



The Evaluation of Mindfulness-Based Stress Reduction for Veterans with Mental Health Conditions

AUTHORS: Lisa Kluepfel, D.N.P., P.M.H.N.P., R.N.; Terry Ward, Ph.D., R.N.; Rachel Yehuda, Ph.D.; Eleni Dimoulas, Ph.D.; Ann Smith, Ph.D.; Kelly Daly, R.Y.T.

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RESEARCH HIGHLIGHTS:

- This research assesses the impact of mindfulness-based stress reduction (MBSR) on a veteran population, and studies the feasibility of MBSR for veterans by measuring patient compliance and overall patient satisfaction with MBSR.
- Veterans who participated in MBSR report that they learned mindfulness, had better sleep quality, and experienced reduced levels of depression and stress. Veterans also experienced decreased tension, increased well-being, increased ability to cope with their mental health status, and a heightened sense of mental clarity after MBSR treatment classes. Veterans expressed high levels of satisfaction and compliance with the MBSR treatment program.
- Future studies should assess the financial and administrative feasibility of implementing mindfulness-based stress reduction techniques for veterans with mental health conditions.

ABSTRACT:

Purpose: To assess the feasibility of mindfulness-based stress reduction (MBSR) for veterans with mental health conditions to evaluate its efficacy on psychological well-being and stress reduction.

Design: Single-group, pretest-posttest design.

Method: 30 veterans within a mental health clinic of a VA (Veterans Administration) medical center were enrolled in an 8-week standard MBSR program. Perceived stress, sleep, mindfulness, and depression were measured via self-reports at baseline and study end. Feasibility was measured by compliance and satisfaction with the course.

Findings: Scores on the Perceived Stress Scale ($p=.002$) and Beck Depression Inventory-II ($p = .005$) were significantly reduced ($p = .002$). The global measure for sleep from the Pittsburgh Sleep Quality Index improved significantly ($p = .035$). Satisfaction and compliance were high.

Conclusion: MBSR is a feasible intervention that has potential efficacy for veterans with mental health conditions. Future controlled trials are needed in this area.”

Implications

FOR PRACTICE

Veterans who participated in an 8 week program on mindfulness based stress reduction techniques found they had a better quality of sleep and a reduction of stress and depression symptoms. Veterans with mental health issues should consider complementing their current plan of care with mindfulness-based stress reduction treatments. Veterans interested in MBSR treatment should consult with their primary physician to discuss if and how MBSR would best improve their mental health. Most participants report that MBSR treatment was successful, even if they missed a session. However, instructors recommend that participants attend all sessions, and participate in all the MBSR home-based meditations so that participants achieve optimal results. Thus veterans participating in MBSR treatments should attend all sessions. To ensure consistent patient treatment, MBSR instructors should try to be certified in the processes of mindfulness for professionals. MBSR professionals should design a standardized MBSR treatment manual for instructors that provides strategies to garner high retention for intervention programs. Given the minimal risks and cost effective nature of MBSR treatments, medical offices should consider supplementing MBSR treatments to traditional models of care.

FOR POLICY

The VHA might incorporate MBSR treatments into current treatment plans to further decrease the reliance of pharmaceutical models of care. The VHA and policymakers might commission researchers to conduct feasibility studies to determine if patient-centered MBSR treatments can serve as a cost-effective alternative to costly pharmacological treatments. If MBSR treatments are found to be a feasible alternative, the VHA might implement MBSR programs in all facilities to provide veterans with an additional resource for managing personal mental health issues. The VHA might conduct studies that address the cognitive, physiological, emotional, behavioral, relation to self and others, and spiritual domains to further understand the effects of meditation on mental health for veterans. The VHA might conduct studies to assess what other non-pharmacologic treatments, in addition to MBSR treatments, could improve sleep quality, depression symptoms, and post-traumatic stress disorder for veterans.

FOR FUTURE RESEARCH

A limitation of this study was that the interviews were conducted in group settings which could have encouraged response bias. Future researchers should conduct both group and individual interviews to reduce response bias. Forthcoming research on the potential benefits of MBSR should follow-up with participants to assess if positive MBSR treatment effects are sustained over long periods of time. Future researchers should assess the efficacy of MBSR on post-traumatic stress disorder outcomes and analyze different measures of assessing integrity of treatments. Lastly, it would be beneficial to explore whether participation in MBSR programs was the sole reason for improvement or whether there were other mechanisms responsible for the change in psychology and thus the reduction in symptoms.

AUTHOR INFORMATION

Lisa Kluepfel, D.N.P., P.M.H.N.P., R.N.^{1, 2, 3}

Terry Ward, Ph.D., R.N.³

Rachel Yehuda, Ph.D.²

Eleni Dimoulas, Ph.D.²

Ann Smith, Ph.D.⁴

Kelly Daly, R.Y.T.²

¹ lisa.kluepfel@va.gov

² James J. Peters VA Medical Center

³ Duke University School of Nursing

⁴ Maryland VA Medical Center