

Healing the Healers: A Qualitative Phenomenological Study on Yoga Nidra and Nurses' Well-being

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ABSTRACT

Introduction: Nurses often face substantial challenges and stress due to multitasking and comprehensive roles in the clinical setting, which can adversely affect their physical, psychological and emotional health. This, in turn, impacts the quality of patient care. Among various conventional therapies, Yoga Nidra, a guided meditation approach, remains the preferred way for promoting deep relaxation and mental clarity through a structured, simple framework, helping individuals to achieve inner calm and peace. Deep-rooted in indigenous wisdom, Yoga Nidra offers a conventional intervention to support nurses' well-being.

Aim: To explore the lived experiences and perceived impact of Yoga Nidra on nurses' well-being.

Materials and Methods: A qualitative phenomenological study was conducted at Shree Krishna Hospital in the Charotar region of Gujarat, India, from July 2024 to August 2024, to explore the effects of Yoga Nidra on nurses' well-being. Twenty-five nurses from various clinical settings were recruited through purposive sampling. All 25 participants submitted their reflective diaries;

three were incomplete and excluded. The participants were encouraged to attend yoga Nidra sessions facilitated by the investigators and to maintain reflective diaries to document their experiences with the practice. Descriptive statistics were used to summarise demographic characteristics.

Results: The mean age of the participants was 45 years, and their work experience was 20 years. All participants were female; the majority, 24 (96%), were married. Most of the participants, 14 (56%), were working in general wards, and 15 (60%) belonged to the staff nurse cadre. The broad themes generated from the analysis of reflective diaries were improved emotional well-being, Physical well-being, cognitive and behavioural transformation, and perceived effectiveness and challenges.

Conclusion: Yoga Nidra proved to be a viable and culturally tailored intervention to support the well-being of nurses operating within the complex healthcare environments. Integrating Yoga Nidra into staff wellness initiatives may contribute to a more resilient and effective nursing workforce, benefiting both healthcare organisations and the quality of patient care.

Keywords: Cognitive and behavioural transformation, Guided meditation, Healthcare workers, Psychological well-being

INTRODUCTION

Mental health and well-being are major concerns among healthcare professionals, particularly nurses who often experience high levels of stress and burnout [1], most of the time due to inadequate staffing, heavy workloads, and job-related dissatisfaction [2]. The World Health Organisation (WHO) stated that long-term exposure to work-related stress has serious effects on an individual's physical and mental health [3], which ultimately compromises the quality and safety of patient care [4].

The number of nurses facing mental health challenges is alarmingly high and is a global concern. A study from South India reported poor mental health among 79.1% of nurses [5], while 32.4% to 41.2% of Australian nurses reported symptoms of depression, anxiety, or stress [6], and 75.5% of nurses from Egypt experienced difficulties with daily activities [7]. Several factors contribute to compromised well-being among nurses, including challenging working conditions, high emotional and physical demands, poor interpersonal relations, and lack of resources and support, leading to increased workplace errors and disrupt the patient care quality [8]. Meanwhile, support from family and colleagues, individual coping skills, and emotional resilience are critical to promote well-being [9]. Therefore, efforts are crucial for protecting and promoting nurses' well-being to sustain a healthy workforce [10].

Well-being, in the context of ancient Indian psychology, is a holistic state of harmony, attained through balancing the elements of emotion, behaviour, cognition and relationships [11]. This multifaceted concept of well-being involves the integration of

physical, mental and spiritual dimensions [12]. A study has reported the potential usefulness of complementary therapies, such as yoga and mindfulness-based practices, to enhance well-being [13]. Yoga Nidra, a technique within the broader discipline of Yoga, focuses on Pratyahara, the withdrawal of the senses to promote inner awareness, making it a powerful tool for self-awareness and well-being [14].

Yoga Nidra, widely regarded as 'psychic sleep', has shown various benefits, including reducing stress, enhancing quality of life [15], boosting happiness [16], balancing emotional health [17], and improving sleep quality [18]. It stands out as the best conventional intervention as it is effortless, easy to practice, and can promote deep relaxation [19].

The existing literature from India has mainly focused on describing nurses' problems, with few studies reported from Gujarat. Further, the literature limits interventional studies that explore participants' lived experiences, leaving a clear gap. Addressing this gap is essential for developing evidence-based interventions that are acceptable and contextually grounded. Hence, the present study aimed to explore the role of Yoga Nidra in nurses' well-being by examining their lived experiences, perceived benefits, implementation challenges, and the feasibility of integrating Yoga Nidra into structured wellness initiatives.

MATERIALS AND METHODS

A qualitative phenomenological approach was conducted at Shree Krishna Hospital in central Gujarat, India, from July 2024 to August

2024. Ethical clearance was obtained from the Institutional Ethics Committee-2 of Bhaikaka University (IEC/BU/353/Faculty/2023). Written informed consent was obtained from the participants after a detailed explanation of the study protocol.

The participants were also informed of their right to withdraw at any time without any consequences. All the participants were given a code, and confidentiality was maintained.

Using purposive sampling, 25 staff nurses from various clinical departments were initially recruited to participate in the guided Yoga Nidra intervention.

Sample size: The sample size was determined based on methodological recommendations for qualitative studies, which suggest 10-20 participants for lived experience studies [20].

Inclusion criteria: Nurses with more than six months of clinical experience, working in various clinical departments at Shree Krishna Hospital, were considered eligible for inclusion in the study.

Exclusion criteria: Nurses were excluded if they were already practising any relaxation techniques, were in their third trimester of pregnancy (as the intervention was performed on Shavasana, and the position may be contraindicated in later pregnancy), or were approaching retirement during the intervention period, to ensure adherence to the 8-week intervention protocol.

Study Procedure

The primary investigator of the study is a practitioner of yoga Nidra. The co-investigator has undergone the same training. The script for Yoga Nidra was developed by the investigators following the sequential steps proposed by Swami Satyananda Saraswati [21]. The script incorporated the standard components of Yoga Nidra, including withdrawal of senses, resolve, and rotation of consciousness, breath awareness, visualisation and return to wakefulness. The script was initially written in English and then translated into Gujarati using forward-backwards translation. The forward translation was done by a bilingual expert fluent in English and Gujarati. The Gujarati translation was then back-translated to English by an independent bilingual translator who was blinded to the original script. Both the English versions were compared to ensure semantic accuracy. The finalised Gujarati Script was then reviewed by three Yoga Nidra practitioners holding formal training in holistic healthcare and yoga with an experience of 8-10 years in conducting structured yoga Nidra sessions in different cohorts.

The participants underwent Yoga Nidra sessions in Shavasana posture, conducted for 30 minutes each, twice a week for eight weeks. Participants were guided to follow the sequential stages of withdrawal of senses, resolve, and rotation of consciousness, breath awareness, visualisation and return to wakefulness. Considering the feasibility of the participants, the sessions were scheduled in the afternoon from 2.30 pm to 3 pm at the on-campus activity centre. All the Yoga Nidra sessions were conducted in person, facilitated and observed by the investigators. After each session, the participants were given time to reflect on the practice and share their experience. The investigators kept a note of the nonverbal cues and the participant reflections in the form of field notes, which ensured a supplementary data source. The participants were also given diaries to record their experiences during and after meditation sessions. Reflective diaries were maintained by participants over eight weeks and were collected on the last day of the intervention and used for thematic analysis. The reflective diary entries served as primary data, while field notes were triangulated with diary data during thematic analysis.

Firstly, the diary entries were transcribed verbatim from Gujarati to English onto a Microsoft Excel 2016 sheet by the co-investigator, who read them multiple times to familiarise with the data and spent around three hours on each reflective diary to transcribe. The primary investigator verified all transcriptions against the original diaries to ensure accuracy. Though data saturation was achieved by the 17th

diary, with no new codes or themes emerging, the remaining diaries were also analysed to ensure completeness. The six-step approach by Braun V and Clarke V was followed to identify recurring patterns and themes [22].

Using an inductive approach, the themes were derived from keywords resulting from participants' expressions in the diaries. The first author manually coded the text by highlighting key phrases/ words and meaningful patterns. The independently generated codes were compared, discussed, and refined through extensive discussions among a multidisciplinary team of five investigators until a consensus was reached, ensuring coding credibility. The team included a general physician, a psychiatrist, a critical care physician, and a doctoral and a post-graduate nursing faculty member. All investigators had experience in qualitative research. The conceptually similar codes were then clustered and categorised into potential sub-themes and then into themes. Finally, to ensure the credibility and confirmability of the findings, peer debriefing and triangulation were performed. Colleagues from the Department of Yoga, BLISS unit, and Shree Krishna hospital, who were not directly involved in data collection, were briefed on the study, the process of transcription, and code identification, initially during code generation and then during theme development. All generated codes were reviewed, and consensus was reached while generating the final codes, sub-themes, and themes.

STATISTICAL ANALYSIS

Descriptive statistics were used to summarise demographic characteristics, whereas the diaries were analysed using thematic analysis to identify relevant codes, subthemes, and themes.

RESULTS

The study participants were nurses working in various clinical departments. The mean age of the participants was 45 years, with a range from 25 to 55 years. The mean years of experience of the participants were 20 years, with a range from one year to 32 years. All the participants were females, and the majority, 24 (96%), were married. The participants' work areas varied, with most 14 (56%) working in general wards [Table/Fig-1]. All 25 participants submitted their reflective diaries; three were incomplete and excluded.

The analysis of 22 reflective diaries revealed four major themes that capture the range of participants' experience with Yoga Nidra meditation [Table/Fig-2].

S. No.	Demographic variables	n (%)
1.	Age (in years) (Mean±SD)	45±9.3
2.	Years of experience (Mean±SD)	20±9.5
3.	Gender	
	Females	25 (100)
4.	Marital status	
	Married	24 (96)
	Unmarried	1 (4)
5.	Education	
	Diploma in Nursing (GNM)	23 (92)
	B.Sc Nursing	2 (8)
6.	Area of working	
	Intensive care units	11 (44)
	General wards	14 (56)
7.	Designation	
	Staff nurses	15 (60)
	Assistant in-charges	7 (28)
	Ward in-charges	3 (12)

[Table/Fig-1]: Demographic variables of study participants (N=25).

Themes	Subthemes	Codes
1. Emotional well-being	Calmness and relaxation	Mind and body relaxation, immediate calmness, peaceful, relaxed physically and mentally, total relaxation
	Anger management	Anger control, respond calmly
	Positive mood and outlook	Positive feeling, enjoyment at work, energetic, happy and peaceful, absence of negative thoughts, worry less, emotional control, work-life balance
2. Physical well-being	Energy restoration	Energetic, refreshed, feel energised
	Sleep improvement	Improved sleep quality, sound sleep, and waking up energetic.
	Pain relief	Reduced headache, reduced body pain
3. Cognitive and behavioural transformation	Improved focus and concentration	Improved concentration, better focus, mental clarity
	Enhanced relationship	Increased self-awareness, conscious responses, mindful use of energy
	Proactive engagement	Intention to continue, encouraging others, recommending Yoga Nidra, sharing experiences, eagerness for sessions.
4. Perceived effectiveness and challenges	Perceived effectiveness	Effective visualisation, good experience, refreshing and relaxing sustained calmness
	Challenges	Unable to concentrate, sleepy, disturbed, restless, physical discomfort

[Table/Fig-2]: Themes, subthemes and codes derived from the reflective diaries.

Theme 1: Emotional Well-being

Emotional well-being emerged as a major theme. Participants reported better control of their emotions at work place. Over time, participants noted a change in their behaviour, with them behaving calmly in difficult situations. Four sub-themes supported this theme:

- **Calmness and relaxation:** All 22 (100%) participants reported that they felt relaxed and calm immediately after the meditation, and the experience sustained. Participants reported the feeling as being in a “different world”, and the sessions added a sense of “peace and calmness”.

“My mind and body was completely relaxed. I felt so light and peaceful.”(Participant-1)

“I felt like all the tensions gone, and the peace I experienced stayed with me even after the session.” (Participant-3)

- **Anger management:** Control over anger issues was reported by 14 (63.6%) of the participants, while 21 (95.45%) participants mentioned that the sessions could reduce their stress levels and the way they respond to others, noting “improved interactions”.

“My anger issues reduced. I am more aware of the way I respond and I could behave more calmly in stressful situations.” (Participant-14)

“I don't carry hospital stress home anymore. I am truly relaxed once I am at home.” (Participant-3)

- **Positive mood and outlook:** Enhanced mood and positive feelings were reported by 12 (54.5%) participants. Statements like “felt more positive”, “started enjoying work” echo improved motivation and fulfilment. The sessions also seemed to decrease negative thoughts. *“I felt more positive. I started focusing on good things in my life.” (Participant-10)*

“There were no negative thoughts at all. My mind was clear and free from worries.”(Participant-2)

Theme 2: Physical Well-being

A regular experience reported by the participants is deep physical well-being with statements like “body was totally relaxed” and “body discomfort just vanished”, indicating relief from physical strain. Participants reported “feeling lighter”, with relief from “body tension and fatigue”.

- **Energy restoration:** Most of the participants 19 (86.36%) felt refreshed after the sessions, enabling them to perform daily activities with great energy and enthusiasm.

“My body felt completely relaxed. It was like all the tension had melted away, leaving me in a state of comfort. (Participant-5)

- **Sleep Improvement:** Improved sleep quality was reported by 18 (81.8%) participants. Meditation helped them ‘fall asleep faster’, experience ‘deeper rest’, and ‘wake up feeling refreshed’. Many reported sound sleep at night.

“My sleep pattern has improved significantly. I feel more rested and energetic throughout the day.”(Participant-11)

- **Pain relief:** Relief from pain was reported by 3 (13.6%) participants, such as headache and body pain, suggesting meditation may contribute to pain modulation through relaxation and focus. Together, these experiences reinforce the supportive effect of yoga Nidra in enhancing the physical well-being of nurses.

Theme 3: Cognitive and Behavioural Transformation

Participants experienced improved focus and self-awareness, which is exhibited as better emotional regulation, improved interactions at work place and a greater sense of social responsibility in terms of sharing the benefits of meditation with others.

- **Improved focus and concentration:** Enhanced concentration and mental clarity were noted by 3 (13.6%).

“I have learned to use my energy thoughtfully. I focus on what truly matters and avoid wasting energy on unnecessary worries.”(Participant-9)

- **Enhanced Relationships:** Better relationships with colleagues and family members were noted by 7 (31.8%) participants. The ability to ‘respond calmly to people around’ suggests a shift towards more empathetic and thoughtful social behaviour.

“The way I interact with people has notably changed. Now, I am more conscious of how I respond and react with others.” (Participant 23)

- **Proactive engagement:** Few of the participants, 5 (22.7%) expressed their interest to continue meditation regularly. Further, they have encouraged their colleagues to attend the meditation sessions. Statements such as ‘will recommend to others’, ‘practised meditation with family’ explain a broader influence, where personal transformation can initiate a ‘snowball effect’, transforming people around.

Theme 4: Perceived Effectiveness and Challenges

The majority of the participants appreciated Yoga Nidra meditation as it reportedly improved their overall well-being. Statements such as “30 minutes relaxation had a major effect”, “refreshing and relaxing” underscore the impact of Yoga Nidra in relaxation and tranquillity. However, there were challenges reported by the participants. A few participants, 6 (27.3%), reported that they had “difficulty concentrating”, “slept during the session”, and “could not lie down comfortably”, which limited their engagement [Table/Fig-2].

DISCUSSION

The participants of the study perceived Yoga Nidra as supportive, contributing to their comprehensive well-being. The findings are in line with those of Dwivedi M and Kumar MK who concluded that Yoga Nidra can precisely influence the well-being of physical, mental, emotional, and spiritual dimensions [23]. One of the most striking outcomes of the study is the improvement in emotional well-being among participants. This finding is consistent with the findings of Kriakous SA et al., that mindfulness-based interventions significantly lower the stress among healthcare professionals [24]. The findings are further reiterated by Malviya S et al., that Yoga Nidra can be considered as a focused strategy to improve mental health [25].

The study findings in relation to cognitive well-being are consistent with previous research showing that meditation positively impacts attention and cognitive function [26]. Cognitive well-being is critical in healthcare as it helps in prompt decision making, ultimately contributing to patient safety.

With 81.8% of the participants reporting better sleep, the finding is important considering the report of Stimpfel AW et al., that nurses tend to sleep for shorter durations than recommended, which negatively affect patient care [27]. It can be interpreted that Yoga Nidra may help counteract the physiological problems related to shift duties and work-related fatigue. The experience of lightness, relaxation, and pain relief reported in this study further supports the result that Yoga Nidra causes deep relaxation and recovery, potentially alleviating the physical strain associated with long duty hours. Stated findings align with Dol KS's observation that Yoga Nidra precisely reduces life stress intensity and improves self-esteem [28].

Additionally, the behavioural changes reported by the participants' highlights the social benefits of meditation. The study revealed significant improvements in interpersonal relationships. These findings suggest that Yoga Nidra may result in better team dynamics, communication, and collaborative activities, which are essential aspects of quality patient care. This matches with the findings of Lee CT and Doran DM which highlighted the role of collaboration in lowering workplace errors [29]. Ultimately, the eagerness of participants to recommend the experiences to others support the findings of Jaiswal A and Arun SJ that individual transformation fosters collective well-being at the workplace [30].

While the findings mainly highlight the positive effects of Yoga Nidra on nurses' well-being, the participants also reported few challenges such as difficulty following the instructions, being unable to pay attention due to work-related thoughts, physical uneasiness while resting, and falling asleep during practice sessions. These challenges may highlight underlying fatigue, heavy work burden, or limited familiarity with meditative practices, especially in a demanding clinical situation. Similar challenges were reported in a meditation-based interventional study in which participants reported challenges including scheduling difficulties, busy mind, stress, and anxiety as key barriers to meditation practice [31]. Addressing mentioned challenges calls for having short, flexible Yoga Nidra sessions in improving the support systems to increase engagement and maximise the benefits.

These findings suggest that integrating Yoga Nidra into staff wellness programs could be a cost-effective, culturally tailored method to promote well-being. The consistent improvements noticed across participants suggest that adherence to the practice may contribute to a balanced, resilient, and effective workforce. However, investigating the direct association between Yoga Nidra practice among nurses and patient outcomes is an area for further advancement.

Limitation(s)

As a qualitative study, the study findings relied on the self-reported experiences of nurses, which may have caused response bias. The single study setting may limit the generalisability of the findings. The organisational climate and other contextual factors differ across Institutions, which may influence the experience of the participants with meditation. Repeated observational studies are also recommended to examine the long-term effects and sustainability of Yoga Nidra practice over the period of time. Future enquiries should build on these findings by conducting larger, multicentre studies to enhance the transferability of results across diverse healthcare settings.

CONCLUSION(S)

The study examined the impact of Yoga Nidra on nurses' well-being, revealing improvements in emotional, physical, cognitive,

and behavioural aspects. While a few participants faced minor challenges like concentration issues and physical discomfort, these were rare and didn't affect their participation. The results suggest that Yoga Nidra is a simple, effective, and sustainable practice. Given the increasing demands in healthcare, prioritising staff well-being is essential. It's recommended that healthcare Institutions train team leaders to facilitate Yoga Nidra sessions for promoting holistic well-being among nurses.

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