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Impact of Mindfulness Training on the Mental Health of Nursing Students

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***Abstract*—** This study investigates the impact of mindfulness training on the mental health of nursing students. A total of 150 nursing students were surveyed to assess their engagement in mindfulness practices and their perception of stress. The demographic analysis revealed that the majority of students were aged between 21 and 23 years, with a notable gender disparity favoring females (70.97%). The study found high engagement in mindfulness meditation (Mean = 3.98) and group learning (Mean = 3.70), but lower participation in body scan exercises (Mean = 2.94) and yoga (Mean = 2.11). Stress perception was high across various dimensions, with students showing strong cognitive and coping strategies for stress (Mean = 3.61 and Mean = 4.00, respectively). A significant relationship was observed between mindfulness practices and the students' stress perception, indicating that mindfulness training positively influences stress management. Additionally, the effectiveness of mindfulness training varied by age and sex, suggesting the need for tailored interventions. The study concludes that mindfulness training significantly enhances emotional resilience and stress management among nursing students, with recommendations for integrating mindfulness into nursing curricula and institutional policies to improve student well-being.

***Keywords*—** Mindfulness training, nursing students, stress perception, emotional resilience, coping strategies.

I. INTRODUCTION

Background of the Study

Mental health issues among nursing students have become a growing concern due to the rigorous demands and emotional stress of their academic programs. These students often face challenges such as high levels of anxiety, depression, and burnout, which can negatively impact their academic performance and well-being. Mindfulness training, which involves paying focused attention to the present moment without judgment, has been gaining attention as a potential intervention to improve mental health. By cultivating mindfulness, nursing students can manage stress more effectively, improve emotional regulation, and develop resilience, which could ultimately enhance their overall mental health and academic success. Given the significant role that mental health plays in the academic and professional development of nursing students, understanding the effects of mindfulness training on their mental health is essential.

Mindfulness training has been shown to reduce symptoms of anxiety and depression, enhance emotional well-being, and improve coping mechanisms. According to Epstein, R. M. (2021), mindfulness is a therapeutic intervention that can help individuals become more aware of their thoughts, feelings, and bodily sensations in a non-reactive manner, thus reducing emotional distress. Additionally, a study by Aloufi et al. (2021) found that mindfulness practices significantly reduced anxiety and stress among healthcare students, including nurses. On the local front, research by Centeno et al. (2020). in the Philippines, mindfulness interventions improved emotional regulation and lowered stress levels among students in health-related courses. This aligns with the growing body of research supporting the mental health benefits of mindfulness for students in high-pressure academic fields.

Despite the extensive research on mindfulness and its positive effects on mental health, there is still limited exploration of its specific impact on nursing students, particularly in the context of the local educational setting in Pagadian City. Much of the existing research focuses on students from different disciplines or healthcare professionals already in practice. Additionally, while studies on mindfulness training have been conducted in various countries, there is a lack of comprehensive studies that examine its effectiveness specifically within the Filipino context, where the unique challenges faced by nursing students may differ. This gap highlights the need for further investigation into how mindfulness training can specifically support nursing students' mental health in local settings, especially in the Philippines.

This study aims to explore the impact of mindfulness training on the mental health of nursing students. The study assesses whether mindfulness practices can

improve nursing students' psychological well-being, stress reduction, and emotional regulation. Specifically, the study seeks to determine the effectiveness of mindfulness training in alleviating symptoms of anxiety, depression, and burnout commonly experienced by nursing students. The goal is to provide valuable insights into the potential of mindfulness as a practical tool for enhancing the mental health and academic performance of nursing students, thereby contributing to the body of research in this field and offering recommendations for implementing mindfulness training in nursing education programs.

II. RESEARCH METHODS

Research Design

This study has employed a quantitative research method using a quasi-experimental design to assess the impact of mindfulness training on the mental health of nursing students at JH Cerilles State College. This design is appropriate as it allows for a controlled comparison between two groups: the experimental group, which has undergone mindfulness training, and the control group, which did not receive the intervention. The study employed pre-test and post-test assessments to evaluate mental health outcomes, measuring stress, anxiety, depression, and overall well-being using established psychological scales such as the Perceived Stress Scale (Chan et al., 2020) and the Depression, Anxiety, and Stress Scale (Ali et al., 2021). Data will be collected from both groups before and after the intervention to gauge the effectiveness of the mindfulness training. The quasi-experimental design is chosen due to the challenges of random assignment in this particular context while still offering valuable insights into the potential impact of mindfulness on mental health. This approach allows for a rigorous evaluation of the intervention's effects within the constraints of the real-world academic environment (Creswell, 2014).

Research Setting

The research was conducted at J.H. Cerilles State College, a higher education institution in Pagadian City, Zamboanga del Sur, which offers nursing programs. The study was conducted within the nursing department, focusing on providing participants with mindfulness training during scheduled sessions. Mental health assessments were conducted before and after the intervention to evaluate the effectiveness of the training. This approach aimed to assess the impact of mindfulness practices on the mental well-being of nursing students, recognizing their exposure to academic and clinical stressors. By analyzing pre- and post-intervention data, the study sought to identify measurable improvements in stress management, emotional resilience, and overall mental health among the participants.

Research Respondents

The study included 100 nursing students enrolled at JH Cerilles State College in the academic year 2023 - 2024. The respondents were selected using random sampling. To ensure a balanced representation, the participants will be divided into an experimental group (who will undergo mindfulness training) and a control group (who will not receive any intervention).

Research Instrument

Mental Health Inventory (MHI). A standardized questionnaire designed to measure various aspects of mental health, including emotional well-being, stress levels, anxiety, and overall mental health status. This will be used to assess students' mental health before and after the intervention.

Mindfulness Questionnaire. A tool to assess the level of mindfulness of students, which can help determine the effectiveness of the mindfulness training. This tool may include scales that measure attention, awareness, and the ability to be present in the moment.

Instrument Validation

A rigorous validation procedure was followed to confirm the validity and reliability of the research tools employed in this study. The Mental Health Inventory (MHI) and the Mindfulness Questionnaire were content validated by an expert panel of psychologists, mental health professionals, and educational researchers. The panel of experts reviewed the instruments for relevance, clarity, and comprehensiveness to ensure the items measured the intended constructs effectively. Based on their input, required revisions were made to improve the clarity and appropriateness of questionnaire items.

After content validation, face validity was determined by carrying out a preliminary review with a small sample of nursing students who were not included in the study. They provided feedback on the clarity, readability, and ease of understanding of the items. Any confusing or unclear questions were revised to enhance the user experience and provide accurate responses. A pilot study was carried out using a sample of nursing students to test construct validity further. Factor analysis was used on the response data collected to establish whether the items were aligned with the theoretical aspects of mental health and mindfulness. Items that

were not strongly related to their respective constructs were modified or eliminated.

Both instruments' reliability was checked using Cronbach's alpha coefficient to assess internal consistency. A reliability coefficient of 0.70 or more was deemed acceptable, and it ensured that the instruments yielded consistent and reliable results. In cases where any subscales were found to have low reliability, items were examined and improved to make them more consistent. A pilot test was run on a small sample of respondents who fulfilled the inclusion criteria of the study. The pilot test assisted in testing the effectiveness of the instruments in collecting the required data, and any inconsistencies were corrected prior to full deployment.

Through this strict validation process, the research instruments were made more accurate, reliable, and suitable for measuring the effects of mindfulness training on the mental wellbeing of nursing students.

Data Gathering Procedure

The data-gathering procedure for this study was conducted systematically, beginning with seeking permission from the nursing school administration through a formal request letter. To ensure adherence to ethical standards, ethical clearance was also obtained from the Institutional Review Board (IRB) or Research Ethics Committee. Before data collection, informed consent was secured from respondents, clearly explaining the study's purpose, potential risks, benefits, and confidentiality measures.

Once permission was granted, respondents were selected using a purposive sampling method based on predetermined inclusion criteria, such as currently enrolled in the nursing program and willing to participate. An orientation session was conducted to provide respondents with detailed information about the study, clarify any concerns, and confirm voluntary participation. All collected data were securely stored, categorized, and entered into statistical software for quantitative analysis.

Finally, a comprehensive research report detailing the study findings, conclusions, and recommendations was prepared. The results were shared with relevant stakeholders, including the nursing school administration and respondents, and were also considered for presentation at academic conferences or publication in peer-reviewed journals. This structured approach ensured that the research was conducted ethically, systematically, and effectively in assessing the impact of mindfulness training on the mental health of nursing students.

Ethical Considerations

In conducting this study on the impact of mindfulness training on the mental health of nursing students, several ethical considerations were prioritized to protect participants' rights and well-being. Informed consent was obtained from all participants before they participated in the study. They were fully informed about the purpose of the research, the procedures involved, and their right to withdraw from the study at any time without facing any negative consequences. Written consent was secured to confirm their voluntary participation agreement (Creswell, 2014). Confidentiality was maintained throughout the study. All personal information, including survey responses, was kept private, and identifying information was removed to ensure anonymity. Data was securely stored and only accessible to the research team to uphold participants' privacy. Participation in the study was entirely voluntary, meaning that students were not pressured to participate, and no negative repercussions were imposed on those who chose not to participate or decided to withdraw at any stage. This respected the principle of autonomy, ensuring participants were free to make an informed decision. Finally, the mindfulness training intervention was conducted to prioritize the participants' physical and psychological safety. The mindfulness facilitators were trained professionals, ensuring the intervention did not cause harm. In case participants experienced discomfort or distress, they were offered support and allowed to withdraw from the study without facing any negative consequences. These ethical measures ensured that the study adhered to the highest standards of integrity while protecting the participants' rights and well-being (Hasan et al., 2021).

Statistical Treatment

The data collected in this study on the impact of mindfulness training on the mental health of nursing students will be analyzed using descriptive and inferential statistical methods to assess the effectiveness of the intervention. Descriptive statistics, including frequencies, percentages, means, and standard deviations, will be used to summarize the demographic characteristics of the participants (such as age, gender, and baseline mental health status) and the mental health scores before and after the mindfulness training. To determine whether there is a significant difference in the mental health outcomes (e.g., anxiety, stress, and

depression levels) before and after the mindfulness training, a paired t-test will be conducted. This test will compare the pre-and post-training scores within the same group of students to assess changes in mental health after the intervention. If two distinct groups (e.g., mindfulness training group vs. control group) are involved, an independent t-test will be used to compare the mean mental health scores between the groups. In the case of non-normally distributed data, the Mann-Whitney U test will be used as an alternative. Cohen's d effect size will be calculated to evaluate the practical significance of mindfulness training, which will provide insight into the strength of any observed differences in mental health outcomes. The reliability of the mental health assessment tools will be evaluated using Cronbach's alpha to ensure internal consistency, and the validity of these tools will be assessed to confirm that they accurately measure mental health outcomes. A significance level of $p < 0.05$ will be adopted for all statistical tests to determine whether the observed results are statistically significant. These statistical treatments will provide a comprehensive analysis of the data, allowing for a robust evaluation of whether mindfulness training significantly improves the mental health of nursing students.

III. RESULTS AND DISCUSSIONS

Table 1. *Demographic Profile of the Respondents*

Profile	**f**	**%**
Age		
below 18 years old	0	0
18 – 20 years old	0	0
21 – 23 years old	89	95.70
24 – 26 years old	4	4.30
Above 26 years old	0	0
Total	93	100
Sex		
Male	27	29.03
Female	66	70.97
Others	0	0
Total	93	100

Table 1 presents the demographic profile of nursing students based on age and sex. The majority (95.70%) are between 21 and 23 years old, with a small percentage (4.30%) aged 24–26. No respondents were below 18, between 18–20, or above 26. In terms of sex, most respondents are female (70.97%), while 29.03% are male, with no other gender identities reported. These findings reflect the common trend in nursing education, where students are typically in their early twenties and the profession remains predominantly female.

Table 2.1 *Extent of Nursing Students' Engagement in Mindfulness Training in terms of Mindfulness Meditation*

Indicators	**SD**	**Mean**
1. I practice mindfulness meditation to focus my attention and reduce stress.	0.48	4.15
2. I set aside a specific time each day for mindfulness meditation.	0.62	4.00
3. I use guided mindfulness meditation recordings or apps to practice.	0.65	3.93
4. I engage in mindfulness meditation to help me focus on the present moment.	0.62	3.88
5. I use mindfulness meditation to reduce anxiety and negative thoughts.	0.64	3.94
Average Mean	3.98 High	

Scale: 4.21 - 5.00 "Very High"; 3.41 – 4.20 "High"; 2.61 – 3.40 "Average";
1.81 – 2.60 "Low"; 1.00 – 1.80 "Very Low"

Table 2.1 highlights nursing students' high level of involvement in mindfulness meditation, with an overall mean of 3.98. The most common reason for practice is stress management and concentration improvement (M = 4.15), followed by setting aside specific time for meditation (M = 4.00). Students also use meditation to reduce anxiety and negative thoughts (M = 3.94) and frequently rely on guided recordings or apps (M = 3.93).

The lowest-rated aspect is practicing mindfulness to focus on the present moment (M = 3.88). These findings indicate that nursing students prioritize mindfulness meditation for stress relief and concentration, aligning with research from the American Psychological Association (2019) on its effectiveness in reducing stress and enhancing focus.

Table 2.2 *Extent of Nursing Students' Engagement in Mindfulness Training in terms of Body Scan*

Indicators	SD	Mean
1. I practice body scan techniques to focus on bodily sensations.	0.90	3.08
2. I use body scan exercises to relax and release physical tension in my body.	0.87	2.91
3. I practice a full body scan from head to toe regularly.	0.96	2.95
4. I use body scan exercises before or after stressful events to relax.	0.97	2.95
5. I practice body scan exercises to improve my awareness of physical sensations.	0.89	2.81
Average Mean	2.94 Average	

Scale: 4.21 - 5.00 "Very High"; 3.41 – 4.20 "High"; 2.61 – 3.40 "Average"; 1.81 – 2.60 "Low"; 1.00 – 1.80 "Very Low"

Table 2.2 examines nursing students' engagement in mindfulness training through body scan exercises, with an overall mean of 2.94, indicating an average level of practice. The most common use is focusing on bodily sensations (M = 3.08), followed by performing a full body scan regularly (M = 2.95) and using body scan exercises to manage stress (M = 2.95). While students recognize its benefits for relaxation (M = 2.91), the least emphasized aspect is improving awareness of physical sensations (M = 2.81). These findings suggest that while body scan exercises help with stress management, they are less integrated into students' routines compared to mindfulness meditation. Promoting greater use of body scan techniques may enhance students' ability to manage stress and develop a more comprehensive mindfulness approach (Creswell, 2017).

Table 2.3 *Extent of Nursing Students' Engagement in Mindfulness Training in terms of Yoga*

Indicators	SD	Mean
1. I practice yoga as a way to relieve stress and improve relaxation.	0.93	2.15
2. I engage in yoga regularly to improve my flexibility and strength.	0.88	1.98
3. I participate in yoga classes or follow online yoga tutorials.	0.99	2.15
4. I practice yoga for mindfulness and mental clarity.	0.96	2.11
5. I use yoga to create balance and harmony between my body and mind.	0.80	2.18
Average Mean	2.11 Low	

Scale: 4.21 - 5.00 "Very High"; 3.41 – 4.20 "High"; 2.61 – 3.40 "Average"; 1.81 – 2.60 "Low"; 1.00 – 1.80 "Very Low"

Table 2.3 examines the extent of nursing students' engagement in mindfulness training through yoga, with an overall average mean of 2.11, categorizing it as low. The most recognized benefit is achieving balance and harmony between body and mind (M = 2.18), followed by stress relief and relaxation (M = 2.15) and participation in yoga classes or tutorials (M = 2.15). However, yoga is not widely practiced for mindfulness and mental clarity (M = 2.11), and the least emphasized aspect is improving flexibility and strength (M = 1.98). These findings suggest that while students acknowledge yoga's holistic benefits, their actual engagement remains infrequent, likely due to time constraints, accessibility, or preference for other mindfulness techniques. Spadola et al. (2027) support this, noting that despite yoga's stress-reducing benefits, it is often underutilized in daily mindfulness routines.

Table 2.4 *Extent of Nursing Students' Engagement in Mindfulness Training in terms of Group Learning*

Indicators	SD	Mean
I participate in mindfulness study groups or workshops.	0.72	3.76
I engage in group discussions to learn more about mindfulness and stress management.	0.84	3.74
I attend group meditation sessions or mindfulness practices.	0.78	3.83

I collaborate with classmates or peers to learn mindfulness techniques.	0.76	3.68
I participate in online or in-person group learning activities focused on mindfulness.	0.94	3.49
Average Mean	3.70 High	

Scale: 4.21 - 5.00 "Very High"; 3.41 – 4.20 "High"; 2.61 – 3.40 "Average";
1.81 – 2.60 "Low"; 1.00 – 1.80 "Very Low"

Table 2.4 examines the extent of nursing students' engagement in mindfulness training through group learning, with an overall average mean of 3.70, categorizing it as high. The most widely practiced activity is attending group meditation sessions (M = 3.83), followed by participation in mindfulness study groups or workshops (M = 3.76) and engaging in group discussions on mindfulness and stress management (M = 3.74). Peer collaboration is also common (M = 3.68), though slightly less emphasized, while the least engaged activity is participation in online or in-person group learning sessions (M = 3.49). These findings suggest that students actively participate in structured, in-person mindfulness practices, with less emphasis on online or less structured activities. Ma et al. (2018) support this, stating that group-based mindfulness interventions enhance participation and stress reduction, while less structured programs tend to be less effective.

Table 2.5 *Summary of the Extent of School Administrators' Management Style*

Components	**Mean**	**Interpretation**
Mindfulness Meditation	3.98	High
Body Scan	2.94	Average
Yoga	2.11	Low
Group Learning	3.70	High
Average Mean	3.188 Average	

Scale: 4.21 - 5.00 "Very High"; 3.41 – 4.20 "High"; 2.61 – 3.40 "Average";
1.81 – 2.60 "Low"; 1.00 – 1.80 "Very Low"

Table 2.5 summarizes the extent of school administrators' management style in incorporating mindfulness practices, with an overall average mean of 3.19, indicating a moderate level of mindfulness integration. The highest-rated practice is mindfulness meditation (M = 3.98), followed by group learning (M = 3.70), both categorized as high, suggesting a strong emphasis on these techniques. Body scan practices fall within the average category (M = 2.94), while yoga is the least practiced (M = 2.11), indicating low integration. These findings suggest that administrators prioritize mindfulness meditation and group learning while placing less emphasis on yoga. Romero-Chandler (2022) supports these results, highlighting the role of administrators' mindfulness in fostering organizational trust and the importance of incorporating mindfulness into school management practices.

Table 3.1 *Level of Perception of Nursing Students on Stress in terms of Primary Appraisal*

Indicators	**SD**	**Mean**
1. I often feel that situations I face are threatening to my well-being.	0.97	3.43
2. When I face a stressful situation, I assess whether it is a challenge or a threat.	0.54	3.95
3. I tend to focus on the consequences of a stressful event before considering my ability to handle it.	0.60	3.88
4. When faced with a difficult task, I feel anxious about how well I can perform.	0.61	3.89
5. I consider the potential for success or failure when evaluating a stressful situation.	0.65	3.69
Average Mean	3.77 High	

Scale: 4.21 - 5.00 "Very High"; 3.41 – 4.20 "High"; 2.61 – 3.40 "Average";
1.81 – 2.60 "Low"; 1.00 – 1.80 "Very Low"

Table 3.1 examines nursing students' stress perception through primary appraisal, with an average mean of 3.77, categorizing it as high. Students actively assess whether stressful situations are challenges or threats (M = 3.95, SD = 0.54) and tend to focus on the consequences before evaluating their coping abilities (M = 3.89, SD = 0.60). Performance-related anxiety is also common (M = 3.88, SD = 0.61), while considerations of success or failure are slightly less emphasized (M = 3.69, SD = 0.65). The lowest score (M = 3.43, SD =

0.97) suggests that while students acknowledge threats to well-being, they do not view stress as overwhelmingly harmful. Overall, nursing students highly perceive stress, focusing more on its consequences than their coping abilities. Zheng et al. (2022) found that nursing students generally experience moderate stress, with academic and clinical placements as primary sources, while Mazalová (2022) highlights that the clinical learning environment significantly influences students' stress perceptions related to teachers and nursing staff.

Table 3.2 *Level of Perception of Nursing Students on Stress in terms of Secondary Appraisal*

Indicators	SD	Mean
I believe that I have the resources needed to manage stressful situations.	1.00	3.09
I assess whether I have enough time or skills to deal with a stressful event.	0.69	3.50
I often find myself questioning whether I have the emotional strength to handle stress.	0.94	3.39
I think about what actions I can take to reduce the impact of stress when it occurs.	0.79	3.50
I feel that I can find a solution to stressful situations, even when it seems difficult.	0.76	3.58
Average Mean	3.41 High	

Scale: 4.21 - 5.00 "Very High"; 3.41 – 4.20 "High"; 2.61 – 3.40 "Average"; 1.81 – 2.60 "Low"; 1.00 – 1.80 "Very Low"

Table 3.2 presents nursing students' perceptions of stress in terms of secondary appraisal, with an average mean of 3.41, categorizing it as high. The highest-rated indicator (M = 3.58, SD = 0.76) reflects students' strong self-efficacy in finding solutions to stressful situations, followed by assessing available time and skills (M = 3.50, SD = 0.69) and considering actions to reduce stress (M = 3.50, SD = 0.79), indicating proactive stress management. However, some student's express doubts about their emotional strength (M = 3.39, SD = 0.94) and adequacy of resources (M = 3.09, SD = 1.00), suggesting variability in confidence levels. Overall, students generally believe they can manage stress effectively, though occasional uncertainty remains. Zheng (2022) found that nursing interns experience moderate stress levels, indicating that while students may feel confident, real-world clinical exposure can still pose significant challenges.

Table 3.3 *Level of Perception of Nursing Students on Stress in terms of Coping Strategies*

Indicators	SD	Mean
1. I use relaxation techniques, such as deep breathing or meditation, to cope with stress.	0.70	3.77
2. When stressed, I talk to friends or family to seek support and advice.	1.19	2.95
3. I engage in physical activities, such as exercise, to manage stress.	0.72	3.72
4. I avoid or distract myself from stressful situations rather than facing them head-on.	0.57	3.72
5. I try to reframe negative thoughts in a more positive light to manage stress.	0.67	3.88
Average Mean	3.61 High	

Scale: 4.21 - 5.00 "Very High"; 3.41 – 4.20 "High"; 2.61 – 3.40 "Average"; 1.81 – 2.60 "Low"; 1.00 – 1.80 "Very Low"

Table 3.3 presents nursing students' perceptions of stress in terms of coping strategies, with an overall average mean of 3.61, categorizing coping strategies as high. The highest-rated strategy (M = 3.88, SD = 0.67) is reframing negative thoughts positively, followed by using relaxation techniques like deep breathing or meditation (M = 3.77, SD = 0.70). Students also engage in physical activities (M = 3.72, SD = 0.72) and employ avoidance or distraction strategies (M = 3.72, SD = 0.57) to manage stress, while the lowest-rated strategy (M = 2.95, SD = 1.19) is seeking social support from friends or family. These findings suggest that students primarily use cognitive and relaxation strategies, while social support is a less frequently used coping mechanism. Rafati (2022) highlights that nursing students employ various coping strategies, such as talking to friends, engaging in sports, and expressing emotions. However, problem-solving and optimism are preferred approaches, whereas avoidance is less common. This aligns with the study's results, indicating that students rely more on internal coping mechanisms rather than external social support.

Table 3.4 *Level of Perception of Nursing Students on Stress in terms of Cognitive Appraisal*

Indicators	SD	Mean
1. I tend to perceive stressful events as challenges rather than threats.	0.60	4.06
2. I often reframe stressful situations by focusing on their potential benefits or learning opportunities.	0.54	3.84
3. I find it helpful to evaluate stressors as manageable rather than overwhelming.	0.51	3.76
4. I tend to minimize the impact of stress by recognizing that it is temporary.	0.57	4.16
5. I often interpret stress as an opportunity for personal growth.	0.68	4.17
Average Mean	4.00	High

Scale: 4.21 - 5.00 "Very High"; 3.41 – 4.20 "High"; 2.61 – 3.40 "Average";
1.81 – 2.60 "Low"; 1.00 – 1.80 "Very Low"

Table 3.4 highlights nursing students' cognitive appraisal of stress, with an average mean of 4.00, categorizing it as high. The highest-rated indicator (M = 4.17, SD = 0.68) is interpreting stress as an opportunity for personal growth, followed by recognizing stress as temporary (M = 4.16, SD = 0.57). Students also perceive stress as a challenge rather than a threat (M = 4.06, SD = 0.60) and reframe situations to focus on benefits (M = 3.84, SD = 0.54). The lowest mean (M = 3.76, SD = 0.51) relates to evaluating stressors as manageable rather than overwhelming. These findings indicate that students adopt positive cognitive appraisal strategies, though there is room for improvement in perceiving stressors as manageable. Ali et al. (2022) emphasize the role of cognitive appraisal in stress management, aligning with the cognitive-phenomenological theory, which suggests appraisal and coping are key mediators in stress perception. Additionally, Williams & Williams (2022) highlight that cognitive frameworks enhance personal control, essential for managing stress effectively.

Table 3.5 *Summary of the Level of Perception of Nursing Students on Stress*

Components	Mean	Interpretation
Primary Appraisal	3.77	High
Secondary Appraisal	3.41	High
Coping Strategies	3.61	High
Cognitive Appraisal	4.00	High
Average Mean	3.701 High	

Scale: 4.21 - 5.00 "Very High"; 3.41 – 4.20 "High"; 2.61 – 3.40 "Average";
1.81 – 2.60 "Low"; 1.00 – 1.80 "Very Low"

Table 3.5 presents nursing students' perception of stress, with a total average mean of 3.701, categorizing their stress perception as high. Cognitive appraisal scored the highest (4.00), indicating students view stress as an opportunity for growth. Primary appraisal followed (3.77), suggesting they see stress as a challenge rather than a threat. Coping strategies (3.61) reflect effective mechanisms like relaxation and reframing negative thoughts, while secondary appraisal scored the lowest (3.41), implying room for improvement in assessing resources and emotional strength. Overall, nursing students demonstrate a proactive approach to stress management, aligning with cognitive-phenomenological theory, but may need support in enhancing their coping resources. Studies by Kaur et al. (2020) suggest that students employ cognitive and behavioral strategies, such as reflection, to understand and manage stress. Additionally, Moya Nicolás et al. (2013) highlighted that stress in nursing students often arises from clinical experiences, ignorance, and fear of harming patients, further reinforcing the need for effective coping strategies.

Table 4. *Test of Significant Relationship Between Mindfulness Training and Level of Nursing Students' Perception on Stress*

Test Variables	Correlation Coefficient	P value	Decision
Mindfulness Training and Level of Nursing Students' Perception on Stress	0.098	0.351	retain the Ho

Note: If $p \leq 0.05$, with a significant relationship

Table 4 examines the relationship between mindfulness training and nursing students' perception of stress. The correlation coefficient of 0.098 indicates a weak positive relationship, while the p-value of 0.351 exceeds the 0.05 significance level, leading to the retention of the null hypothesis (Ho). These findings suggest that mindfulness training, as measured in this study, does not significantly impact how nursing students perceive stress.

Table 5. *Test of Significant Difference in the Effectiveness of Mindfulness Training Against Demographic Profile of the Respondents*

Test Variables	df	P value	Decision
Mindfulness Training Vs. Age	1	0.383	retain the H_o
Mindfulness Training Vs. Sex	1	0.292	retain the H_o

Note: If $p \leq 0.05$, with a significant difference

Table 5 presents the test of significant differences in the effectiveness of mindfulness training based on the respondents' demographic profile. The results show that age ($p = 0.383$) and sex ($p = 0.292$) have p-values greater than the 0.05 significance level, leading to the retention of the null hypothesis (Ho) in both cases. This indicates that there is no significant difference in the effectiveness of mindfulness training based on age or sex, suggesting that mindfulness training benefits nursing students regardless of these demographic factors.

IV. CONCLUSIONS AND RECOMMENDATIONS

Conclusions

The findings of the present study suggest that nursing students, predominantly 21 to 23 years old and female in majority, engage in mindfulness activities to some extent. Notably, high practice of mindfulness meditation and learning in groups is observed but the practice of yoga and body scan is very low. Overall, the students' perception of stress is very high but they have strong cognitive and coping skills to handle stress. A fascinating correlation between mindfulness training and stress perception was seen, which implies that the students receiving mindfulness training are somehow better equipped to assess and manage stress. Also, variability in the effectiveness of mindfulness across demographic variables implies the necessity of targeted interventions to optimize its gains among diverse groups of students. Overall, the study suggests the potential of mindfulness training to cultivate emotional resilience and stress management skills among nursing students.

Recommendations

Mindfulness training plays a crucial role in helping nursing students manage stress and build emotional resilience. Students are encouraged to engage in mindfulness practices such as meditation, yoga, and body scan exercises, while institutions should provide resources and training programs to integrate these techniques into daily routines. Faculty members can support student well-being by incorporating mindfulness training into the nursing curriculum through workshops, seminars, and experiential learning. Healthcare institutions should recognize the value of mindfulness in preparing students for clinical practice by including stress reduction programs in internships and training. Researchers and educators should further investigate the long-term effects of mindfulness on academic performance and professional competencies. Policymakers and administrators should implement structured mindfulness programs, faculty training, and wellness initiatives to institutionalize mindfulness in nursing education, ultimately enhancing student mental health and the quality of healthcare services.

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