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Educating Nurses on the Use of the Mindfulness-Based Stress Reduction for Managing Work-Related Stress

linda Alaekwe
Walden University

Walden University

College of Nursing

This is to certify that the doctoral study by

Linda Alaekwe

has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

Review Committee
Dr. Andrea Jennings, Committee Chairperson, Nursing Faculty
Dr. Joan Hahn, Committee Member, Nursing Faculty

Chief Academic Officer and Provost
Sue Subocz, Ph.D.

Walden University
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Executive Summary: Staff Education Project

Educating Nurses on the Use of the Mindfulness-Based Stress Reduction for Managing Work-Related Stress

by

Linda Alaekwe

BSN, Grand Canyon University, 2017

RN, Lamar Port Author College, 2012

LVN, St. Phillips College, 2007

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Summary

Mindfulness-based stress reduction (MBSR) is an evidence-based approach designed to help individuals manage stress, anxiety, and emotional exhaustion through mindfulness practices. The practice problem addressed in this project was the lack of knowledge among healthcare providers about using MBSR to manage workplace stress effectively. The purpose of this staff educational project was to develop and deliver an MBSR module aimed at improving providers' knowledge of its principles and applications. The practice-focused question was: Upon educating healthcare providers on MBSR techniques, is there an increase in providers' knowledge on MBSR as evidenced by pre- and postsurvey findings? I used the analysis, design, development, implementation, and evaluation instructional design model to create and implement the training. Sources for module development included peer-reviewed literature and evidence-based guidelines. Twenty articles were reviewed and evaluated using the Johns Hopkins evidence-based practice model to ensure content validity. Two subject matter experts provided feedback to refine the module and ensure its clinical relevance. Ten participants attended a one-time, in-person training session, which included a PowerPoint presentation and guided mindfulness practice. The participants completed pre- and posttest surveys to measure changes in knowledge. A paired *t* test revealed a significant improvement in participants' MBSR knowledge, with mean scores increasing from 68% on the pretest to 87% on the posttest with a p value $< .001$. These results demonstrate that the educational intervention enhanced provider knowledge of MBSR, though the small sample size limits the generalizability of the findings. This educational training holds important implications for nursing practice, organizational wellness, and positive social

change by equipping healthcare providers with tools to reduce stress, improve resilience, and enhance the quality of patient care.

Background

The practice problem this educational project focused on was insufficient knowledge among healthcare providers on using MBSR techniques to manage work-related stress. MBSR is an evidence-based intervention developed by Kabat-Zinn to help individuals manage stress, anxiety, and chronic pain through mindfulness practices, such as meditation, body awareness, and cognitive restructuring (Kriakous et al., 2020; Othman et al., 2023). Multiple studies have demonstrated its effectiveness in reducing stress and improving emotional well-being among healthcare professionals, including nurses (Felder et al., 2024; Gan et al., 2024; Truscott, 2024). However, despite its benefits, many healthcare providers, particularly nurses, lack sufficient training in MBSR techniques, limiting their ability to integrate these practices into patient care or their self-care routines. Kriakous et al. (2024) reported that nurses often experience high levels of burnout and stress due to demanding workloads, emotional exhaustion, and inadequate coping mechanisms. While MBSR has been shown to mitigate these issues, its full potential remains untapped due to insufficient provider education. Felder et al. (2024) found that many nurses report limited exposure to formal MBSR training, which leaves them unprepared to teach or apply these techniques effectively in clinical settings.

Given the high prevalence of stress and burnout among nurses, there is an urgent need to improve their knowledge and competency in MBSR. For instance, recent statistics indicated that at least 20% to 40% of nurses report burnout (Jin et al., 2023) and 35% to 54% of clinicians in the United States have experienced burnout symptoms (Shah

et al., 2021). Structured MBSR programs have been shown to significantly reduce perceived stress, improve emotional regulation, and increase job satisfaction among healthcare workers (Felder et al., 2024; Truscott, 2024). Nonetheless, nurses may struggle to implement these strategies without proper training and leadership support, leading to suboptimal outcomes for themselves and their patients (Jin et al., 2023). Educational interventions, such as workshops, online modules, and hands-on practice sessions, can bridge this knowledge gap. By integrating MBSR training into nursing curricula and professional development programs, healthcare organizations can empower nurses with practical tools to manage stress, enhance resilience, and improve patient care. Furthermore, as explained by Truscott (2024), fostering a workplace culture that prioritizes mindfulness can sustain these benefits in the long term, reducing turnover rates and promoting overall well-being in the healthcare workforce. In general, strengthening nurses' MBSR knowledge is an investment in their mental health and an important step toward improving healthcare delivery and patient outcomes.

Project Purpose and Question

The purpose of this project was to develop and implement an educational module on MBSR targeting healthcare providers and nurses in a psychiatric setting. The practice-focused question was: Upon educating healthcare providers on MBSR techniques, is there an increase in providers' knowledge on MBSR as evidenced by pre- and postsurvey findings?

The gap in practice that I sought to address with this educational project was the insufficient institutional support that often prevents the adoption of MBSR programs, as illustrated by Watson et al. (2022). This obstacle leaves healthcare workers without the

resources to meaningfully address work-related stress. Without the necessary support and tools, healthcare professionals are more vulnerable to burnout, emotional exhaustion, and diminished patient care. Besides, without institutional buy-in, the sustainability of mindfulness practices within healthcare settings is compromised, and the positive outcomes of MBSR can be difficult to sustain. I addressed this gap by educating providers on how MBSR techniques can improve their knowledge, which can translate into reduced stress and better patient outcomes.

Evidence Supporting the Proposed Change

A review of the most recent evidence established that educating nurses on MBSR techniques can reduce their stress levels. I accessed articles through the MEDLINE and CINAHL databases and appraised them using the Johns Hopkins Individual Evidence Appraisal Summary Tool. Most of these articles contained strong evidence (i.e., Level I and Level II). Based on the reviewed literature, there is rich evidence demonstrating that MBSR programs significantly reduce perceived stress, anxiety, and emotional exhaustion while improving mindfulness, resilience, and work engagement (Ameli et al., 2020; Brouwer et al., 2023; Kriakous et al., 2020). For instance, in a randomized controlled trial, Hoge et al. (2023) found MBSR to be as effective as pharmacotherapy in reducing anxiety, highlighting its potential as a nonpharmacological alternative. In their qualitative study, Knudsen et al. (2023) also established that MBSR fosters self-compassion, presence in patient care, and stress awareness, contributing to a healthier workplace culture. Thus, given the high-stress nature of healthcare environments, MBSR equips providers with essential coping skills, ultimately enhancing both personal well-being and patient care quality.

Integrating MBSR into healthcare settings also addresses systemic challenges, such as burnout and staff retention. Strong evidence exists illustrating that mindfulness interventions improve nurses' work-life balance, job satisfaction, and professional fulfillment (Lin et al., 2024; Xie et al., 2020). For example, in a network meta-analysis, Zhang et al. (2024) found mind-body practices, including MBSR, to be highly effective in reducing occupational stress compared to other psychological interventions. Additionally, systematic reviews have supported MBSR's role in reducing depressive symptoms and enhancing emotional regulation, making it a cost-effective strategy for organizational wellness programs (Cohen et al., 2023; Truscott, 2024). By prioritizing MBSR education, healthcare organizations can cultivate a resilient workforce capable of sustaining high-quality care despite the demands of the profession. These evidence-based benefits help to highlight the importance of widespread MBSR adoption to support the mental health and resilience of healthcare providers.

Staff Education Project Development

Participants

In this staff education project, I targeted 10 nurses at an outpatient health facility. The participants for this educational training included registered nurses, social workers, and one nurse practitioner.

Procedures for Developing and Implementing the Educational Project

I designed this educational program using the five steps of the analysis, design, development, implementation, and evaluation model (see Kim et al., 2020). Participants' educational needs, misconceptions associated with the MBSR, and barriers to its implementation in the healthcare setting were identified in the analysis phase. Learning

objectives were also clarified and defined, and delivery methods agreed upon. The design and development phase focused on bridging the gap in providers' knowledge of MBSR principles to improve their knowledge and ability to manage stress and enhance patient care. I used the Johns Hopkins evidence-based practice model for nursing and healthcare professionals to ensure the validity and reliability of the content. The one-time educational session included information on the core principles of MBSR, guided mindfulness exercises, stress-reduction techniques, and care-based applications. Participants were presented with an educational PowerPoint highlighting the importance of MBSR, its benefits, key principles for success, strategies for sustaining mindfulness practices, and ways to address common barriers. They were also engaged in guided mindfulness exercises.

To ensure the accuracy and relevance of the MBSR training material, I consulted two content experts with experience in nursing and stress reduction practices. The first expert, a nurse educator with expertise in mindfulness-based interventions, provided guidance on integrating evidence-based strategies into the content of the educational session. The second expert, a clinical manager in a high-stress healthcare setting, offered practical insights to enhance real-world applicability. Both experts reviewed the PowerPoint module and recommended improving my knowledge evaluation forms. The experts also confirmed that the learning objectives were clear, meaningful, and achievable. Their feedback ensured the content was well-organized, engaging, and effective in supporting knowledge in MBSR.

Data Collection and Analysis

I collected data for this educational project in multiple phases. First, participants completed a pretest questionnaire administered through the SurveyMonkey platform (see Appendix A). Each participant was assigned a number (1 to 10) to track individual knowledge changes after the pre-test and post-test. This pretest was designed to capture their baseline knowledge and understanding of MBSR principles, benefits, and applications. Following the baseline assessment, participants attended a one-time educational session that lasted approximately 1 hour, which included a PowerPoint presentation (Appendix B) followed by practicing a few mindfulness techniques.

After the educational training, participants completed a posttest survey containing questions identical to those in the pretest. Because the post-test survey was completed on printed paper (printed questions), each participant indicated their unique identifiers for purposes of tracking knowledge changes. I used this posttest to measure participants' knowledge acquisition and improvements resulting from the education. To analyze the data, the mean difference between pre- and posttest scores was calculated manually (see Table 1) to determine whether participants showed measurable knowledge gains. Statistical analysis was performed using statistical package for social sciences software, with a paired *t* test (Sig. two-tailed) performed to assess whether the changes were statistically significant.

Table 1

Pre- and Posttest Results

Question No.	Presurvey (% of correct answers)	Postsurvey (% of correct answers)	Positive change in MBSR knowledge (%)
1	80	90	12.5%
2	60	80	33.33%
3	50	80	60.0%
4	80	100	25.0%
5	70	90	28.57%
6	70	90	28.57%
7	60	80	33.33%
8	70	90	28.57%
9	80	90	12.5%
10	60	80	33.33%
M	68%	87%	29.6%

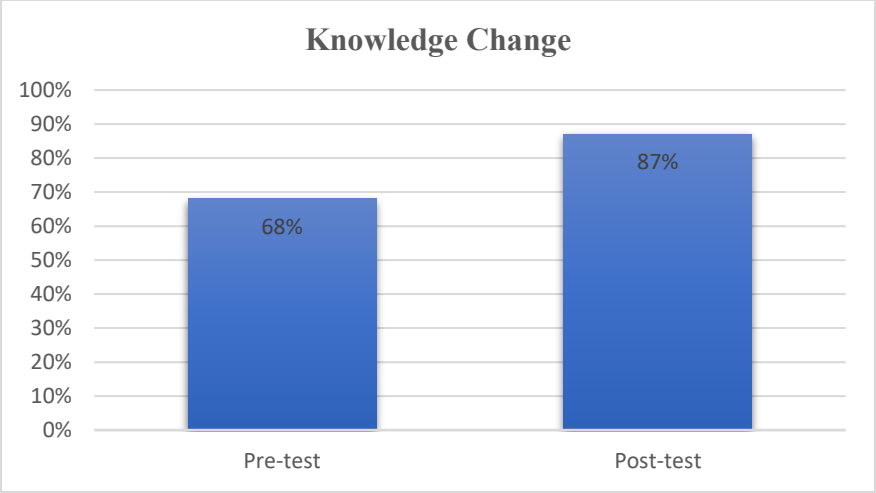
Results

As seen in Table 1, the pretest survey results showed an average correct response rate of 68%, while the posttest survey results increased to 87% (see Figure 1), indicating a notable improvement in MBSR knowledge among participants. The positive change in knowledge across individual questions ranged from 12.5% (Questions 1 and 9) to 60% (Question 3). Most questions demonstrated consistent gains of approximately 25%–33%, with the overall mean positive change calculated at 29.6%. These findings suggest that

the one-time educational session significantly enhanced participants' understanding of MBSR concepts and applications.

Figure 1

Knowledge Change



I performed a paired *t* test to compare participants' pre- and posttest scores (see Table 2). The mean difference between the pre- and posttest was -19.00 (*SD* = 5.68), indicating that, on average, posttest scores were 19 percentage points higher than pretest scores. The 95% confidence interval for the difference ranged from -23.06 to -14.94, which does not include zero, suggesting a meaningful improvement. The t-statistic was *t* (9) = -10.585, with a *p* value < .001 (two-tailed), indicating that the increase in knowledge from pre- to posttest was statistically significant. Therefore, the one-time MBSR educational session significantly improved participants' knowledge.

Table 2

Paired Samples Test

Paired Differences					*t*	*df*	Significance	
M	*SD*	Std. Error Mean	95% Confidence Interval of the Difference				One-sided *p*	Two-sided *p*
			Lower	Upper				
-19.00000	5.67646	1.79505	-23.06070	-14.93930	-10.585	9	<.001	<.001

Implications

The findings from this project have significant implications for the project site organization because improved staff knowledge of MBSR enhances the capacity to deliver holistic, evidence-based strategies for reducing stress and burnout among healthcare workers. The organization can foster better emotional well-being, improved job satisfaction, and a more supportive work environment by equipping staff with mindfulness tools. Over time, this may translate into reduced staff turnover, fewer stress-related errors, and improved patient care outcomes.

The potential implications for nursing practice include emphasizing the value of ongoing professional development in reducing workplace stress and preventing burnout. Strengthening provider knowledge of MBSR through continuous education equips nurses with evidence-based strategies to manage high-pressure environments and maintain emotional well-being. Improved mindfulness skills can positively impact patient care by fostering greater focus, empathy, and resilience.

The implications for positive social change include advancing workplace wellness; reducing provider burnout; and creating more compassionate, patient-centered care environments. Organizations can cultivate inclusive, supportive cultures that value mental health and overall well-being by equipping staff with mindfulness skills.

Continuous MBSR education ensures that providers are prepared to address the diverse needs of patients while promoting a healthier, more engaged workforce that benefits both healthcare professionals and the communities they serve.

The broader impact of this project lies in promoting mental resilience across healthcare settings by embedding mindfulness as a practical, sustainable tool for stress management. Workplace stress is a widespread issue that affects provider well-being, team communication, and the overall quality of patient care (Ameli et al., 2020). By advancing knowledge of MBSR, this project empowers healthcare professionals to develop greater emotional regulation, focus, and coping skills. A workforce equipped with these techniques is better positioned to manage high-pressure environments; reduce burnout; and maintain compassionate, patient-centered care (Brouwer et al., 2023). These improvements contribute to organizational efficiency, lower staff turnover, and improved patient satisfaction, ultimately supporting a culture of wellness and resilience (Kriakous et al., 2020).

Limitations

This educational project had limitations that may affect the generalizability and strength of the findings. The small sample size restricted the statistical power of the results and limited the ability to establish meaningful trends. All participating nurses were recruited from a single clinic, which may not reflect the diversity of nursing practices, patient populations, or institutional policies in other healthcare settings. As a result, the findings may not be broadly applicable across different clinical environments. In addition, the pre- and posttest questions used to assess knowledge gains were explicitly

developed for this program and were not scientifically tested, as Hilton and Murphy (2023) noted, this affects the reliability and validity of the findings.

Recommendations

Because the intervention consisted of a one-time educational session that did not include follow up or assessment of how the knowledge gained was applied in clinical practice, future projects should involve a larger, more diverse group of nurses from multiple facilities and incorporate long-term follow up to evaluate the sustained impact of MBSR education on clinical performance and organizational outcomes. Future investigations should also implement guided mindfulness techniques within clinical settings, such as brief, routine mindfulness sessions during shift changes or designated quiet spaces for practice, to promote ongoing stress reduction, reinforce learning, and support the integration of MBSR into daily nursing routines. A further recommendation is that regular MBSR training would help healthcare professionals stay aligned with best practices for managing stress and enhancing team collaboration.

Conclusions

I conducted this educational project to bridge a knowledge gap among healthcare providers by introducing the MBSR module as a practical tool for managing occupational stress. Psychiatric nurses participated in a 1-hour training session that introduced core MBSR principles, stress-reduction strategies, and mindfulness techniques. Pre- and postintervention assessments revealed a statistically significant improvement ($p < .001$) in participant knowledge. Even though the findings are promising, limitations, such as the small sample size, single-site setting, and lack of follow up, restrict their broader applicability. The absence of long-term follow up also led to a failure to determine how

well the training translates into sustained clinical practice. Future interventions should involve more diverse healthcare teams, longitudinal follow up, and real-time integration of MBSR into the clinical setting. This educational project highlights the potential of MBSR training to mitigate burnout, strengthen emotional resilience, and promote a healthier work culture in high-stress environments. With continued research, leadership engagement, and institutional investment, MBSR can become a lasting and impactful element of professional development and improved patient outcomes.

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Appendix A: Pre-/Postsurvey

1. **What is mindfulness?**
    a. **Being aware of the present moment without judgment (Answer)**
    b. Multitasking effectively
    c. Avoiding stressful situations
    d. Focusing on the past to avoid mistakes
2. **Which of the following is a core principle of mindfulness?**
    a. Judging thoughts as good or bad
    b. Living in the present moment
    c. Ignoring stressful emotions
    d. Reacting quickly to situations
3. **What is the primary goal of mindfulness practices?**
    a. To eliminate all stress
    b. To control others' emotions
    c. To cultivate awareness and acceptance of experiences
    d. To resolve all workplace conflicts
4. **Which of the following is NOT a mindfulness-based practice?**
    a. Meditation
    b. Body scanning
    c. Mindful breathing
    d. Multitasking
5. **How can mindfulness benefit nurses in managing workplace stress?**
    a. By increasing emotional awareness

b. By promoting better responses to stress triggers

c. By improving focus and decision-making

d. All the above

6. Which of these statements about mindfulness in patient care is true?

a. It helps nurses respond more calmly to patient needs.

b. It reduces compassion fatigue.

c. It enhances communication with patients.

d. All the above

7. How does practicing mindfulness improve nurse-patient interactions?

a. By helping nurses become more attentive to patients' needs

b. By teaching patients to manage their stress better

c. By ensuring faster response times to medical emergencies

d. By eliminating emotional challenges in caregiving

8. What is the purpose of a body scan meditation?

a. To focus on the breath only

b. To scan the room for stressors

c. To bring awareness to physical sensations in the body

d. To stretch and exercise

9. **What is the primary focus during mindful breathing exercises?**

a. Controlling the pace of breathing

b. Paying attention to the in-breath and out-breath

c. Avoiding distractions

d. Holding your breath

10. **Which mindfulness technique involves bringing attention back to the present when your mind wanders?**

    a. Visualization

    b. Focused attention

    c. Body scan

    d. Journaling

11. **When practicing mindfulness, what should you do when thoughts arise?**

    a. Suppress them immediately

    b. Ignore them completely

    c. Observe them non-judgmentally and let them pass

    d. Analyze them thoroughly

12. **What are the common benefits of mindfulness for healthcare workers?**

    a. Reduced stress and burnout

    b. Improved emotional regulation

    c. Enhanced focus and patient care

    d. All the above

13. **Which challenges might nurses face when trying to practice mindfulness?**

    a. Lack of time during shifts

    b. Difficulty staying focused

    c. Feeling self-conscious about mindfulness practices

    d. All the above

14. **If a nurse feels overwhelmed by a heavy workload, how might mindfulness help?**

a. By encouraging the nurse to suppress emotions

b. By helping them pause, breathe, and approach tasks calmly

c. By teaching them to multitask more efficiently

d. By reducing the workload immediately

15. **How can mindfulness-based stress reduction help prevent burnout in nurses?**

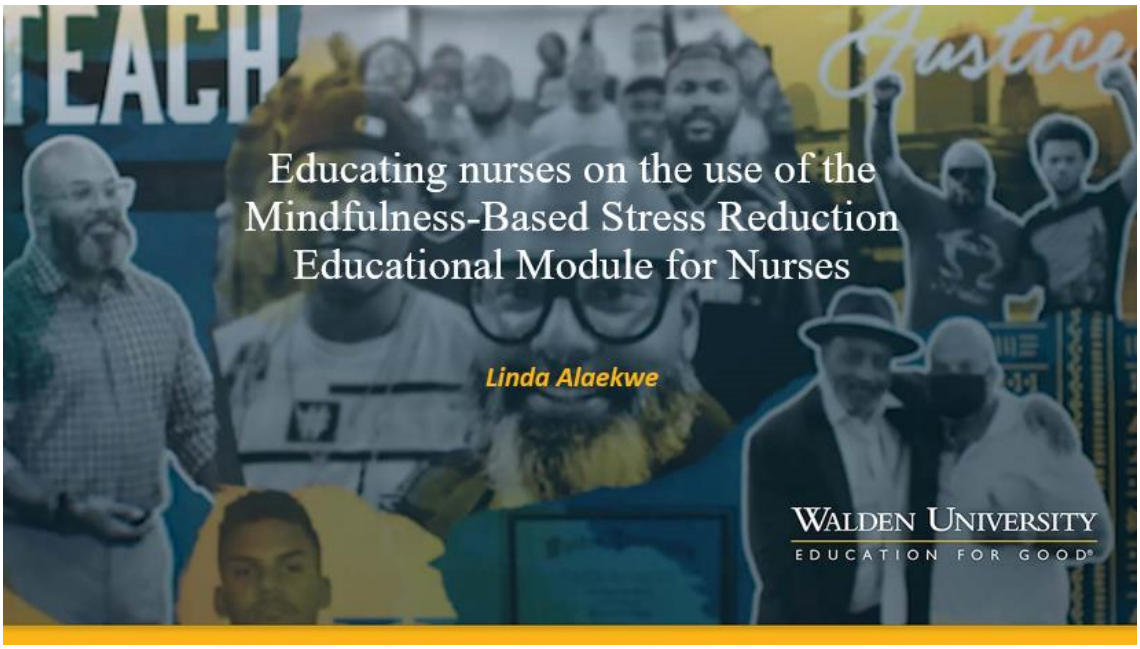
a. By improving self-awareness and emotional resilience

b. By eliminating workplace stressors completely

c. By forcing nurses to take time off

d. By prioritizing patients over personal needs

Appendix B: PowerPoint Presentation



GOAL

- The primary goal of this educational program is to develop a mindfulness-based stress reduction (MBSR) module for nurses.

Palouse Mindfulness – Mindfulness-Based Stress Reduction (MBSR)

- This mindfulness program will be based on Palouse Mindfulness – Mindfulness-Based Stress Reduction. It is a free online MBSR with a printable manual or materials.
- Core learning elements include:
  - Introduction to Body Scan Meditation.
  - Sitting Meditation practice.
  - Dealing with thoughts, emotions, and pain
  - Mindfulness in communication, compassion, and walking meditations (Palouse Mindfulness, n.d.).

OBJECTIVES

- To introduce nurses to the principles and practices of mindfulness.
- To educate nurses on the role of MBSR in reducing workplace stress and preventing burnout.
- To enhance nurses' self-awareness, focus, and emotional regulation through mindfulness techniques.
- To promote the integration of mindfulness into daily professional and personal routines.
- To empower nurses with tools for better coping strategies in high-pressure environments.

WHAT NURSES WILL LEARN FROM MINDFULNESS-BASED STRESS REDUCTION

- Understanding Mindfulness:
  - Definition and history of mindfulness.
  - The science behind mindfulness and its impact on the brain and stress levels.
  - The difference between mindfulness and meditation.
- Key Techniques of MBSR:
  - Mindful breathing exercises.
  - Body scan meditation.
  - Guided mindfulness meditation.
  - Loving-kindness meditation.
  - Awareness of thoughts, feelings, and sensations

WHAT NURSES WILL LEARN FROM MINDFULNESS-BASED STRESS REDUCTION

- Application of Mindfulness in Nursing:
  - Techniques to remain present during patient interactions.
  - Strategies to manage emotional triggers in high-stress situations.
  - Practices to promote work-life balance and self-care
- Mindfulness in Healthcare Teams:
  - Building mindful communication with colleagues.
  - Fostering empathy and understanding within healthcare teams.

WHAT NURSES WILL LEARN FROM MINDFULNESS-BASED STRESS REDUCTION

- Stress and Burnout Prevention:
  - Recognizing early signs of stress and burnout.
  - Techniques for immediate stress reduction.
  - Long-term strategies to cultivate resilience.

HOW NURSES WILL BENEFIT FROM THIS EDUCATION

- Personal Well-being:
  - Improved emotional resilience and mental clarity.
  - Enhanced ability to manage stress and maintain work-life balance.
  - Increased self-compassion and reduced feelings of self-criticism.
- Professional Performance:
  - Better focus and attention during tasks.
  - Improved patient care and communication.
  - Enhanced problem-solving and decision-making skills.

HOW NURSES WILL BENEFIT FROM THIS EDUCATION

- Team Dynamics:
  - Reduced interpersonal conflicts through mindful communication.
  - Greater empathy and collaboration with colleagues.

MINDFULNESS-BASED STRESS REDUCTION IN STRESS AND BURNOUT REDUCTION

- Stress Reduction:
  - Decreases physiological stress markers (cortisol levels).
  - Promotes relaxation and reduces the fight-or-flight response.
- Burnout Prevention:
  - Increases awareness of personal limits and the need for self-care.
  - Encourages mindful detachment from emotionally draining situations.
  - Supports sustainable engagement in caregiving roles.

MINDFULNESS-BASED STRESS REDUCTION PRINCIPLES AND SUCCESS

- **Core Principles of MBSR:**
  - **Non-judgmental awareness:** Observing thoughts and feelings without judgment.
  - **Present-moment focus:** Staying grounded in the here and now.
  - **Acceptance:** Embracing experiences as they are.
  - **Compassion:** Cultivating kindness toward oneself and others (Knudsen et al., 2023; Kriakous et al., 2020; Watson et al., 2022).

HOW TO ADDRESS MINDFULNESS-BASED STRESS REDUCTION BARRIERS

- Lack of Time:
  - Incorporate short mindfulness exercises (3-5 minutes) into busy schedules.
  - Provide online modules and mobile apps for flexibility.
- Skepticism About Effectiveness:
  - Present evidence-based research and real-world success stories.
  - Highlight testimonials from other healthcare professionals.
- Difficulty Maintaining Focus:
  - Start with guided exercises to help participants stay engaged.
  - Gradually build up the duration of mindfulness practices.
- Cultural or Personal Resistance:
  - Frame mindfulness as a universal, non-religious practice.
  - Encourage participants to adapt techniques to their personal beliefs.

IMPORTANT FEATURES OF THE PROGRAM

- **Program Duration:**
  - One session, lasting 60 minutes.
- **Delivery Format:**
  - In-person delivery.
- **Interactive Components:**
  - PowerPoint Presentation.
- **Support Tools:**
  - PowerPoint materials.
- **Guided Mindfulness Exercises/Practice**
  - Breathing exercises.
  - Walking meditations.
  - Body scans.

PROGRAM EVALUATION

- Pre- and post-survey knowledge assessment.

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Thank You

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