

JOINT EVENT

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Effect of a meditation-based strategy on sleep quality and perceived stress of healthy older adults living in the community

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The study assessed the comparative effectiveness of two no-pharmacological interventions, Mantram, a meditation-based strategy, and sleep techniques, to improve sleep in the healthy older adults living in the community. The study also evaluated the feasibility of delivering a 5-week, 60-90-minute, weekly *Mantram* repetition training program to a sample of healthy older adults living in the community. Qualified subjects were healthy older adults aged 50 and above who are English literates. Individuals with a diagnosis of obstructive sleep apnea and dementia were excluded. A convenient sample of 44 subjects consented to participate. One subject left the study due to illness and eight subjects with missing post-tests were removed from the analysis. A total of 35 subjects (sleep technique group n=19, *Mantram* group n=16) remained for the analysis. The study used a quasi-experimental pretest and post-test nonequivalent comparison group approach. A blocked design by gender was used and blocks were randomly assigned to either the *Mantram* intervention group or sleep technique group. Sleep quality was measured with the Pittsburgh Sleep Quality Index (PSQI). The level of perceived stress was measured with the Perceived Stress Scale (PSS). The self-reported questionnaires (PSQI and PSS) were completed before and after the 5-week training. Analysis of covariance and change scores were performed to determine the impact of *Mantram* repetition on sleep quality and perceived stress. Multiple regression analysis was implemented to identify the best set of predictors of sleep quality. The results showed that the *Mantram* group and the sleep technique group significantly differed in perceived stress, sleep latency, and subjective sleep quality scores post training, suggesting an improvement in the *Mantram* group. The *Mantram* group exhibited a beneficial change in perceived stress level, sleep quality (global), frequency of sleep-aid use, sleep latency, and subjective sleep quality. Gender and marital status were not found to have any effect on the subjects' intervention response. Marital status was the strongest predictor of global sleep quality. Age was a significant predictor of sleep latency. Being male was negatively predictive of subjective sleep quality. Perceived stress was the strongest predictor of daytime dysfunction and sleep disturbance. Intervention group membership was the strongest predictor for sleep duration.

Biography

Dr. Jade Kay graduated from University of California, Los Angeles in 2000 with a Master of Science in Nursing. Dr. Kay is a Board-Certified Family Nurse Practitioner with a Subspecialty in Neuropsychiatry. Her clinical experience is in the areas of Internal Medicine, Pediatrics, Rheumatology, and Mental Health. She attained her PhD in Nursing from University of Texas, Medical Branch, School of Biomedical Sciences in 2016. Her research interest is in psychoneuroimmunology. Her current research focus is in sleep and stress in older adults. She has published in the Journal of National Black Nurses' Association. Dr. Kay is currently serving as the Associate Director for National University, Los Angeles Campus, Department of Nursing. Her volunteer works include homeless healthcare outreach in homeless shelters in Glendora, Covina, Hacienda Heights, and San Dimas and medical/dental mission trips to the provinces in the Philippines.

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