

Mindfulness, Wisdom and Loving-Kindness (MWL) Meditation and Its Role in Enhancing Family Cohesion and Mental Well-Being*



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Abstract

This study examines how Mindfulness, Wisdom, and Loving-kindness (MWL) meditation can be a crucial tool for families with children who have unique requirements. This study, grounded in Buddhist psychology and peace studies, aimed to: (1) To study the difficulties and obstacles experienced by families caring and scientific knowledge for parenting of special needs children; and (2) To study the family caring aims to happiness and the meditation courses for the families based on Buddhist scripture. Conducted by the Buddhamahametta Foundation, the study utilized a qualitative approach involving 21 caregiving families and 10 interdisciplinary specialists, Buddhist teachings, paediatric care, expressive therapy, education, and the Founder of BaanMaeNok Learning Centre of Persons with Disabilities Association. Data was collected through a questionnaire and focus groups discussion.

The MWL program incorporated fundamental Buddhist practices such as mindfulness breathing, loving-kindness chanting, and contemplative reflections, specifically designed to enhance emotional regulation and foster family harmony. Findings revealed that families frequently struggle with emotional exhaustion, financial hardships, and social disconnection. Nonetheless, MWL practices significantly enhanced emotional awareness, compassionate communication, and mental resilience. Feedback after the course revealed a heightened sense of inner peace, improved caregiving perspectives, and a feeling of spiritual continuity through the daily application of MWL techniques. Participants also mentioned an enhanced feeling of community and shared understanding during the group meditation sessions. The study emphasizes MWL meditation as a culturally pertinent and psychologically advantageous instrument for promoting peace within caregiving settings. Its brief, structured format provides enduring emotional and spiritual support, aligning traditional Buddhist teachings with the contemporary needs of family care. These results highlight the necessity of incorporating spiritually based interventions into broader caregiving frameworks.

Keywords: Mindfulness; Wisdom; Loving-kindness; Family Cohesion; Buddhist Meditation; Mental Well-Being

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Introduction

The care of children with special needs involves profound responsibilities, typically borne by families under considerable emotional, financial, and social strain. Globally, these families confront persistent stressors such as emotional exhaustion, economic hardship, and inadequate access to specialized educational and healthcare services Kumari et al., (2024). This burden disproportionately impacts caregivers, who often experience heightened psychological distress driven by cultural expectations and insufficient systemic support Koç et al., (2024).

While empirically supported parenting programs are available, many fall short in addressing the deeper emotional and existential dimensions of caregiving lovino et al., (2021). In cultural contexts where spirituality is an integral part of daily life such as in Thailand Buddhist teachings offer a compelling, culturally attuned approach to fostering caregiver resilience and psychological well-being.

This study examines an integrative caregiving framework based on three foundational principles of Buddhist practice: **Mindfulness (Sati)** Nanamoli and Bodhi (1995), **Wisdom (Paññā)** Nanamoli and Bodhi (1995), and **Loving-kindness (Mettā)** Salzberg and Kabat-Zinn (2004). Together, these principles integrate emotional regulation, practical insight, and compassionate relationships into a unified model of caregiving.

Mindfulness (Sati) cultivates non-judgmental awareness of the present moment, enabling caregivers to recognize and regulate their emotions while reducing reactive behaviors.

Wisdom (Paññā) nurtures insight into suffering (*dukkha*), impermanence (*anicca*), and non-self (*anattā*), fostering a deeper acceptance of life's challenges and promoting inner equanimity.

Loving-kindness (Mettā) encourages unconditional compassion toward oneself and others, transforming stress, frustration, and resentment into empathy and emotional resilience.

Rooted in both Buddhist psychology and contemporary contemplative science, the MWL framework offers a sustainable and spiritually coherent model of caregiving. When practiced consistently, these principles support emotional clarity, relational harmony, and a renewed sense of dignity in the caregiving experience.

This research focuses on the **Buddhamahametta Foundation**, a community-based organization in Thailand that incorporates the MWL framework into its meditation programs and caregiver support initiatives. Through structured spiritual practices such as guided breathing, chanting, and devotional song (*Dhamma Gita*) the Foundation provides essential emotional and spiritual resources for families navigating the complexities of disability care.

This study, therefore, seeks to systematically evaluate the therapeutic effectiveness and cultural relevance of the MWL caregiving intervention. Situated within the wider framework of Thai Buddhist tradition and peace psychology, this research adds to the growing

academic conversation regarding the impact of contemplative practices on improving caregiver well-being.

Objectives of the Research

1. To study the difficulties and obstacles experienced by families caring and scientific knowledge for parenting of special needs children.
2. To study the family caring aims to happiness and the meditation courses for the families based on Buddhist scripture.

Research Methodology

The research employed purposive sampling to engage two distinct participant groups: (1) 21 families currently participating in the MWL meditation program for special needs caregiving at the Buddhamahametta Foundation, and (2) 10 subject matter experts from diverse backgrounds who provided comprehensive insights into care, mental health, and Buddhist practices.

Details of Key Informants and Experts:

- Senior monk and mindfulness instructor.
- Specialist in Mahayana Buddhism and family dharma practice.
- Founder of BaanMaeNok Learning Centre for persons with disabilities.
- Educator and owner of a Kumon tutorial school experienced in adaptive teaching.
- Dhamma singer and voice coach integrating MWL into artistic practice.
- Former nurse with corporate healthcare experience, offering insight into caregiver health.
- Holistic medicine advocate and Buddhist scholar.
- Paediatrician and expressive therapist specializing in developmental disorders.
- Military doctor and behavioural science expert.

These experts contributed critical perspectives during focus group discussions, particularly regarding the integration of Buddhist teachings into contemporary caregiving practices.

1. Prior to fieldwork, the researcher conducted a comprehensive review of academic, clinical, and Buddhist literature. Key areas of focus included mindfulness-based stress reduction (MBSR), Buddhist peace psychology, and the caregiving dynamics within families of children with special needs.

2. Field Study: The intervention was conducted at the BaanMaeNok Learning Centre, a facility serving individuals with disabilities. The core activity involved a one-day MWL meditation session tailored for families caring for children with developmental or cognitive challenges.

3. Key Informants: The 21 participating families served as primary informants, selected through purposive sampling to ensure diversity in socioeconomic background, caregiving responsibilities, and caregiving duration. Additionally, the 10 subject matter experts were engaged to contribute multidisciplinary perspectives.

4. Research Instruments: Two main tools were used: a structured questionnaire and focus group discussions. The questionnaire assessed emotional, psychological, and experiential changes following the MWL session, while the focus groups explored broader themes such as caregiving, spirituality, and the perceived benefits of MWL practices.

5. Data Collection: Data were collected after the one-day course. All family participants completed the questionnaire, and selected family representatives along with all 10 experts joined the focus group discussions.

6. Data Analysis: A qualitative thematic analysis was conducted. Data were coded line-by-line to identify recurring themes, emotional patterns, and behavioral trends. Cross-validation was performed by triangulating data from questionnaires, focus group transcripts, and observational field notes to enhance credibility and validity.

7. Summary and Presentation: Findings were synthesized and organized into thematic categories with accompanying visual representations. These results illustrated the effects of MWL meditation on family well-being, stress management, and spiritual development, and were interpreted within the frameworks of Buddhist psychological theory and contemporary caregiving research.

Research Results

The results are presented below, categorized according to the study's two primary objectives.

The 1st objective: To study the difficulties and obstacles experienced by families caring and scientific knowledge for parenting of special needs children.

1. Challenges Faced by Families

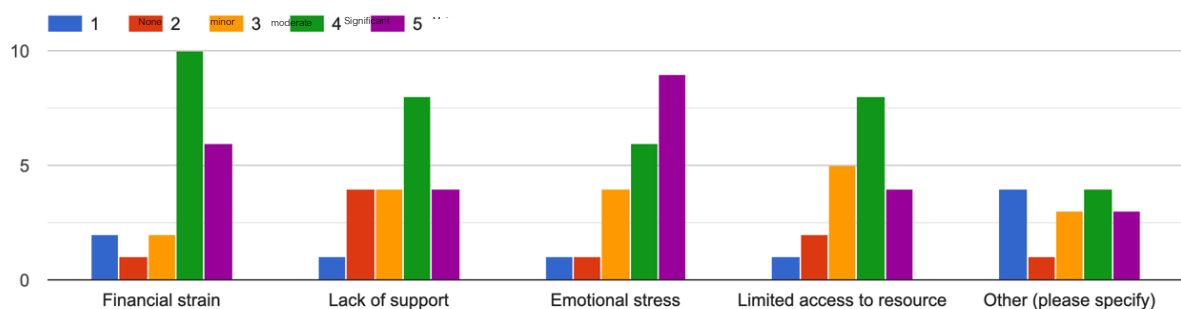


Figure 1: Reported challenges when caring for a child with special needs (1= Not a challenge and 5= Major challenge)

Based on survey responses, the primary challenges faced by families caring for children with special needs include emotional burdens, financial constraints, limited access to resources, and insufficient social support. Among these, emotional strain and financial hardship emerged as the most pressing concerns. As shown in Figure 1, 10 respondents rated financial difficulties at level 4, and 6 considered it a level 5 issue (indicating a major challenge). Emotional strain also received a high number of level 5 ratings, reflecting its pervasive impact. These findings highlight the substantial psychological and economic pressures experienced by caregiving families. This assessment aligns with the conclusions of Kumari et al. (2024) and Koç et al. (2024), who identified emotional exhaustion and financial strain as prominent stressors for caregivers of children with special needs. Henning-Smith and Lahr (2021) further underscored the multifaceted nature of caregiving challenges, including elevated psychological stress and diminished care quality, issues that are particularly acute in rural and underserved communities. Additional insights are offered by Simione et al. (2024), who examined the systemic barriers families encounter when accessing autism-related support services, and Singh et al. (2023), whose findings demonstrated that mindfulness interventions significantly enhanced caregiver well-being and improved the quality of life for individuals on the autism spectrum.

2. Observed Post-Course Behavioural Shifts

Field observations and follow-up narratives revealed that many families described using breathing techniques during stressful moments, engaging in nightly *Dhamma Gita* sessions with their children, and approaching caregiving with increased compassion. During focus group discussions, caregivers emphasized how these simple yet meaningful practices helped reduce reactive behaviors and cultivate more peaceful home environments. A recurring theme that emerged was the transformation of caregiving from a burdensome duty into a journey of personal and spiritual growth.

3. Community Bonding and Empowerment

The seminar fostered a strong sense of solidarity and companionship among participants. Attendees reported feelings of togetherness, mutual encouragement, and validation through the sharing of personal caregiving experiences. Although informal and temporary, this community served as an emotional support system, offering insights that extended beyond individual households and contributing to participants' overall well-being.

These observations underscore the multifaceted impact of the MWL course, not only on individual emotional states but also on family dynamics and community connections. Though brief in duration, the program planted meaningful seeds of transformation, rooted in both psychological principles and Buddhist spiritual wisdom.

The 2nd objective: To study the family caring aims to happiness and the meditation courses for the families based on Buddhist scripture

1. Experience of Happiness After MWL Meditation Course

21 responses

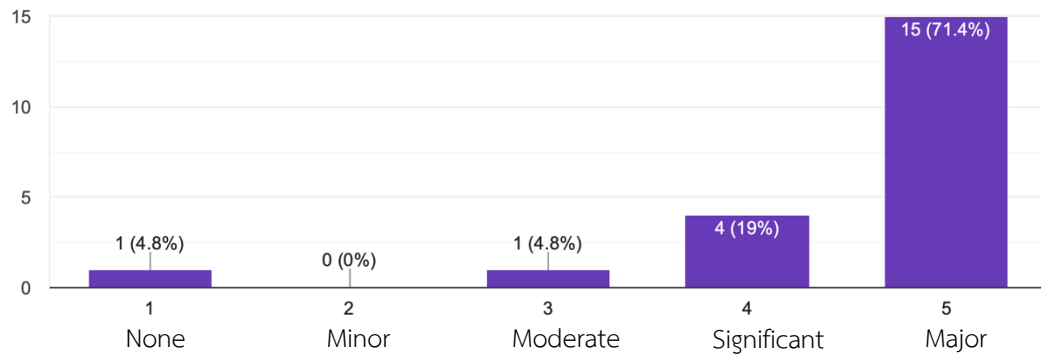


Figure 2: Family happiness improvement rating post-course (1= Not a challenge, 5=Major challenge)

A follow-up survey conducted after the one-day MWL meditation session revealed overwhelmingly positive outcomes. As illustrated in Figure 2, 71.4% of participants rated their post-course happiness at level 5, while 19% selected level 4. These responses indicate that the MWL course significantly improved participants' emotional well-being and perspectives on caregiving. Reported benefits included a sense of inner tranquility, renewed patience, and enhanced emotional clarity.

2. Perceived Benefits of Meditation Course Components

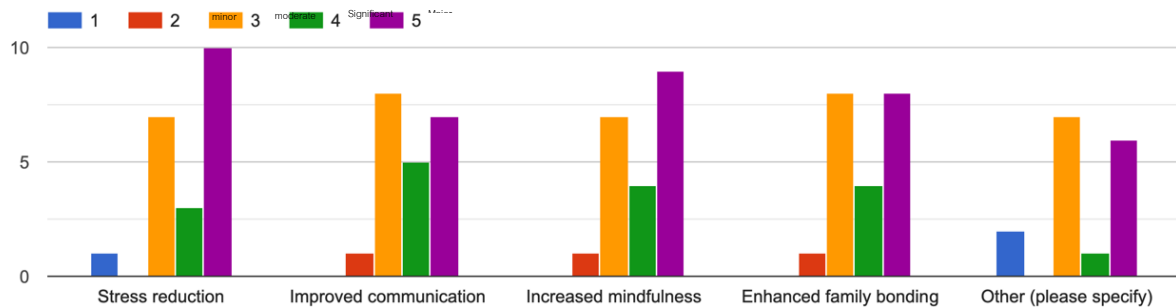


Figure 3: Ratings of specific benefits gained from MWL meditation (1= Not a challenge and 5= Major challenge)

Participants were also asked to evaluate specific components of the MWL course. As shown in Figure 3, the most highly rated elements included stress reduction, increased mindfulness, and improved family connectedness. For instance, 10 participants rated stress reduction as level 5 (extremely beneficial), with similarly strong ratings observed across the other domains. These findings provide further evidence supporting the MWL course as an effective intervention for enhancing caregivers' mental health and promoting family cohesion.

1. Observed Post-Course Behavioural Shifts

Observations revealed that many caregivers have integrated mindfulness breathing and *Dhamma Gita* chanting into their daily home routines. This sustained engagement with MWL techniques reflects not only the course's long-term applicability but also its deep spiritual resonance, particularly within the context of Buddhist teachings.

2. Community Bonding and Empowerment

This informal peer network offered more than just emotional support. It embodied the Buddhist communal ideals of shared tranquility and mutual encouragement, thereby reinforcing the social and spiritual dimensions of happiness cultivated during the MWL session.

The MWL (Mindfulness, Wisdom, and Loving-kindness) intervention yielded significant positive outcomes. Following the intervention, more than 90% of participants reported increased happiness, emotional clarity, patience, and improved family interactions. These outcomes corroborate earlier mindfulness research by Kabat-Zinn and Hanh (2009) and Salzberg and Kabat-Zinn (2004), which demonstrated that brief, structured meditation practices can substantially enhance emotional well-being and social connectedness.

Further support comes from Ruiz-Robledillo et al. (2015), who showed improved health outcomes in caregivers of individuals with ASD following a structured eight-week mindfulness program delivered in a group format, consisting of eight consecutive fortnightly sessions followed by a final session after a two-week interval. Similarly, Lunsy et al. (2021) reported reduced stress and enhanced coping capacity among parents of autistic adolescents through a virtual, group-based mindfulness intervention. These results resonate with findings by Reilly (2025), who documented improvements in parent-child interactions and emotional self-regulation following loving-kindness meditation.

In addition, Tan et al., 2017 emphasized the integration of mindfulness-based interventions rooted in Theravāda Buddhism, such as Mindfulness-Based Supportive Therapy and Mini-Mindfulness Meditation, that highlights the potential of culturally grounded contemplative practices to enhance psychosocial care in palliative settings, aligning with MWL's Buddhist-inspired framework. Ramakrishnan (2023) further expanded on mindfulness assessment tools used in autism caregiving programs, reinforcing the flexibility and cross-cultural relevance of MWL's components.

Together, these findings reinforce the MWL framework as a credible, adaptable, and context-sensitive intervention model.

These collective results underscore the efficacy of mindfulness-based and Buddhist-informed programs in fostering emotional well-being, caregiver empowerment, and family cohesion across diverse caregiving environments.

The New Body of Knowledge

This research presents an MWL-based caregiving intervention, delivered as a one-day meditation course hosted by the Buddhamahametta Foundation. The course incorporated the following core components:

1. **Guided mindfulness breathing exercises** designed to enhance present-moment awareness and support emotional regulation.
2. **Loving-kindness (mettā) chanting and visualizations**, aimed at cultivating compassion and reducing emotional reactivity.
3. **Application of Wisdom (paññā)** through guided reflections on Buddhist teachings relevant to the caregiving experience.
4. **Use of Dhamma Gita** - Buddhist devotional songs and verses that participants can incorporate into their home routines for ongoing spiritual support and emotional upliftment.

These components embody a practical integration of mindfulness and compassion-based Buddhist methodologies. The conceptual relationships between caregiving challenges, spiritual practices, and community-based support are illustrated in Figure 4.

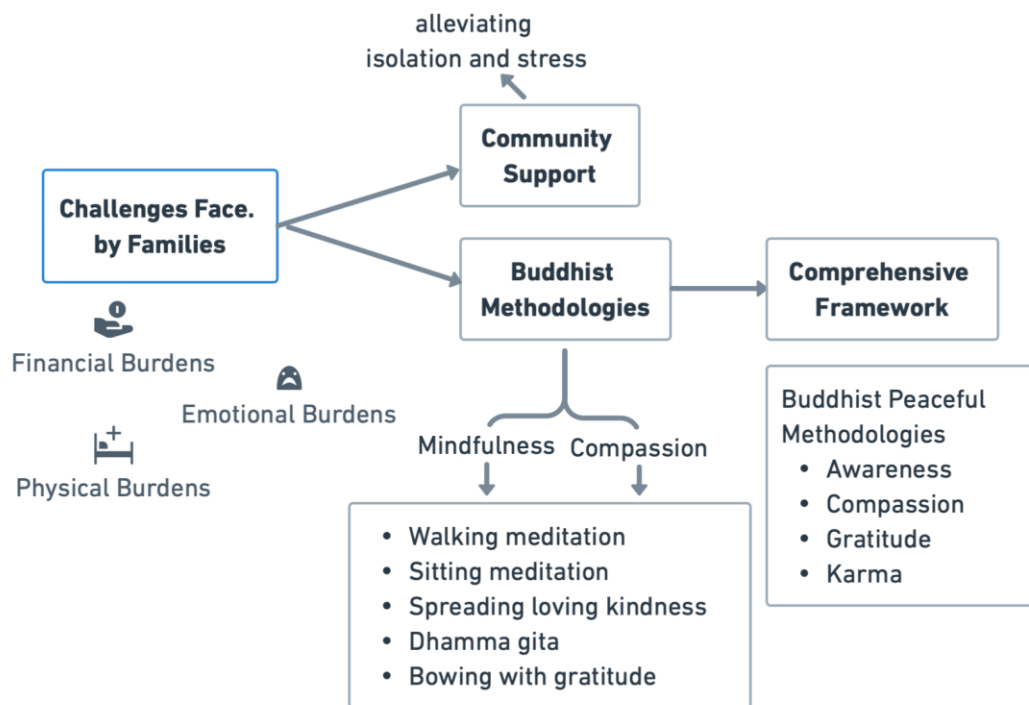


Figure 4: Integration of MWL Practices and Buddhist Peace Methodologies to Address Family Caregiving Challenges

This figure visually synthesizes the emotional, financial, and physical burdens experienced by families caring for children with special needs. It illustrates how core Buddhist principles, such as community support; mindfulness; and loving-kindness, intersect to form a holistic and supportive caregiving framework.

Though the intervention lasted a single day, its intention was to provide sustainable tools, namely mindfulness and loving-kindness techniques that could be practiced daily within the home environment.

The model emphasizes accessibility, spiritual alignment, and emotional transformation, showing that even brief interventions can yield lasting psychosocial benefits when grounded in authentic spiritual principles and reinforced through consistent daily practice.

Discussion of Research Results

Objective1: To study the difficulties and obstacles experienced by families caring and scientific knowledge for parenting of special needs children

Families caring for children with special needs face substantial emotional, financial, and systemic burdens. These include heightened emotional stress, economic hardship, limited access to professional guidance, and inadequate institutional support. This analysis aligns with findings by Kumari et al. (2024) and Koç et al. (2024), who identified emotional fatigue and financial strain as primary stressors among caregivers. Furthermore, Henning-Smith and Lahr (2021) highlighted compounding challenges such as caregiver burnout and diminished caregiving quality, particularly prevalent in rural and underserved regions.

Objective2: To study the family caring aims to happiness and the meditation courses for the families based on Buddhist scripture.

The MWL (Mindfulness, Wisdom, and Loving-kindness) intervention yielded significant positive outcomes. Post-intervention, over 90% of participants reported increased happiness, emotional clarity, patience, and improved family interactions. These outcomes corroborate earlier mindfulness research by Kabat-Zinn and Hanh (2009) and Salzberg and Kabat-Zinn (2004), which demonstrated that brief, structured meditation practices can substantially enhance emotional well-being and social connectedness.

Conclusion

This analysis demonstrates that the MWL meditation approach, grounded in Buddhist philosophy, provides a culturally meaningful and effective strategy for addressing the psychosocial challenges frequently encountered by families of children with special needs. Notably, even a single session resulted in reported improvements in emotional regulation, mindfulness, and overall family cohesion.

The implementation model employed by the Buddhamahametta Foundation exemplifies how spiritual practices such as loving-kindness chanting and *Dhamma Gita* recitation can be seamlessly incorporated into daily caregiving routines. These outcomes highlight the potential of MWL as a sustainable and spiritually congruent intervention framework.

By integrating Buddhist principles with contemporary caregiving needs, this study contributes to the expanding discourse on mindfulness-based interventions and underscores the value of culturally embedded approaches in diverse familial and sociocultural contexts.

Suggestions

1. The suggestions from the research

From the research result of the 1st objective, relevant institutions such as healthcare providers, educational institutions, social development ministries, and community centres ought to create comprehensive caregiver education programs that blend contemporary parenting insights with culturally significant Buddhist meditation techniques. These initiatives should foster interdisciplinary collaboration among health professionals, Buddhist monks, educators, and therapists to assist families in a holistic way. The training should encompass modules on emotional regulation, mindfulness-based communication, and household practices that incorporate Dhamma Gita.

From the research result of the 2nd objective, it is recommended that the MWL meditation course be offered as a regular series of one-day sessions by the Buddhamahametta Foundation and the Baan Mae Nok Learning Centre for Persons with Disabilities Association. In addition, families should be provided with supplementary materials to take home, such as recorded chanting sessions, reflective journaling guides, and sustained support through community networks or mobile applications. This framework will promote regular practice and enhance accessibility for underrepresented communities.

2. The suggestions for future research

2.1 Engage in longitudinal studies that monitor the emotional and relational health of families for a duration of 3 to 12 months after completing the MWL course, utilizing repeated interviews and follow-up surveys.

2.2 Examine the results of meditation practices rooted in Buddhist principles alongside those of secular mindfulness and cognitive-behavioural parenting initiatives, employing a controlled experimental framework.

2.3 Investigate the varying effects of MWL meditation on caregivers of children with diverse disabilities such as autism spectrum disorders, physical challenges, and intellectual disabilities to gain insights into both specificity and generalizability.

2.4 Explore the influence of Dhamma Gita and auditory spiritual resources in enhancing emotional resilience at home, utilizing neuroscientific and psychophysiological evaluations.

2.5 Assess the impact of MWL practices on enhancing family system dynamics, including marital communication, co-parenting synchronization, and sibling interactions.

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