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Capstone #4

By the second summer in the program, this old dog had a few new tricks in the bag. I was feeling more and more confident in my academic writing style and my self-efficacy in general. That is why I chose this literature review project artifact; it very much reflects the growing confidence in my graduate student abilities.

I thoroughly enjoyed the mindfulness practicum and knew I wanted to continue my pursuit of mindfulness instruction in additional ways. So bursting with self-confidence (OK, a slight exaggeration), I approached my advisor about conducting a literature review of teaching mindfulness to the senior population (ages 65+).

As I mentioned in the Caption Statement about my practicum, one of my favorite groups to facilitate was seniors. They were so receptive and always had great questions. I began wondering if there were differences in course design needs for this population. After receiving a green light from the administration, I began my review of the literature and started really enjoying the research. I felt like a PhD student collecting data for my thesis. I would bring my laptop to a coffee shop and play the consummate grad student. Part of me even daydreamed that my paper could be published in a journal about gerontology or mindfulness (I never pursued publication; my self-esteem at the time didn't think the paper was quite up to snuff).

Today I am proud of this paper because it very much reflects my confidence at the time. I am also proud that it is very practice-oriented, from suggesting more white space on PowerPoint slides (to not overwhelm older learners visually) to allowing ample time for note-

taking (to compensate for cognitive deficits). A change I would make if I were re-writing the paper today would be to further research the instructional style preferred. I briefly mention the subject of learning style at various ages, but I would delve into the subject on a much deeper level. The recommended philosophy for teaching mindfulness to all ages is Humanism, which very much is in keeping with my personal learning philosophy.

If I ever become a mindful life/health coach for those with chronic illnesses serving senior clients, this paper will serve as a blueprint for logistical design. For example, seniors like more time to practice and process learning between sessions, so an eight-week series could be stretched to several months to accommodate their needs.

To create a visual for this old dog after submitting this paper: I was balancing a ball on my nose quite proudly. But my next artifact will cause that ball to start shaking uncontrollably. Will I be able to steady it? Read on and find out.

Teaching Mindfulness to Older Adults: A Literature Review

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Abstract

The following paper is a literature review regarding how older adults learn and includes the sharing of methods and techniques that can be applied to mindfulness instruction for seniors. The topics addressed include cognitive and physical declines that may occur during later life, as well as how to compensate for these deficits by making accommodations to instruction. The paper concludes with a brief summary of how mindfulness training for older adults can be better designed based on the literature.

The purpose of this independent study project has been to review literature related to how older adults learn and to develop methods to incorporate these techniques into mindfulness programs for seniors. For this study, older adults will be defined as those aged 65 and older.

In brief, mindfulness is a way of thinking and being that encompasses, according to Kabat-Zinn, “paying attention in a particular way: on purpose, in the present moment, non-judgmentally (Martins, 2014, p. 17).

Mindfulness can be a powerful tool for older adults with a myriad of benefits. As Martins explains, mindfulness positively affects “adults’ physical health, subjective and psychological well-being, cognitive performance, social interactions, spirituality and spiritual well-being” (2014, p. 210).

Having learned the advantages of mindfulness intervention for this age group, the primary objective becomes designing a program that meets their needs and is presented in a way which connects with their learning styles and cognitive abilities.

The Mindfulness-Based Stress Reduction (MBSR) program pioneered by Kabat-Zinn serves as the foundation of most programs, regardless of the audience age (Martins, 2014). The MBSR program has been proven in numerous studies to have measurable benefits for its participants (McCown, Micozzi & Reibel, 2011). In addition to its goals of increasing awareness of how one responds to situations, developing detachment from emotional and physical pain, encouraging more adaptive responses to stress and developing compassion and acceptance (McCown et al., 2011), Keller, Singh and Winton add the following goals for older adults:

to stimulate verbal skills related to the consciousness of inner experiences; b) to move mindfully in the context of one's physical limitations; c) to experience feelings of losing control,

without nurturing other thoughts such as the risk of losing autonomy; c) to disentangle oneself from negative thoughts specific to aged people (I'm too old to change ...); d) to enhance and reinforce positive coping with typical difficulties that seniors have to deal with in their daily life (e.g., health problems with irreversible physical consequences, psychosocial limitations such as being unable to drive, or the death of peers) (2013, p. 456).

Three themes, appearing consistently in the literature, that need to be addressed in order for older participants to meet the aforementioned goals include: 1) how to compensate for decline in cognitive abilities; 2) how to compensate for changes in physical and sensory skills; and 3) how to stress the positive aspects of aging. I will focus on each of these areas individually and examine what adaptations can be made to mindfulness programs for older adults.

Cognitive Abilities

Before a discussion of cognitive decline in older adults can be started, it is important to note that speed and severity of decline is very much an individual experience. According to Stevens, "The extent of decline is affected by genetic inheritance, the presence of chronic diseases ..., the degree of education and occupation, and the extent of ongoing mental challenges generated by their extensive reading and participation in continued education activities, among other factors" (Stevens, 2003, p. 2). Therefore, it is important to keep in mind that data presented here are simply generalizations based on large numbers of subjects.

Cognitive slowing of the brain is a limitation that many older adults will have to face as they age (Stevens, 2003). According to Bayen and Jones, "older adults respond slower than young adults on tasks that assess psychomotor speed and cognitive speed," (1998, p.676). Accommodation can be accomplished by adopting a slower pace of instruction and allowing

ample time for questions (Bayen & Jones, 1998). Also, allowing extra time for note-taking and providing note paper are valuable, as seniors “may have a greater reliance on external memory aids than younger adults” (Bayen & Jones, 1998. p. 677). In addition, allowing ample time for class discussion is very important so participants have a chance to process information deeply, which helps them retrieve the information more easily at a later time.

Working memory is another area in which older adults may experience deficits. This type of memory is defined as “the capacity of the mind at any given moment to manipulate different types of information” (Stevens, 2003, p. 2). In other words, multi-tasking is not effective for older adults with cognitive deficits. Some seniors also exhibit a lessened ability to focus, which some associate with working memory issues (Steven, 2003).

Instructional adaptations for these concerns include sharing learning objectives up-front to let students know what will be covered in a given teaching segment and breaking up the instruction into smaller segments with specific goals (Bayen & Jones, 1998). Including objectives before instruction “should reduce the amount of cognitive processing resources required by older adults by helping them ‘chunk’ the material” (Bayen & Jones, 1998, p. 679). Also, relating new information to students’ existing knowledge is a very effective way to aid cognition (Stevens, 2003). Sharing information in a narrative way, rather than abstract, is also a tool to help students relate more effectively to material (Stevens, 2003).

Older adults are also “less able to ignore irrelevant stimuli and thoughts because of a decline in the efficiency of the inhibitory attentional mechanisms,” (Bayen & Jones, 1998, p. 680). This means senior have a hard time eliminating information that is not important.

Therefore, the more an instructor can eliminate distractions and focus on just one concept at a time, the better the students will grasp the material (Bayen & Jones, 1998).

To compensate for cognitive issues as they relate to materials used in training, Stevens suggests that instructors summarize their messages frequently to help memory; break text into clear sections, which divides information into manageable pieces; use headings often, which provides an introduction to the information to come and adds reinforcement; use lots of white space to avoid visually overwhelming participants; and use illustrations and diagrams, due to research that confirms people are able to decipher even complex pictures as they get older (Stevens, 2003). Bayen and Jones also argue that graphic materials reduce stress on working memory (1998). Stevens does caution instructors against the use of charts with columns and rows, such as Excel spreadsheets, because of a common cognitive decline in the skill required to decipher information in this format (2003).

Beyond examining what adaptations need to be made for older audiences, another consideration in the cognitive field is how they prefer to learn. Researchers Truluck and Courtenay examined learning style preferences of older adults in a study they conducted. The authors clarify that their definition of learning styles is related to practice in the classroom, as opposed to cognitive styles, which the authors contend are more laboratory-based with fewer applications (Truluck & Courtenay, 1999).

During the study, 172 participants completed Kolb's Learning Style Inventory (LSI) to determine their preference in classroom instruction. The researchers did not find differences based on gender or educational levels, but they did note learning style trends in various age groups (Truluck & Courtenay, 1999). Participants aged 55-65 preferred the Accomodator style

(learning by doing and feeling); those in the age range of 66-74 preferred the Diverger style (watching and feeling); and the 75+ group preferred the Assimilator style (watching and thinking) (Truluck & Courtenay, 1999). Based on the data, the researchers advise educators to embrace the diversity of older adults and to incorporate different teaching methods to accommodate their preferred styles (Truluck & Courtenay, 1999). Also, not all older adults prefer hands-on learning, which the authors contend is a common conception in adult education (Truluck & Courtenay, 1999). The key is to balance instructional methods to reach the most students.

Based on the cognitive issues addressed above, researchers Keller, Singh and Winton developed the Mindfulness-Based Cognitive Approach for Seniors (MBCAS), which is designed specifically for older audiences. While the traditional MBSR program has a duration of eight weeks, the MBCAS program is taught for eight months. The rationale for the increased length is explained below:

The reasons for this unusual time duration are the following: (a) the underpinning of the program is self-development of seniors and this takes time—a lot more time, given their age and potential for decreasing cognitive abilities; (b) healthy seniors are generally not eager to follow an intensive 8-week program because there is no clinical urgency; (c) healthy seniors have a need to feel competent and thus are not eager to be closely guided; (d) healthy seniors have a need to exercise and explore new learning within their own rhythm of life and a longer intervention period gives more time to practice alone, with regular guidance and group meetings; (e) a longer intervention period provides more opportunities to engage in meditation practice under “real-life conditions” and permits the

ritualization of the practice; and (f) with a more relaxed training pace and an enhanced opportunity to really practice, the instructor becomes less important than the participant's experience (Keller et al., 2014, p. 2).

Physical and Sensory Abilities

Researchers have found that older adults also have physical and sensory deficits that require accommodation. For example, Morone cites that “many people have decreased strength, flexibility and balance, as well as stiffer joints and decreased joint mobility as they get older” (2014, p. 2). Through practical experience, Morone says many of her older mindfulness students are not able to sit in a cross-legged position and have equal trouble standing from a prone position after body scans; therefore, her adaptation is to have all meditations done in chairs (2014).

Morone claims having older students sit upright during scans, which are intended to help participants become more attune to body sensations, “translates to body awareness during mundane daily activities such as sitting in a car or in a doctor’s office ... without direct instruction on informal mindfulness practice” (Morone, 2014, p. 3). Martins suggests integrating standing, sitting, lying down and walking to keep participants from becoming overly stiff and tired. Physical limitations should also decrease meditation time and other activities to avoid participant fatigue (Martins, 2014).

Sensory deficits also need to be addressed in designing educational programs for older adults. Bayen and Jones contend there is a “strong connection between sensory functioning and performance in cognitive tasks, especially in older adults” (1998, p. 683).

Since reduced hearing can affect some seniors, Morone offers ideas to compensate for this deficit by asking hearing-impaired individuals to sit closer to the instructor; asking those that read lips to make sure they are in a position to do so; and utilizing microphones if available (2014). For those with visual deficits, using a larger font size will help them read PowerPoint presentations and hand-outs (Bayen & Jones, 1998). Ensuring adequate lighting will also help those with visual issues (Bayen & Jones, 1998).

Positive Aspects of Aging

Although making instructional changes based on cognitive, physical and sensory abilities is necessary in teaching older adults, I believe stressing the positive aspects of aging is equally, if not more, important to the learning process -- especially in mindfulness instruction, where the primary goal is for individuals to learn more about themselves.

Stevens stresses an advantage of aging when she says “researchers have found that knowledge is retained across the lifespan” (2003, p. 2). This means every encounter and life experience a person has had add to their knowledge-base and provide myriad examples of prior learning, which they then bring to the classroom. What a wealth of skills and capabilities older adults can share with everyone! Martins mirrors this idea with the concept of conscious aging, which she describes in the following way:

Conscious aging refers to a process in which elders bring awareness and mindfulness to the aging process. This awareness allows elders to recognize the positive aspects of aging ...

This holistic line of development in later life promotes a relationship with the world in terms of universal connection, living service, self-knowledge and individuation (Martins, 2014, p. 43).

In mindfulness instruction, focusing on the spiritual and psychosocial facets of older participants and making them aware that these parts of the self can continue to grow and develop, despite any losses in physical or sensory skills, is very empowering (Martins, 2014). Older adults, who may be suffering from depression and anxiety, need to realize their potential for future growth, especially in a spiritual context. A new paradigm on aging can make a measurable difference in their outlook toward life (Martins, 2014).

Conclusion

As I look to applying all the knowledge gained from this literature review, some major points stand out for me:

1. I agree with the idea of extending a mindfulness program to months instead of weeks to allow participants to advance at their own pace, with plenty of time to practice in between sessions, as long as I make myself available for questions and discussion.
2. I will make necessary accommodations for cognitive, physical and sensory deficiencies based on the literature recommendations.
3. I will work to have participants embrace the concept of conscious aging and include activities which show participants how the world is only limited by what they think they cannot do, regardless of perceived cognitive or physical losses.
4. I will bring varied teaching methods to this group because I have learned each of us becomes more interesting and different every day, based on our unique experiences. And my instructional methods need to mirror this diversity and celebrate it.

As Eleanor Roosevelt eloquently said, “Beautiful young people are accidents of nature,
but beautiful old people are works of art.”

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