

Psychoeducation *Mindfulness* to Reduce Anxiety in the Elderly in Rame Hamlet, Pilang Village, Wonoayu District, Sidoarjo Regency

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Abstract. This study aims to determine the effectiveness of mindfulness psychoeducation in increasing understanding of anxiety in the elderly in Rame Hamlet, Pilang Village, Wonoayu District, Sidoarjo Regency. The elderly often face anxiety related to age and health changes, so mindfulness psychoeducation is expected to increase their understanding of how to manage anxiety. A total of 25 elderly people participated in the psychoeducation activities provided in one session, and changes in understanding were measured using pre-test and post-test. Data were analyzed using t-test to compare the scores of understanding before and after psychoeducation. The results showed a significant difference in understanding of anxiety ($t = 8.069$, $p < 0.001$), indicating that mindfulness psychoeducation is effective in improving understanding of anxiety in the elderly.

Keywords: Anxiety, Elderly, Mindfulness, Psychoeducation

1 Introduction

Anxiety is a signal that warns or signals the presence of a threatening danger and allows a person to take action to overcome the threat [1]. Anxiety is a subjective condition that is unpleasant, characterized by feelings of anxiety, tension, and certain emotional responses in individuals. Anxiety is a temporary feeling of nervousness or fear, usually arising when someone faces a difficult situation in life [2].

In Indonesia, the rate of anxiety disorders is quite high, the Ministry of Health reported that 58% of the population experienced anxiety disorders in 2020. According to World Health Organization (WHO) statistics, anxiety increases annually by 2.5 percent, in women by 2.43 percent and in men by 0.07 percent [3]. An estimated 5% of the 898 million people worldwide suffer from acute and chronic anxiety, with a female to male ratio of 2:1 [3].

There are two groups of factors that influence anxiety levels. Internal factors include gender, age, education level, as well as an individual's experience in receiving care. Meanwhile, external factors include medical condition or disease diagnosis, availability of information, therapeutic communication, surrounding environment, and health care facilities [1]. In line with the aging process, the level of anxiety in the elderly tends to increase, which is most likely influenced by various factors, both from within (internal) and from the surrounding environment (external) [4].

Older people are more likely to experience disorders such as anxiety than depression. The aging process is associated with increased anxiety. The aging process is a natural process followed by a decrease in physical, psychological, and social interactions [5]. The aging process is a continuous process, where the capacity of body tissues decreases naturally and cannot return to its original state. In fact, the older we get, the more significant the amount of tissue loss that occurs [4].

According to data from the Indonesian Health Service, the prevalence of mental emotional disorders characterized by symptoms such as feelings of anxiety and hopelessness was recorded at 6.9% in individuals aged 55-64 years, increasing to 9.7% at the age of 65-74 years, and reaching 13.4% in the age group above 75 years. These findings indicate that feelings of anxiety are a common form of mental disorder experienced by the elderly [5].

Aspects of anxiety in the elderly can be divided into three main dimensions, namely physical, psychological and social. The physical dimension includes symptoms such as trembling, increased blood pressure, and difficulty sleeping [6]. The psychological dimension includes excessive anxiety, worry, or fear, while the social dimension includes social and community withdrawal.

Factors that trigger anxiety in the elderly include various aspects, such as declining physical health, experiences of loss, social isolation, and lack of family or community support. Fear of death is one of the dominant psychological aspects, while social factors such as loneliness and lack of interaction also exacerbate anxiety in the elderly [7].

The anxiety experienced by the elderly can have a complex impact on their physical and mental health. In addition, anxiety also affects the utilization of health services and the overall quality of life of the elderly. The causes of anxiety in the elderly are diverse, such as chronic diseases (e.g. cancer and post-stroke complications), depression, social isolation, abuse, and other physical health problems such as chronic pain, dental problems, and fear of falling[8].

Based on the results of the Community Require Evaluation (CNA) using the meet and perception strategy on elderly posyandu cadres and health workers on duty at the posyandu, it was found that the elderly in Rame Hamlet experienced anxiety. This is triggered by several factors, such as concerns about health problems, children and grandchildren, and death. This condition causes the elderly to have difficulty sleeping, trembling, and withdrawing from the social environment. In addition, in the observations made, many elderly people seemed more anxious when talking about their health or the condition of their family. Some elderly also expressed deep fears related to physical conditions and death. This condition shows that the elderly in Rame Hamlet have the potential to experience anxiety, especially chronic diseases. Therefore, to avoid or reduce the impact of this problem, a psychoeducational exercise was held.

The Indonesian Psychological Association (HIMPSI), as the professional organization for psychology in Indonesia, defines psychoeducation as an effort designed to increase individual knowledge and/or skills in order to prevent or reduce the risk of mental disorders among groups, communities, and society. This activity is preventive in nature, with the aim that mental disorders do not develop into more serious or widespread [9].

Psychoeducation is a process of delivering information and efforts to help individuals and groups develop coping skills to face various challenges or problems in life [9]. Psychoeducation is a form of comprehensive intervention that includes activities such as counseling, training, and consultation. This model is facilitative in nature, which means that psychoeducation aims to help individuals and groups develop their full potential. Because it is facilitative, psychoeducation serves to provide new insights or knowledge that can encourage internal motivation and contribute to behavioral changes in a more positive direction. As a form of psychological intervention, psychoeducation can be applied to both individuals and groups who are facing certain problems, and is believed to have an impact on their cognitive, emotional and behavioral aspects [10].

Psychoeducation activities can be carried out in a passive form, such as disseminating information through leaflets, emails or websites, or in an active form, such as counseling or counseling conducted individually or in groups. Psychoeducation aims to provide understanding to individuals who experience physical or mental disorders in order to help overcome the psychological problems they experience. Physical disorders can include conditions such as hypertension, cancer or skin diseases, while mental disorders can include depression, anxiety and schizophrenia. One form of psychological problem that often arises is anxiety [11].

Research conducted at STIKES Pantai Waluya shows that family psychoeducation is effective in reducing anxiety in families with elderly people with decreased cognitive function. The average anxiety score some time ago after psychoeducation was 69.90, while after psychoeducation it dropped to 51.70, with a decrease of 18.2 points [12]. In addition, based on the results of research conducted by Syadza Noverta, psychoeducation which includes relaxation methods and positive self-talk is proven to have a significant effect in reducing anxiety levels in the elderly, both from the severe panic category to the low-moderate category [12]. These two studies are consistent in showing that psychoeducation is an effective approach in reducing anxiety in the elderly and the individuals who care for them.

These two studies further demonstrate that psychoeducation is an effective approach to reduce anxiety in the elderly and their caregivers. One intervention that can be utilized to reduce anxiety in the elderly is mindfulness [3]. Mindfulness is a practice that includes mindfulness in the present moment without judgment, which is very useful for dealing with anxiety problems [13]. Mindfulness exercises, such as breathing techniques, reflection, and centering on the presentation, can help older adults manage anxiety more effectively and improve their quality of life. Mindfulness provides a way to distract from stresses about the future or laments about the past, which are often a source of anxiety among older people.

The success of mindfulness in reducing anxiety is influenced by several factors, such as consistency of practice, length of practice, and available social support[15]. Family and community support also play an important role in success. Mindfulness interventions in the elderly. Elderly people who routinely practice mindfulness with appropriate guidance experience a significant decrease in anxiety compared to those who do not [16].

The intervention is given in the form of mindfulness techniques carried out using four techniques, namely: (a) breathing meditation techniques, (b) body sensation techniques, (c) body detection techniques with an appreciative attitude, and (d) techniques to open awareness and accept thoughts & feelings [17]. There are five perspectives of

mindfulness, namely observing, describing, acting with mindfulness, not judging internal engagement and not reacting to internal experiences [18].

This shows that the higher the application of mindfulness, the lower the anxiety level in the elderly. Supported by research by Rovica Probawati, Witriyani, and Andriani Mei Astuti found Another large study by Goyal showed that mindfulness-based programs, such as Mindfulness-Based Stress Reduction (MBSR), can significantly reduce anxiety and stress in the elderly. In addition, mindfulness training was also found to improve sleep quality in the elderly by reducing the anxiety and stress that often interferes with their sleep. that increased mindfulness is directly related to the reduction of anxiety that almost occurs in elderly people [19].

Mindfulness psychoeducation is an increasingly popular approach to treating anxiety, focusing on developing self-awareness and acceptance of emotional experiences. Mindfulness psychoeducation is an educational activity that aims to increase awareness and awareness skills, as well as help individuals overcome psychological problems and improve mental health.

Based on the explanation above, psychoeducation efforts are needed to provide understanding to the elderly about anxiety, its causative components, its impact, and the importance of mindfulness as an effective mediation to overcome anxiety. Thus, the theory proposed is that there is no significant difference between the anxiety level of the elderly some time ago and after participating in mindfulness psychoeducation in Rame Hamlet, Pilang Village, Wonoayu District, Sidoarjo Regency. And there is a significant difference between the anxiety level of the elderly some time ago and after participating in mindfulness psychoeducation in Rame Hamlet, Pilang Village, Wonoayu District, Sidoarjo Regency.

2 Research Methods

2.1 Research Design

This research is a quantitative study with a Pre-experimental approach. The research design used is a One-Group Pretest-Posttest design to measure the understanding of the elderly before and after being given psychoeducational treatment. Onegroup pretest and post-test design is a model that is carried out with only one treatment or one group without a comparison group [20]. The use of this pre-test and post-test is ideal for studying causal relationships, because most sources of invalidity that exist in research can be well controlled.

Table 1. Experimental Design

	Pretest	Treatment	Posttest
Experimental group	O1	X	O2

Description:

O1: Measurement before treatment/Pre Test

O2: Measurement after treatment/Post Test

X : Treatment

2.1.1 Research Subjects

The subjects of this study were elderly people in Rame Hamlet, Pilang Village, as many as 25 people aged 55-70 years, 23 women and 2 men. The selection of subjects was carried out with a purposive sampling approach based on data obtained from interviews and observations of elderly posyandu cadres and doctors on duty at the posyandu.

2.1.2 Research Instruments

The instrument used in this study was a questionnaire designed to measure the level of understanding of the elderly regarding mindfulness and anxiety before and after psychoeducation. The questionnaire was prepared based on references from the research module.

2.1.3 Implementation Method

The stages of implementing this psychoeducation activity refer to three main stages, namely (1) Preparation stage; (2) Implementation stage; (3) Materials; (4) Evaluation stage.

Table 2. Preparation Stage

Stage 1. Preparation	
Activity	: - Application for permission to conduct psychoeducation activities to Pilang Sub-District Health Center. - Administration. - Conducting Community Need Assessment (CNA). - Preparation of tools, materials, and venue
Objective	: Identify needs and design a psychoeducation program.
Time	: 1 month before the activity
Tools	: Stationery, administrative documents and presentation materials

Table 3. Psychoeducation Implementation Stage

Stage 2. Psychoeducation Implementation	
Activity	: - Opening and introduction to psychoeducation participants - Ice breaking session - Pre-test completion. - Material delivery and question and answer session. - Post-test completion - Closing and photo session
Objective	: To build a conducive atmosphere and increase participants' enthusiasm
Time	: 60 minutes during the activity
Tools	: Mic, pre-test and post-test papers, and stationery.

Table 4. Materials

Stage 3. Material	
Activity	: - Definition of anxiety - Symptom factors - Definition of mindfulness - Steps of mindfulness - Benefits of Mindfulness
Purpose	: To provide an in-depth understanding of the topic of psychoeducation.
Time	: 60 minutes during the activity
Tools	: Mic, laptop, projector, pointer, and participant modules or handouts.

Table 5. Evaluation Stage

Evaluation Stage 4	
Activity	: - Completion of activity evaluation form - Preparation of psychoeducation activity report.
Objectives	: Measuring participants' understanding after psychoeducation.
Time	: 30 minutes after the activity
Equipment	: Questionnaire and Post-Test Distribution

3.2 Data Analysis

Data were obtained through questionnaires distributed to the elderly before and after the psychoeducation activity. The questionnaire contains 15 statements regarding anxiety and mindfulness, which can be answered with the option "Yes" or "No". Data from pre-test and post-test results were analyzed using JASP 0.18.3.0 software to see the effectiveness of psychoeducation on the level of understanding of the elderly.

4 Results and discussion

4.1 Results

The following presents the results of statistical analysis related to the effectiveness of the mindfulness psychoeducation program provided, specifically in reducing anxiety in the elderly in Rame Hamlet, Pilang Village, Wonoayu District, Sidoarjo Regency.

Table 6. Normality Test (Shapiro-Wilk)

<i>Test of Normality (Shapiro-Wilk)</i>				
		W	p	
posttest	-	pretest	0.934	0.109

Note. Significant results suggest a deviation from normality.

The results of the normality test, as displayed in Figure 1, show that the data fulfill the assumption of normality with a value of $P = 0.109$ ($p > 0.05$). The fulfillment of this assumption indicates that the data has met the requirements for further analysis.

Table 7. Descriptive Statistics of Pretest and Posttest Psychoeducation Scores

<i>Descriptive Statistics</i>		
	pretest	posttest
Valid	25	25
Missing	0	0
Mean	8.080	13.880
Std. Error of Mean	0.712	0.211
Std. Deviation	3.558	1.054
Coefficient of variation	0.440	0.076
Minimum	0.000	12.000
Maximum	12.000	15.000

Figure 2 presents the results of descriptive statistics describing the pretest and posttest scores of 25 elderly people related to understanding mindfulness and anxiety before and after being given psychoeducation. The data shows a significant difference in the average score before and after being given psychoeducation. The mean pretest score ($M=8.080$), which reflects the initial level of understanding of mindfulness and anxiety of the elderly before participating in psychoeducation. After being given psychoeducation, there was a significant decrease in the average, which became ($M = 13.880$), this shows an increase in understanding of mindfulness and anxiety in the elderly after being given psychoeducation.

Table 8. Paired Samples T-Test

<i>Paired Samples T-Test</i>					
Measure 1	Measure 2	t	df	p	
posttest	-	pretest	8.069	24	< .001

Note. Student's t-test.

Based on the analysis results in Figure 3 above, it can be seen that the p value = $<.001$, which is smaller than $p < 0.05$. So, it can be concluded that in this service there is a significant change in understanding between before and after being given Psychoeducation.

4.2 Discussion

The results showed that mindfulness psychoeducation was effective in increasing understanding of anxiety and mindfulness in the elderly in Rame Hamlet, Pilang Village, Wonoayu District, Sidoarjo Regency. The average anxiety understanding score before psychoeducation was $M = 8.080$ and after psychoeducation increased to $M = 13.880$. The paired t test results show a p value = $0.001 < 0.05$, which means there is a significant difference between the anxiety understanding scores before and after mindfulness psychoeducation.

This finding is in line with research conducted by Dauri who conducted a literature review and found that mindfulness therapy is effective in overcoming anxiety in the elderly [3] Mindfulness allows individuals to focus more on the present moment, increase acceptance of the conditions being experienced, and reduce excessive thoughts that can trigger anxiety. Elderly who participated in mindfulness tended to increase their understanding of anxiety triggers and how to manage them more adaptively.

However, these results differ from research conducted by Hasanah who found that although mindfulness was applied in psychoeducation activities, the impact was not significant in improving the elderly's understanding of anxiety. The study suggests that other factors such as social conditions and family support may influence the effectiveness of mindfulness in helping older adults understand and manage their anxiety.

The mindfulness psychoeducation in this study successfully demonstrated a significant effect on increasing understanding of anxiety and mindfulness in older adults. The mindfulness psychoeducation program was designed to provide insights and practical exercises related to mindfulness techniques, which can help older adults to better understand the concept of anxiety, its sources, and strategies to manage it effectively.

The process includes hands-on training through mindfulness techniques applied in several sessions, ranging from basic introduction to mindfulness, breathing exercises, to focused meditations that help older adults become more aware of their thoughts and feelings. The program was delivered in the form of lectures and practical exercises, where each session focused on increasing self-awareness and acceptance of physical and psychological conditions. The technique proved to be effective as supported by an evaluation that showed an increased understanding of anxiety and mindfulness among the participants.

In addition, the program also helped the elderly to respond to changes and challenges in life more calmly and thoughtfully. The mindfulness techniques applied in this psychoeducation are expected to provide long-term benefits in increasing older adults' understanding of anxiety and improving their quality of life. Older people who are more self-aware and understand how to manage anxiety tend to be mentally healthier and can adapt better to changes in their lives.

However, this study also faces some limitations, mainly due to the design used Pre-experimental design that cannot fully control external variables. This may affect the generalizability of the study results to the wider population. In addition, although increased understanding of anxiety and mindfulness was measured in this study, the study did not measure the long-term impact on the application of mindfulness concepts in the daily lives of older adults. Therefore, further research with a more robust experimental design and measurement of long-term impact will be needed to strengthen these findings.

Based on the results of this study, the proposed hypothesis is:

- a. H_0 (Null Hypothesis): There is no significant difference in the level of understanding of anxiety and mindfulness of the elderly before and after attending mindfulness psychoeducation in Rame Hamlet, Pilang Village, Wonoayu District, Sidoarjo Regency.
- b. H_1 (Alternative Hypothesis): There is a significant difference in the level of understanding of anxiety and mindfulness of the elderly before and after attending mindfulness psychoeducation in Rame Hamlet, Pilang Village, Wonoayu District, Sidoarjo Regency.

Based on the results of statistical analysis, the p value = 0.001 < 0.05 was obtained, which indicates that the null hypothesis (H_0) is rejected, and the alternative hypothesis (H_1) is accepted. Thus, it can be concluded that there is a significant difference in the level of understanding of anxiety and mindfulness of the elderly before and after being given mindfulness psychoeducation.

Health institutions or other related institutions are expected to be more proactive in organizing mindfulness psychoeducation programs, especially for the elderly, to help them improve their understanding of anxiety and coping strategies. In addition, collaboration between educational institutions, families and communities can create an environment that supports the implementation of this program in a sustainable and effective manner. Thus, the mindfulness psychoeducation approach is expected to make a significant contribution in increasing the understanding of anxiety and improving the mental well-being of the elderly in various regions.

5 Conclusion

Based on the results of the research analysis, it shows that mindfulness psychoeducation has a significant effect on increasing understanding of mindfulness and anxiety in the elderly in Rame Hamlet, Pilang Village, Wonoayu District, Sidoarjo Regency. Through a quantitative approach with a pretest-posttest design, the results showed a significant increase in understanding of mindfulness and anxiety in the elderly after participating in this psychoeducation program. This proves that mindfulness-focused psychoeducational interventions can help older adults to understand mindfulness and anxiety and improve their mental well-being. The program is not only effective in improving understanding of mindfulness and anxiety, but also supports increased self-awareness and adaptability, which are essential in maintaining quality of life.

In addition, this study also emphasizes the importance of the role of family and community. In addition to the individual benefits, this psychoeducation program also has wider environmental benefits in supporting the success of psychoeducation. Consistent support from the family and the creation of a supportive environment can strengthen the effectiveness of this program, so that the elderly are able to maintain and apply mindfulness techniques in their daily lives. In this context, mindfulness psychoeducation serves as a means to improve the quality of life of older adults, both psychologically and emotionally, and strengthen their ability to cope with anxiety.

In addition to the individual benefits, this psychoeducation program also has a wider impact on society. By increasing older people's understanding of the importance of managing anxiety and maintaining mental health, it is hoped that they can become more active individuals in their social lives and make a positive contribution to their environment. This study shows that the success of mindfulness psychoeducation is not only limited to

improving the understanding of anxiety in the elderly, but can also create a greater social impact by creating a healthier elderly generation.

Therefore, collaboration between health, education, family and community institutions is essential in supporting the implementation of mindfulness psychoeducation to improve the well-being of older adults. This program is expected to be the first step in creating a more resilient, healthy and qualified elderly generation in facing the challenges of life in old age.

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