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## Embedding Self Care Strategies into the Nursing Curriculum: The Students' Lived Experience

Heather Moulzolf, RN, MA, CNP

**Purpose:** To understand the students' experience when self-care strategies are embedded into the nursing curriculum. **Method:** Twenty-two senior pre-licensure nursing students completed questionnaires that explored their knowledge and practice of self-care before and after the development of a self-care plan. **Findings:** Themes suggested that prior to the introduction of the self-care content in the course, students were familiar with the concepts. Most students voiced that poor self-care could negatively impact their nursing practice. Several students did not separate self-care as the care of mind-body-spirit but merged the concept with the ability to manage stress; many did not identify physical needs such as food and rest with self-care. Students identified the use of exercise and breathing as techniques for their self-care plan. Post-questionnaire themes demonstrated that students struggled with the implementation of their self-care plan due to the demands of nursing school. Many students did report the utilization of breathing techniques and in particular valued the mindfulness meditation video introduced during the course. **Implications for Education:** Nurse Educators must consider how they can foster and reinforce the practice of self-care during nursing education so that the students' transition into practice with established self-care behaviors.

The definition of nurse self-care (NSC) varies across the literature but for the purpose of this research, the author defines NSC as an individualized, unique, intentional action that supports rest and wellness among the nurse's mind-body-spirit. Significant changes have occurred over the last decade within healthcare requiring evolving competencies and innovation which can further detract from the nurses' ability to participate in NSC. Nursing has historically been known as a stressful profession and the work environment does not often lend opportunity for NSC. The exposure to occupational stress and lack of the NSC can impact the nurses' physical health, mental health, and the safety of the care provided to patients (Piko, 1999; Tucker, Harris, Pipe, & Stevens, 2010; Kingdom & Halverson, 2006; Moola, Ehlers, & Hattingh, 2008). Nurses have been identified as key leaders in the advancement of health within the context of healthcare reform (IOM, 2011). With increased responsibilities and expanded roles, it is crucial that nurses are well equipped to be resilient during times of constant change and are prepared to handle the stressors they will face. The inability to cope with stressors and the failure to adapt to change can decrease the nurse's job satisfaction, increase burnout rates, and put the nurse at risk for compassion fatigue (Potter et al, 2010; Abendroth & Flannery, 2006). At a time when there is a need for more nurses in the workplace; losing practicing nurses from the consequences of stress and poor NSC is a shame. Opportunities exist at the academic level to educate students about and reinforce NSC skills.

Nursing students are a captive audience that are motivated to learn and desire to graduate with the competencies that allow them to be successful in the profession of nursing. Nurse educators (NE) are in a key position to reinforce NSC behaviors as nursing students often look to the knowledge and skills learned in nursing school as the foundation to practice. Studies show

that embedding NSC content into the curriculum may have the potential to improve NSC behaviors (Stark, Manning- Welsh- Welsh, & Vliem, 2005; Billingsley, Collins, & Miller, 2007). Unfortunately, the majority of the curriculum in nursing focuses on the outward care of others and NE are tasked with preparing students to successfully pass the NCLEX exam which does not include content on NSC. Therefore, little time or value is placed on including the NSC into the currently saturated nursing curriculum. However, the benefit of inclusion of the NSC content in the curriculum is not only demonstrated in the research but is also supported by two main publications that serve as guidance for curricular development at the baccalaureate level; The American Association of Colleges of Nursing (AACN) *Essentials of Baccalaureate Education for Professional Nursing Practice* (2008) and The American Nurses Association (ANA) *Code of Ethics for Nurses with Interpretive Statements, Provision 5* (2015). These documents encourage nursing schools to prepare their graduates to engage in NSC and reinforces the need for the nurse to advocate for environments that promote NSC. Both organizations acknowledge the impact that NSC has on both the nurse and the patient. Understanding the students experience when exposed to NSC may be helpful to glean insight, could help provide guidance for future curriculum development, and identify how NE can best support the behaviors of NSC. This study explored the nursing students experience prior to and after the exposure to a curriculum intervention surrounding NSC.

## **METHOD**

### **Sample and Setting**

This study took place at a private, Catholic, Midwestern university within a large school of nursing. Approval was obtained from the university institutional review board. All students had exposure to the curriculum content but participation in the study and completion of the questionnaires was voluntary. Twenty one females and one male nursing student (N= 22) consented and participated. Twenty of the students were in their last semester of nursing school of a post baccalaureate, pre-licensure program, and two were in their last semester of nursing school of a traditional, pre-licensure program. The class was delivered in a hybrid model utilizing the D2L platform with monthly face-to-face classes, weekly clinical, and simulation.

### **Procedure**

This qualitative descriptive study explored the students experience before and six weeks after the exposure to NSC content. The researcher described the purpose and time commitment of the study to the potential student participants. The nursing professor was asked to leave the room during the consent and questionnaire completion process to maintain anonymity. Confidentiality was assured and all potential participants' questions were answered. All potential participants' received a consent form and were instructed to sign the form if they wished to participate or not sign if they did not wish to participate, all students were asked to return the consent form whether completed or not to blind the student's peers from those who chose to participate. The same process was followed for the pre-intervention questionnaire which explored the following questions related to NSC:

- What does self-care mean to you?

- Do you think that self-care affects your nursing practice? If so how?

Upon participant pre-intervention questionnaire completion and collection, the one and a half hour face to face class session began. The class session included the discussion of stress in the nursing profession and delivery of a presentation by the researcher on compassion fatigue, self-care, and introduction to the concept of mindfulness. The class then practiced with a mindfulness meditation module and completed a self-care plan. During the six weeks following, the researcher posted a reminder in the announcement section of the on-line class platform regarding the importance of NSC by study participants. After six weeks, the researcher attended an additional face to face class at which time the post- intervention questionnaire was administered. Processes to assure confidentiality and anonymity were followed in the same manner as the pre-intervention questionnaire collection. The following questions related NSC were explored in the post- intervention questionnaire:

- Since taking this class, have you instituted any pieces of your self-care plan from your classroom learnings?
- What method of delivery and during what part of the nursing program would you recommend teaching this content to future students?

Upon completion, the pre and post-questionnaire, responses were transcribed line by line under each question, segmented, and then assigned to an inductive category. Enumeration was utilized for questions involving only closed ended answers. Ideally, participant feedback would have been sought but due to recent graduation this was not feasible. Therefore, external auditing was used as an alternative method to evaluate validity with the categorization of the data.

## **Findings**

Themes suggested that prior to the introduction of the NSC and the development of the self-care plan, students were familiar with self-care concepts. Most students voiced that poor self-care could negatively impact their nursing practice. Several students did not separate self-care as the care of mind, body, and spirit but merged the concept with the ability to manage stress, many did not address physical needs. Many students identified the use of exercise and breathing as techniques utilized in their self-care plan. Post- questionnaire themes demonstrated that students struggled with the implementation of their self-care plan due to the demands of nursing school. Many students did report the utilization and placed value on a mindfulness meditation video introduced during the course.

### **Research Question One Pre- Intervention**

The researcher was interested in exploring the participant's understanding of the topic of NSC so asked the question, "What does self-care mean to you?" The breadth of the participants' answers showed that the definition was unique to each individual but all identified specific behaviors that would fall into the categories of mind, body, and spirit. Fifteen out of the twenty-two participants used the terms "taking time for" in their definition and ten of the participants included the word stress in their definition:

- “ Self-care means having a meaningful life and values outside of your professional life and can be achieved thru taking the time to participate in stress-reduction techniques like guided imagery, yoga, exercise, meditation and connecting spiritually to help melt away the stress of your job completely when you are not at work”
- “Self-care is taking the time to manage your stress effectively by eating healthy, resting, regular exercise, breathing exercises, downtime and a supportive family and friends”
- “Self-care means taking the time out to prepare healthy meals, exercise, breathe, and spend time with friends and family to de-stress”.

### **Research Question Two Pre- Intervention**

The researcher was interested in the participant’s awareness of how NSC impacts nursing practice since the participants will soon graduate and will enter the nursing profession. Therefore, she asked the question, “Do you think that self-care affects your nursing practice? If so how?” All twenty two participants answered yes to the fact that NSC impacts their nursing practice. Themes discovered in the reflections about how the lack of NSC can impact nursing practice was the potential impact on compassion and focus.

- “Yes, lack of self-care will affect my attitude and possibly prevent me from handling a patient or situation in a thoughtful, reasonable or ethical way. I think my unresolved issues may come up during patient care and prevent me from focusing on the patient.”
- “Yes, absolutely if I feel stressed, I could take it out on my patients and that would be bad. I could be unfocused, forgetful and not provide optimal care”.
- “Yes, I think self-care is instrumental in my nursing practice because if I don’t practice it, I tend to have less patience, more anxiety, less focus and I am unable to be fully compassionate while caring for patients”.
- “Yes, if I don’t feel good about myself or haven’t taken the time to eat, I tend to lose my patience quicker and make mistakes. I would be more likely to burnout quicker”

### **Research Question One Post Intervention**

The researcher was interested in understanding if the participant’s instituted any piece of their self-care plan six weeks after the NSC content was presented in class. Therefore the question: “Since taking this class, have you instituted any pieces of your self-care plan from your classroom learnings”?

Seven of the twenty- two students reported that they implemented some aspect of their self-care plan. The students continued to connect NSC with the management of stress. Breathing and meditation seemed to be the intervention that students utilized the most and valued.

- “Yes, taking moments throughout the day to re-center myself when I was stressed, calming and quieting my mind before bed.”
- “Yes, when I start to feel extreme anxiety I do deep breathing exercises. I have been using my journal from class to write inspirational bible verses like be anxious in nothing and prayerful in everything”
- “Yes, I used the mediation video from class and I have been using my treadmill for 30 minutes, five times a week. These were both goals I set for myself”
- “ Before bed, I would focus on my breath, this helped me sleep when I was stressed”

Many commented on their desire to participate but time and energy was a barrier.

- “ No I am fried, hope for self-care at the conclusion of my nursing program”
- “No, I forgot, I am tired, it was a busy semester.”
- “No, unfortunately my self- care got pushed aside, no time, no energy”.

One student made an interesting statement about NSC, nursing, and women.

- “I think self-care has a negative connotation for women and for nurses. We are supposed to care for others and sometimes there seems to be a conflict of interest between that and the ability to participate in self-care.”

### **Research Question One Post Intervention**

Understanding nursing students’ viewpoints on perceived value of content and preferred method of delivery will likely impact the students’ willingness to engage in learning about a topic. In addition, obtaining this feedback is helpful to NE as they design new courses and implement changes within current courses that will appeal to the net-generation of learners. The researcher asked the question: “What method of delivery and during what part of the nursing program would you recommend teaching this content to future students”?

Consistently students recommended that the NSC be introduced early in the nursing program and reinforced throughout. Students felt exposure to the NSC content would be extremely helpful before first clinical experience or before they become stressed.

- “Use the meditation video and review the content before the first clinical and throughout the remainder of the program, maybe a monthly session”

- “Present the same content in the beginning and reinforce it each week”
- “The earlier the better and reinforce, just having the awareness is helpful”
- “Start at the beginning and the end of each course, with the self-care content and include the meditation video”
- “Present the content the same way after the first semester and before their first clinical experience, reinforcing before every class or simulation”
- “I think that these topics should be talked about throughout the entire program, introduced in the beginning and reinforced during each semester, especially when students are stressed”

Several students recommended including it in classroom time or link points to the participation in NSC activities.

- “Attach points for consistent practice and reinforce value”.
- “Plan a before class mediation group”.
- “Practice techniques like meditation in class”
- “Do a five minute meditation or self-care exercise at the beginning of class, anything that is scheduled is easier to accomplish or follow through with”.

In addition, students appreciated the varied learning approaches for presenting the content and enjoyed the mindfulness meditation video. The researcher would expect some variation in this area due to the preferred learning styles among students.

- “Best way was to talk about self-care and then use the meditation video”
- “I found the PowerPoint presentation very valuable and the independent self-care plan creation helpful”
- “I really liked the in class presentation and video. Email reminders would also be good”
- “I really liked the PowerPoint and laminated self-care plan card”
- “Use the video and the presentation”
- “Audio and video, that is accessible during breaks”

## **Discussion**

Overall, the researcher sought to understand the nursing student experience when introduced to the topic of NSC. Most participants connected NSC as a stress rescue method versus a daily activity that promotes personal health and wellness. Many students did not attach the physical body needs such as nourishment, rest, or participation in health promotion visits to NSC but several did connect exercise as NSC. This may reflect that healthy nourishment and rest are already part of their daily life but certainly represents an area for further discussion as NSC is presented in future classes. Nurses are in a key position to model healthy behaviors with patients including healthy eating, exercise, rest, and participation in health promotion visits so reinforcement of these items may be beneficial.

Participants identified the impact of poor NSC on nursing practice, yet many voiced that they were too busy to incorporate items from their self-care plan due to the chaos of nursing school. Of an interesting note, the post-questionnaire responses were much shorter and less reflective than the pre-questionnaire. The researcher suspected that this may be that the students were at their end of their schooling, were overwhelmed, and possibly tired of reflection. Which raises the question are NE graduating nurses that are already burnout?

A few participants commented that they hoped to begin NSC after school. This is concerning, as the stress does not end with the completion of nursing school. New graduates will likely continue to face time constraints and be exposed to stress as they take the NCLEX exam, adapt to and orientate to a new job, and possibly start shift work. The introduction of NSC early in the nursing program with reinforcement during class time may establish NSC as a habit for graduating nurses. Avoiding NSC has the potential to cause moral distress in a nurse who is aware that it is impacting his/her practice yet does not feel that the environment empowers the participation in NSC.

Participants' consistently valued breathing techniques as a NSC tool and responded positively to the five minute mindfulness meditation video introduced in class. This feedback represents an opportunity for the NE as they look to implement a low effort, educational intervention that can be utilized as a NSC resource. Reinforcement of breathing techniques utilizing a meditation video or audio could be implemented during class, prior to clinical, before simulation, and could be offered to students for self-use at home.

## **Limitations**

Possible limitations of this study include that the setting was one academic environment, the study was small, twenty of the participants were post-baccalaureate students, and all but one student was female. The intervention took place at the end of the program prior to graduation and during a time when the curriculum is heavily laden with tests, clinical, and simulations which could have impaired the students' availability of time to participate in NSC activities and added to the frequent comments about stress. The data collection was performed utilizing written questionnaires which may have limited the depth and breadth of the content obtained. Despite the fact that the questionnaires were coded to assure anonymity, students may have felt uncomfortable sharing the full context of the NSC behaviors. Perhaps, interviews or focus

groups completed earlier on in the program may have provided more insight. Further research should be completed on a larger scale, incorporating faculty feedback, at all levels of nursing education to assure the generalizability. In addition, further opportunities exist to research the academic setting and workplace environments and the impact of this on the ability for NSC with new nurse graduates.

### **Conclusion**

In conclusion, this research provided insight into the experience of the student when self-care was embedded into the nursing curriculum. Nurses are the most respected profession and represent the largest number of healthcare providers therefore their ability to model and impact health outcomes is great (BLS, 2014; Gallup®, 2014). By better understanding student experience and preference, Nurse Educators can learn how to focus educational interventions and design meaningful curriculum around Nurse self-care. By focusing on early introduction of Nurse self-care in nursing programs and reinforcement it throughout, students will have increased exposure to the content that may assist them to model and lead healthy lives both personally and professionally.

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