

MINDFULNESS AND EMOTION REGULATION: THE GOLDEN POT AGAINST STRESS AND BURNOUT IN NURSES

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MINDFULNESS

Mindfulness, a concept adapted of Buddhist tradition, could be defined as a process of bringing a certain quality of awareness and attentiveness to the experience of the present moment with an attitude of curiosity, openness, and acceptance for each experience (Kabat-Zinn, 2005)

BURNOUT

Burn-out is defined as 'a syndrome of exhaustion, cynicism and inefficacy' (Maslach et al. 1996). Studies have found that burnout may lead to decreased job performance and commitment, increased rates of absenteeism and turnover, and decreased career satisfaction and productivity (Peterson et al. 2008, Alacacioglu et al. 2009).

EMOTION REGULATION

Emotion regulation is a process by which an individual is able to modulate his or her emotional experiences. It encompasses the ability to filter emotions and engage in healthy emotion management strategies and provides additional information about how individuals adapt to stressors (Gross, 1998).

GOAL

This observational study was designed to (a) analyse the gender differences and (b) explore the relationship between the mindfulness profile with stress, burnout, and emotion regulation in a sample of Italian nurses. The ability in applying positive emotion regulation strategies and some mindfulness facets could be protective factors against burnout and stress.

METHOD

A sample of 42 nurses working in emergency room in different hospitals in the north of Italy completed the Five Facet Mindfulness Questionnaire (FFMQ), the Interpersonal Reactivity Index (IRI), the Maslach Burnout Inventory (MBI), the General Health Questionnaire (GHQ) and the Difficulties in Emotional Regulation Scale (DERS).

FFMQ

The FFMQ (Baer et al., 2006) assesses five facets of a general tendency to be mindful in daily life on a 5-point Likert-type scale

- **Observing**: noticing or attending to internal and external experiences.
- **Describing**: labelling internal experiences with words.
- **Acting with Awareness**: attending to one's activities of the moment
- **Nonjudging of inner experience**: taking a nonevaluative stance toward thoughts and feelings
- **Nonreactivity to inner experience**: allowing thoughts and feelings to come and go, without getting caught up in or carried away by them

MBI

The Maslach Burnout Inventory (MBI) (Maslach et al., 1996) is the most commonly used tool to self-assess the risk of burnout exploring three components:

- **Emotional Exhaustion**: measures feelings of being emotionally overextended and exhausted by one's work
- **Depersonalization**: measures an unfeeling and impersonal response toward recipients of one's service, care treatment, or instruction
- **Personal Accomplishment**: measures feelings of competence and successful achievement in one's work.

DERS

The DERS (Gratz & Roemer, 2004) is a 36 item on a 5-point Likert scale self-report measure developed to assess clinically relevant difficulties in emotion regulation. Items are scored on six scales:

- **Nonacceptance of Emotional Responses** (Nonacceptance, 6 items);
- **Difficulties Engaging in Goal-Directed Behavior** (Goals, 5 items);
- **Impulse Control Difficulties** (Impulse, 6 items);
- **Lack of Emotional Awareness** (Awareness, 6 items);
- **Limited Access to Emotion Regulation Strategies** (Strategies, 8 items);
- **Lack of Emotional Clarity** (Clarity, 5 items).

GHQ

The 12-Item General Health Questionnaire (GHQ-12) is the most extensively used self-administered screening questionnaire designed for use in consulting settings aimed at detecting individuals with a diagnosable psychiatric disorder (Goldberg & Hillier, 1979), in addition to being a more general measure of psychiatric well-being. The type of score used in this study is the 4-point Likert-type scale (0-1-2-3).

Statistical analysis

Through the use of predictive analytics software SPSS 22 it was performed a) an analysis of variance (ANOVA) to check whether there were statistically significant differences in mean scores on FFMQ scales on male and female nurses, b) a correlation between the scales of FFMQ, MBI, DERS and GHQ

Discussion

Nurses who have higher level of "acting with awareness" and "non-judging of inner experience" facets of Mindfulness, show lower level of stress and burnout, mostly on the subscales "Emotional Exhaustion" and "Depersonalization" and show higher level of emotion regulation. There is no gender effect in except in the "Nonreactivity to inner experience" scale in the FFMQ Scales. The ability in applying positive emotion regulation strategies and some mindfulness facets are protective factors for Burnout and stress; therefore mindfulness-based training should be added to nurse curriculum, as well as training in emotion regulation strategies, to help students to develop a set of basic skill to promote well-being and resilience in a stressful working environment.

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RESULTS

(a) Gender differences

FFMQ Scales	F	p
Observing	0,319	,574
Describing	0,209	,649
Acting with awareness	0,000	,983
Nonjudging of inner experience	0,096	,758
Nonreactivity to inner experience	4,551	,037*

(b) Correlations

FFMQ Scales	GHQ Total	DERS Total	MBI Total	MBI Emotional Exhaustion	MBI Depersonalization	MBI Personal Accomplishment
Acting with awareness		-,546**		-,253*	-,422**	,391**
Nonjudging of inner experience	-,472**	-,607**	-,399**	-,395**	-,369**	