

Exploring the Influence of Mindfulness on Subjective Well-Being among Caregivers of Differently-Abled Children



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Abstract: *This research focuses on exploring the influence of mindfulness on the subjective well-being among caregivers of differently-abled children. Data were collected from 100 caregivers via self-reported questionnaires by using purposive and convenient sampling method. The main focus was to conclude whether mindfulness leads to enhancements in caregiver well-being. Statistical analysis confirmed significant positive relations between mindfulness and subjective well-being, with mindfulness positively influencing subjective well-being. Remarkably, male and elder caregivers described higher levels of both mindfulness and subjective well-being than females. The conclusions suggest that being mindful can enhance mental health outcomes of caregivers of differently-abled children. Though, the study's cross-sectional research design and use of self-reported data lessen the chances of establishing causal inferences.*

Keywords: Mindfulness, Subjective well-being, Caregivers, Differently-abled children, Mental health outcomes

Background

Caregivers' subjective well-being might take a hit when dealing with the mental and emotional demands of caring for a child with a disability. They have to deal with medical needs, behaviors of children, and their own emotional conditions too. Mindfulness involves paying attention to the present experience and treating it as neutral and non-reactive (Kabat-Zinn, 2014) and has been proposed as an intervention to enhance well-being of caregivers. Such expectations could mean increased stress and fatigue which in turn leads to feelings of emotional exhaustion, lack of social contact and reduced life satisfaction (Al-Gamal & Long, 2013). Although mindfulness has been known to enhance mental health across diverse population through various scientific studies (Creswell, 2017), the impact of simple forms of mindfulness apart from formal intervention

techniques are not as captured (Garland et al., 2011).

This raises a critical question: Even if these are not well-developed applications of Mindfulness Based Intervention, can these already provide a positive effect on the state of caregivers of children with various kinds of disabilities? Previous research has emphasized on a formal training and guided sessions of the MBIs including the mindfulness-based stress reduction (Segal et al., 2012). These programs have shown significant improvement in reducing stress, anxiety and depressive symptoms among caregivers; (Bazzano et al., 2015). Therefore, the need for structured interventions can limit the accessibility and feasibility for the caregivers who lack the resources and time. (Carlson & Brown, 2005). As such, it is important to explore whether less demanding and less time-consuming approaches

to mindfulness like Mindful breathing, Stretching and Observing Thoughts can have the same positive effect on the caregivers. Investigating this could offer a more radical way of improving the caregivers' current state of well-being especially those who might not be able to attend planned programmes (Querstret et al., 2020).

Introduction

Mindfulness with its origin from the practice of meditation in Buddhism refers to a deliberate attention on the current events without evaluating them (Kabat-Zinn, 2014). In modern culture, mindfulness has been incorporated in clinical uses like Mindfulness-Based Stress Reduction and Mindfulness-Based Cognitive Therapy which have a beneficial impact and reduce stress and improve the quality of people's lives (Goyal et al., 2014). Whereas in formal MBIs the implementation of the programme does not require a professional training and a huge amount of time each day. Mindfulness is proposed to lie in the ability to reflect upon emotions in a non-judgmental way with the ability to modulate the emotional response (Guendelman et al., 2017). This enables people to understand and manage feelings without getting lost in the emotions; it is particularly beneficial for caregivers since caregiving is highly stressful and takes its toll on the caregivers emotionally (Hölzel et al., 2011). Smolla et al. (2014) found that mindfulness brings about positive changes in emotions, lowers the levels of stress, and improves anterior wheal (Keng et al., 2011; Guendelman et al., 2017).

SWB means perceived overall well-being based on cognitive and affective evaluations that are made by the individual. The affective component involves the number and intensity of positive and negative emotions within the individual, self, and specified period (Diener et al., 2018). Another facet of SWB is life satisfaction, namely an attitude- or judgment-based report of well-being in one or more spheres of life or in life in general, including caregiving as a particular life domain (Pavot & Diener, 2008). A person with strong SWB has the ability of controlling emotions and handling

issues. On the other hand, those who report low SWB are likely to deem their lives as unhappy, characterized by negative affect including anxiety, anger and in severe cases may lead to depression (Diener et al., 2015).

Social isolation and cultural apprehension, being affiliated stigma, emerged as significant factors determining the health of the caregiver, besides caregiver's perception of stigma being relatively higher in mothers (Ji et al., 2014, Patra and Patro, 2019). Research indicated that self-identified distinct nurturing of children with ASD, the children's mothers and the demonstrative sample of mommies of offspring without incapacities spent relatively more time as caregivers and homemakers than in leisure (Bello-Mojed et al., 2013, Smith et al., 2010). Minhas et al., (2015) acknowledged that parents of children with developmental disorders tend to experience increased stress than other parents, and the stress that stems from being a caregiver may bring about increased stress and easily develop symptoms of psychiatric disorders as noted by Fairthorne et al., (2016). According to Indian research, it was found that partial mothers of offspring having ASD had depression (Singh et al., 2017).

Schumer et al. (2018) points to the fact that mindfulness may influence subjective well-being of the caregivers in a positive way and enhance their psychological processes. Thus, by learning how to pay attention to what they are thinking & feeling without getting lost in it, caregivers will be able to handle the excessive workload they encounter (Cachia et al., 2016). Also, mindfulness increases self-acceptance, which is important for caregivers since these people often have feelings of guilt and self-criticism due to the burdens that are inherent to caregiving (Neff & Faso, 2015). Thus, there is a direct connection between the increase in mindfulness as the aspect of people's daily life, and the improvement in their mental health, emotional stability, and quality of life despite the numerous difficulties they face (Rayan & Ahmad, 2017).

Such practices contribute to stress management, increased emotional self-control, and improvement of general quality of life. Insights

from prior work demonstrate that mindfulness could be an advantageous tool for caregivers. Moreover, more work is required to understand the effects of mindfulness on subjective well-being, specifically within informal practice with typical use of mindful procedures (Mehsud, Shaheen & Khattak, 2022). Thus, this research targets to examine the influence of mindfulness on the subjective well-being of caregiver's of differently-abled children. By concentrating on further reachable form of mindfulness, this study pursues to fill the gap in the literature concerning the usefulness of informal mindfulness performs in this exceptional populace. The conclusions of this research could have useful suggestions for emerging low-budget, effortlessly implementable approaches to aid caregivers, eventually enhancing their worth of life.

Rationale of the Study

The aim of this research is to establish role that mindfulness could play in enhancing the subjective wellbeing (SWB) of parents of children with disabilities who practice high level of stress, burnout & social isolation. In a negative way these challenges can affect their health as well as the quality of care that they are capable to offer. Then there is mindfulness, which is can help manage levels of stress and is useful for improving people's emotions – it is realistic and can be put into practice immediately. While there is growing literature on the benefits of mindfulness, there are few studies done on the impact of using mindfulness among caregivers of children with different disability. That is why this study at seeking to uncover how mindfulness can enhance the quality of life of caregivers, and consequently enhance the quality of life of the children being cared for, by increasing caregivers' mental health, overall well-being, and resilience to stress and emotional pressure.

Hypothesis of the Study

H₁, Caregivers of children with disabilities will experience a significantly higher rate of subjective well-being when they will be mindful.

H₂, Mindfulness will have a profound effect on the subjective well-being of caregivers of

differently abled children.

H₃, Male parents of differently abled children are more likely to report high levels of mindfulness and subjective wellbeing than their female caregivers.

H₄, Parental mindfulness and subjective well-being will be much greater among those "above 50 years" of age as compared to those "under 50 years."

Methodology

Procedure

Caregivers were first informed about the study's rationale, planned methods, and their rights as participants by means of written consent forms. Caregivers completed the previously designed FFMQ and SWLS surveys in Urdu. Caregivers of children with disabilities can have increased life satisfaction as a result of mindfulness, according to research that examined the Influence of Mindfulness on Subjective Well-Being amongst Caregivers of Differently-Abled Children using statistical approaches such as SPSS.

Research Design

Caregivers of differently abled children are the focus of this quantitative cross-sectional study, which aims to determine how mindfulness affects their own subjective well-being. Taking the measurements at regular intervals would be impractical, so the data will be acquired at one moment in time to validate the association between these factors.

Participants

Caregivers of children with disabilities in Multan, Pakistan, were our intended audience. The Children Hospital Multan and The Institute of Child Health Multan, Health NGOs and charities in Multan and Arrahma Hospital Multan Pakistan, are among the institutions that have provided subjects, as have various support groups and programs for children with developmental disorders and their families.

Sampling

In order to identify effects, a total of about 100 participants, including both males and females,

have been selected using a combination of convenient and purposive sampling methods.

Instruments

The Mindful Attention Awareness Scale (MAAS)

The Mindfulness Attention Awareness Scale (MAAS), by Brown and Ryan (2003), is a frequently utilized self-report measure especially focusing on the attention and awareness of one’s experiences in the present moment during one’s daily activities. The scale originally has 15 items, but there is also a 5-item version for quicker use. Participants estimate each entry on a Likert scale of 1 almost always and 6 corresponding to almost never, while higher scores represent greater levels of mindfulness, or higher ability to pay attention to the presence moment. This 5-item version is especially valuable for research or clinical contexts that may be time constrained, but can be confident in the assessment of mindfulness in daily functioning.

Satisfaction with Life Scale

Satisfaction with Life Scale (SWLS) is one of the most commonly employed instruments that were designed by Diener et al. in 1985, and it measures the subject’s general level of life satisfaction. The scale has five questions and the responses are measured on a Likert scale of 7 points with 1 = strongly disagree to 7 = strongly agree, and the total score is numerical and the higher the score, the higher the indication of life satisfaction. The SWLS measures how an individual objectively feels about his or her life in general without emphasizing on particular domains such as physical health or family. It is a short, simple method of assessment and is preferred in well-being research because of the validity and standardized nature of the tool.

Results

Correlation analysis was performed using the Statistical Package for the Social Sciences (SPSS version 23) to examine influence of mindfulness on subjective well-being.

Table 1 *Correlation Examination amongst variables (n= 100)*

Variables	Mean	SD	1	2
Mindfulness	15.33	5.33	1	
Subjective Well-being	35.61	6.85	.755**	1

***.* Correlation is significant at the 0.01 level (2-tailed)

Table 2 Regression results of impact of mindfulness on subjective well-being (n= 100)

Model	Outcome	Predictors	B	SE	T	LICI	ULIC
Model 3	Subjective Well-Being	Constant	20.424	2.076	9.84	16.30	24.54
		Mindfulness	.371	.136	2.724	.10	.64

$R^2 = .137, F_{(1, 98.00)} = 15.55$

***p= 0.0*

Table 2 also reveals that there is positive and significant relationship between mindfulness and subjective well-being ($\beta = 0.371, p < 0.01$). The model explains 13.7% of the total or

explained variance in well-being value of $R^2 = 0.137$ and is both statistically reliable and significant $F(1, 98) = 15.55, p < .01$. The confidence intervals are very credible (95% LCI = 0.10, 95% ULIC = 0.64) and affirm the stability of this relation.

Table 3 t-test for variance amongst mindfulness and subjective well-being concerning male & female participants (n= 100)

Variables	Gender	N	Mean	SD	T	p-value
Mindfulness	Male	64	16.318	5.692	2.659	.009
	Female	36	13.411	3.970		
Subjective Well-being	Male	64	37.000	7.040	2.934	.004
	Female	36	32.911	5.631		

It was also revealed in Table 3 that the average level of mindfulness estimated by male participants was higher than that of the female participants ($M = 16.32$, $p = .009$). Likewise, there was higher subjective well-being among males ($M = 37.00$, $SD = 7.04$) than females ($M = 32.91$, $SD = 5.63$) with a significant difference $t(98) = 2.934$, $p = .004$. This implies that males have a higher score in mindfulness

and subjective well-being as compared to the females.

Table 4 presents the results of an independent samples t-test conducted to examine differences in mindfulness and subjective well-being between two respondent age groups: Age: below fifty years and above fifty years ($n=100$).

Variables	Age Group	N	Mean	SD	T	p-value
Mindfulness	Under 50 Years	46	13.413	3.512	-3.501	.002
	Above 50 Years	54	16.963	6.062		
Subjective Well-being	Under 50 Years	46	32.217	5.185	-5.121	.001
	Above 50 Years	54	38.500	6.803		

Table 4 shows that individuals over 50 years old report significantly greater ranks of mindfulness ($M = 16.96$, $SD = 6.06$) and subjective well-being ($M = 38.50$, $SD = 6.80$) paralleled to those under 50 years (mindfulness: $M = 13.41$, $SD = 3.51$; well-being: $M = 32.22$, $SD = 5.19$). These differences are statistically significant (mindfulness: $t(98) = -3.501$, $p = .002$; SWB: $t(98) = -5.121$, $p = 0.001$) were positively correlated with these aspects of well-being.

Discussion

In the first hypothesis, it was proposed that mindfulness would be completely related to subjective well-being. It also revealed that mindfulness had a significantly positive relationship with subjective well-being ($r = .755$, $p < .01$) and added support to the theory that mindfulness can enhance well-being. This conclusion points to the fact that with the increase in the level of mindfulness, the level of

subjective well-being rises as well and with this finding, the positive effect of mindfulness on different facets of well-being has been supported. This is in support of the observation by Brown and Ryan (2003) who stated that mindfulness enhances total subjective well-being by means of facilitating present focused attention which minimizes negative emotions and enhances positive feelings. The results that are obtained in this study corroborate the above-mentioned ones where simple forms of mindfulness can be seen as useful in enhancing the quality of life of those who are engaged in care-giving, which is usually stressful and emotionally straining. Carmody and Baer (2008) supported the effectiveness of mindfulness meditation for improving the psychological well-being of the clients by reducing the levels of distress while at the same time increase their emotional competencies. This works hand in hand with the current study which reveals a

positive relationship between simple mindfulness and well-being.

According to hypothesis two, the regression analysis indicated that mindfulness significantly predicts subjective well-being ($\beta = 0.371$, $p < .01$), explaining 13.7% of the variance in subjective well-being. This result underscores the importance of mindfulness as a predictor of subjective well-being. Previous research has demonstrated that mindfulness can influence subjective well-being through various mechanisms, such as enhancing emotional resilience and reducing stress (Kabat-Zinn, 2003). Raes et al., (2011) showed that mindfulness and self-compassion are strongly linked to psychological well-being. Their study supports the notion that mindfulness contributes significantly to overall well-being by enhancing self-compassion and reducing stress.

In light of hypothesis three, the study findings showed that the male caregivers exhibited a significantly higher level of mindfulness and subjective wellbeing as compared to the female caregivers. As stated by Borenstein et al., (2021) this meta- analysis paints a panorama of the state of gender differences in psychological research with emphasis on mindfulness and well-being indicating that female participants record lower rates of well-being and mindfulness in comparison with their male counterparts. Eisenberg, N., & Lennon, R. (1983) analyse the gender differences in affectivity and psychological characteristics, one of those components is mindfulness. This study revealed that women tend to indicate increased scores in emotional distress that could be linked to reduced mindfulness than men. Some studies show that females, overall, indicate higher levels of stress & lesser levels of well-being due to social & caregiving stress (Matud, 2004) whereas other studies present that males expose greater levels of mindfulness & subjective well-being due to variations in the process of socializing & managing strategies (Brougham et al., 2009). Kuyken et al. (2010) considered gender differences in mindfulness and perceived level of well-being and observed that men tend to have higher increases of well-being under the practice of mindfulness than women. This is in

agreement with the current study's results indicating that male caregivers had higher mindfulness and subjective well-being scores.

As postulated by the fourth hypothesis, the t-test findings revealed that the levels of mindfulness and self-perceived well-being among the caregivers aged more than 50 years were significantly higher than the counterparts at below 50 years. According to the results of the current study, age was positively correlated with mindfulness and subjective well-being; therefore, it can be hypothesized that older caregivers may find solace in practicing mindfulness to enrich their well-being. According to Grossman et al. (2004), older people take more mindful positions because they have experienced more of life and focus on the here and now and this leads to higher perceived quality of life. Kok et al., (2010), therefore identified the effects of age on well-being and indicated that ageing promotes positive emotions and life satisfaction. This is similar to the results of the study discussed herein since the older participants achieved higher mindfulness and subjective well-being.

Limitations

The cross-sectional design also limits establishment a cause-and-effect relationship, while representing only some of the caregivers, the sample may not be inclusive of any caregiver, limiting external validity. For results there could be social desirability bias in self-report data and other key variables like stress of the caregiver were not accounted for. Perhaps due to the focus of the study on caregivers in Pakistan, the study may also be experiencing some degree of convergence restriction when compared to other cultures.

Future Suggestions

Future research should follow-up studies with causal oriented designs such as longitudinal and/or panel designs and include a more heterogeneous sample. Perhaps by adding self-estimated scores to the actual ratings of the subjects in question regarding mindfulness and well-being, one could garner better results. More variables could be analyzed and more studies could be made on different cultures to get a

wider picture.

Conclusion

The present research indicates the relationship between mindfulness and self-perceived quality of life among parents of children with a disability. The association between mindfulness and well-being confirms that enhanced mindfulness level positively relates to both life satisfaction and these aspects of emotional health. It is also observed that male caregiver are more mindful and have higher well-being than female caregiver. Further, the older caregivers are more mindful and have higher levels of subjective well-being than the younger caregivers. It is crucial for the future reference to continue the analysis of impact of such practices as mindfulness on the general welfare, as well as to consider the effects of gender and age.

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