

POLICY PAPER

Fostering Self-Care for Filipino Nurse Educators: A Policy Paper

Khandy Lorraine G. Apsay, MAN, RN¹

Abstract

Lack of self-care has strongly been associated with stress and burnout among nurse educators. It has long been a silent battle as they struggle with academia, clinical practice, and research. Challenges identified that contribute to lack of self-care are heavy workloads, limited facilities for instruction, lack of support for professional advancement, and limited self-care facilities. In support of the Alma Ata declaration in empowering and assisting individuals to obtain knowledge, skills, and resources to preserve health, this paper advocates the need to foster and establish a self-care culture for nurse educators in the Philippines through the Reflect, Recharge, Revive Program. The program framework of Reflect through self-assessment and self-reflection, Recharge through self-care education and training, and Revive for sustainability are collected from various programs already used by some nursing schools that have been proven effective in their respective organizations. Its integration into the current policies and guidelines, including policy frameworks of nursing institutions, will help address stress and burnout associated with a lack of self-care among nurse educators. As a healthy policy, it is believed to positively affect nursing education, especially in decreasing faculty turnover and increasing job performance and self-fulfillment in teaching.

Introduction

Due to the demands of their responsibilities in academia, clinical practice, and research, nurse educators frequently experience high stress and burnout. The World Health Organization defines self-care as the capacity of individuals, families, and communities to manage their physical, emotional, and social well-being to promote health and prevent disease. Despite the importance of self-care in the nursing profession, there is no consensus on how nurse educators can practice self-care, increasing stress levels and burnout (Chen et al., 2020; Joseph, 2022). However, self-care has long been a concern for helping professionals at risk for burnout or vicarious traumatization (Butler et al., 2019).

Nurse educators face numerous obstacles in maintaining their physical and mental health while fulfilling multiple responsibilities. These obstacles include extended work hours, high educational demands, and administrative responsibilities, which can result in psychological distress and physical exhaustion (Baghdadi et al., 2023). In addition, role ambiguity, interpersonal conflicts with colleagues, and workplace incivility can exacerbate the stress levels of nurse educators (Sarmiento et al., 2004). The COVID-19 pandemic has also contributed to

the stress of nurse educators, who have had to adapt to online learning and remote work, which has increased their burden and diminished their opportunities for social interaction and support (Saco & Kelly, 2021).

A sense of obligation and responsibility towards their students and profession may make it difficult for nurse educators to prioritize their needs and self-care practices (Ward, 2022). Moreover, they usually needed permission to do self-care (Andrews et al., 2020). The stigma associated with requesting help for mental health problems may also prevent nurse educators from accessing support services or discussing their struggles with coworkers and supervisors (Nyblade et al., 2019). The lack of comprehension and knowledge about self-care activities is also a significant barrier to self-care (Docherty-Skippen, 2020).

As a result of the obstacles, nurse educators frequently experience job-related stress and burnout characterized by emotional exhaustion, depersonalization, and a diminished sense of personal accomplishment (Meshko et al., 2020; Murry, 2022; Maslach, 2006). In nursing education, stress is feeling

¹ Associate Professor at the College of Health Sciences of the Mindanao State University – Iligan Institute of Technology; email address: 2235750@slu.edu.ph

physically and emotionally drained at the end of a clinical teaching day as job requirements such as heavy workloads interfere with personal activities (McVicar, 2016). Burnout is a syndrome conceptualized by WHO as a result of chronic stress associated with work that has not been managed successfully (2019). Stress and burnout impact the health and job satisfaction of nurse educators and the quality of instruction and support given to nursing students. Recent studies by Charrier (2018), Kalikotay (2019), Watson (2023), Zangaro et al. (2023), and a systematic review by Hosseini et al (2022) show increasing stress and burnout among nurse educators.

Stress and burnout are becoming a growing concern in nursing education. Deleterious effects of stress and burnout are increased faculty turnovers and decreased production of new nurses, which poses a threat to patient outcomes (Morgan, 2023; Zangaro et al., 2023). In its report to the American Association of Colleges of Nursing, Byrne et al. (2023) reported increasing faculty vacancy rate to 8.8 % (accounting for 2,166 nursing faculty) among 909 nursing schools in the United States, the highest in the past ten years. Compounding concerns about the current massive shortage of nurse educators threatens the education and supply of registered nurses not only in the United States but globally, including the Philippines (Boamah et al., 2021; Jarosinski et al., 2022; Jaymalin, 2022; Martin et al., 2023).

WHO defines self-care as the “ability of individuals, families, and communities to promote health, prevent disease, maintain health, and cope with illness and disability with or without the support of a health-care provider.” Self-care's Positive effects include improved mental health outcomes and decreased likelihood of stress and burnout among nurse educators (Hosseini et al., 2022; Watson, 2023). Butler et al. (2019) suggest integrating self-care into routine activities as it helps buffer stress and burnout, enhancing the overall health functioning of an individual. Fundamental principles in instituting self-care include taking a holistic approach to health and acknowledging that self-care needs change across an individual's life course (Narasimhan et al., 2019). The systematic review and meta-analyses of Zhang et al. (2022) found that the most effective strategies and programs to address the lack of self-care in healthcare include self-care workshops, communication skills training, stress management training, workload or schedule rotations, teamwork or transitions, and debriefing session through focus groups.

Various studies have investigated the effectiveness of self-care in addressing stress and burnout. However, these studies focus mainly on nurses, not nurse educators. A few studies have attempted to explore self-care among nurse educators and have developed programs that are helpful to their respective organizations (Blackburn et al., 2020; Couser et al., 2020; White-Trevino et al., 2022). These studies gave an inspiration to

advocate a culture of self-care for nurse educators in the Philippines. Moreover, the 40th anniversary of the Alma Ata declaration reiterated the significance of empowering and assisting individuals in obtaining knowledge, expertise, and resources necessary to preserve their health or the health of those under their care (WHO, 2018). In support of the declaration, stress and burnout must be investigated more, and measures to address it through creating programs and policies on self-care must be formed. This paper aims to foster and establish a self-care culture for nurse educators in the Philippines through the Reflect, Recharge, Revive Program.

Being a Nurse Educator in the Philippines

Nurse Educators are registered nurses who have received advanced education and training in nursing. They play an essential role in fostering the growth of the nursing workforce by ensuring that the next generation of nurses is holistically equipped. The Philippine Nurses Act (RA 9173) stipulates that in order to teach professional nursing courses, a nurse educator must be a registered nurse, have at least one year of clinical practice in a field of specialization, be a member of good standing of an accredited professional nurse organization, and hold a master's degree in nursing, education, or another allied medical and health sciences conferred by a college or university duly recognized by a governing body such as the Commission on Higher Education (CHED).

The significant roles of nurse educators include teaching and clinical supervision, leadership and management, and research and accreditation engagements (Gutierrez, 2020). They oversee designing, implementing, and continuously evaluating the nursing curriculum to ensure that it satisfies the criteria mandated by CHED and other accrediting agencies. They must participate in research activities to advance the nursing profession through knowledge translation of evidence-based nursing practice. Moreover, they must adhere to the Code of Ethics for Nurses in the Philippines; it is expected that they practice the professional standards and principles of nursing practice, such as confidentiality in patient information, honoring the rights of patients, improving patients' health and well-being, and only provide appropriate care according to their education and experience. Furthermore, apart from classrooms and simulation laboratories, the working environment of nurse educators is quite like clinical nurses since they work in the same clinical settings with almost the same job description, but the focus is more on instructing and supervising students to practice nursing (Owen, 2017).

The Challenges and Their Impact

The challenges faced by nurse educators in the Philippines are not well-documented. Some concurrently cited by literature are

heavy workloads, limited instructional facilities, lack of support for professional advancement, and limited self-care facilities, which they commonly experience.

Heavy Workloads. The average number of teaching units held by full-time faculty and part-time lecturers is 24 to 36. The teaching load for full-time faculty consists of teaching, administrative, research, and extension units, whereas part-time lecturers only hold teaching units. CMO 15 S. 2017 stipulates that a nurse educator may only carry a regular teaching load of 18 units, plus an overload of 6 units, for 24 units. In this comparison, nurse educators are already dealing with hefty workloads. Higher work demands can significantly impact nurse educators' physical and mental health and their ability to provide quality education to their students. Heavy workloads can result in stress, burnout, and decreased job satisfaction, leading to poor performance and lower employee retention rates (Arian et al., 2018; Owens, 2017; Yuan et al., 2019).

Limited Facilities for Instruction. Upon initial interview, some deans in nursing schools in Iligan City shared that they are still dealing with a limited number of classrooms, simulation laboratories, and even hospital slots for Related Learning Exposure (RLE). This is mainly due to the increasing number of nursing students and, for some, limited budget for infrastructure. For instance, one nursing school in Mindanao only has eight classrooms, five simulation laboratories, and two affiliated hospitals to accommodate more than 500 nursing students. Due to this limitation, nurse educators must work late into the evening and on weekends to ensure their students acquire the necessary skills. This inadequacy is a great challenge since they will have less time to do self-care due to the need to extend their work hours which are supposed to be 8 hours only per day or 40 hours per week with no weekends. Long, extended hours at work increase stress and burnout, which can harm health and well-being. Stress and burnout contribute to absenteeism and decreased student engagement (Horton et al., 2018), which could result in a decline in the quality of education because educators may lack the energy or resources to provide quality instruction and necessary support for students (Dag et al, 2019).

Lack of Support for Professional Advancement. Little has been known about nursing schools allotting a substantial budget for professional growth. Per the interview, some nurse educators in Northern Mindanao shared that they were given support in attending seminars and training to elevate their instructional skills. They further express that the heavy workload assigned to them decreases their desire to attend seminars and training; they prefer to stick to their teaching assignments rather than attend seminars and training to avoid make-up classes and duties, which would add to their overloaded workloads. Such hurts their professional growth since being unable to attend conferences or engage in other professional development

opportunities will make them miss out on new developments and best practices in their field, hindering their ability to educate students effectively. Lack of professional development opportunities and heavy workloads are significant predictors of decreased job satisfaction and feelings of stagnation among nurse educators (King et al., 2021; Liu et al., 2020).

Limited Self-Care Facilities. The World Health Organization strongly encourages schools to make their respective institutions a health-promoting school. They reported that the Philippines has been compliant in delivering health promotion activities. However, despite its compliance, they identified barriers to implementation, including limited health personnel to serve many students, limited resources, and inadequate infrastructure for physical, mental, and social activities (WHO, 2021). As students need self-care facilities to balance their personal and school lives, so do their educators. They must also balance personal and work lives to deliver high-quality instruction (Bagalawis et al., 2021; Younas, 2017).

For instance, one university has the Siglakas Program, where faculty and staff actively engage in sports such as badminton, bowling, chess, and basketball. However, some sports, such as badminton and bowling, will have to be done off campus due to the lack of badminton courts and bowling facilities. Hence, they will have to spend personal money to travel to these facilities, which could be expensive since not all live within city limits. They also have a campus clinic, which offers medical and dental services. However, the services are limited to consultations and laboratory for medical services and tooth extraction for dental services. As such, the constituents will have to seek other services from other healthcare agencies, which could be expensive.

The lack of institutional resources and support for self-care is a great challenge that nurse educators face. When they have limited access to resources such as time, money, and facilities for activities such as exercise, relaxation, and socialization, they may find it challenging to prioritize self-care, which may result in feelings of burnout and stress and can negatively affect their physical and mental health (Arian et al., 2018; Bagalawis et al, 2021; Butler et al., 2019).

Programs Created to Address Lack of Self-care

The concept of self-care is well-studied for nurses but is less on nurse educators. Several studies suggest that it is necessary to address the lack of self-care among nurse educators. White-Trevino et al. (2022) integrated self-care into the quality improvement plan in a nursing school in the United States. They believed that in order for nurse educators to ensure that their students possess caring skills, educators must be able to

comprehend their caring behaviors and the ability to form caring relationships with others. Hence, they adopted the concept of instilling caring micro practices into their quality improvement plan to promote a caring culture with self-care, well-being, and resilience. Micro practices are defined by Sitzman and Watson (2018) as those that reduce stress levels through mindful self-care activities involving an individual's whole being, mind, spirit, heart, and body. Studies show its effectiveness in reducing stress and cortisol levels (Bottaccioli et al.; Wu et al., 2019). Their framework includes self-assessment, implementation of learning workshops, and evaluation. They also identified effective self-care strategies educators practiced using the Appreciative Inquiry concept. Effective self-care strategies include relaxation techniques, focused breathing, shutting down after work and focusing on family, daily reflection, and meditation. Effects include creating meaningful relationships with colleagues and students and increasing student engagement. Engagement in the program facilitated contemplation, reignited an understanding of compassionate behaviors, and instilled a motivation to employ efficacious approaches in mitigating stress and burnout (White-Trevino et al., 2022).

Self-care programs designed for nurses can also help design a framework to address the lack of self-care. The THRIVE program designed by Blackburn et al. (2020) specifically for oncology nurses to address burnout and secondary stress and increase resilience has been successful after six months of implementation. It used the same framework of self-reflection and education through training, seminars, and post-program assessment. Educational programs such as those designed by Couser et al. (2020) and Admando (2018) are also developed. Their programs comprise pre and post-knowledge assessments and workshops. At the end of the programs, there is a high level of satisfaction and positive impact among the participants (Admando, 2018) and realization that achieving healthy nutrition, adequate sleep, and exercise routines are goals to be achieved in self-care (Couser et al., 2020).

Reflect, Recharge, Revive Program

The Reflect, Recharge, Revive Program is a comprehensive initiative to advocate a self-care culture among nurse educators. Its framework is developed from programs already used by some nursing schools, which have been proven effective in their respective organizations (Blackburn et al., 2020; Couser et al., 2020; White-Trevino et al., 2022). As a health policy, its integration into the current policies and regulations of nursing institutions encourages and motivates educators to regularly practice self-care to enhance and maintain their overall health and well-being, eventually contributing to high retention rates and raising quality nursing education.

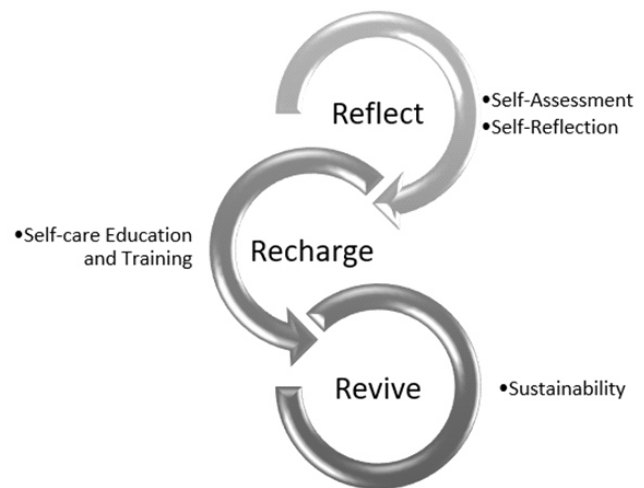


Figure 1. Framework of the Reflect, Recharge, Revive Program

The program empowers nurse educators to prioritize self-care by engaging in activities that make them reflect, recharge, and renew. It intends to address and alleviate stress and burnout and provide them with the necessary tools and resources to improve their health, well-being, and ability to perform their duties effectively. By implementing the program, they can improve their quality of life and work-life balance, resulting in improved outcomes for themselves, their students, and the healthcare industry.

The program includes three fundamental steps:

Reflect. The focus of this stage is for nurse educators to reflect on their health status by assessing their current level of self-care and identifying areas for improvement. Self-care is not a one-size-fits-all pursuit, so it would greatly benefit if they examined each area of their lives and defined what self-care means and how they plan to implement it. Activities for this stage include self-assessment and self-reflection. Self-assessments include assessing all aspects of health and well-being, identifying strengths and weaknesses in self-care, and the frequency of self-care (Vujanić et al., 2020). Self-reflection is an activity where one must reflect on their own experiences in instituting self-care practices and analyze the effects of such practices on their health, including their performance at work (Grech, 2021). Based on self-assessment and self-reflection, it would be easier to identify which areas of self-care practices need to be modified or enhanced. Moreover, recognizing that self-care is vital to preventing burnout and maintaining a healthy work-life balance, in addition to being an essential component of one's general well-being, is one of the significant actions that must be taken

successfully by nurse educators to complete this stage. Therefore, this stage provides a strong foundation for establishing new self-care practices, which is crucial to achieving optimum health and well-being.

To successfully implement this stage, nurse educators are expected to be truthful to themselves regarding their sources of stress and current state of health. Self-assessment and self-reflection activities can be organized by an office that handles and monitors the health status of educators (e.g. school clinics). School administrators can show support by allotting a budget and approving the schedule of activities for this stage.

Recharge. The second stage focuses on recharging nurse educators' physical, mental, and spiritual vitality by restoring and promoting healthy habits and instituting measures to prevent burnout. Workshops and training programs will include lectures on health and wellness, demonstrations on self-care, and personal sharing of effective self-care strategies. Self-care wellness booths that offer rest will be put up to encourage the practice of self-care. Lastly, counseling corners will also be put up for those needing psychological support and seeking mental health advice. Hence, this stage recharges their physical, mental, and spiritual energies, enabling them to carry out their teaching responsibilities more effectively and with self-fulfillment.

To successfully implement this stage, nurse educators must actively participate in the program. With the approval of the school administration, suspension of classes will encourage attendance to the series of workshops and trainings organized. To monitor compliance, attendance to preferred meetings and booths (e.g., counseling booth and self-care corner) visited must be checked (e.g., logbooks).

Revive. The last stage focuses on the sustainability of self-care among nurse educators. It includes self-reflection activities on how their self-care practices contribute to the achievement of their personal and professional growth. Self-reflection in this stage is where nurse educators reflect on how to integrate the self-care practices they have done in the Recharge stage into their daily routines. Self-care involves goal setting and time management to achieve work-life balance, leading to a more competent, self-fulfilled nurse educator while meeting nursing education standards. They can also identify and pair with mentors to assist them in achieving their personal and professional goals and help them prioritize self-care.

These activities can help them establish a culture of self-care within themselves and succeed as a nurse educator, family member, and community partner. Hence, this stage helps nurse educators establish a sustainable self-care culture, eventually giving them a sense of purpose and personal fulfillment.

To successfully implement this stage, nurse educators will take responsibility for continuing chosen or preferred self-care practices while engaging in teaching responsibilities and professional growth. Other than professional engagements, they must attend seminars and conferences tackling self-care. Self-support systems must be in place. School administration can revisit and review policies and guidelines, especially on work schedules and workloads, and institute or add policies related to practicing self-care to promote the sustainability of self-care culture. They can also create a reward program that offers incentives to nurse educators who excel professionally in their scholarly tasks while actively participating in the self-care programs. Lastly, there must be regular meetings where nurse educators share their best self-care practices, which can benefit others.

Benefits of the Program

The program for nurse educators is a comprehensive endeavor with a wide array of stakeholders, each of whom can get unique benefits from its implementation. Nurse educators stand to enjoy better personal well-being through self-care practices, less burnout, and enhanced professional growth. The consequences of the THRIVE Program conducted by Blackburn et al. (2020) are also known.

The effectiveness of the practices will cascade to students as educators integrate self-care into the different nursing concepts. Various studies have been suggesting the integration of self-care in nursing education so student nurses can practice self-care earlier, helping them endure the academic rigor and simultaneous clinical exposures in the nursing curriculum (Green, 2019; Kirkendall, 2023) and improve and maintain their health and well-being (Younas, 2017). Moreover, students can gain from a greater quality of education as there will be less faculty turnover (Harrington, 2023). Well-prepared nursing graduates contribute significantly to healthcare institutions as they help improve patient care, reducing healthcare expenditures (Fawaz et al., 2018).

School administrations can also expect higher job satisfaction among nurse educators as their employees. As educators

engage in self-care practices and enjoy the benefits of maintaining a work-life balance, they will feel valued, leading to productivity at work (Christian, 2021). Colleagues at work can also become part of the program as educators cascade self-care benefits to them, increasing their job satisfaction and improving their well-being.

Policy Goals

The policy's main goal is to improve the overall well-being of nurse educators by fostering a culture of self-care in nursing education institutions.

To achieve this, the following are the specific goals:

1. To provide self-care education and strengthen positive self-care practices of nurse educators.
2. To promote the health and well-being of nurse educators, thereby decreasing the incidence of chronic diseases and even death.
3. To ensure adequate support and resources for the development and maintenance of the culture of self-care.
4. To sustain high performance in nursing education while educators practice self-care.
5. To establish a monitoring and evaluation system ensuring the program is timely and relevant.

Policy Statements

1. To foster a culture of self-care among nurse educators, the Reflect, Recharge, Revive program must be established to promote health, increase job satisfaction, and reduce faculty turnover.
2. To ensure the success and sustainability of the program, school administrators and the active involvement of nurse educators in policymaking are necessary to develop an excellent version of the program, specifically tailored to the self-care needs of the nurse educators.

The quality of nursing education must be prioritized. Self-care policies must positively correlate with teaching performance, job satisfaction, and faculty turnover.

References

- Admando, A. (2018). Preventing and alleviating compassion fatigue through self-care: An education workshop for nurses. *Journal of Holistic Nursing: Official Journal of the American Holistic Nurses' Association*, 36(4), 304-317. <https://doi.org/10.1177/0898010117721581>
- Andrews, H., Tierney, S., & Seers, K. (2020). Needing permission: The experience of self-care and self-compassion in nursing: A constructivist grounded theory study. *International Journal of Nursing Studies*, 101, 103436. <https://doi.org/10.1016/j.ijnurstu.2019.103436>
- Arian, M., Soleimani, M., & Oghazian. (2018). Job satisfaction and the factors affecting satisfaction in nurse educators: A systematic review. *Journal of Professional Nursing*, 34(5), 389-399. <https://doi.org/10.1016/j.profnurs.2018.07.004>
- Baghdadi, N.A., Alsayed, S.K., Balaha, H.M., & Farghaly Abdelaliam, S.M. (2023). An analysis of burnout among female nurse educators in Saudi Arabia using K-Means clustering. *European Journal of Investigation in Health, Psychology and Education*, 13, 33-53. <https://doi.org/10.3390/ejihpe13010003>
- Bagalawis, R. D., Galon, E. A., Gerochi, L. A., Gerochi, V. M., & Pueblos, V. L. (2021). Perceived self-care practices among nurse educators in the Philippines: A descriptive correlational study. *Nursing Forum*, 56(3), 441-450. doi: 10.1111/nuf.12522
- Blackburn, L., Thompson, K., Frankenfield, R., Harding, A., & Lindsey, A. (2020). The THRIVE © program: Building oncology nurse resilience through self-care strategies. *Oncology Nursing Society*, 47(1), E25-E34. DOI: 10.1188/20.ONF.E25-E34
- Boamah, S. A., Callen, M. C., & Cruz, E. (2021). Nursing faculty shortage in Canada, A scoping review of contributing factors. *Nursing Outlook*, 69(4), 574-588. <https://doi.org/10.1016/j.outlook.2021.01.018>
- Bottaccioli, A. G., Bottaccioli, F. & Minelli, A. (2018). Stress and the psyche-brain-immune network in psychiatric diseases based on psychoneuroendocrineimmunology: A concise review. *Annals of the New York Academy of Sciences*, 1437(1), 31-42. <https://doi.org/10.1111/nyas.13728>
- Butler, L.D., Mercer, K.A., McClain-Meeder, K., Horner, D., & Dudley, M. (2019). Six domains of self-care: Attending to the whole person. *Journal of Human Behavior in the Social Environment*, 29(1), 107-124. <https://doi.org/10.1080/10911359.2018.1482483>
- Byrne, C., Keyts, J., & Di, F. (2023). *Special survey on vacant faculty positions for academic year 2022-2023*. American Association of Colleges of Nursing. <https://www.aacnnursing.org/Portals/0/PDFs/Data/2022-Faculty-Vacancy-Report.pdf>
- Charrier, D. (2018). The effects of technology on stress and coping strategies in nurse educators. *Journal of Nursing Education and Practice*, 8(4), 2018. <https://doi.org/10.5430/jnep.v8n4p28>
- Chen, H. C., Ann, H. K., & Chang, Y. (2020). Inadequate Self-care Competence and Attitudes toward Encouraging Self-care among Nursing Faculty. *International Journal of Nursing Sciences*, 7(1), 37-42. <https://doi.org/10.1016/j.ijnss.2019.12.005>
- Commission on Higher Education. (2017). *Policies, standards, and guidelines for the Bachelor of Science in Nursing (BSN) program*. <https://ched.gov.ph/wp-content/uploads/2017/09/CMO-No.-14-s.-2017.pdf>
- Couser, G., Chesak, S., & Cutshall, S. (2020). Developing a course to promote self-care for nurses to address burnout. *The Online Journal of Issues in Nursing*, 24(3).

- <https://doi.org/10.3912/OJIN.Vol25No03PPT55>
- Docherty-Skippen, S.M. (2020). *Self-care as a pedagogical ontology in the professional care practice of others and with others: A hermeneutic phenomenology of self-care in nursing education* (Publication No.) [Doctoral dissertation, Brock University]. Retrieved on May 10, 2023, <https://hdl.handle.net/10464/14811>
- Fawaz, M. A., Hamdan-Mansour, A. M., & Tassi, A. (2018). Challenges facing nursing education in the advanced healthcare environment. *International Journal of Africa Nursing Sciences*, 9, 105-110. <https://doi.org/10.1016/j.ijans.2018.10.005>
- Gerolamo, A.M., & Roemer, G.F. (2011). Workload and the nurse faculty shortage: Implications for policy and research. *Nursing Outlook*, 59(5), 259-265. <https://doi.org/10.1016/j.outlook.2011.01.002>
- Grech, J. (2021). Critical reflection for nurse educators: Now more than ever! *Teaching and Learning in Nursing: Official Journal of the National Organization for Associate Degree Nursing*, 16(1), 89-91. <https://doi.org/10.1016/j.teln.2020.09.001>
- Green, C. (2019). Teaching accelerated nursing students' self-care: A pilot project. *NursingOpen*, 7(1), 225-234. <https://doi.org/10.1002/nop.2.384>
- Harri, J. (1996). 'I love my work, but...': the 'best' and the 'worse' in nurse educator's working life in Finland. *Journal of Advanced Nursing*, 23(6), 1098-1109. <https://doi.org/10.1046/j.1365-2648.1996.01395.x>
- Harrington, J. J. (2023). *The impact of self-care on nursing faculty burnout and worklife* (Publication No. 1095.) [Doctoral dissertation, Regis University]. ePublications at Regis University.
- Horton, K. L., Harshbarger, J. L., & Russell, C. L. (2018). Teaching in nursing education: Examining workload and work engagement. *Journal of nursing education and practice*, 8(11), 38-44. doi: 10.5430/jnep.v8n11p38
- Hosseini, M., Soltanian, M., Torabizadeh, C., & Shirazi, Z. H. (2022). Prevalence of burnout and related factors in nursing faculty members: a systematic review. *Journal of Educational Evaluation for Health Professions*, 19. <https://doi.org/10.3352/jeehp.2022.19.16>
- Jaronsinski, J. M., Seldomridge, L., Reid, T. P., & Willey, J. (2022). Nurse faculty shortage: Voices of nursing program administrators. *Nurse Educator*, 47(3), 151-155. <https://doi.org/10.1097/NNE.0000000000001139>
- Joseph, T.D. (2022). *Burnout and how self-care and self-compassion can help*. [Doctoral dissertation, Eastern Kentucky University] Encompass. https://encompass.eku.edu/psych_doctorals/22
- Jaronsinski, J. M., Seldomridge, L., Reid, T. P., & Willey, J. (2022). Nurse faculty shortage: Voices of nursing program administrators. *Nurse Educator*, 47(3), 151-155. <https://doi.org/10.1097/NNE.0000000000001139>
- Jaymalin, M. (2022, October 4). *Philippines suffering from shortage of nursing educators – group*. Philippine Star. <https://www.philstar.com/headlines/2022/10/04/2214112/philippines-suffering-shortage-nursing-educators-group>
- King, R., Taylor, B., Talpur, A., Jackson, C., Manley, K., Ashby, N., Tod, A., Ryan... Robertson, S. (2021). Factors that optimize the impact of continuing professional develop in nursing: A rapid evidence review. *Nurse Education Today*, 98, 104652. <https://doi.org/10.1016/j.nedt.2020.104652>
- Kirkendall, N. (2023). Integrating self-care into the nursing curriculum. *Nurse Educator*, 48(1), E28. DOI: 10.1097/NNE.0000000000001280
- Liu, Y., Li, L., Li, Y., Li, H., Hu, J., & Zhang, Y. (2020). The relationship between job satisfaction, perceived organizational support, and turnover intention among clinical nursing teachers. *BMC Nursing*, 19(1), 1-8. <https://doi.org/10.1186/s12912-020-00463-1>
- Martinez, N., Connelly, C. D., Pérez, A., & Calero, P. (2021). Self-care: A concept analysis. *International Journal of Nursing Sciences*, 8(4), 418-425. <https://doi.org/10.1016/j.ijns.2021.08.007>
- Maslach, C. (2006). Understanding job burnout. In Rossi, A. M., Perrewe, P.L., & Sauter, S. L. (Eds.), *Stress and quality of working life current perspectives in occupational health*. InformationAge Publishing.
- McVicar, A. (2016). Scoping the common antecedents of job stress and job satisfaction for nurses (2000-2013) using the job demands- resources model of stress. *Journal of Nursing Management*, 24(2), E112-E136. <https://doi.org/10.1111/jonm.12326>
- Meshko, H., Meshko, O., Drobyk, N., & Mikheienko, O. (2020). Psycho-pedagogical training as a mean of forming the occupational stress resistance of future teachers. *Proceedings of the International Conference on Sustainable Futures: Environmental, Technological, Social and Economic Matters*, 166, 8. E3S Web of Conferences <https://doi.org/10.1051/e3sconf/202016610023>
- Morgan, L. (2023). *Nursing faculty perceptions of stress, coping, and intent to leave the profession in the ongoing COVID-19 pandemic: A quantitative study*. [Doctoral dissertation, University of Southern Mississippi]. The Aquila Digital Community. <https://aquila.usm.edu/dissertations/2106>
- Murry, K. (2022). Nurse and self-care. *Asian Journal of Nursing Education and Research*, 12(2), 251-3. doi://10.52711/2349-2996.2022.00054
- Narasimhan, M., Allotey, P., & Hardon, A. (2019). Self care interventions to advance health and wellbeing: A conceptual framework to inform normative guidance. *BMJ (Clinical Research edition)*, 365, l688. <https://doi.org/10.1136/bmj.l688>
- Nyblade, L., Stockton, M.A., Giger, K., Bond, V., Ekstrand, M.L., McLean, R., Mitchell, E.M.H... Wouters, E. (2019). Stigma in health facilities: Why it matters and how we can change it. *BMC Medicine*, 17, 25. <https://doi.org/10.1186/s12916-019-1256-2>
- Saco, T.L. & Kelly, M.M. (2021). Nursing faculty experiences during the COVID-19 pandemic response. *Nursing Education Perspectives*, 42(5), 285-290. <https://doi.org/10.1097/01.NEP.0000000000000843>
- Santos, J. A., Sousa-Ribeiro, M., Figueiredo-Ferraz, H., & Agra, A. (2020). Burnout syndrome in nursing education: A systematic

- review. *Revista Latino-Americana de Enfermagem*, 28, e3242. <https://doi.org/10.1590/1518-8345.3275.3242>
- Sarmiento, T.P., Laschinger, H.K., & Iwasiw, C. (2004). Nurse educator's workplace empowerment, burnout, and job satisfaction: Testing Kanter's theory. *Journal of Advanced Nursing*, 46(2), 134-143. <https://doi.org/10.1111/j.1365-2648.2003.02973.x>
- Sitzman, K., & Watson, J. (2018). *Caring science, mindful practice: Implementing Watson's human caring theory*. Springer Publishing Company.
- Vujanić, J., Prlić, N., & Lovrić, R. (2020). Nurses' self-assessment of caring behaviors in nurse-patient interactions: A cross-sectional study. *International Journal of Environmental Research and Public Health*, 17(4), 5255. <https://doi.org/10.3390/ijerph17145255>
- Ward, M. (2022). Self-care practices for nursing faculty to alleviate burnout. [Doctoral dissertation, St. Catherine University]. Sophia. https://sophia.stkate.edu/dnp_projects
- Watson M. F. (2023). The relationship between psychological distress and nursing faculty with burnout. *SAGE Open Nursing*, 9, 23779608231181203. <https://doi.org/10.1177/23779608231181203>
- White-Trevino, K., Blackburn, A., Rosa, V., & Amin, R. (2022). Culture of care in a school of nursing: Faculty embark on a quality improvement plan. *International Journal for Human Caring* 26(4), 238-247. <http://dx.doi.org/10.20467/IJHC-2021-0004>
- World Health Organization (2018). *Declaration of Astana*. Global Conference on primary health care. <https://www.who.int/docs/default-source/primary-health/declaration/gcphc-declaration.pdf>
- World Health Organization (2019, May 28). *Burn-out an "occupational phenomenon": International classification of diseases*. <https://www.who.int/news/item/28-05-2019-burn-out-an-occupational-phenomenon-international-classification-of-diseases>
- World Health Organization (2021). *Making every school a health-promoting school: Country case studies*. WHO and UNESCO. <https://iris.who.int/bitstream/handle/10665/341909/9789240025431-eng.pdf>
- World Health Organization (2022, June 30). *Self-care interventions for health*. <https://www.who.int/news-room/fact-sheets/detail/self-care-health-interventions>
- Wu, R., Liu, L., Zhu, H., Su, W., Cao, Z., Zhong, S., Liu, X., & Jiang, C. (2019). Brief mindfulness meditation improves emotion processing. *Frontiers in Neuroscience*, 13(2019), 1074. <https://doi.org/10.3389/fnins.2019.01074>
- Yuan, H., Zuo, M., & Yu, Y. (2019). The impact of work overload on job burnout among university faculty: The mediating role of self-efficacy. *Asia Pacific Education Review*, 20(3), 309-318. doi: 10.1007/s12564-019-09613-9
- Younas, A. (2017). Self-care behaviors and practices of nursing students: Review of literature. *Journal of Health Sciences*, 7(3), 137-145. <https://doi.org/10.17532/jhsci.2017.420>
- Zangaro, G. A., Rosseter, R., Trautman, D., & Leaver, C. (2023). Burnout among academic nursing faculty. *Journal of Professional Nursing*, 48, 54-59. <https://doi.org/10.1016/j.profnurse.2023.06.001>

ABOUT THE AUTHOR



Khandy Lorraine G. Apsay, MAN, RN, is a PhD student pursuing a Doctor of Philosophy in Nursing degree at Saint Louis University. She obtained Bachelor's degree in Nursing in 2004 and Master of Arts in Nursing Major in Medical-Surgical Nursing in 2010. She is currently an Associate Professor at the College of Health Sciences of the Mindanao State University – Iligan Institute of Technology. Her research interest is on nursing education with a focus on quality improvement and curriculum enhancement.

Acknowledgment

I would like to express my sincere gratitude to Dr. Abdullah Junior S. Mangarun and Dr. Gloria Sheila E. Coyoca for sharing valuable insights in advocating self-care for nurse educators.

“Let us never
consider ourselves
finished, nurses.
We must be
learning
all of our lives.”

– Florence Nightingale