# Assessing the impact of transcendental meditation on the mental health and well-being of UK ambulance service personnel: A single-arm study

Submission date	<b>Recruitment status</b> No longer recruiting	Prospectively registered		
31/01/2024		[X] Protocol		
Registration date 15/02/2024	Overall study status Completed	Statistical analysis plan		
		Results		
<b>Last Edited</b> 15/02/2024	Condition category  Mental and Behavioural Disorders	Individual participant data		
		[ ] Record updated in last year		

## Plain English summary of protocol

Background and study aims

The COVID-19 pandemic has significantly impacted the mental health of ambulance service workers, exacerbating existing stressors and leading to increased rates of depression, anxiety, and PTSD among healthcare professionals. Even before the pandemic, the UK's ambulance service faced challenges such as high sickness absence rates and burnout among staff, highlighting the need for effective interventions. Despite existing stress coping methods provided by ambulance service trusts, stress levels among ambulance staff post-pandemic continue to rise, emphasising the necessity for additional solutions.

Transcendental Meditation (TM) has emerged as a promising intervention, showing efficacy in reducing stress and improving psychological well-being across diverse populations. This study aims to assess the effectiveness of TM specifically for ambulance service workers in the UK, recognising the urgent need for interventions to support their well-being amidst ongoing challenges. Through the assessment of PTSD symptoms, perceived stress, and other mental health indicators, this research seeks to offer valuable insights into TM's potential as a practical and effective tool to address a critical gap in current support strategies for ambulance service personnel.

## Who can participate?

Individuals working in various roles in the Ambulance Service were eligible to participate in the study.

## What does the study involve?

Participants received instruction in Transcendental Meditation (TM) and were recommended to practice the technique twice daily, for 20 minutes each session, in the morning and evening. The TM course included a 60-minute introductory presentation, followed by 4 consecutive days of instruction lasting 90-120 minutes per session, which could be attended either in person for all sessions or as blended learning, with the first session one-to-one in person and subsequent

sessions held in small groups remotely. Remote sessions utilised a specially designed app for course materials, with participants connecting to their TM instructor via video conference for daily meditation sessions. Both in-person and remote courses provided identical content. Additionally, participants were offered individual and group follow-up sessions, available both in person and online. Participants signed a consent form and completed a baseline survey before learning TM, followed by surveys post-TM instruction at 3 weeks and 3 months. Standard self-reporting measures were used to assess post-traumatic stress disorder (PTSD) symptoms, perceived stress, anxiety, depression, insomnia, professional fulfilment including burnout and general mental health and wellbeing,

What are the possible benefits and risks of participating?

Participating in the study and learning TM offered potential benefits to reduce stress and related conditions, enhancing general health and wellbeing, and fostering daily resilience. No anticipated risks were associated with learning TM, and participants were given the option to withdraw from the practice and study at any time.

#### Where is the study run from?

TM instruction took place in the East of England area. The TM instruction was arranged by the David Lynch Foundation UK and the study was conducted in collaboration with the Center for Social-Emotional Health & Consciousness, Maharishi International University, USA.

When is the study starting and how long is it expected to run for? June 2021 to March 2023. The study commenced recruitment in July 2021 and concluded in March 2023.

Who is funding the study?

Funding was provided by the David Lynch Foundation UK, with a grant from the Postcode Places Trust.

Who is the main contact?
The main contact was Deirdre Parsons the Principal Investigator, dparsons@davidlynchfoundation.org.uk

# **Contact information**

## Type(s)

Public, Scientific, Principal investigator

#### Contact name

Ms Deirdre Parsons

#### Contact details

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## Additional identifiers

## Clinical Trials Information System (CTIS)

Nil known

## ClinicalTrials.gov (NCT)

Nil known

#### Protocol serial number

UK Ambulance 2021-2023

# Study information

#### Scientific Title

Evaluating the impact of transcendental meditation (TM) on reducing PTSD Symptoms and stress-related conditions among ambulance staff: A three-month intervention study

## Study objectives

The hypothesis is that individuals employed in the ambulance service who regularly practise transcendental meditation (TM) for three months will show improvements in reducing stress levels and related conditions.

## Ethics approval required

Ethics approval required

## Ethics approval(s)

approved 02/07/2021, Maharishi International University (Maharishi University of Management Research Institute) (1000 N 4th Street, Fairfield, Iowa, 52557, United States of America; +1 3196140357; ftravis@miu.edu), ref: DLFUK2021

## Study design

Single-arm multi-centre interventional study

## Primary study design

Interventional

## Study type(s)

Prevention, Quality of life, Treatment, Efficacy

## Health condition(s) or problem(s) studied

Reduction in post-traumatic stress disorder (PTSD) symptoms and stress-related conditions in ambulance staff.

#### Interventions

This is a single-arm, multi-centre interventional study involving 60 participants from the UK ambulance service, conducted in collaboration with the David Lynch Foundation UK and the Center for Social-Emotional Health, Maharishi International University (MIU) in the USA, where participants voluntarily learned transcendental meditation (TM) and practised it twice daily for three months.

The participants, employed in various roles within the ambulance service, will learn TM and be instructed to practice it twice daily. Standard self-reporting measures will be administered online at baseline, post-TM course, three weeks, and three months. Additionally, semi-structured one-to-one interviews will be conducted via a video call with 11 participants after the three months following TM instruction. Participants receive instruction from a specialised TM instructor in small groups in four sessions over consecutive days, with options for in-person or blended learning, where the initial session is conducted in person, followed by subsequent sessions conducted remotely online using a video conference platform.

#### Intervention Type

Behavioural

## Primary outcome(s)

Post-traumatic stress disorder (PTSD) symptoms measured using a self-reporting PTSD Checklist (PCL-5) at baseline, 3 weeks and 3 months

## Key secondary outcome(s))

The following secondary outcome measures are assessed at baseline, 3 weeks and 3 months:

- 1. Perceived stress using the self-reporting Perceived Stress Scale (PPS-10)
- 2. Depression using the self-reporting Patient Health Questionnaire (PHQ-9)
- 3. Anxiety using the self-reporting General Anxiety Disorder 7 scale (GAD-7)
- 4. The severity, and impact of insomnia using the self-reporting Insomnia Severity Index (ISI-7)
- 5. Mental well-being covering subjective well-being and psychological functioning using the self-reporting Warwick-Edinburgh Mental Wellbeing Scales (WEMWBS)
- 6. Professional Fulfilment using the self-reporting Professional Fulfilment Index (PFI-16)
- 7. Burnout using the self-reporting Professional Fulfilment Index i(PFI-16)

## Completion date

27/03/2023

# **Eligibility**

## Key inclusion criteria

- 1. Working within the UK ambulance service
- 2. Adults aged over 18 years

## Participant type(s)

Healthy volunteer, Health professional

## Healthy volunteers allowed

No

## Age group

Mixed

## Lower age limit

18 years

## Upper age limit

70 years

#### Sex

All

#### Total final enrolment

60

## Key exclusion criteria

- 1. Self-reported or diagnosed unstable psychotic symptoms
- 2. Any prior involvement in TM instruction
- 3 Signed off or retired from the ambulance service

#### Date of first enrolment

05/07/2021

#### Date of final enrolment

10/10/2022

## **Locations**

#### Countries of recruitment

**United Kingdom** 

England

# Study participating centre

Missenden Abbey Adult Education College

School Grounds Great Missenden United Kingdom HP16 0BD

## Study participating centre

#### Premier Inn

Prince of Wales Road Norwich United Kingdom NR1 1DX

# Study participating centre

Writtle College

Lordship Road, Writtle Chelmsford United Kingdom CM1 3RR

# Study participating centre Regus

8 Duncannon street London United Kingdom WC2N 4JF

# Sponsor information

## Organisation

David Lynch Foundation UK

# Funder(s)

## Funder type

Charity

#### Funder Name

Postcode Places Trust

#### Funder Name

David Lynch Foundation UK

## **Results and Publications**

## Individual participant data (IPD) sharing plan

The data sets generated during and/or analyse during the current study will be available upon request from Deirdre Parsons, Principal Investigator: dparsons@davidlynchfoundation.org.uk beginning at 9 months and ending 36 months following article publication

Documents available: Study Protocol, Informed consent form

Data will be available individual participant data meta-analysis for Investigators whose proposed use of the data has been approved by an independent review committee identified for this purpose..

Data will be available from Investigator's proposals that have been submitted up to 36 months following article publication.

## IPD sharing plan summary

# Available on request

## Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Protocol file			15/02/2024	No	No