Using the Theory of Planned Behavior to Assess Intention to Engage in Mindful Self-care

Brenda K. Sanya, PhD, RN, CPAN & Dawn L. Denny, PhD, RN, ONC

Background

❖ Self-care is essential for both nurses and patients, as it directly enhances nurse well-being, resilience, job satisfaction, and patient outcomes (Blackburn et al., 2020).

❖ The American Nurses Association (ANA) stresses self-care as an ethical duty for nurses, but many still prioritize patient needs over their own, resulting in imbalances that harm both their health and their ability to provide quality care (ANA, 2015).

❖ Mindful self-care, especially in high-stress environments like perianesthesia, has proven to improve nurse resilience and job efficacy, yet few engage in these practices (Brommelsiek & Peterson, 2022).

❖ Theory of Planned Behavior (TPB) was used as a guiding framework to understand nurses' intentions toward engaging in self-care. The TPB suggests that behavioral intentions are shaped by attitudes, subjective norms, and perceived behavioral control (Ajzen, 1991).

68%
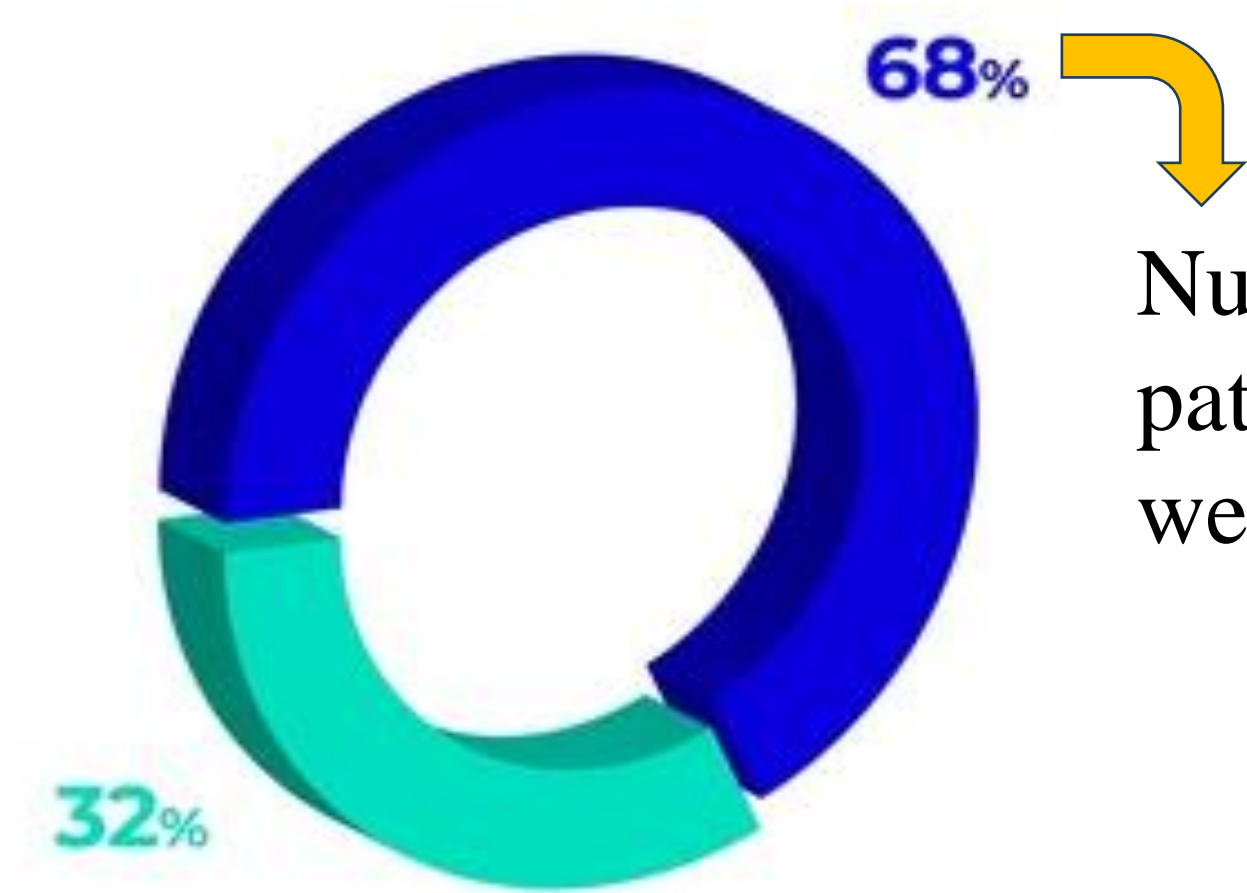
Nurses who prioritized their patients' health, safety, and well-being over their own.

32%

American Nurses Association Health Risk Appraisal.Nursingworld.org 2016

Purpose

The purpose of this study was to examine how the variables from the Theory of Planned Behavior (attitudes, subjective norms, and perceived behavioral control) and the variables from the Mindful Self-Care Scale (mindful relaxation, physical care, self-compassion and purpose, supportive relationships, supportive structure, and mindful awareness) relate to nurses' intentions to engage in mindful self-care within the perianesthesia setting.

Methods

❖ This research study used a cross-sectional design.
❖ The study received institutional review board approval from the university (#0005519).

## Study Sample

Population used: American Society of PeriAnesthesia Nurses (ASPAN)

Study Procedures

❖ **Expert validation process:** Four field experts used to validate the Theory of Planned Behavior Questionnaire for use among perianesthesia nurses.
❖ **Pilot Study:** Sample comprised of a 10 committee of ASPAN.
❖ **Main Study:** A sample size of 85 nurses surveyed

Informed consent obtained from participants and participation was voluntary.

Instruments: Theory of Planned Behavior questionnaire and Mindful Self-Care Scale

Significant Variables Influencing Self-Care
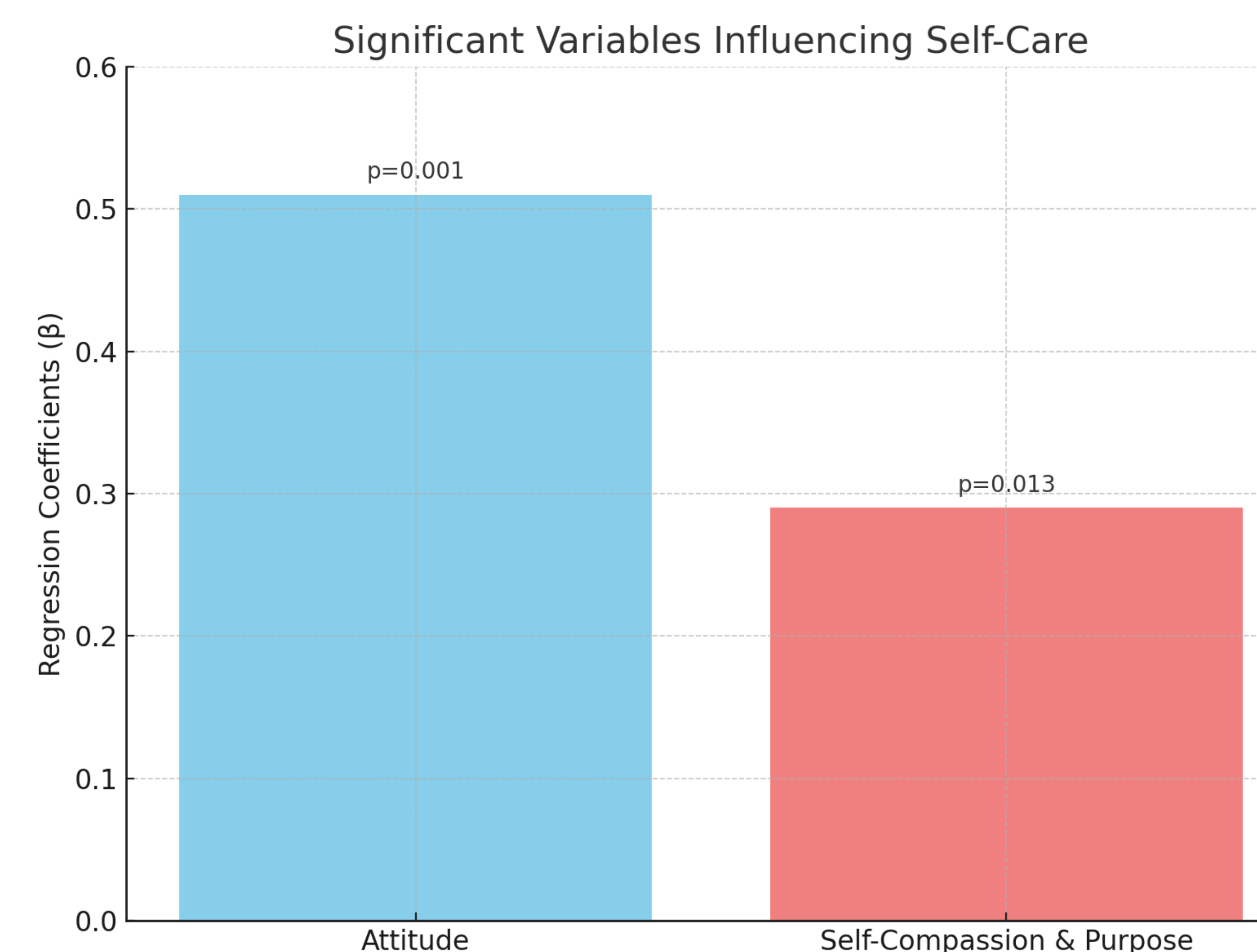
Results

Regression analyses:

❖ *attitude* (β=0.51, t=5.63, p=<0.001)- significant factors influencing the intention

❖ *self-compassion and purpose* (β=0.29, t=2.54, p=0.013)- significant factors influencing the intention

❖ Theory of Planned Behavior, $F_{(8,76)} = 9.33$; $p = 0.001$- the model for intent to engage in mindful self-care was a good fit

❖ The model significantly related to the intention to engage in mindful self-care. The model explained 44% of the variance ($R^2_{adjusted} = 0.44$) in the intention to engage in self-care by perianesthesia nurses.

❖ On average, perianesthesia nurses engaged in mindful self-care 2-3 days per week.

❖ Comparing rural and non-rural nurses showed no significant differences.

Implications for Practice

❖ Implementation of theory-based interventions to promote self-care behaviors in healthcare by incorporating strategies that foster attitude and 'self-compassion and purpose' and interventions tailored to nurses' unique needs.

❖ Incorporating self-care training into nursing education can equip future nurses to handle career demands more effectively and with more resilience.

Limitations:

❖ The study's cross-sectional design limits its ability to determine cause-and-effect relationships.

❖ Survey completion time may have limited rural nurses' participation.

❖ Use of ASPAN members as population, excluded perianesthesia non ASPAN members from participating hence incomplete picture of self-care intentions across the perianesthesia nursing population.

References

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Study Contact: Brenda Sanya, PhD, RN, CPAN: Brenda.Sanya@inova.org