

BACKGROUND & SIGNIFICANCE

- One of the goals of Healthy People 2020 is to reduce the number of people who experience major depressive episodes (Office of Disease Prevention and Health Promotion [ODPHP], 2010).
- Older adults are vulnerable to depressive episodes due to chronic illness, sensory and/or cognitive impairments, & decline in functional status resulting in loss of independence (Institute of Medicine [IOM], 2012).
- In 2030, the number of Americans 65 years or older will increase from 43 million in 2012 to 73 million (Ortman, Velkoff, & Hogan, 2014).
- It is estimated that clinically significant depressive symptoms affect 15% of older adults living in the community (Xiang, An & Heinemann, 2018).
- Health care spending in the U.S. reached \$2.9 trillion in 2014 (amounts to more than 17% of the U.S. economy).
- Personal healthcare spending for depressive disorders accounted for \$71.1 billion in 2013 costliest mental health condition & 6th costliest condition overall (Dieleman et al., 2016).

AIMS & OBJECTIVES

The aim is to provide a strategy, specifically mindfulness meditation, to address depression in the older population.

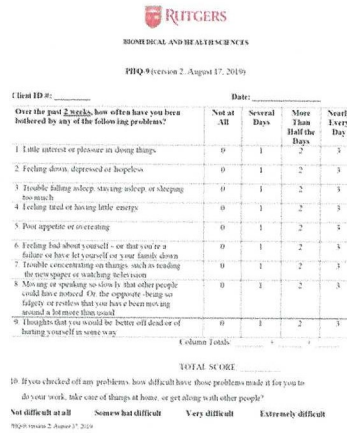
OBJECTIVES:

- Administer the PHQ-9 to clients in an AMDC to measure pre-intervention and post-intervention depression scores.
- Implement a mindfulness meditation group for 30 minutes each session, twice a week, for 4 weeks, for a total of 8 sessions.
- Compare pre-intervention and post-intervention PHQ-9 scores at the end of four weeks to determine if there are any changes.
- Gather qualitative data each session by asking participants how they feel about the mindfulness meditation group.

METHODOLOGY

DESIGN:

- Quality-improvement; Pilot study
- Quasi-experimental, pre-test post-test design
 - PHQ-9 administered to participants before and after the implementation of a mindfulness meditation group.



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PHQ-9 (version 2, August 17, 2016)

Client ID #: _____ Date: _____

Over the past 2 weeks, how often have you been bothered by any of the following problems?

	Not at All	Several Days	More Than Half the Days	Nearly Every Day
1 Little interest or pleasure in doing things	0	1	2	3
2 Feeling down, depressed or hopeless	0	1	2	3
3 Trouble falling asleep, staying asleep, or sleeping too much	0	1	2	3
4 Feeling tired or having little energy	0	1	2	3
5 Poor appetite or overeating	0	1	2	3
6 Feeling bad about yourself - or that you or a failure or have let yourself or your family down	0	1	2	3
7 Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8 Moving or speaking so slowly that other people could have noticed (or the opposite: being so fatigued or restless that you have been moving around a lot more than usual)	0	1	2	3
9 Thoughts that you would be better off dead or of hurting yourself in some way	0	1	2	3

Column Totals: _____

TOTAL SCORE: _____

10. If you checked off any problems, how difficult have those problems made it for you to do your work, take care of things at home, or get along with other people?

Not difficult at all Somewhat difficult Very difficult Extremely difficult

PHQ-9 (version 2, August 17, 2016)

SETTING:

- Adult medical daycare center (AMDC) in Northern, NJ.

SAMPLE:

- 31 adults ages 55-90 y/o with PHQ-9 scores of 5-19.

DEMOGRAPHIC DATA:

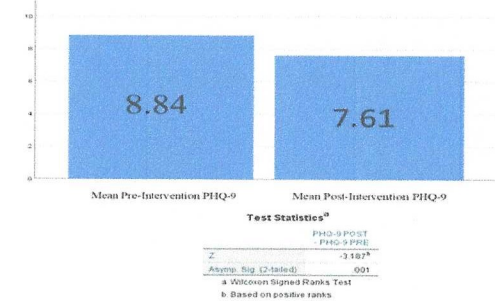
- Age, gender, race, level of education, marital status, home medications

INTERVENTION:

- Mindfulness Meditation (2 times per week for 4 weeks)
 - Week 1- Mindful Breathing
 - Week 2- Mindful Breathing with Mindful Listening
 - Week 3- Mindful Breathing with Mindful Movement
 - Week 4- Body Scan Exercise

RESULTS

Decreased depression symptoms as evidenced by lower post-intervention PHQ-9 scores.



DISCUSSION/IMPLICATIONS

- Analysis of the data using the Wilcoxon signed rank test revealed a statistically significant decrease in post-intervention PHQ-9 scores, suggesting a decrease in depressive symptoms after the intervention.
- Clinicians who work in settings like nursing homes, assisted living facilities, and adult day cares, can improve their practice by having some sort of training/experience with mindfulness meditation.
- When an intervention that targets depression in older adults, such as mindfulness meditation, is incorporated into clinicians' practices and healthcare organizational policies, this will inevitably improve quality of care and safety.
- More studies with greater sample sizes and more diverse patient population is suggested for improved generalizability.

References

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CONTACT INFORMATION:

Ben-Hur Sabino- bs770@sn.rutgers.edu