Does Integrative Restoration (iRest) Meditation Decrease Perceived Stress Levels and Negative Moods in School Counselors?

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Introduction

Research suggests that many counselors experience stress in the workplace. In fact, Sears and Navin (1983) reported that 14.8% of school counselors viewed counseling as “very stressful,” 50.4% rated it “moderately stressful,” and 30.1% found it “mildly stressful.” In addition, Arvay and Uhlemann (1996) reported that 16% of counselors working with trauma patients felt that they were highly psychologically fatigued. Just over a quarter (26%) reported that they were dissatisfied with their level of productivity at work, and 14% claimed to experience extreme stress levels similar to patients who have post-traumatic stress disorder.

In addition to fatigue and reduced work productivity (Arvay & Uhlemann, 1996), stress has also been shown to cause negative moods (e.g., Scott, Brandberg & Ohman, 2001). In fact, Scott et al. (2001) reported many negative experiences related to stress such as anxiety, time urgency, and nervousness, as well as feelings of being rushed, inadequacy, and hopelessness. Stress is linked to depression and anxiety symptoms such as anger, fatigue, and confusion (Carlson, Ursuliak, Goodey, Angen, & Speca, 2001), emotional irritability and disorganized thoughts (Speca, Carlson, Goodey, & Angen, 2000).

Given the negative relationship between stress and well being, it is important that counselors, who need to be at their best to help their clients, find a way to reduce their stress levels. Meditation has been shown to be beneficial for lowering perceived stress and its negative consequences for a number of different populations. For example, Coppola and Spector (2009) found a significant decrease in trait anxiety levels in individuals who practiced meditation for 4 weeks. Also, women diagnosed with breast
cancer demonstrated a decrease in their stress levels after participating in a mindfulness-based stress reduction and relaxation program (MBSR). Results also showed an increase in the patient’s locus of control and mental well-being after the MBSR program was completed (Tacon, Caldera, & Ronaghan, 2004). Similarly, Carlson and Garland (2005) reported that following MBSR, participants were able to acquire better sleep patterns and reduce fatigue, mood disturbance, and stress levels. Patients with different forms of cancer and in different stages of their cancer development have been shown to benefit from an MBSR program by decreasing their stress levels (Brown & Ryan, 2003; Carlson, Speca, Patel, & Goodey, 2004; Carlson et al., 2001; Speca et al., 2000).

Because stress is linked to negative moods, reducing stress through meditation should impact negative moods as well. Ramel, Goldin, Carmona, and McQuaid (2004) followed people with mood disorders through an MBSR program and found that their depression and anxiety levels decreased after completion of the program. Similarly, Tacon, McComb, Caldera and Randolph (2003) demonstrated a decrease in anxiety levels among women diagnosed with cardiovascular disease after they completed a similar program. Majumdar, Grossman, Dietz-Waschkowski, Kersig, and Walach (2002) studied a group of people with chronic diseases and found an increase in their quality of life and well-being as their stress levels decreased through an MBSR program. Similarly, Grossman, Niemann, Schmidt, and Walach (2004) studied a group of patients with various diagnoses and found they also reported an increase in their quality of life and a decrease in stress by participating in a meditation program.

**Yoga Nidra**

Similar to mindfulness-based stress reduction (MBSR), Yoga Nidra is a state of meditation and complete relaxation where meditators withdraw into the sensory world. The goal of this type of meditation is to observe sensations without responding to them (Baer, 2003; Bonadonna, 2003; Kjaer et al., 2002; Lou & Kjaer, 2005; Miller, 2005; Praissman, 2008; Wahbeh, Elsaes, & Oken, 2008). Yoga Nidra begins with a comprehensive body scan that can be done in any physical orientation (sitting, lying down, or standing), which has been recommended as a way to relieve stress and anxiety (Cassileth, 1999). Following the body scan, meditators are encouraged to explore sensations, emotions, and thought patterns, moving back and forth between feeling and witnessing, allowing both to reside simultaneously in awareness (Miller, 2005).

Yoga Nidra has been shown to reduce anxiety and hostility (Bhushan & Sinha, 2001) as well as stress levels in chronically ill patients (Pritchard, Elison-Bowers, & Birdsall, 2010). However, no studies have examined whether or not meditation is an effective stress-reliever and mood enhancer for school counselors.

**Present Study**

Research clearly demonstrates that counselors are stressed (Arvay & Uhlemann, 1996; Sears & Navin, 1983). In particular, school counselors are increasingly challenged to meet the demands of accountability, high student to counselor ratios, poorly defined roles, and overwhelming student problems (Cunningham & Sandhu, 2000; Gysbers, Lapan, & Blair, 1999; Herr, 2001; McCarthy, Van Horn Kerne, Calfa, Lambert, &
Guzmán, 2010). Greater rates of job-related stress often lead to high burnout in school counselors due to stress (McDaniel Cail, 1994). Research has shown that stress can be decreased by the use of meditation and that stress reduction leads to improved mood. However, it is not known how meditation, as a form of stress reduction, specifically helps counselors. This study examined this area. We hypothesized that after exposure to a meditation program, counselors would report lower stress levels and improved moods, compared to when they began the program.

**Method**

**Participants**

Notices were sent to local school districts that a Yoga Nidra meditation class was being offered for professional school counselors. Interested school counselors volunteered to register for the class and participate in the study. Twenty six professional school counselors from local public schools enrolled in the class.

**Measures**

The Perceived Stress Scale (PSS; Cohen, Kamarck, & Mermelstein, 1983) was used as a pre- and post-test to assess the counselor stress before and after completing an MBSR program. The PSS has been frequently used to determine participants’ stress levels within a variety of populations (Golden-Kreutz, Browne, Frierson, & Andersen, 2004; Schulze, Laudenslager, & Coussons-Read, 2009; Solomon, Kiang, Halkitis, Moeller, & Pappas, 2010; Sorenson, Janusek, & Mathews, 2006). The PSS is a self-report measure that asks participants to rate their stress from the past month (e.g. “In the last month, how often have you been upset because of something that happened unexpectedly?”). Participants use a scale from 0 (never) to 4 (very often) to rate their stress for each question. Scale scores are computed by summing items ($\alpha = .81$ for the pretest, $\alpha = .90$ for the posttest).

To measure mood, participants responded to a 30-item short version of the Profile of Mood States (POMS; McNair, Lorr, & Droppleman, 1981). The POMS assesses anxiety, tension, depression, anger, vigor, confusion, and fatigue. Responses were measured on a 5-point scale, from 1 (not at all) to 5 (extremely). This measure has been tested on several populations and has shown to be reliable and valid (Gibson, 1997; Shin & Colling, 2000).

**Procedure**

Interested school counselors were screened based on ability to make the majority of the class sessions. Informed consent was obtained and the pretest was completed at the first session prior to the Yoga Nidra practice initiation. Participants were asked to read the instructions for the survey and answer to the best of their ability. The posttest was administered at the last session following the Yoga Nidra instruction. Participants were thanked for their involvement.
Overview of the Yoga Nidra Program

The program was similar to the program suggested by Miller (2005) with further suggestions by Miller (personal communication; see Miller, 2005 for a description of the program). This program was used successfully with chronically ill patients (see Pritchard et al., 2010 for further description). Foundations of the Yoga Nidra meditation program were discussed at the first session. Students were given 2 CDs containing two different meditation practices during the course of the program so that they could practice at home as well. These include the body scan meditation, breath work, exploration of sensations, emotions, and thought patterns, moving back and forth between feeling and witnessing, and sitting in awareness. Yoga mats, blankets, and eye pillows were provided for in-class use. Participants were asked to practice once a day at home in addition to the class sessions.

Data Analysis

Sum scores on the PSS and all dimensions of the POMS for all participants were analyzed using paired samples t-tests to detect significant changes over the course of the program. Only 22 of the 26 counselors completed both the pretest and posttest; thus analyses were based on 22 participants.

Results

As evident in Table 1, participants reported significantly lower levels of stress after the completion of the Yoga Nidra meditation program. Additionally, lower levels of fatigue were demonstrated.

Discussion

Consistent with previous research demonstrating the positive effects MBSR has on health (e.g., Carlson & Garland, 2005; Coppola & Spector, 2009; Tacon et al., 2004), the present study demonstrates that meditation lowers stress and fatigue levels among school counselors. Furthermore, this study was the first to examine the changes in fatigue and stress levels among school counselors after completion of a Yoga Nidra program. Because counselors often experience nervousness, time urgency, and feelings of being rushed (Scott et al., 2001), Yoga Nidra is a practical method for reducing stress for them. More specifically, yoga postures need not be mastered to experience the benefits. Therefore, counselors are able to take advantage of the program, without allotting much time or learning complicated postures.

The present study contained several limitations worth discussing. First, the sample size obtained was small (22 final participants) and not all participants who completed the pretest also completed the posttest. Additionally, there was no control group to study and compare with the experimental group. Because of this, it is impossible to claim that findings are attributed specifically to the Yoga Nidra program and not, the possibility of stress naturally depleting over time. Future studies should incorporate a control group to better determine the effectiveness of the Yoga Nidra program.

Setting these limitations aside, it seems as though Yoga Nidra meditation promotes a positive change in the stress and fatigue levels of school counselors.
Moreover, this study was available to counselors regardless of the school setting or the level (e.g., elementary, junior high school, high school) where they were employed, demonstrating the program’s usefulness in a variety of school settings. Yoga Nidra requires little training and is a relatively inexpensive, effective intervention. These positive findings suggest that future research should focus on the long-term benefits gained by school counselors who participate in the program.

References


*Note: This paper is part of the annual VISTAS project sponsored by the American Counseling Association. Find more information on the project at: http://counselingoutfitters.com/vistas/VISTAS_Home.htm*
Table 1

Change (Means and Standard Deviations) in POMS subscales scores over time

<table>
<thead>
<tr>
<th>Variable</th>
<th>Time 1</th>
<th>Time 2</th>
<th>t(17)</th>
<th>p</th>
<th>95% CI</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td>SD</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(17)</td>
<td></td>
<td>(17)</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>LL</td>
<td>UL</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vigor</td>
<td>13.22</td>
<td>4.77</td>
<td>14.56</td>
<td>5.10</td>
<td>-1.02</td>
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<tr>
<td>Fatigue</td>
<td>15.33</td>
<td>4.81</td>
<td>11.78</td>
<td>5.05</td>
<td>2.63</td>
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<tr>
<td>Anger</td>
<td>10.11</td>
<td>5.06</td>
<td>7.89</td>
<td>2.68</td>
<td>1.48</td>
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<tr>
<td>Tension</td>
<td>11.17</td>
<td>4.42</td>
<td>9.50</td>
<td>4.63</td>
<td>1.09</td>
</tr>
<tr>
<td>Depressed</td>
<td>9.17</td>
<td>4.38</td>
<td>8.5</td>
<td>5.14</td>
<td>.48</td>
</tr>
<tr>
<td>Confused</td>
<td>8.39</td>
<td>3.48</td>
<td>7.39</td>
<td>3.29</td>
<td>.84</td>
</tr>
<tr>
<td>Mood</td>
<td>80.94</td>
<td>21.43</td>
<td>70.50</td>
<td>22.52</td>
<td>1.41</td>
</tr>
<tr>
<td>Stress</td>
<td>1.95</td>
<td>.56</td>
<td>1.42</td>
<td>.59</td>
<td>2.96</td>
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