



# MANUAL OF SHARED ATTENTION EXERCISES FOR CAREGIVERS AND ALZHEIMER'S PATIENTS IN MILD AND MODERATE STAGE (GDS3, GDS4)

Canary Association for the Development of  
Health through Attention



attention to  
the present



# **Manual of shared attention exercises for caregivers and Alzheimer's patients in mild and moderate stage (GDS3, GDS4)**

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**Canary Association for the Development  
of Health through Attention**

**Living aware is like taking a daily health pill for our body, our thinking, our emotions and our relationships.**

**"Attention to the present is an intentional focus of attention, which allows us to observe, without effort and without judgement, our bodily sensations, emotions, thoughts and external phenomena, while we are experiencing them".**

**This guide, which is complementary to the *Manual of Attention to the Present Exercises*, is not centered on explaining thoughts, considerations, reflections or theories about attention to the present nor cognitive deterioration. The guide focuses on the most important aspect of “attention to the present” which is practice. No knowledge about attention to the present is more important than practice.**

**In accordance with the above, this guide is focussed on suggesting attention to the present exercises to practise, on a shared basis, with the aim of contributing to the health of people with mild and moderate cognitive impairment.**

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# INTRODUCTION

**Attention to the present** practice produces beneficial and specific effects on cognitive processes, brain activity and physical and mental health that are relevant for the clinical control of **Alzheimer's disease** (AD) and other dementias.

There is a great deal of scientific documentation that supports the effectiveness of treatments based on attention to the present in reducing symptoms such as stress, hypertension, anxiety and depression, all of which are risk factors in AD.

AD has a multifactorial etiology and its course is manifested by a heterogeneous symptomatology with deficits in cognitive, functional capacity and the development of **psychological and behavioural symptoms associated with dementia** (PBSA). For this reason, effective treatment should address these aspects. In this regard, practice based on paying attention to the present entails the performance of exercises that involve the cognitive abilities implicit in carrying out basic, instrumental and advanced **daily life activities** (DLA). In addition, these practices generate a state of calm that helps to prevent psychopathology.

Attention to the present-based treatments (paying attention to the present) have demonstrated that during its practice cerebral circulation increases in cortical and subcortical areas, including the hippocampus (the central structure in AD), the connectivity between different brain structures and the neuronal density increases, brain function changes in the resting state, and areas of the brain are activated that are involved in the body awareness and emotional control aspects of the attention to the present practice. All of these capabilities deteriorate progressively in AD.





Therefore, participating actively in a programme based on attention to the present should be beneficial for older people with AD.

The pioneers in adapting a programme based on Attention to the present for older people with dementia were Lantz, Buchalter and McBee in 1997. These authors developed a group programme to reduce the PBSA in a home. The effectiveness of this intervention in the management of the behaviour of older people with dementia has been repeated in various studies since then. However, we do not have sufficient data on their effectiveness in preventing the emergence of psychopathological comorbidity in the early stages.

A start has also been made to apply a **programme of mindfulness based stress reduction** (MBSR) to people with mild cognitive impairment and is producing promising data on its efficacy in the cognitive area. However, the studies should be improved by conducting controlled clinical trials with more experimental subjects.

While the possible benefits of the practice of attention to the present in AD may be easy to observe, traditionally it has not been very clear how to carry out this practice with Alzheimer's patients.

The main obstacle has been the role that immediate memory loss plays in the course of the disease, since the expectation is that patients would simply forget to practise. For this reason it has been suggested that this practice is not suitable for use in residential contexts.



To overcome this obstacle, the programme of stimulation based on attention to the present that we have developed for patients with Alzheimer's disease, is built around three pillars: 1st) Caregivers, 2nd) basic and instrumental DLA and 3rd) attention to the present moment.

The main aim was to instruct caregivers and patients to practise focussing their attention on the present before starting, or during the course of their DLA. To carry out this task, and to embed the practice in an appropriate and meaningful way, the caregiver and the patient come to a group session three times a week until they consolidate and embrace the practice.

Our research team has developed a longitudinal study, probably the first in the world, which has evaluated the effect of attention to the present in the evolutionary course of Alzheimer's disease.

We are currently focussing on the production of research and training programmes that enhance individual and social health, by adopting a way of life that is in touch with reality, without prejudices and with an affection and respect for life in all its manifestations.



## CONSIDERATIONS

### *Shared attention*

Shared attention is an exercise in communication.

### *A skill*

Shared attention is a skill through which the caregiver (guide) **shares and maintains the attention** of a sensation with the patient.

### *The aim of being attentive*

The purpose of practising attention to the present consists of two aspects that improve our **health**.

On the one hand it allows us to **overcome the stress** that causes us to live in a distracted way. On the other hand it helps us to **maintain a genuine empathetic affection** towards ourselves and others.



## *The aim of sharing attention*

The aim of sharing is to help the patient to pay attention and to **maintain** their **attention** towards what is happening.

## *With whom can it be useful to share attention?*

With people with mild and moderate cognitive impairment. Also with beginners in the practice of attention to the present.

## *How to maintain shared attention?*

By the guide periodically **repeating the invitation to the patient to pay attention** to the sensation produced by the proposed activity.

## *The need to stimulate*

It is essential that the guide generates interest in the patient about the exercise to be shared.

In order to **stimulate** the person with cognitive deterioration the important thing is to be able to practise for a few minutes before a pleasurable activity takes place, only for three minutes, the time it takes to count 30 breaths.



The **pleasurable activities** should be everyday activities, every meal, bathing, brushing the teeth, walking, watching television, saying goodbye when going out or greeting people when coming back home. These daily activities should be the focus of attention.

## *Considerations in developing exercises for shared attention*

1. Use simple **language**.
2. Suggest them **clearly, concisely and directly**.
3. The focus of attention must always be a **sensation**.
4. Use must be made of the **scenarios** that are offered by our daily lives.
5. **Adjust the exercise** to the skills and abilities of the patient.
6. The place and the length of the exercise must help to **sustain attention**.
7. **Repeat** the **exercises** that work.





## *Considerations to the guide*

1. **Assist the patient** without feeling obligated and with an affectionate smile. Suggest, never order.
2. The attention to the present exercise that is suggested, is **always shared**.
3. Consider what is **motivating** for the patient.
4. Consider what may constitute a cause of **resistance** for the patient, such as the invasion of his personal space.
5. Consider the **inner harmony** of the patient.
6. Consider **how to handle the patient**.
7. Consider the **tone of voice** that is comfortable for the patient.
8. Always **go slowly** rather than quickly.
9. The drifting of the patient informs us of the need to **make adjustments** to the exercise.



## *Evaluate in order to learn*

After the attention to the present exercises, as caregivers **we share our experience** with the patient in order to learn from the experience. We encourage them, without asking them directly, to share their experience.

It is important not to reject any experience, whether it is positive, negative or neutral. The rejection of negative moods encourages the breakdown of empathetic relationships.

Our **silence with an affectionate look** is a good means of strengthening the empathetic bond.

*Let us not break the other person's silence because we experience discomfort.*

## *A necessary gesture*

**Smiling helps me feel good about myself and my life.**

- I smile when I wake up.
- I smile when I start each session of exercises.
- I smile when I remain attentive.



## EXERCISES IN SHARED ATTENTION

### *Let us share the walk*

The guide periodically repeats to the patient that they should pay attention to the sensation of each footstep while they walk towards their objective.





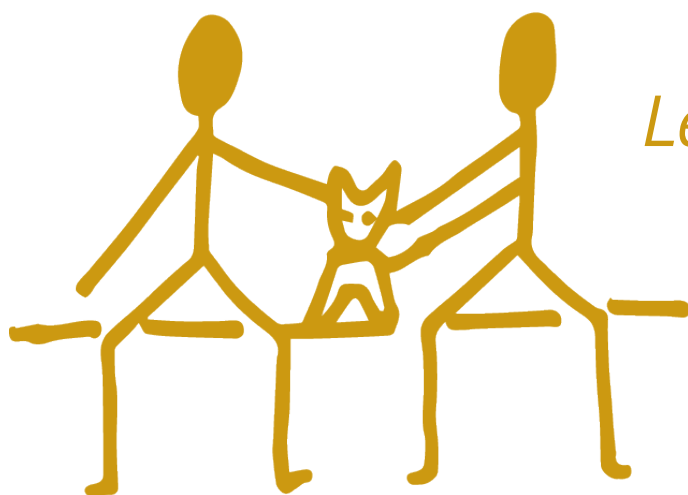
## *Let us share cleaning our teeth*

The guide proposes to the patient that they pay attention to the sensation that they feel while they both brush their teeth.



## *Let us share the activity*

The guide invites the patient to pay attention to the sensation of each movement that he suggests.



## *Let us share what we touch*

**The guide invites  
the patient to pay  
attention to the sense  
of touch produced by  
each item that he offers.**

## *Let us share what we smell*

**The guide invites the patient to pay attention to  
the smell produced by each item that he offers.**







## *Let us share what we taste*

The guide invites the patient to pay attention to the taste produced by the food they share.



## *Let us share what we hear*

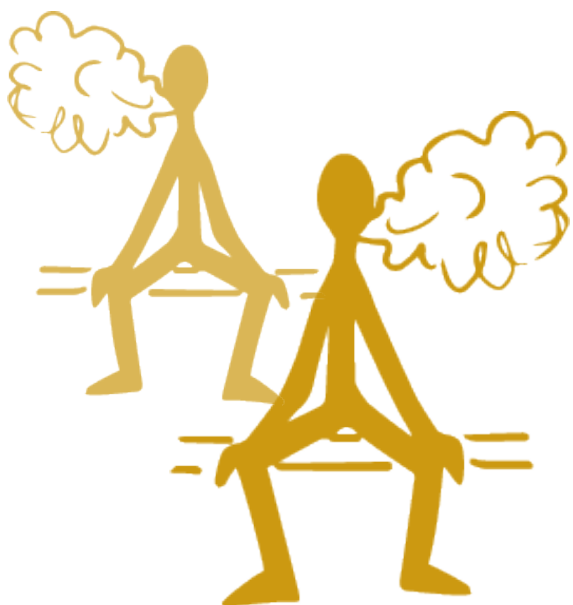
The guide suggests to the patient to pay attention to the sensations produced by some music while they conduct it with their hands.



*Let us share a smile*



**The guide suggests to the patient that  
he pay attention to them smiling.**



## *Let us share the sensation of breathing*

**The guide proposes to  
the patient that they pay  
attention to the sensation  
of the air that comes and  
goes, while they breathe.**

## *Let us share the sensation of the right arm going up and down*



**The guides invites the patient to pay  
attention to the feeling of the right  
arm as it goes up when he inhales  
and down when he exhales.**



## *Let us share a massage*

**The guide invites the patient to pay attention to the feeling of the gentle massage that he gives him.**



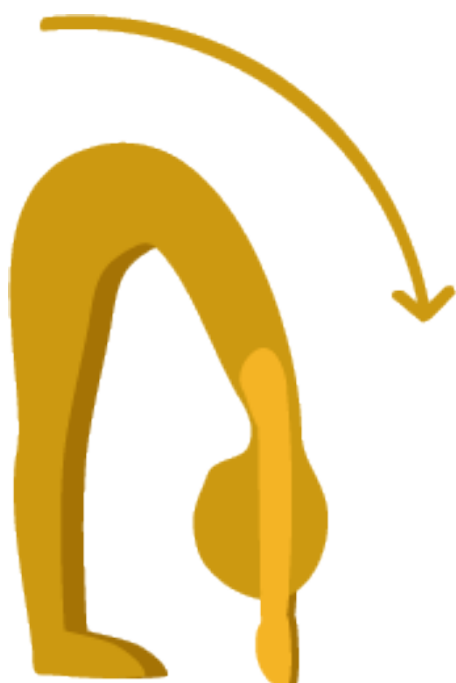
## *Let us share the sensations of the body while we walk*

**The guide invites the patient to pay attention to the feeling of his body while they are walking together.**



# EXERCISES TO STIMULATE THE ATTENTION

**Start of each session:  
Inverted position and  
observation of the body.**



*Exercise in inverted  
position*

**In any position, that suits  
me, I maintain my head  
below my heart.**

*(1 to 3 minutes)*

## *Observation of the body*

Attention to the present exercises included in this Manual.

- **Observation and relaxation of the face**
- **Observation and relaxation of the body**

Example demonstrated in this link:

<https://attentiontothepresent.com/free-courses/>

*This exercise can be practised daily  
(3 to 10 minutes)*





## *Exercises to start the day*

1. On waking up I pay attention to whether I am breathing smoothly, at the same time that I say:

**“I am breathing smoothly while I am waking up”**

*(30 breaths that are equivalent to 3 or 4 minutes)*

2. I pay attention to massaging myself gently with both my hands on my head, my chest and my legs while I say:

**“I am massaging myself gently”**

*(2 to 3 minutes)*

3. Standing in front of the bathroom mirror, I pay attention to the feeling that smiling produces in me, while I say:

**“I am smiling”**

*(2 to 3 minutes)*

4. I pay attention to brushing my teeth slowly, while I say:

**“I am brushing my teeth”**

*(2 to 3 minutes)*



## *Pay attention to my breathing I*

1. I pay attention to **breathing in** while smiling, and then **breathing out** while smiling.

*(2 to 3 minutes)*

2. I **raise one of my arms** each time I breathe in **and lower it** when I breathe out.

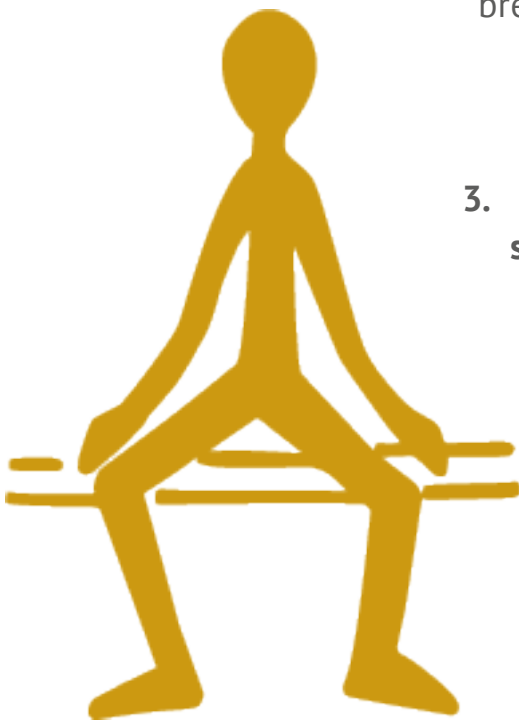
*(1 to 5 minutes)*

3. I pay attention to the **sensation of the cold air in my nose** when I inhale and of the warm air when I exhale.

*(1 to 5 minutes)*

4. I **close my eyes** when I inhale and I **open them** when I exhale.

*(1 to 5 minutes)*





## *Pay attention to my breathing II*

1. With each inhalation through the nose, I give a **gentle tap with my right hand on my right thigh** and with each exhalation through the mouth, I give a **gentle tap with my left hand on my left thigh**.

*(2 to 5 minutes)*

2. With each inhalation, through the nose, I **gently lean my head and my torso** to the right and with each exhalation through the mouth, I gently, lean my head and my torso to the left.

*(2 to 5 minutes)*

3. With each breath I keep **touching the fingers of my hand**, starting with the thumb and the little finger and finishing with the thumb and index finger.

*(2 to 5 minutes)*



## *Counting with the fingers*



With each breath I keep touching the fingers of my hand, starting with the thumb and the index finger and finishing with the thumb and little finger. I particularly pay attention to the movements.

*(2 minutes)*



## *Stroking the fingers*

With the thumbs we stroke the little fingers slowly.

Then the ring, the middle and the index fingers.

We become aware of the sensation in our fingers.



## *I know what I am touching*



Different objects are provided to the person in a non-see-through bag so that he touches them without seeing them. He is asked to describe the texture of the objects and not the name of them. The objects are coarse sandpaper, a billiard ball, a dice, a thimble, a button, etc.



## *Playing the piano*

**On a flat surface, we make movements with our fingers as if we were playing the piano and we observe the sensation of the fingers on the surface, as well as the actual movement of the fingers.**







## *Moving our eyes I*

**With our eyes closed, slowly and without moving our heads, we look to the right, back to the centre and then look to the left.**

*(Several times)*

## *Moving our eyes II*

**With our eyes closed, slowly and without moving our heads, we look up, back to the centre and then look down.**

*(Several times)*

## *Moving our eyes III*

**With our eyes closed, slowly and without moving our heads, we follow with our eyes the outline of a horizontal figure eight.**



*(10 times approx.)*

*At the end we leave our eyes in a resting position,  
i.e. downwards without forcing anything.*



## *Moving the body*

**Basic physical exercises for older people  
carried out in a chair as shown.**

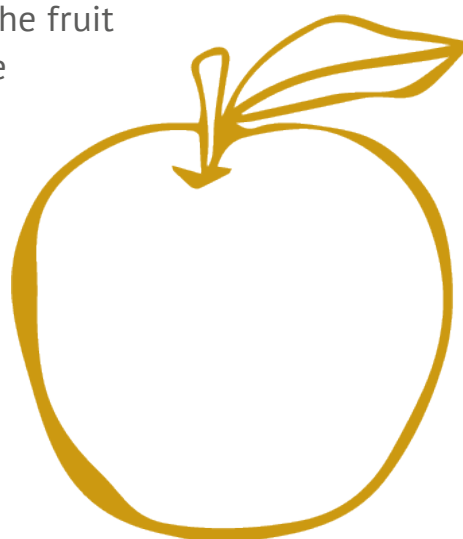
**Patients are invited to pay attention  
to their bodily sensation.**



## *Eating fruit*

### **Eat as if it were the first time:**

1. Look at the fruit, take it in your hand and, if you are aware of it being in your hand, you feel the weight, the texture, the colour, you bring it to your nose and the smell will tell you whether it is juicy.
2. Bite a piece of fruit, taste the fruit well, feel whether the juice runs over the corners of your mouth.
3. Smell the bitten fruit, aware of the scent.
4. Go back to smelling the part of the fruit that is not bitten and you become aware of the new scent.



# CANARY ASSOCIATION FOR THE DEVELOPMENT OF HEALTH THROUGH ATTENTION

## VISION

People and society need to know the integral health benefits that attention to the present provides.

## MISSION

Our mission focuses on the generation of research and training programs that improve individual and social health by adopting a lifestyle attentive to reality, without prejudice, with affection and respect for life in all its manifestations.

## CONTACT

For more information about the *Canary Association for the Development of Health through Care* contact us through the media and social networks of your choice:

