regions of the body; (b) mantra technique, a meditation on a word or phrase giving one a meaning or a power of concentration when mental suffering arises such as self-negative judgment or unhappy thoughts about the self; (c) emotion anchor, a way of being free from one's own emotional sufferings using deep breathing to enhance awareness of what is happening in the body.

(d) metta or loving-kindness meditation, a good intention or compassionate thought one wants to extend to the self, to the other or to the universe; and (e) centering meditative prayer, a way of adding depth of meaning, developing the self and building of faith through the grace of contemplation on the sacred word that best supports one's sincere intention to be in the presence of the Lord and to be open to His divine action within. The setting of the intervention program was in the counselling room of the Catholic Pastoral Center of the Saigon Archdiocese, Ho Chi Minh City, Vietnam. The atmosphere was safe and comfortable for the participants to experience mindfulness practice. The intervention program was led by the researcher, who had

been practising mindfulness intervention, together with a guidance counsellor.

4. RESULTS

The table below shows the profile of experimental and control groups before and after the intervention. As shown in the table, the baseline analysis revealed that before intervention, the experimental group achieved a score of 2.35 in self-compassion while the control group received 2.42, considering that the two groups are low in the scale, and no significant difference between groups in the pre-test was observed as shown by their T_1 values of 1.871 that had a probability p= 0.82 which is greater than the significance level of 0.05. Random grouping proved to be unbiased. After the intervention, the experimental group showed a significant increase in the total mean of self-compassion from 2.35 (in the pre-test) to 3.62 (in the post-test) while the control group slightly increased from 2.42 to 2.44 (still considered as low).

The observed difference between the post-test scores of the two groups was significant since the T_2 value of 12.51 had a probability p=0.00, which is less than the standard significance level of 0.05. This implies that there was a significantly positive change in self-compassion of participants in the experimental group while those in the control remain unchanged, indicating that mindfulness intervention is effective in enhancing self-compassion among older adults.

Sub-scales of Self-compassion	Experimental				Control			
	Pretest		Posttest		Pretest		Posttest	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD
Self-Kindness (SK)	1.9333	.25820	3.8667	.63994	2.13	.35187	2.4000	.63246
Self-Judgment (SJ)	3.3333	.48795	2.4667	.61968	.51640	.61721	3.5333	.83381
Common Humanity (CH)	2.2000	41404	3.7333	.59362	2.3333	.48795	2.4667	.51640
Isolation (I)	3.3333	.48795	2.6000	.50709	3.3333	.61721	3.7333	.79881
Mindfulness (M)	2.2000	.41404	3.6000	.50709	.13093	.41404	2.3333	.48795
Over-Identifying (OI)	3.5333	.74322	2.2000	41404	3.4667	.63994	3.2667	70373
Overall Self-compassion	2.3556	.26627	3.6222	.24774	2.4222	.28776	2.4444	.27217

Comparison of differences between groups before and after intervention

	Experimental		Control		Test of significant difference between groups
	Pre	Post	Pre	Post	
Overall Self-compassion	2.3556	3.6222	2.4222	2.4444	T_1=1.871; p= 0.82>0.05 T_2=12.51; p= 0.00<0.05

Table1: Descriptive statistics for the Self-Compassion

T_1 refers to the result of the test of significant difference for the experimental and control groups before intervention and T_2 for the two groups after intervention.

5. DISCUSSION

Though given to a small population, the result of the current study shows that the participants in the experimental group after

mindfulness training significantly increased their self-compassion as compared to the control group, indicating that MIP is effective. This means: 1) After learning and practising mindfulness techniques, older adult participants recognized that being imperfect, failing, and experiencing life difficulties is inevitable, so they tend to be gentle with themselves when confronted with painful experiences rather than becoming angry or making negative judgments of themselves and accepting the reality of life limitations with sympathy and kindness and greater emotional equanimity during their reflection on their daily life; 2) After mindfulness training, participants were able to recognize that there was no guarantee that people can always get what they want and that they may make mistakes every day.

Future research: This study was limited to a medium sample size with 15 participants for the experimental group and 15 for the control group. However, the analyses of outcome data for the study hypotheses yielded statistically significant results as described in the summary of results. This suggests that further research using larger sample sizes and different populations may be worth conducting, especially with older male adults. Any future study should also investigate factors that may predict the level of self-compassion, and include follow-up assessment, to determine whether the benefits of this current mindfulness-based intervention have an enduring characteristic in enhancing self-compassion.

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