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"We're Not Really By Ourselves Anymore": Implementation and Effectiveness of a Mindfulness-Based Retreat for Mothers of Pediatric Heart Transplant Recipients

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INTRODUCTION

Mothers are often the **primary caregivers** to children requiring heart transplantation (HTx). Their ability to cope with the dynamic health status of their child influences familial, social and health outcomes.¹

Mindfulness is proposed as an evidence-based intervention to enhance aspects of daily life in this caregiving population.²



OBJECTIVE

This study explored the implementation and effectiveness outcomes of a mindfulnessbased retreat (MBR) for mothers of pediatric HTx recipients.

METHODS

Intervention: A two-day MBR consisting of mindfulness-based teachings, including mindful meditation, deep relaxation and circle sharing.³

RESULTS

Sixteen mothers of pediatric HTx recipients (mean age 9.8 years, range 2-17 years; mean time post-Tx 8.2 years, range 1-16 years) participated.

Implementation Outcomes

- The MBR demonstrated high feasibility, fidelity and adoption.
- Participants reported high levels of engagement and satisfaction with the MBR.

Effectiveness Outcomes

Significant improvements were seen at T3 with regards to participants'

- (1) Ability to be mindful in daily life,
- (2) Coping through maintaining family integration, and
- (3) Perceived social support from family members.



Participants' Experiences Qualitative analysis illuminated three themes:

Participants: Mothers of HTx recipients from the Heart Transplant Program at The Hospital for Sick Children, Toronto, Canada.

Design: A convergent parallel mixed methods design using questionnaires and focus groups and interviews over three timepoints.

Assessments		T1	T2	Т3
QUANT	Five Facets Mindfulness Questionnaire	Х	Х	Х
	Coping Health Inventory for Parents	Х	Х	Х
	Distress Tolerance Scale	Х	Х	Х
	Multidimensional Scale of Perceived Social Support	X	Х	Х
	PedsQL™ Family Impact Module	Х	Х	Х
QUAL	Focus Groups		Х	
	Individual Interviews			Х

Analysis: Data were analyzed separately and amalgamated to evaluate implementation and effectiveness outcomes.



CONCLUSIONS

Study findings support the MBR as an effective and impactful intervention that improves maternal coping, social support and quality of life, underpinning family-centred care within pediatric HTx.

Findings provide the necessary evidence-base to inform future investigations examining the transferability of the MBR for caregivers and other family members affected by pediatric chronic illness.

References

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