

Research Article

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Efficacy of Mindfulness Based Stress Reduction (MBSR) Program on Psychological Wellbeing, Psychological Distress, and Subjective Wellbeing Among Special Education Teachers

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Abstract: Teachers in special education sectors harbour a very challenging job, their struggles can be manifested as handling day-to-day tantrums and entertaining a wide spectrum of the needs of children. Apart from that, they are to manage a great many other tasks that come in handy with their jobs. Mindfulness-Based Reduction (MBSR) program helps special education teachers improve their psychological and subjective well-being, fostering Mindfulness, enhancing job satisfaction, and bettering interpersonal relationships with their colleagues and students. For this purpose, a quasi-experimental pre-test and post-test study was conducted with 30 special education teachers to improve their overall well-being and enhance mindfulness. Before conducting this training program, the researcher was certified in providing training in Mindfulness-Based Stress Reduction (MBSR) program from 'Palouse Mindfulness'. The training program was conducted under the supervision of a Clinical Psychologist who is also a certified relaxation expert. MBSR is an 8-week training program and different mindfulness activities were conducted. Participants were assessed before and after the MBSR training program. Findings show a significant difference between Baseline Assessment and post-assessment scores. Results of the present study confirmed that Mindfulness-Based Stress Reduction (MBSR) is an effective training program that enhances mindfulness, psychological well-being, and subjective well-being and reduces psychological distress among special education teachers.

Key Words: Mindfulness-Based Stress Reduction, Training Program, Post-Assessment, Baseline Assessment Psychological Wellbeing, Psychological Distress, Special Education Teachers

Introduction

Special education teachers work with differently abled students such as students with Autism, ADD/ADHD, intellectual disabilities, hearing and visual impairment, learning disabilities, physical disabilities, and other behavioral issues. Special education teachers have particularly challenging jobs such as struggling with day-to-day tantrums and the diverse needs of their students. Other than that, they must manage other different tasks that also come with their jobs. Mindfulness-Based Stress Reduction (MBSR) helps special education teachers improve their well-being, promote mindfulness, increase job satisfaction, and create better relationships with their colleagues and students (Haydon et al., 2019).

Mindfulness and Mindfulness-Based Stress Reduction (MBSR)

The term “Mindfulness” is described as bringing awareness of the present moment without passing any judgment (Davis & Hayes, 2011). Mindfulness is described as living here and now and paying attention to our thoughts, sensations, and feelings with kindness and curiosity. It is also defined as being fully focused and fully alive at the moment rather than thinking about past and future experiences. It is a unique way of

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understanding thoughts and feelings with full clarity without passing any judgment on them (Kabat-Zinn, [2013](#)).

Special education teachers face many challenges working with mentally challenged children including behavior and emotional issues and increased workloads. All these problems can lead to reduced job satisfaction, exhaustion, and psychological problems. The program was developed in 1979 by American Dr. Jon Kabat Zinn. He is the founder of Stress Reduction Clinic. After the failure of conventional therapy for his patients, he created an eight-week program to cure their psychological health issues (Kabat-Zinn, [1982](#)). The term mindfulness means to be consciously present in the moment and provide awareness without any judgment. Mindfulness-Based Stress Reduction (MBSR) program is designed to alleviate stress and enhance wellness. MBSR can be very beneficial for special education teachers because it helps to manage anxiety, depression, and stress. They may be able to understand the needs of special children with empathy and kindness by mastering skills to be more aware and present. This program may also help special education teachers improve their quality of work and educate their students about mindfulness and how they can practice it (Paris et al., [2021](#)).

The benefits of the MBSR program help to minimize stress, depression, and anxiety. It helps to acknowledge our surroundings. It enhances our well-being. It helps us to observe our breathing. We acknowledge our negative thoughts without any frustration and through practice one can transform all those thoughts into positive ones. It helps to see things with clarity, kindness, compassion, acceptance, and appreciation. Individuals can build greater awareness of their thoughts, sensations, and feelings. Individuals can modulate their emotional experiences. Practicing mindfulness helps to find calm in a chaotic life. It improves our concentration (Harold, [2023](#)).

Psychological Wellbeing

Psychological well-being can be referred to in terms such as mental satisfaction or contentment. If an individual is content with his life and is mentally satisfied, then you can say he/she has high psychological well-being. Ryff's theory of psychological well-being is based on human growth. This theory has six dimensions including self-determination, environmental mastery, cordial relations with others, self-growth, self-acceptance, and direction in life. Ryff's theory underlines the significance of personal experiences and subjective values in describing the psychological well-being of an individual (Ryff, [1989](#)). Self-determination refers to having authority over one's life. Environmental mastery refers to modulating one's environment and adapting to the environment efficiently. Cordial relations with people refer to having strong and positive connections with the people in our surroundings and strengthening the relations with others. Self-growth is the ability to grow one's abilities, and potential, and achieve one's goals. Self-acceptance refers to accepting the way you are despite having weaknesses. The direction in life refers to having a meaningful purpose in life (Ryff & Keyes, [1995](#)). An online MBSR program has been demonstrated to be feasible for supporting the mental health of individuals from the general population in challenging times, such as global pandemics, via the mediation of emotion regulation (Sanilevici et al., [2021](#)).

Psychological Distress

Psychological distress among special education teachers can be explained by the Transactional theory of stress and coping. There are three steps to this theory. Primary appraisal determines if the stressor has any impact on an individual's well-being. It evaluates if that particular stressor is relevant or irrelevant for an individual. Secondary appraisal is the tool that an individual has to manage stressors. Special education teachers experience many issues in their daily routines such as dealing with students with hyperactivity, emotional and behavioral problems, lack of attention, establishing a positive teacher-parent relationship, administrative tasks, and burnout. The teacher decides if she can use different mindful practices to reduce psychological distress. Mindful practices develop mental clarity, improved flexibility, and increased psychological well-being, which can give rise to enhanced contentment about their jobs and better health outcomes among special education teachers (Lazarus & Folkman, [1987](#)). Another research study was some evidence that the adapted/brief versions of MBSR can reduce psychological distress in nurses. It would be beneficial to conduct randomized controlled trials with larger sample sizes and follow-



up studies in the future. MBSR should also be delivered to nurses in a creative and effective manner (Ghawadra et al., [2019](#)). It was revealed in this systematic review that mindfulness-based interventions are likely to be effective in preventing emotional distress related to burnout. More research is still needed to determine what type of program is most suitable to impact the other two components of burnout (Kriakous et al., [2021](#)).

Subjective Well-being

Subjective well-being (SWB) consists of three components which are positive emotions, life fulfillment, and happiness which help a person evaluate themselves. A theory that describes the association between mindfulness and subjective well-being is the broaden-and-build theory of positive emotional experiences. Mindfulness has been promoted for the last couple of years. An exploratory mixed-methods study by Berk et al. (2018) to understand the use of MBSR among adults with memory illnesses. The purpose of this study was to investigate the effectiveness of the MBSR 10 program among middle-aged or older adults with memory complaints. Before starting the training, the participants completed the questionnaires of the study, and even after the completion of the training. The semi-structured interviews were conducted at the end of the training sessions. The findings suggested that MBSR can battle anxiety, alleviate negative thoughts, and mitigate stress. It was also found that MBSR was well-liked by the participants who suffer from memory issues (Berk et al., [2018](#)).

The purpose of the study was to examine the factors of burnout that affect the wellness of special education teachers and their understanding of mindful practices. Semi-structured interviews were also conducted. Results indicated that special education teachers felt immense pressure due to the paperwork, conflict in a parent-teacher relationship, and other stressors. It was also found that mindfulness practices can help teachers to focus and be aware of their feelings by being in the present moment. Additionally, it can help them to acknowledge their thoughts without any judgment. It was suggested that mindfulness practices provide mental clarity, flexibility, acceptance, and compassion (Cao et al., [2018](#)).

Another study discovered the relationship between mindfulness practices and stress among midlife women who suffer from menopausal symptoms. The findings suggested that practicing mindfulness reduced menopausal symptoms while high stress increased menopausal symptoms (Sood et al., [2019](#)). Another study aimed to discover the benefits of mindfulness in alleviating stress among special education managers. The study comprised five participants. The results revealed that practicing mindfulness enhanced psychological well-being and decreased stress among special education teachers (Oleksiak, [2020](#)). Another research study examined the importance of the MBSR program in boosting psychological well-being and emotional control. The purpose of the study was to discover the efficacy of MBSR on mental health and emotion modulation due to the severe first wave of COVID-19. The MBSR program was conducted online due to the lockdown restrictions. The findings suggested that online MBSR improved psychological well-being and modulated emotional experiences (Sanilevici et al., [2021](#)).

A study investigated the relationship between mindfulness, subjective well-being, and self-compassion. The purpose of the study was to see if there is a positive correlation between subjective well-being, self-compassion, and mindfulness. The results showed that the greater the mindfulness the higher subjective-wellbeing and self-compassion among employees (Yang et al., [2022](#)).

A Randomized Controlled Trial (RCT) study investigated the use of MBSR program on psychological distress among healthcare workers. The results suggested that MBSR program has beneficial for reducing stress among healthcare workers (Errazuriz et al., [2022](#)).

Theoretical Framework

The theoretical framework for this study integrates several psychological theories to understand how the MBSR program might impact the psychological well-being, psychological distress, and subjective well-being of special education teachers. The framework combines Mindfulness Theory, Theories of Wellbeing, and Stress and Coping Models.

Mindfulness Theory

Mindfulness theory suggests that individuals who engage in mindfulness practices, such as those included

in the MBSR program (mindful meditation, body scan, and mindful awareness), experience greater psychological flexibility and emotional regulation. The theory proposes that by being present in the moment, individuals can reduce their automatic reactions to stress, improve self-awareness, and enhance their ability to manage difficult emotions. This framework assumes that mindfulness practices lead to an improvement in psychological well-being and a reduction in psychological distress. The key factor is Attention regulation which explains that Mindfulness practices encourage non-judgmental awareness, which helps individuals focus on the present moment and reduce mental distractions. The second key factor included Decentering which can Help individuals see their thoughts and feelings as transient, reducing their impact on mental health. The Third factor included acceptance which can be cultivating a mindset of acceptance, individuals can handle stressful situations more effectively.

Theory of Psychological Wellbeing

Psychological well-being, according to Ryff, involves multiple dimensions of positive functioning, including self-acceptance, personal growth, purpose in life, environmental mastery, autonomy, and positive relationships with others. MBSR, with its emphasis on mindfulness, is thought to impact these dimensions by fostering greater self-awareness, self-compassion, and emotional balance. Self-Acceptance: Mindfulness can help individuals develop a more positive and compassionate relationship with themselves. Autonomy and Purpose: Mindfulness practices encourage reflective awareness, leading to greater clarity about one's life goals and values, and enhancing autonomy and purpose. Environmental Mastery: Teachers who practice mindfulness might feel more capable of managing the challenges in their work environment.

Cognitive-Behavioural Model of Stress and Coping

This model suggests that stress is a result of an individual's appraisal of a situation as taxing or threatening. How individuals perceive and cope with stress plays a critical role in determining their emotional and psychological responses. MBSR provides tools to shift from maladaptive to adaptive coping strategies, leading to lower psychological distress. Appraisal of Stress: Mindfulness helps individuals reframe stressful situations and reduce their perception of stressors. Coping Strategies: MBSR encourages the development of adaptive coping strategies, such as acceptance and emotional regulation, leading to better stress management.

Subjective Wellbeing Theory (Diener, 1984)

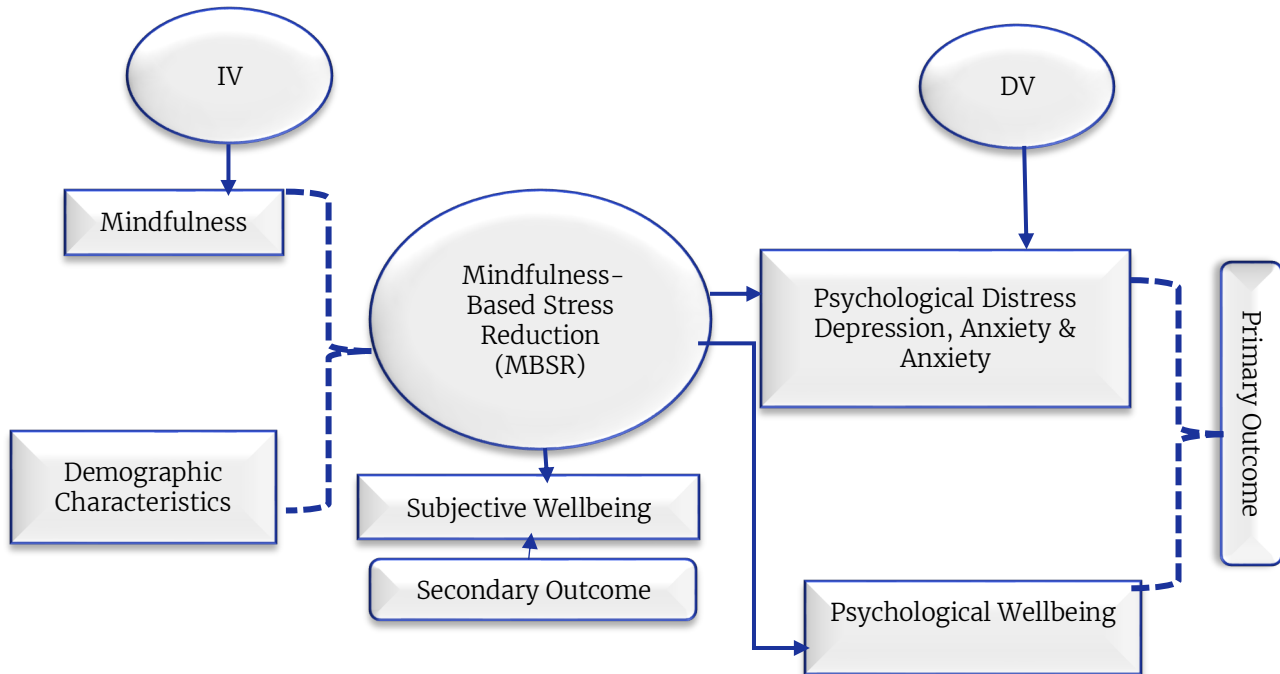
Subjective well-being refers to an individual's self-reported assessment of their own happiness and life satisfaction. It encompasses both cognitive judgments (e.g., satisfaction with life) and emotional reactions (e.g., frequent positive affect). The MBSR program, by reducing stress and increasing mindfulness, can enhance subjective well-being by increasing positive emotional states and life satisfaction. Positive Affect: Mindfulness practices promote a positive mindset, reducing negative emotions and fostering positive feelings. Life Satisfaction: By improving emotional regulation and reducing stress, mindfulness enhances overall satisfaction with life.

Conceptualizing the Framework

In the context of this study, the relationship between the independent variable (MBSR intervention) and the dependent variables (psychological well-being, psychological distress, and subjective well-being) is based on the interplay between the theories described above. The MBSR program functions as an intervention to enhance mindfulness and coping mechanisms, which in turn are expected to lead to improvements in well-being and reductions in distress among special education teachers. The proposed theoretical framework suggests that MBSR's impact on mindfulness and stress management will result in increased psychological well-being, reduced psychological distress, and higher subjective wellbeing among special education teachers. This framework is underpinned by the assumption that MBSR cultivates a deeper sense of awareness and emotional regulation, which in turn enhances the overall quality of life and work satisfaction.

**Figure 1**

Conceptual Framework of the Study



Note. The mindfulness and demographics were independent variables and the Mindfulness Based Stress Reduction (MBSR) program played a role as a training program. The dependent variables were psychological well-being and psychological distress were the primary outcome and subjective well-being was a Secondary outcome.

The rationale of the Study

In the setting of special education, where teachers meet different challenges because of the tough nature of their jobs such as burnout, psychological distress, and reduced subjective well-being (Ahammed, 2021). The MBSR program can help them with the struggles of their daily lives by providing them with different strategies and practices which in turn will help them enhance their psychological well-being and have a positive outlook on life. The MBSR program was conducted to the unique preferences of the special education teachers, considering any problems they may have. The MBSR program will help them stay calm and deal with their students with kindness and care. MBSR program helps in reducing psychological distress, emotional exhaustion, and burnout (Lo et al., 2021). The present Quasi-Experimental study intends to train Special Education Teachers on how the MBSR program can help them reduce psychological distress and improve their psychological well-being. The present study was also focused on weekly training practices with special education teachers for eight weeks with a competent MBSR school clinical psychologist. The main purpose of this study is to discover the effectiveness of the MBSR program in increasing psychological well-being and reducing psychological distress among special education teachers. Another purpose of the study is to discover the efficacy of the MBSR program in improving subjective well-being among special education teachers. The results of the study covered the way to understand the efficacy of the MBSR program before and after the training on special education teachers.

Method

Objectives

The following objectives were:

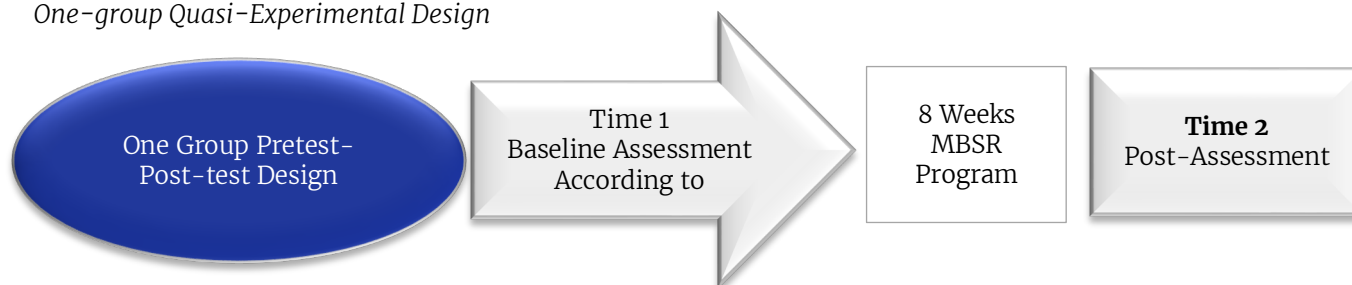
1. To discover the effectiveness of the Mindfulness-Based Stress Reduction (MBSR) program on psychological well-being and psychological distress among special education teachers.
2. To discover the effectiveness of the Mindfulness-Based Stress Reduction (MBSR) program on subjective well-being among special education teachers.

Research Design

One group pretest-post-test quasi-experimental design is used in the research to find out the effectiveness of the training program (Harris et al., 2006). It is used on participants in which measurements are taken both before and after the intervention. A self-report questionnaire was used in both pre and post-tests to measure anxiety among the participants. Pre- and post-testing aims to assess the efficacy of intervention programs (Stratton, 2019).

Figure 2

One-group Quasi-Experimental Design



Note. Figure 2 demonstrates the one-group pretest-post-test design is a quasi-experiment in which the outcome of interest is measured twice: once before (time 1) and once after (time 2) exposure to the (8 weeks of MBSR Program) intervention. After the exposure, the researcher measures the participants' outcomes. As a result of this design, it is possible to compare the outcomes of the intervention group within the group.

Participants

The purposive sampling was used in this study. Purposive sampling is the technique in which the participants are selected or gathered for the training program based on inclusive criteria (Crossman, 2020). There were 60 participants targeted for data collection. Only 50 participants were selected according to the inclusive criteria of the sample initially. Finally, only ($n=30$) special education teachers were selected on the basis of consent and level of stress according to DASS (Lovibond & Lovibond, 1995). The previous research studies suggest that a sample of 30-500 participants should be used in the study for the psychometric properties (Guetterman, 2020). The demographic characteristics of sample included gender, qualifications, age, and Instructors with disabilities. There were gender differences, revealed 76.7% were females and 23.3% were males. It also revealed difference in the qualifications of special education teachers, which were: Bs Psychology 6.7 %, BSCP 10%, Doctor of Physiotherapy 6.7%, MPhil 6.7%, MA in special Education 36.7%, MS in Clinical Psychology 13.3%, MS in Speech and language pathology 10% and MSc 10%. The demographic also included the types of disabilities which were: Autism and ADHD 20 %, down syndrome 16.7%, hearing and visual impairment 13.3%, intellectual disability 23.3%, learning disabilities 6.7%, physical impairment 10%, and speech and language impairment 10%.

The age range of research participants was between 20 to 60 years. The research participants' age was between (20-25) 6.7%, (26-30) 33.3%, (31-35) 40%, (36-40) 3.3% and (41-60) 6.7%. The special education teachers were selected from two different special education schools in Rawalpindi.

Operational Definitions

Mindfulness

The operational definition of mindfulness was the mindful attention awareness scale (MAAS) was developed by Kirk Brown & Richard, 2003. It is a self-report measure in which the individuals assess their characteristics of mindfulness (Brown & Ryan, 2003).

Mindfulness-Based Stress Reduction (MBSR) program

The operational definition of MBSR was 8 8-week intervention program. it was designed to alleviate stress and enhance wellness.



Psychological Wellbeing

The operational definition of psychological well-being was the Psychological Wellbeing Scale (PWB; Ryff, 1989) as a primary outcome.

Psychological Distress

The operational definition of psychological distress was the Depression Anxiety Stress Scale (DASS; Lovibond & Lovibond, 1995). It is a self-report measure. as a primary outcome.

Subjective Wellbeing

The operational definition of subjective well-being was the teacher subjective well-being questionnaire (TSWBQ; Renshaw et al., 2015) as a secondary outcome.

Measurements/Instruments

The permission was taken by the authors before using their scales for the current research. Following are the scales used before and after the pre-and post-testing. Mindful Attention Awareness Scale (MAAS) The Mindful Attention Awareness Scale (MAAS) was developed by Kirk Brown & Richard, in 2003. MAAS is a 15-item scale. It is a six-point Likert scale. It is a self-report measure in which the individuals assess their characteristics of mindfulness. This scale helps them assess their receptive or open awareness and attention to the present experiences. MAAS internal consistency ranges from .80 to .90 Cronbach's Alphas. The Cronbach alpha of the current study for the Mindfulness Attention Awareness Scale was .89(> .80) which indicated high reliability. This scale takes about 5 minutes to complete (Brown & Ryan, 2003). Psychological Wellbeing Scale (PWBS) The Psychological Wellbeing Scale (PWB) was developed by Carol Ryff in 1989. PWB is a 42-item scale. It is a six-point Likert scale. This scale consists of six well-being dimensions. It is designed to measure the positive functioning of the individuals. It takes about 6-8 minutes to complete (Ryff, 1989). The Cronbach's α value for the Psychological Wellbeing Scale (PWBS) for the current study was .93 (> .90) which indicated high reliability. Depression Anxiety Stress Scale (DASS) The Depression Anxiety Stress Scale (DASS) was developed by Peter Lovibond in 1995. DASS is a 42-item scale. It is a 4-point scale. It is a self-report measure. It takes about 5-7 minutes to complete. It is designed to measure negative emotional experiences of depression, anxiety, and stress (Lovibond & Lovibond, 1995). The Cronbach's α value for the Depression Anxiety Stress Scale (DASS) for current was .84 (> .90) which indicated very high reliability.

Teacher Subjective Wellbeing Questionnaire (TSWBQ) 21 Teacher Subjective Wellbeing Scale (TSWBQ) was developed by Tyler Renshaw in 2015. It is an 8-item scale. It is a self-report Likert scale. It is designed to measure teachers' subjective well-being. It is used to assess teachers' job-related well-being (Renshaw et al., 2015). The Holmes-Rahe Life Stress Inventory The Holmes-Rahe Life Stress Inventory was developed by Thomas Holmes and Richard Rahe in 1967. They designed this inventory to identify major stressful life events (Holmes & Rahe, 1967). The Cronbach's α value for the Teacher Subjective Wellbeing Questionnaire (TSWBQ) was .71 (> .70) which was considered as a good reliability.

Procedure

Previous literature suggests that the Mindfulness-Based Stress Reduction (MBSR) program helps special education teachers cope with stress and increase their well-being by cultivating mindfulness practices in their routines as this program regulates their attention by teaching them to concentrate on the present moment without passing any judgment (Mitchell & Heads, 2015). The current study focused on educating special education teachers about mindfulness and practicing mindfulness in their daily lives through the training program. Before providing the training to special education teachers the researcher successfully completed her 8-week training through "Palousemindfulness.com" by Dave Potter and certified Mindfulness-Based Stress Reduction (MBSR) course after completing 50 hours of instruction, reading, and practice. Before starting the training, all ethical consideration was incorporated. The Consent was requested from two special education schools in Rawalpindi. Special education schools that gave permission to conduct the training program were Seedum Special Children School and Govt. the special education center for the mentally challenged in Rawalpindi. The training was completed with Clinical psychologists allocated by special education institutes.

Baseline Assessment

Pre-testing was conducted on the first day of the training program on specialeducation teachers. It was conducted on February 27, 2024, and March 1, 2024. Questionnaires were administered to the special education teachers on the first day priorto the training program. The baseline assessment was completed through study variables.

Intervention

The details of intervention activities and themes of MRBS programs.

Table 1

Week Wise Intervention Phase According to Themes, Core Activities, and Key Outcomes

Week	Theme	Core Activities	Key Outcomes
Week 1	Introduction to Mindfulness	Introduction to mindfulness, body scan meditation, awareness of breathing	Developing awareness of the present moment
Week 2	Perception and Creative Responding	Body scan, mindful movement (yoga), mindfulness of breathing	Awareness of habitual reactions and patterns
Week 3	Being Present in the Body	Sitting meditation, walking meditation, mindful eating	Enhancing awareness of the body and sensory experience
Week 4	Stress Awareness and Mindful Responses	Sitting meditation, stress response exploration, mountain meditation	Learning mindful responses to stressors
Week 5	Mindful Communication	Sitting meditation, loving-kindness meditation, role-playing difficult conversations	Building compassion and improving communication skills
Week 6	Working with Difficult Emotions	Sitting meditation, mindful movement, exploring challenging emotions	Regulating emotions mindfully
Week 7	Integrating Mindfulness into Daily Life	Mindfulness of daily activities (e.g., washing, eating), body scan, mindful breathing	Applying mindfulness in daily routines
Week 8	Sustaining Mindfulness Practice	Sitting meditation, reflective journaling, body scan, group discussion	Long-term integration of mindfulness practices into life

Post-testing

Post-testing was done on the 18th of April 2024, and the 19th of April 2024. It was conducted on the last day of training. The study measures were administered tothe participants.

Ethical Considerations

The American Psychological Association (APA) ethical guidelines provide a framework for researchers for effective writing. The APA ethical guidelines have been followed for the current study. The Informed Consent Form was given to all the special educationteachers who participated in the training program. The researcher informed the participants that their information would be kept confidential and only be used for research purposes. Before providing the training to special education teachers the researcher successfully completed her 8-week training through “Palousemindfulness.com” by DavePotter. She was certified in Mindfulness-Based Stress Reduction (MBSR) course after completing her 50 hours of instruction, reading, and practice. MBSR training was conducted after getting permission from the schools.

Results

The aim of analysis in the quasi-experimental study is to assess the changes that occur within one group after conducting a training program. Pre-test and post-test scoreswere analyzed using Statistical Package



for Social Sciences (SPSS). It is widely used for the analysis of data in research studies. The researchers can analyze the data and understand the effectiveness of the training programs (Field, 2017). Firstly, the reliability of the scales was analyzed to ensure an acceptable range. Secondly, the correlations of the variables were analyzed. Thirdly, a paired sample t-test was run to see the differences between the pre-testing and post-testing scores of special education teachers. An Independent t-test was computed to assess the family systems and gender of special education teachers.

Analysis of Pearson correlation

1. There is a positive relationship between mindfulness and psychological well-being among special education teachers.
2. There is a negative relationship between mindfulness and psychological distress among special education teachers.
3. There is a positive relationship between mindfulness and subjective well-being.

Table 2

Statistical Description of Variables and a Pearson Correlation Analysis

$p < 0.01^{**}$, $p < 0.05^{*}$

Table 2 shows that significantly negative relationship between mindfulness with psychological distress (r

Variables	n	M	SD	1	2	3	4
1 Mindfulness	50	41.18	13.02	1	–	–	–
2 Psychological Distress	50	87.86	11.87	-.54**	1	–	–
3 Psychological Wellbeing	50	131.76	29.46	.69**	-.51**	1	–
4 Subjective Wellbeing	50	20.86	4.18	.27	-.31*	.15	1

$= -.54$, $p < 0.05$), as mindfulness decreases psychological distress increases. Mindfulness also positive relationship with psychological well-being ($r = .69$, $p < 0.05$) significantly correlated. A significant negative correlation was found between psychological distress and psychological well-being ($r = -.51$, $p < 0.01$), Subjective well-being was non-significantly correlated with mindfulness and psychological well-being but significantly correlated with psychological distress ($r = -.31$, $p < 0.05$) with negative direction.

Analysis of Paired t-test

Hypothesis 4: There is a difference in baseline assessment and post-assessment of psychological well-being psychological distress and subjective well-being within a group of special education teachers.

Table 3

Mean Comparison of Special Education Teachers Pretest and Post-test on Primary and Secondary Outcomes.

Variables	Pretest		Post-test		t(29)	p	r	Cohen's d
	M	SD	M	SD				
			Primary	outcome				
Mindfulness	2.77	.87	4.32	.81	7.82	.00	.17***	1.42
Psychological Wellbeing	134.03	28.41	181.93	29.50	7.40	.00	.25***	1.35
Psychological distress	92.80	14.09	65.20	13.15	7.68	.00	-.04***	1.40
			Secondary	outcome				
Subjective Wellbeing	20.33	3.37	25.33	5.39	4.35	.00	.02***	0.79

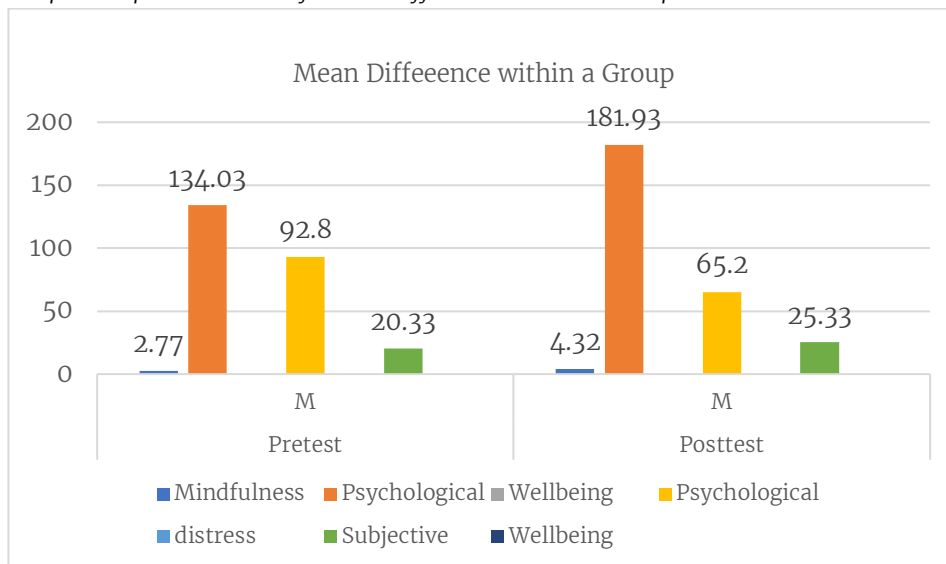
*** $p < .001$

Table 3 revealed the mean comparison of Special Education Teachers before and after the Mindfulness-Based Stress Reduction (MBSR) program. Findings indicated significant mean differences in mindfulness with $t(29) = 7.82$, $p < .001$. The findings show that mean scores on Mindfulness before MBSR training ($M = 2.77$, $SD = .87$) subsequently increased after MBSR training ($M = 4.32$, $SD = .81$). Two sets of scores were significantly correlated ($r = .17$, $p < .001$). The value of Cohen's d was 1.42 (> 0.80) which indicated a large

size effect. Findings indicated significant mean differences in psychological well-being with $t(29) = 7.40, p < .001$. Results show that mean scores on psychological well-being before MBSR training ($M = 134.03, SD = 28.41$) subsequently increased after MBSR training ($M = 181.93, SD = 29.50$). Two sets of scores were significantly correlated ($r = .25, p = .001$). The value of Cohen's d was $1.35 (> 0.80)$ which indicated a large size effect. Findings indicated significant mean differences in psychological distress with $t(29) = 7.68, p < .001$. Results show that mean scores on psychological distress before the MBSR training ($M = 92.80, SD = 14.09$) subsequently decreased after MBSR training ($M = 65.20, SD = 13.15$). Two sets of scores were negatively correlated ($r = -.04, p < .001$). The value of Cohen's d was $1.40 (> 0.80)$ which indicated a large size effect. Findings indicated significant mean differences on subjective well-being $t(29) = 4.35, p < .001$. Results show that mean scores on subjective well-being before the training program ($M = 20.33, SD = 5.39$) subsequently increased after MBSR training ($M = 25.33, SD = 5.39$). Two sets of scores were significantly correlated ($r = .02, p < .001$). The value of Cohen's d was $0.79 (> .50)$ which indicated medium size effect.

Figure 3

Graphic Representation of Mean Differences within Group



Discussion

Special education teachers play a very important role when it comes to dealing with students with special needs. These teachers are not given the credit they deserve. Mindfulness can be beneficial for them as they face many challenges both in schools and homes that affect their well-being. For this purpose, the special education teachers were provided training to strengthen their well-being. This study was based on the Mindfulness-Based Stress Reduction (MBSR) program (Kabat-Zinn, 2013).

The purpose of the present study was to find out the effectiveness of the Mindfulness-Based Stress Reduction (MBSR) program on special education teachers. First, the researcher completed her 8-week training from 'Palouse Mindfulness' by Dave Potter before providing the training to special education teachers. After completing her 8-week practice and being certified in the MBSR course. The training was provided under the supervision of a Clinical psychologist who is also a certified relaxation expert.

The present study aimed to discover the efficacy of Mindfulness Based Stress Reduction (MBSR) program on psychological well-being and psychological distress among special education teachers. Moreover, the study aimed to discover the effectiveness of the Mindfulness-Based Stress Reduction (MBSR) program on subjective well-being among special education teachers.

First, the reliability of all the scales was confirmed. The alpha coefficient for Mindful Attention Awareness Scale (MAAS) was .89, for Psychological Wellbeing Scale (PWBS) was .93, for Depression Anxiety Stress Scale (DASS) was .90, and for Teacher Subjective Wellbeing Questionnaire (TSWBQ) was .76, which indicated that all the scales were reliable to use in the present study.



The first hypothesis “There will be a positive relationship between psychological well-being and mindfulness” was supported in the present study. The results of this study show that mindfulness is positively correlated with psychological well-being. The findings are in support of the existing literature as mindfulness helps in increasing psychological well-being among special education teachers. Previous literature suggested that mindfulness is a strong predictor of psychological well-being (Klainin- Yobas et al., 2016). Mindfulness is highly associated with many health outcomes such as psychological well-being and mindfulness meditations help in increasing psychological well-being (Mac Donald et al., 2017; Van Gordon et al., 2013; Brown et al., 2001).

The second hypothesis “there will be a negative relationship between mindfulness and psychological distress” was supported in the present study. The results of the present study show that MBSR program helped in increasing mindfulness and decreasing psychological distress. The findings of the present study are in support of the existing literature. Feldman et al., (2007) developed a scale “Cognitive and Affective Mindfulness Scale-Revisited (CAMS-R) to measure mindfulness with other psychological constructs. He reported similar findings that mindfulness is negatively correlated with psychological distress (Feldman et al., 2007). Moreover, previous literature suggested that mindfulness practices help lower psychological distress. Mindfulness meditation increases awareness and attention and is valuable for better health outcomes (Baer et al., 2006; Parto et al., 2011).

The third hypothesis “there is a positive relationship between mindfulness and subjective well-being” was supported in the present study. The results of the present study show that mindfulness and subjective well-being are positively correlated. The findings of the present study are in line with the existing literature. Cultivating mindful practices helps improve subjective well-being. Mindfulness and subjective well-being are associated with each other (Collard et al., 2011; Klussman et al., 2022). Another study by Walsh et al. (2019) found that mindfulness training program help in enhancing subjective well-being. He reported that there exists a positive relationship between mindfulness and subjective well-being (Walsh et al., 2019). The first Brazilian study by Atanes et al., (2015) examined the relationship between mindfulness, subjective well-being, and perceived stress. The findings suggested that there was a clear positive relationship between mindfulness and subjective well-being among different healthcare workers which means that mindfulness practices help alleviate stress and enhance subjective wellness (Atanes et al., 2015).

It was also hypothesized that “there is a difference in baseline testing and post-testing of mindfulness, psychological well-being, psychological distress, and subjective well-being. Results show significant mean differences in mindfulness before ($M = 2.77$) and after ($M = 4.32$) the MBSR training program which means that Mindfulness Based Stress Reduction (MBSR) program was effective in increasing mindfulness among special education teachers. The value of Cohen’s d for mindfulness was 1.42 which indicated a large size effect. Large size effect means a huge difference in mindfulness before and after the MBSR training program. Findings indicate that the MBSR training program increased attention and awareness among special education teachers. It was found that there was a significant mean difference before ($M = 134.03$) and after ($M = 181.93$) the MBSR training program on psychological well-being. The value for Cohen’s d was 1.35 which indicated a large size effect. In short, a huge difference was obtained before and after the training program on psychological well-being. It was also found that the Mindfulness-Based Stress Reduction (MBSR) program was also valuable in decreasing psychological distress among special education teachers as a huge difference before ($M = 92.80$) and after ($M = 65.20$) resulted in psychological distress. The value for Cohen’s d was 1.40 which indicated a large size effect. Results of this study also show that the MBSR program was also effective in enhancing subjective well-being among special education teachers as a significant mean difference before ($M = 20.33$) and after ($M = 25.33$) training program was found. The value for Cohen’s d was 0.79 which indicated medium size effect. Medium size effect may be due to a few items in the scales as TSWBQ consists of 8 items.

The MBSR program helped train special education teachers about mindfulness and how they can practice certain meditations. The MBSR program is a valuable training program for increasing psychological well-being, psychological distress, and subjective well-being (Krialous et al., 2021). MBSR program showed a significant improvement in psychological well-being and cultivating mindful practices in everyday routines will provide better health outcomes (Jones et al., 2020). Mindfulness-Based Stress

Reduction (MBSR) program has been known as a valuable program for its numerous health benefits (Praissmann, 2008).

Implications

Considering the mental health situation in Pakistan and the challenges faced by special education teachers, it is recommended that the Government of Pakistan initiate programs like MBSR as it is a beneficial program for improving psychological well-being, increasing attention and awareness, and decreasing psychological distress. It is important for school administration to initiate programs like MBSR for their teachers, so they feel much more relieved and less stressed. The teachers should integrate mindfulness activities such as breathing exercises in their classrooms for their students and make them a part of their curriculum.

Limitations and Recommendations

There are certain limitations in the present study. Firstly, the sample was selected only from two Rawalpindi schools as some special education schools from twincities were not allowing for conducting the MBSR training program. Due to this, the findings of the present study are not generalizable to all special education teachers from different cities in Pakistan. In the future, an MBSR training program should be conducted involving special education teachers from different cities in Pakistan to make the findings of the study more acceptable. Secondly, the current study used a quantitative method to analyze the data. Hence, a qualitative method should be conducted in future studies to get a more detailed understanding of the MBSR program and its effectiveness. Thirdly, longer follow-up studies should be conducted as well to know the long-term effects of the MBSR program. Lastly, there were not enough studies on special education teachers and the challenges they face in Pakistan. The present study would make way for other researchers to conduct MBSR training programs on special education teachers as it could help them to promote well-being.

Conclusion

In Pakistan, mental health has not yet gained the priority that it has gotten in other countries. Many people can still not afford mental health services because of socioeconomic factors. There should be Mindfulness meditation programs organized by the Pakistani government so that they can better their mental health. The findings showed that the Mindfulness-Based Stress Reduction (MBSR) program proved to be valuable training for special education teachers. The present study accomplished all the goals i.e. MBSR is an effective program as it enhanced mindfulness, psychological and subjective wellness, and reduced psychological distress among special education teachers. The findings showed significant differences in pre- and post-testing scores which supported the present study hypotheses.



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