

Pre and Post Mindfulness of College Students in a Physical Activity and Wellness Course

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Abstract

Due to its well documented benefits, the practice of mindfulness is being integrated into health promotion programming such as college courses. **The purpose of this study was to assess mindfulness of college students before and after taking a physical activity and wellness course.** The Mindful Attention Awareness Scale (MAAS), composed of 15 items with response options ranging from 1 (almost always) to 6 (almost never), was completed by students (n=225) before and after the course. A paired sample t-test was used to evaluate whether a difference existed between mean scores of Pre MAAS and Post MAAS. Pre MAAS (3.9 +/- 0.9) were significantly higher than post MAAS (3.8 +/- 1.0) test scores, $t(224)=2.784, p=0.006$. Although not significant, scores for females decreased from 3.9 to 3.7 (pre to post) while males remained the same at 4.1. Even though students received information and application activities about the mental and spiritual dimensions of wellness, and completed a stress reduction unit including mindfulness, the students did not seem to practice mindfulness on their own. One explanation might be how instructors covered mindfulness. Another explanation might be related to the higher stress levels experienced by students at the end of the semester. These results may support the need to directly educate students about mindfulness. Previous research has shown mindfulness-based programs to be effective in stress reduction and disease management, and therefore it may be advantageous to improve instructor training, increase focus on mindfulness, and monitor course fidelity to assure all content is being covered.

Purpose

To assess mindfulness of college students before and after taking a physical activity and wellness course.



Background

Kabat-Zinn (2003) defined mindfulness as, “the awareness that emerges through paying attention on purpose, in the present moment, and nonjudgmentally to the unfolding of experience moment by moment” (p. 145). Another definition is “mindfulness can refer to any one or a combination of three things: 1) a form of awareness, 2) the practice that elevates that form of awareness, and 3) the application of that awareness for specific perceptual and behavioral goals” (Young, 2013, p. 14). Shapiro, Carlson, Astin, & Freedman (2006) proposed mindfulness contains three axioms, intention, attitude, and attention, or “observing one’s moment-to-moment, internal and external experience...in the here and now” (p. 4).

Issues of Measurement:



Without an accepted definition of mindfulness, the concept can be difficult to measure. Mindfulness is always self-reported, and people may describe themselves as being mindful in assessments, yet their behaviors may not be aligned with definitions of mindfulness. As a result, measurement issues are a concern.

Previous Research

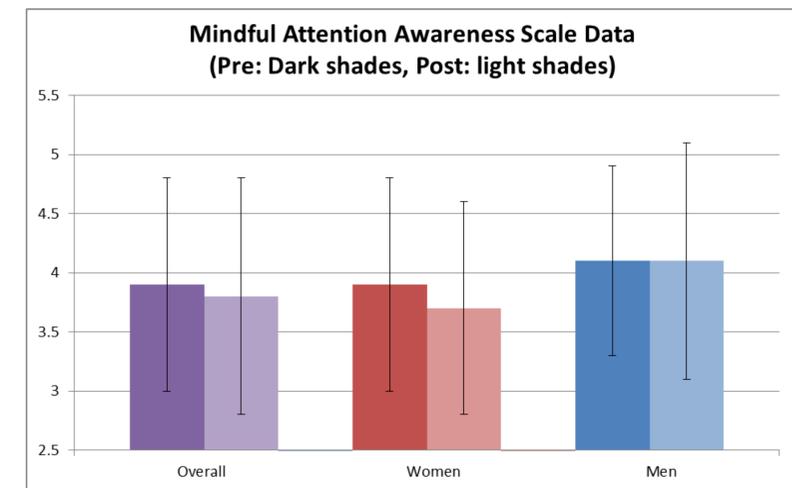
- Positive psychological effects of mindfulness include reduced psychological symptoms and emotional reactivity, and improved subjective well-being and behavioral regulation.
- Association with Healthy Behaviors: more mindful individuals practice more positive health behaviors.

Methods

The Mindful Attention Awareness Scale (MAAS) is a one-dimensional measure composed of 15 items, with response options ranging from 1 (almost always) to 6 (almost never), was completed by students (n=225) before and after the course. Some items include, “I find myself doing things without paying attention” and “I find myself preoccupied with the future or the past.” The MAAS is the most widely used measure of mindfulness and is public domain.

Results

A paired sample t-test was used to evaluate whether a difference existed between mean scores of Pre MAAS and Post MAAS. Pre MAAS (3.9 +/- 0.9) were significantly higher than post MAAS (3.8 +/- 1.0) test scores, $t(224)=2.784, p=0.006$. Although not significant, scores for females decreased from 3.9 to 3.7 (pre to post) while males remained the same at 4.1.



Conclusion

Even though students received information and application activities about the mental and spiritual dimensions of wellness, and completed a stress reduction unit including mindfulness, the students did not seem to practice mindfulness on their own. One explanation might be how instructors covered mindfulness. Another explanation might be related to the higher stress levels experienced by students at the end of the semester. These results may support the need to directly educate students about mindfulness. Previous research has shown mindfulness-based programs to be effective in stress reduction and disease management, and therefore it may be advantageous to improve instructor training, increase focus on mindfulness, and monitor course fidelity to assure all content is being covered.

References

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