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Differences in Student Well-Being Programs Across Top World Universities: A Comparative Study of Mindfulness-Based Stress Reduction (MBSR) Programs

Seyedeh Asra Sajadia
University of Kurdistan
Thomas G. Plante
tplante@scu.edu

Santa Clara University

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Abstract

Objectives

Despite extensive evidence on the benefits of Mindfulness-Based Stress Reduction (MBSR) programs for academic communities, little is known about the extent to which universities actually implement the standardized 8-week MBSR (weekly sessions, a full-day retreat, daily home practice, certified instructors).

Methods

Using a comparative documentary design (Tight, 2019), we systematically reviewed official webpages and documents of the top 10 universities in each continent (Times Higher Education 2024) over a two-month period.

Results

Implementation is highly uneven: only four universities (three in North America, one in Europe) offer a formal, ongoing MBSR; 23 institutions provide non-standardized mindfulness alternatives, concentrated in North America and Australia; Asia, Africa, and South America show limited engagement with this specific Western model. Beyond mapping prevalence, the study advances theory by proposing the Global MBSR Institutionalization Matrix (GMIM), crossing program fidelity with institutional embedding, and the F^3 progression logic (Fidelity–Fit–Funding/Infrastructure)formalized institutional signaling and strategic representation., system-level adoption. We examine MBSR as one specific, resource-intensive benchmark of well-being, acknowledging it does not capture all culturally diverse or local initiatives.

Conclusions

Findings illuminate cultural, structural, and policy disparities and offer a practical framework for inclusive, context-sensitive scale-up of evidence-based well-being initiatives in higher education.

Introduction

In the context of neoliberalism, where higher education is increasingly shaped by market-driven forces, competitive performance metrics, and individual accountability, the emotional well-being of students and faculty has often been marginalized (Waddington et al., 2024; Janfada et al., 2025; Desierto & De Maio, 2020). Neoliberal pressures have contributed to cultures of academic stress (Mula-Falcón & Caballero, 2022; Desierto & De Maio, 2020; Maiese, 2022), detachment (Hokka, 2023; Decuypere & Simons, 2016), and instrumentalism (Wong, 2022; Regmi, 2021), prompting a growing call for more humane and compassionate educational environments (Waddington & Bonaparte, 2024). As a counter-response,

many universities, particularly in Europe and the US, have begun integrating mental health programs or mindfulness initiatives emerging as prominent interventions aimed at nurturing resilience, empathy, and well-being within academic communities. Mindfulness-Based Stress Reduction (MBSR is a structured, evidence-based program widely adopted in clinical and educational settings to alleviate stress (Alzahrani et al., 2023; Hoge et al., 2023), Previous research has also demonstrated its effectiveness in reducing anxiety and depressive symptoms among healthcare professionals (Kriakous et al., 2021). Its adaptation within higher education signifies a broader institutional effort to rehumanize academic life and address the socio-emotional dimensions of learning and scholarship. Despite its growing visibility, the presence, structure, and institutionalization of MBSR across top-ranked global universities remain uneven and underexplored, especially from a comparative perspective that considers geographical and cultural variation.

Despite the growing evidence base supporting the effectiveness of MBSR in enhancing emotional well-being, reducing academic stress, and fostering compassionate learning environments, there is limited knowledge regarding whether such programs are implemented at all, and even less clarity about the ways in which they are operationalized within leading global universities. Existing research has largely focused on the psychological outcomes of MBSR in clinical or educational trials, often within single-institution or national contexts (Khoury et al., 2015; Cejudo & Rubio-Valdehita, 2024). However, few studies have systematically examined the presence, structure, and availability of MBSR as a sustained, formalized well-being initiative across universities. Furthermore, there is a lack of comparative research that considers how geographical, cultural, and institutional differences shape the adoption and implementation of MBSR. However, examining the global distribution of MBSR is intended to map the reach of this specific Western-developed framework which may alternatively rely on indigenous or more accessible resources. Thus, the following research questions are posed:

1. To what extent are MBSR programs present within the well-being infrastructures of the world’s top universities?
2. How do the top 10 universities in each continent differ in terms of the presence or absence of Mindfulness-Based Stress Reduction (MBSR) programs?

Mindfulness

Mindfulness, rooted in ancient Buddhist traditions, refers to the practice of paying purposeful, nonjudgmental attention to the present moment (Kabat-Zinn, 1994). While its philosophical foundations trace back over 2,500 years, mindfulness has been secularized and integrated into Western clinical and educational settings over the past few decades. The pivotal moment came with Jon Kabat-Zinn's development of Mindfulness-Based Stress Reduction (MBSR) in 1979 at the University of Massachusetts Medical School, which introduced mindfulness as a structured 8-week program aimed at reducing stress and improving well-being (Kabat-Zinn, 1990). Since then, mindfulness has evolved from a spiritual discipline into a widely researched psychological and neuroscience interventions (Keng et al., 2011; Calderone et al., 2024; Gotink et al., 2016).

Mindfulness is commonly understood as both a state, a temporary experience of awareness, and a trait, an enduring disposition toward conscious presence (Baer et al., 2006). Conceptually, it encompasses components such as attention regulation, body awareness, emotional regulation through reappraisal, and a non-reactive stance toward internal experience (Hölzel et al., 2011). Neuroscientific research has demonstrated that mindfulness activates and strengthens networks associated with executive control, interoception, and self-regulation, particularly in the prefrontal cortex and anterior cingulate cortex (Tang et al., 2015) with empirical studies supporting its benefits for emotional regulation, attention, and overall mental health (Creswell, 2017; Tang et al., 2015). Its application now spans healthcare, education, military training, and corporate settings, reflecting a significant shift in how contemplative practices are used in modern society (Davidson & Kaszniak, 2015).

In educational and psychological research, mindfulness is increasingly regarded not only as a technique but also as a paradigm of consciousness, a way of relating to self, others, and experience that promotes well-being, empathy, and cognitive flexibility (Shapiro et al., 2006).

Mindful Based Stress Reduction

Mindfulness-Based Stress Reduction (MBSR) program was first developed in 1979 by Jon Kabat-Zinn at the University of Massachusetts Medical School as a clinical intervention to help individuals manage stress, chronic pain, and psychological distress through the cultivation of mindfulness (Kabat-Zinn, 2003). The program's core intention is to foster greater self-awareness, emotional regulation, and resilience by training participants to observe their experiences with non-judgmental attention and openness. Kabat-Zinn's pioneering work positioned mindfulness as a legitimate and accessible therapeutic practice within mainstream healthcare and education, bridging contemplative wisdom with empirical science (Santorelli et al., 2017; Kabat-Zinn, 2013).

The 8-week Mindfulness-Based Stress Reduction (MBSR) program is guided by foundational principles that foster deep engagement with present-moment experience and promote emotional and physical well-being. These include cultivating non-judging, patience, beginner's mind, trust, non-striving, acceptance, and letting go, attitudes explicitly introduced and practiced throughout the program (Kabat-Zinn, 2005). Over eight weeks, participants work on formal techniques such as the body scan, sitting meditation, mindful yoga, and walking meditation, alongside informal practices like mindful eating, communication, and awareness during routine activities. The program also emphasizes self-regulation, attention to stress reactivity, emotional resilience, and compassionate self-care, while helping participants develop a flexible attentional stance, explore automatic behavioral patterns, and respond skillfully to challenges (Santorelli et al., 2017). These principles are not isolated ideas but are experientially embodied in each session, forming the ethical and psychological backbone of MBSR.

According to UMass Memorial Health (n.d.), Mindfulness-Based Stress Reduction (MBSR) interventions are implemented across diverse institutional settings, including credit-bearing academic courses, university counseling centers, student wellness programs, and campus-based mental health initiatives. Although university students often constitute the primary participants, many programs are also extended

to faculty and staff to promote broader institutional well-being and resilience. Program delivery is typically conducted by trained mindfulness instructors who have completed formal MBSR teacher-training pathways. Notably, participation in an 8-week MBSR program is a foundational prerequisite for professional teacher training and certification. Such training structures are intended to ensure consistency and fidelity in intervention delivery across both educational and clinical settings.

A substantial body of empirical research underscores the effectiveness of Mindfulness-Based Stress Reduction (MBSR) in enhancing psychological well-being across diverse nonclinical populations. Querstret et al. (2020) demonstrated that both MBSR and Mindfulness-Based Cognitive Therapy (MBCT), a clinical adaptation or derivative of MBSR, combined with elements of cognitive behavioral therapy (CBT), specifically designed to prevent depressive relapse developed by (Segal et al., 2012), yield consistent benefits in reducing stress, anxiety, and depressive symptoms, while promoting overall mental health. In youth populations, Chi et al. (2018) confirmed that MBSR offers moderate improvements in emotional regulation and depressive symptomatology, suggesting its relevance as an early intervention strategy for adolescents and young adults. Longitudinally, Yavuz Sercekman (2024) revealed that MBSR's transformative impact endures over time, with participants reporting deeper inner calm, lifestyle change, and sustained personal growth years after completion, despite noted challenges in practice continuity.

In academic and clinical training contexts, MBSR has shown promise in developing core competencies such as mindfulness and emotional resilience, emotional regulation, reducing stress and anxiety, and enhancing psychological well-being among university students (Pan et al., 2024; An et al., 2022; Ma et al., 2022). For example, Jiménez-Gómez et al. (2022) found that MBSR not only fostered mindfulness and self-compassion among psychologist trainees but also contributed to the alleviation of anxiety and depression, affirming its role in preventive mental health for future practitioners. Deshpande et al. (2023) highlighted MBSR’s utility as a public health initiative, emphasizing its capacity to enhance students’ mental health, life satisfaction, and stress coping skills. However, such programs are not without implementation barriers. Structural constraints such as scheduling, limited access, and perceived stigma continue to hinder student engagement, as echoed by Cage et al. (2018). These findings point to the importance of context-sensitive delivery and inclusive design.

At a broader institutional and societal level, Crane et al. (2023) argued for an evolution of the MBSR curriculum to address systemic inequities, advocating for anti-oppressive pedagogical frameworks and greater accessibility for marginalized populations. Similarly, Edwards et al. (2014) drew on a decade of applied practice to identify common implementation challenges in community-based MBSR programs, offering pragmatic strategies for sustainable delivery. Parallel concerns about academic staff well-being, as reviewed by Dlamini & Dlamini (2024), further reinforce the need for mindfulness-based interventions within higher education to mitigate burnout and foster holistic resilience.

Despite its widespread adoption, it is crucial to critically examine the assumption that mindfulness is universally beneficial. Scholars argue that mindfulness, particularly when decontextualized from its

original South Asian epistemologies and commodified in Western settings, may not resonate with all individuals or cultural groups (Purser, 2019). Furthermore, it should be acknowledged that MBSR is not a panacea; it may not be suitable or effective for everyone, and some individuals may require alternative psychological support or indigenous healing practices that better align with their local socio-cultural realities.

Mindfulness and Well-being Programs Implementation in Higher Education

The implementation of mindfulness and wellbeing programs in higher education varies significantly across continents, shaped by differing levels of institutional support, cultural perceptions, resource availability, and policy infrastructure. In this context, Hecht & Crane (2025) highlighted that maintaining mindfulness program fidelity is essential, but so is the flexibility to adapt to cultural, social, and contextual needs. The sustainable and ethical future of these programs relies on developing coherent, multidimensional, and globally applicable frameworks for evaluating and enhancing fidelity, primarily through teacher empowerment. Moreover, Mischenko et al. (2022) found that successful implementation of mindfulness-based social emotional learning programs depends heavily on relational trust between implementers like mindfulness teachers and key stakeholders (e.g., school leaders, colleagues, families, students, and themselves). Teachers with high implementation fidelity had stronger trust relationships, which facilitated program delivery. On the other hand, Broderick et al. (2021) identifies four key challenges to ensuring fidelity in school-based mindfulness programs: unclear definitions, balancing adherence with flexibility, the need for teacher embodiment (i.e., the authentic integration of mindfulness into the teacher's own way of being), and differences between traditional teaching and mindfulness pedagogy. Similarly, Hutchesson et al. (2024) surveyed 11 Australian universities, finding strong commitment to student wellbeing but noting lack of resources and data as major implementation barriers.

These implementation challenges and requirements for fidelity are further complicated by how institutions across different regions conceptualize wellbeing itself, as seen in recent studies that frame it not merely as a personal goal but as a systemic and pedagogical commitment. For example, Colla et al. (2023) positions wellbeing not as an individual responsibility but as a shared, systemic, and pedagogical imperative embedded in the fabric of teaching and learning.

As mindfulness programs are initiated, implemented, and sustained as a core function of well-being centers across world universities, such conceptual and structural tensions become even more pronounced when examined across global contexts, where diverse institutional realities in Asia, Africa, and South America reveal how resource constraints, leadership gaps, and policy fragmentation continue to limit the depth and sustainability of mindfulness and well-being initiatives in higher education. As an example, Hsiao et al. (2023) assessed workplace wellness programs in 28 Asia-Pacific universities and found that while basic services like parental leave and disaster preparedness were common, mental

health support and program integration were lacking, often due to limited budgets and weak leadership. Similarly, Yu et al. (2025), found strong policy consistency in goals and evaluation but noted weaknesses in sustainability, innovation, and adaptability to diverse student needs, especially in underdeveloped regions.

In Africa, Henrico (2022), identified five wellness design principles and suggested that integrating self-coaching, appreciative coaching, and self-management strategies could support student well-being in health-focused higher education contexts, despite challenges like limited time and resources. Complementing this, Tomas et al. (2024) conducted a scoping review highlighting key institutional barriers to implementing Health Promoting Universities (HPUs) in Africa, including structural limitations and lack of staff training, and recommended joining international HPU networks to improve student well-being. Similarly, Julius et al. (2024), in a systematic review, emphasized the critical research gap in student mental health in sub-Saharan Africa and called for context-sensitive mental health policies modeled on international frameworks to address students' growing psychological needs. Also in South America, Beroíza-Valenzuela (2024) underscores the vulnerability of students to academic and behavioral stressors, compounded by stigma and limited access to services, and calls for targeted mental health policies and gender-sensitive interventions to support students' psychological well-being.

Methodology

Research Design

This study employed a qualitative documentary research design, guided by the framework proposed by Malcolm Tight (2019), to explore the extent to whichworld top universities integrate MBSR programs in higher education. As Tight outlines, documentary research involves the systematic analysis of publicly accessible documents, such as websites, reports, and institutional records, as valid sources for understanding social and organizational phenomena. According to him, documentary research involves three core steps: identifying and selecting appropriate documents for analysis (in this case, university websites, as they are widely accessible and publicly available resources); applying purposive or strategic sampling to ensure representativeness (using one of the well-known global rankings, Times Higher Education) and evaluating documents based on four key criteria, authenticity, credibility, representativeness, and meaning. These steps form the foundation for systematically interpreting publicly available records to investigate institutional, social, or cultural phenomena. This framework provides a structured approach to documentary research by guiding the selection, sampling, and evaluation of documents as credible sources for analyzing institutional and social realities.

Comparative Strategy

This study adopts a cross-continental comparative strategy to investigate how top-ranked global universities institutionalize MBSR programs. The comparative unit of analysis consists of the top 10 universities from each continent (Asia, Europe, North America, South America, Africa, and Oceania),

based on the 2024 Times Higher Education (THE) World University Rankings. This stratified selection enables a geographically balanced and globally representative dataset, ensuring the inclusion of elite institutions that are widely recognized as leaders in academic innovation and student support services. The rationale for adopting a global comparative lens lies in the hypothesis that institutional adoption of MBSR is shaped not only by the academic standing of universities but also by regional cultural norms, mental health discourses, funding structures, and educational policy frameworks.

Data Sources

This study drew upon a range of publicly accessible institutional documents and communications to examine the presence of MBSR programs in top global universities. To identify and categorize universities, the official website of the *Times Higher Education World University Rankings* was used, as it provides a continent-based ranking and classification of institutions. The selection was based on the 2024 and 2025 rankings, ensuring a contemporary and geographically balanced sample across Asia, Africa, Europe, North America, South America, and Oceania. The primary sources included official university websites, particularly pages related to student well-being, counseling services, staff development, and campus life; publicly available reports and strategic documents produced by well-being offices; and online content from student affairs divisions. Also, data were gathered through direct email correspondence with university offices responsible for student support and mental health services. Special attention was given to named institutional initiatives, such as “Mindful Campus” or “Mental Health and Resilience Programs”, to determine whether they explicitly included a standardized eight-week MBSR program. Only current, verifiable, and institutionally endorsed sources were included in the final dataset for analysis. However, only a small number of institutions responded to these inquiries. As a result, the main data sources remained the primary documents available through official university websites and affiliated platforms.

Data Collection

The data collection process involved a systematic search and review of institutional documents related to MBSR programs across the selected universities during June and July 2025. Initially, the researchers accessed each university’s official website and navigated directly to sections related to student or staff well-being, counseling services, or mental health support. If no relevant information was found through direct browsing, internal search functions on the university websites with keywords such as “mindfulness,” “MBSR,” “stress reduction,” and “well-being” were used. In cases where internal searches yielded no results, the Google search engine with combinations of the university’s name and the same keywords to locate relevant subpages or reports were employed. For universities where no publicly available information about MBSR programs could be found through either method, it was assumed that no formal or institutionally integrated MBSR initiative was in place, unless otherwise confirmed via email communication. The presence, structure, accessibility, and scope of any identified MBSR programs were recorded in a comparative matrix for further analysis.

Data Analysis

The collected data were analyzed using a comparative matrix approach to systematically evaluate the presence of Mindfulness-Based Stress Reduction (MBSR) programs across the selected universities. For each institution, the comparative matrix recorded four key indicators to ensure a multidimensional analysis:

1. **Program Categorization**: Identifying whether the institution offered a 'Standardized 8-week MBSR' program, an 'Alternative Mindfulness Initiative' (e.g., drop-in sessions or hybrid models), or had 'No Formal Program'.
2. **Target Audience**: Determining if the initiative was specifically designed for students, faculty, staff, or a combination of these groups.
3. **Institutional Hosting**: Identifying the specific administrative or academic unit responsible for delivery (e.g., Counseling Centers, Human Resources, or Academic Departments).
4. **Operational Structure**: Recording details such as program duration, frequency, and whether it was embedded within the university's official well-being strategies.

This structured matrix allowed for rigorous cross-case comparison and pattern identification across geographical regions and institutional contexts, ensuring that only continuous and organized efforts were included in the final synthesis.

Trustworthiness and Credibility

To ensure the trustworthiness and credibility of the study, data collection and interpretation were guided by the four evaluative criteria proposed by Tight (2019): authenticity, credibility, representativeness, and meaning. Authenticity was addressed by selecting only documents and web-based content published or directly endorsed by the universities themselves, specifically targeting official domains (e.g., .edu, .ac) and institutional records, reports, or communication from institutional offices. Credibility was ensured by cross-checking the accuracy and consistency of program descriptions across multiple sections of each university's website and, where possible, through direct email correspondence with relevant staff. Representativeness was maintained by using a purposive sampling strategy focused on the top 10 universities from each continent according to the 2024 Times Higher Education rankings, thus capturing a balanced global sample of institutions. Finally, meaning was preserved through close reading and interpretation of institutional language and structure, carefully distinguishing between permanent, ongoing programs and one-off or discontinued events. Only clearly described, regularly offered mindfulness-based programs were included in the analysis, thereby enhancing the reliability of the study's findings.

Results

This section presents the comparative results on the extent to which top universities across different world regions integrate mindfulness programs as indicators of institutional commitment to mental wellbeing. Drawing on institutional data from the *Times Higher Education* rankings, the findings are organized by region and highlight the presence or absence of key mindfulness initiatives across leading universities.

1. To what extent do top-ranked global universities universities integrate mindfulness-based stress reduction (MBSR) programs as indicators of a wellbeing program?

Mindfulness Integration Among Top Asian Universities

Table 1
Mindfulness Integration Among Top Asian Universities

Rank	University	Country	Ongoing 8-Week MBSR Program	Target Audience	Alternative Ongoing Mindfulness Program
1	Tsinghua University	China	-	-	-
2	Peking University	China	-	-	-
3	National University of Singapore	Singapore	-	-	-
4	Nanyang Technological University	Singapore	-	-	-
5	University of Tokyo	Japan	-	-	-
6	University of Hong Kong	Hong Kong	-	-	✓
7	Fudan University	China	-	-	-
8	Zhejiang University	China	-	-	-
9	Chinese University of Hong Kong	Hong Kong	-	-	✓
10	Shanghai Jiao Tong University	China	-	-	-

Table 1 summarizes the presence of ongoing Mindfulness-Based Stress Reduction (MBSR) programs across the top ten universities in Asia. The analysis reveals a striking absence of structured 8-week MBSR programs across all institutions surveyed. None of the ten universities, including globally recognized institutions such as Tsinghua University, the National University of Singapore, and the University of Tokyo, offer an institutionalized, ongoing 8-week MBSR program accessible to all members of the university community (students, faculty, and staff). However, two universities, the University of Hong Kong and the Chinese University of Hong Kong, were found to offer alternative ongoing

mindfulness programs that, while not meeting the formal MBSR criteria (i.e., 8-week standardized structure developed by Jon Kabat-Zinn), still reflect a degree of institutional engagement with mindfulness-based mental health initiatives. These alternatives typically include general mindfulness classes, stress management drop-in, or short-term meditation sessions supported by campus counseling or wellness centers. *Mindfulness Integration Among Top European Universities*

Table 2.

Mindfulness Integration Among Top European Universities

Rank	University	Country	Ongoing 8-Week MBSR Program	Target Audience	Alternative Ongoing Mindfulness Program
1	University of Oxford	UK	-	-	✓
2	University of Cambridge	UK	-	-	-
3	Imperial College London	UK	-	-	-
4	ETH Zurich	Switzerland	-	-	-
5	University College London (UCL)	UK	-	-	-
6	Technical University of Munich (TUM)	Germany	-	-	✓
7	University of Edinburgh	UK	✓	Students, staff and faculty	✓
8	Swiss Federal Technology Institute of Lausanne	Switzerland	-	-	-
9	King's College London	UK	-	-	✓
10	LMU Munich (Ludwig Maximilian Univ.)	Germany	-	-	✓

Table 2 presents data on the integration of mindfulness programs among the top ten European universities. Among these, only the University of Edinburgh offers a formal, ongoing 8-week Mindfulness-Based Stress Reduction (MBSR) program, open to students, staff, and faculty. In contrast, five universities provide alternative forms of ongoing mindfulness programs. Additional institutions with alternative mindfulness offerings include the Technical University of Munich (TUM), King’s College

London, Ludwig Maximilian University of Munich (LMU), and the University of Edinburgh, which offers both MBSR and alternative programs. The remaining universities, University of Cambridge, Imperial College London, ETH Zurich, University College London (UCL), and EPFL, do not offer either a formal MBSR program or an alternative ongoing mindfulness initiative for the general university community.

Mindfulness Integration Among Top African Universities

Table 3
Mindfulness Integration Among Top African Universities

Rank	University	Country	Ongoing 8-Week MBSR Program	Target Audience	Alternative Ongoing Mindfulness Program
1	University of Cape Town	South Africa	-	-	✓
2	Stellenbosch University	South Africa	-	-	-
3	University of the Witwatersrand	South Africa			
4	Mohammed VI Polytechnic University	Morocco			
5	University of Johannesburg	South Africa	-	-	✓
6	Egypt–Japan University of Science & Technology	Egypt	-	-	-
7	University of KwaZulu-Natal	South Africa	-	-	-
8	University of Cape Town	South Africa			
9	Stellenbosch University	South Africa	-	-	-
10	University of the Witwatersrand	South Africa	-	-	✓

As shown in Table 3, none of the top ten African universities offer a formal, ongoing 8-week Mindfulness-Based Stress Reduction (MBSR) program. However, three universities, University of Cape Town, University of Johannesburg, and University of the Witwatersrand, offer alternative ongoing mindfulness programs. These programs are not standardized MBSR interventions but represent institutional efforts to integrate mindfulness in some form. The remaining institutions, including Stellenbosch University, Egypt, Japan University of Science and Technology, University of KwaZulu-Natal, and Mohammed VI Polytechnic University, do not report any ongoing MBSR or alternative mindfulness programs. It is also

noted that some universities appear more than once in the table due to overlapping rankings or listing inconsistencies.

Mindfulness Integration Among Top North American Universities

Table 4.

Mindfulness Integration Among Top North American Universities

Rank	University	Country	Ongoing 8-Week MBSR Program	Target Audience	Alternative Ongoing Mindfulness Program
1	MIT	US	✓	staff, faculty, and students.	✓
2	Harvard University	US	-	-	✓
3	Princeton University	US	-	-	✓
4	Stanford University	US	-	-	✓
5	Caltech	US	-	-	✓
6	UC Berkeley	US	-	-	✓
7	Yale University	US	✓	Students, staff and faculty	✓
8	University of Chicago	US	-	-	✓
9	University of Pennsylvania	US	✓	students, staff, and faculty	✓
10	Johns Hopkins University	US	-	-	✓

As shown in Table 4, among the top ten North American universities, three institutions, Massachusetts Institute of Technology (MIT), Yale University, and the University of Pennsylvania, offer an ongoing 8-week Mindfulness-Based Stress Reduction (MBSR) program. These programs are available to students, staff, and faculty. In addition, all three institutions also provide alternative ongoing mindfulness programs alongside MBSR. The remaining seven universities, Harvard University, Princeton University, Stanford University, California Institute of Technology (Caltech), University of California, Berkeley, University of Chicago, and Johns Hopkins University, do not offer a standardized MBSR program but do provide alternative ongoing mindfulness programs targeting the university community. No institution among the top ten was found to lack both MBSR and alternative mindfulness offerings.

Mindfulness Integration Among Top South American Universities

Table 5.

Mindfulness Integration Among Top South American Universities

Rank	University	Country	Ongoing 8-Week MBSR Program	Target Audience	Alternative Ongoing Mindfulness Program
1	University of São Paulo	Brazil	-	-	✓
2	University of Campinas	Brazil	-	-	-
3	Federal University of Rio de Janeiro	Brazil	-	-	-
4	Pontificia Universidad Católica de Chile	Chile	-	-	-
5	Universidade Estadual Paulista	Brazil	-	-	-
6	Pontifical Catholic University of Rio de Janeiro	Brazil	-	-	✓
7	Tecnológico de Monterrey	Mexico	-	-	✓
7	Universidade Federal do Rio Grande do Sul	Brazil	-	-	-
9	University of Chile	Chile	-	-	-
10	Universidade Federal de Santa Catarina	Brazil	-	-	✓

As shown in Table 5, none of the top ten South American universities offer a formal, ongoing 8-week Mindfulness-Based Stress Reduction (MBSR) program. However, four universities provide alternative ongoing mindfulness programs: the University of São Paulo, the Pontifical Catholic University of Rio de Janeiro, Tecnológico de Monterrey, and the Federal University of Santa Catarina. These programs are not standardized MBSR interventions but represent institutional efforts to offer mindfulness-related support to the university community. The remaining six institutions, including the University of Campinas, Federal University of Rio de Janeiro, Pontificia Universidad Católica de Chile, Universidade Estadual Paulista, Universidade Federal do Rio Grande do Sul, and the University of Chile, do not report either an MBSR program or an alternative mindfulness initiative.

Mindfulness Integration Among Top Australian Universities

Table 6.

Mindfulness Integration Among Top Australian Universities

Rank	University	Country	Ongoing 8-Week MBSR Program	Target Audience	Alternative Ongoing Mindfulness Program
1	University of Melburn	Australia	-	-	✓
2	Monash University	Australia	-	-	✓
3	University of Sydney	Australia	-	-	✓
4	Australian National University	Australia	-	-	-
5	University of Queensland	Australia	-	-	✓
6	UNSW Sedney	Australia	-	-	✓
7	University of Adelaide	Australia	-	-	✓
7	The University of Western Australia UWA	Australia	-	-	✓
9	University of Technology Sydney UTS	Australia	-	-	✓
10	Macquarie University	Australia	-	-	-

According to Table 6, none of the top ten Australian universities offer a formal, ongoing 8-week Mindfulness-Based Stress Reduction (MBSR) program. However, eight universities provide alternative ongoing mindfulness programs. These include the University of Melbourne, Monash University, University of Sydney, University of Queensland, UNSW Sydney, University of Adelaide, The University of Western Australia (UWA), and the University of Technology Sydney (UTS). These institutions offer various forms of mindfulness-related activities or courses that do not follow the standardized MBSR structure. The remaining two universities. Australian National University and Macquarie University, do not report either a formal MBSR program or an alternative ongoing mindfulness initiative for students, staff, or faculty.

2. How do the top 10 universities in each continent differ in terms of the presence or absence of Mindfulness-Based Stress Reduction (MBSR) programs?

Comparison of MBSR Programs Among Top World Universities

The number of universities offering an ongoing 8-week Mindfulness-Based Stress Reduction (MBSR) program across six continents is summarized below. Figure 1 illustrates the distribution of MBSR programs among the top ten universities in each continent.

As shown in Fig. 1, North America has three universities offering MBSR, Europe has one, and no ongoing programs are reported in Asia, Africa, South America, or Australia.

Comparison of Alternative Mindfulness Programs Among Top World Universities

Figure 2 illustrates that North America leads with all 10 top universities offering alternative mindfulness programs, followed by Australia with 8, Europe with 5, South America with 4, Africa with 3, and Asia with only 2 such programs. This highlights a significant regional disparity in the institutional availability of alternative mindfulness initiatives.

Percentage-Based Comparison of MBSR Program Integration in Top Global Universities

Figure 3 illustrates the distribution of MBSR programs across top universities by continent. The results show a clear concentration in North America, which accounts for 75% of all reported MBSR offerings (MIT, Yale, and UPenn), followed by Europe with 25% (University of Edinburgh). Asia, Africa, South America, and Australia report no institutionalized MBSR programs, highlighting a stark regional disparity in the formal adoption of mindfulness-based interventions within higher education.

Percentage-Based Comparison of Alternative Mindfulness Programs Integration in Top Global Universities

Figure 4. Distribution of alternative mindfulness programs among top universities by continent.

Figure 4 illustrates the distribution of alternative ongoing mindfulness programs (non-MBSR) among top universities across six continents. North America leads with 31%, followed by Australia (25%) and Europe (16%), while Asia (6%) and Africa (9%) show minimal institutional engagement. South America holds a moderate share at 13%, highlighting global disparities in mindfulness integration.

Discussion

This study examined how top universities across continents integrate MBSR programs as part of their well-being efforts. The findings show significant regional variation: while some institutions in North America and Europe offer formal 8-week Mindfulness-Based Stress Reduction (MBSR) programs, most universities, especially in Asia, Africa, and South America, lack such structured initiatives. These differences highlight uneven institutional commitment to mindfulness-based mental health support in global higher education.

The absence of formal MBSR programs across Asia's top universities, as revealed in this study, underscores a significant regional gap in the institutionalization of structured mindfulness initiatives within higher education. Despite strong global evidence supporting MBSR's effectiveness in promoting student well-being and emotional resilience (Querstret et al., 2020; Deshpande et al., 2023), these findings suggest that leading Asian institutions have yet to adopt such programs as integral components of their campus wellness strategies. Despite the fact that the origins of mindfulness can be traced to ancient Indian Buddhism, where it was known as *sati* and served as a foundational meditative practice associated with the Eightfold Path and early Buddhist suttas such as the *Satipaṭṭhāna Sutta* (Gethin, 1998; Analayo, 2016) and also its spread over centuries from India to Sri Lanka, Thailand, Burma (Myanmar), China, Japan, Tibet, and other parts of Asia (Harvey, 2013), its institutional re-emergence in higher education appears to have taken stronger root in Western contexts and not in Asia. This pattern may also reflect broader cultural, structural, or policy-related barriers, such as stigma around mental health, emphasis on academic performance, or lack of implementation frameworks (Cage et al., 2018; Hecht & Crane, 2025). While alternative mindfulness offerings in Hong Kong indicate emerging engagement, their limited scope highlights the need for more formalized, sustained interventions to align with global shifts toward compassionate and holistic academic environments (Waddington & Bonaparte, 2024).

Furthermore, the lower adoption rate in Asian institutions might be interpreted as a reaction to the decontextualization and cultural appropriation of traditional practices. As Kirmayer (2015) highlights, extracting mindfulness from its original Eastern context, where it is deeply embedded within a larger system of ethical and moral beliefs, fundamentally changes the nature and effects of the practice. Consequently, these institutions may resist Westernized models that repackage traditional Eastern philosophies into secular, clinical tools, prioritizing instead their own indigenous and culturally resonant approaches that maintain the holistic integrity of mental health.

The parallel absence of formal 8-week MBSR programs across Asia, Africa, South America, and Australia points to a broader trend of partial and fragmented institutional engagement with mindfulness programs in higher education. While several universities in these regions offer alternative mindfulness initiatives, such as drop-in or short-term classes, these efforts often lack the structural coherence, experiential depth, and pedagogical fidelity that define MBSR as a standardized intervention (Kabat-Zinn, 2005; Santorelli et al., 2017). This pattern reflects what Hecht & Crane (2025) identify as a key challenge in global mindfulness adoption: balancing fidelity with contextual adaptation. It also underscores the implementation barriers noted by Cage et al. (2018), including resource limitations, cultural stigma, and institutional inertia. Notably, among these continents, Australian universities exhibit the highest number of alternative mindfulness programs, which may be attributed to a stronger public health orientation in campus well-being strategies and the rising influence of contemplative pedagogies within teacher education frameworks. In Asia, despite policy-level commitments, many programs remain underdeveloped due to weak leadership, budgetary constraints, and poor integration of mental health services within broader wellness infrastructures (Hsiao et al., 2023; Yu, et al., 2025). African universities face similar systemic challenges: limited time, staff training gaps, and structural fragmentation hinder

the full implementation of health-promoting models, though recent efforts advocate for adaptive interventions such as appreciative coaching and international collaboration through HPU networks (Henrico, 2022; Tomas et al., 2024; Julius et al., 2024). In South America, the vulnerability of students to academic stress is compounded by gender disparities, mental health stigma, and inadequate access to services, reinforcing the need for tailored and culturally grounded wellness policies (Beroíza-Valenzuela, 2024).

In contrast to other world regions, Europe and North America demonstrate a comparatively higher degree of institutional commitment to mindfulness programming, particularly North America, where all ten top-ranked universities offer at least some form of ongoing mindfulness initiative, and three (MIT, Yale, UPenn) have implemented formal 8-week MBSR programs. In Europe, the presence is more modest, with only the University of Edinburgh offering a standardized MBSR course. This contrast reflects regional differences in institutional culture and wellness prioritization, with North American universities increasingly adopting mindfulness not only as a therapeutic resource but as an embedded feature of campus-wide mental health strategy (Deshpande et al., 2023; Colla et al., 2023). These findings also align with Waddington & Bonaparte's (2024) argument that mindfulness initiatives represent a pedagogical counter-response to neoliberal academic environments, where emotional well-being has long been marginalized. Moreover, the integration of both structured and flexible mindfulness formats suggests a shift toward more systemic, compassionate models of educational care (Shapiro et al., 2006; Crane et al., 2023), though barriers such as resource allocation and program fidelity still persist (Hecht & Crane, 2025; Hutchesson et al., 2024). Together, the North American and European cases illustrate how mindfulness is transitioning from an individualized wellness tool into a more institutionalized framework of collective well-being.

Despite these systemic shifts, the high concentration of formal MBSR programs in North America is unsurprising, as these institutions benefit directly from implementing and promoting interventions developed by their own Western faculty and nested within their own epistemological frameworks. This institutional preference is further supported by Wilson (2014), who illustrates how mindfulness was systematically adapted and institutionalized within North American academic frameworks to align with Western cultural and clinical values. However, this high prevalence must be critically viewed through the lens of the 'McMindfulness' critique (Purser, 2019). This perspective suggests that the standardized MBSR protocol is a specific Western operationalization that may displace or overlook indigenous and non-secular traditions. Consequently, the 'regional gap' identified in our findings reflects the global diffusion of a specific clinical product rather than a definitive lack of mindfulness-based well-being in non-Western universities.

These comparative findings suggest that while mindfulness has gained institutional legitimacy in some parts of the world, particularly in North America and parts of Europe, its implementation remains uneven and context-dependent. This underscores the need for higher education systems, especially in Asia, Africa, and Latin America, to move beyond fragmented, ad hoc wellness initiatives toward more structured, culturally responsive, and systemically supported models of mindfulness integration.

Universities must consider mindfulness not as an isolated intervention but as a foundational element of compassionate pedagogy and institutional well-being strategy, requiring alignment with broader educational values, mental health policies, and equity frameworks (Colla et al., 2023; Crane et al., 2024).

Theoretical Contributions

Beyond its descriptive findings, this study offers several theoretical contributions to the scholarship on mindfulness and higher education well-being. The first contribution is the introduction of the Global MBSR Institutionalization Matrix (GMIM), a conceptual framework that systematically maps the relationship between program fidelity, the degree to which institutions adhere to the standardized eight-week MBSR model, and institutional embedding, which captures how deeply mindfulness is integrated into the university's culture, policies, and strategic priorities. This model extends the arguments of Hecht and Crane (2025) on balancing fidelity and contextual adaptation in mindfulness implementation and provides a structured analytical response to the tension between global standardization and local responsiveness previously noted by Santorelli et al. (2017) and Deshpande et al. (2023).

While the GMIM identifies a spectrum of institutionalization, this study intentionally focused on Type III (Strategic/Systemic) implementation. This methodological choice was made to establish a high-fidelity benchmark, ensuring that our comparative analysis captures formal, evidence-based commitments to MBSR rather than transient or ad-hoc wellness activities.

Building on this, the study advances a second theoretical insight through the F^3 Logic (Fidelity, Fit, Funding), a triadic mechanism explaining the transition from sporadic and short-term mindfulness offerings to sustainable institutionalization. Fidelity represents adherence to the program's core curriculum (weekly sessions, day-long retreat, home practice, and certified instruction); Fit denotes the cultural and structural adaptability to local contexts; and Funding emphasizes the infrastructural and financial continuity required for sustainability. This logic resonates with Crane et al. (2023), who emphasized the interplay between teacher competence, program resources, and long-term viability, thereby illustrating that institutionalization depends on the balanced presence of all three elements.

A third contribution lies. examining MBSR as a specific, highly structured model of mental health intervention. Whereas prior studies (e.g., Shapiro et al., 2006; Colla et al., 2023) have predominantly treated mindfulness as an individual-level intervention, this study elevates it to an organizational dimension of university responsibility. From this perspective, the presence, or absence, of a standardized, ongoing MBSR program can serve as one but not the only, empirical benchmark for assessing universities' ethical and cultural accountability in fostering compassionate learning environments. This reframing aligns with the pedagogical ethos of Waddington and Bonaparte (2024), who conceptualize compassion and mindfulness as central to humanizing academic institutions.

Finally, the comparative documentary approach employed here establishes a replicable methodological protocol for global monitoring of educational well-being initiatives. By combining cross-continental sampling with systematic document analysis, the study provides a foundation for both scholarly

replication and policy benchmarking. Consequently, the GMIM and F³ frameworks not only elucidate current disparities but also offer a roadmap for scaling MBSR integration, particularly in resource-limited contexts, by guiding universities through a gradual progression from ad hoc mindfulness initiatives to evidence-based institutional well-being systems.

A limitation of this study is its specific focus on MBSR as one particular type of wellness program within higher education. As a resource-intensive and highly structured intervention rooted in a Western context, MBSR cannot serve as a universal or definitive metric for evaluating institutional wellness initiatives. Therefore, the absence of MBSR at a given institution does not indicate a lack of support for student mental well-being. Rather, institutions may utilize alternative, culturally relevant, or more cost-effective indigenous models that better align with their local contexts and specific student populations.

Moreover, this study is limited by its reliance primarily on publicly available information from university websites, which may not fully capture the scope or internal delivery of mindfulness programs. While efforts were made to contact university well-being centers and relevant administrative offices, the lack of responses, particularly from institutions in Asia, Australia, Africa, and South America, restricted direct confirmation. Additionally, the complexity of website navigation, inconsistent terminology, and the absence of updated announcements may have led to underreporting; it is possible that some universities do offer structured mindfulness or MBSR programs that are not clearly advertised online.

Furthermore, the reliance on the Times Higher Education (THE) rankings for institutional selection introduces a geographical bias. By focusing on the top ten universities per continent, the sample is naturally clustered around a few countries that dominate global rankings (e.g., specific nations in Europe and Asia). Consequently, this study prioritizes the analysis of 'institutional leaders' and trendsetters over a broad national diversity, which may limit the generalizability of the findings to smaller or less resource-intensive institutions within those regions.

Conclusion

This study exposes significant global disparities in the institutionalization of Mindfulness-Based Stress Reduction (MBSR) as one dimension of institutional wellbeing support. Through the proposed Global MBSR Institutionalization Matrix (GMIM) and F³ Logic, mindfulness is reconceptualized as a structural pillar of educational well-being rather than a personal stress-management practice. Embedding standardized MBSR programs within universities thus represents a transformative pathway toward cultivating compassionate, inclusive, and resilient academic communities.

Declarations

Author Contribution

SAS organized study, collected and conducted data analysis, wrote the first draft of the paper. TGP edited the paper and offered consultation and suggestions throughout.

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Figures

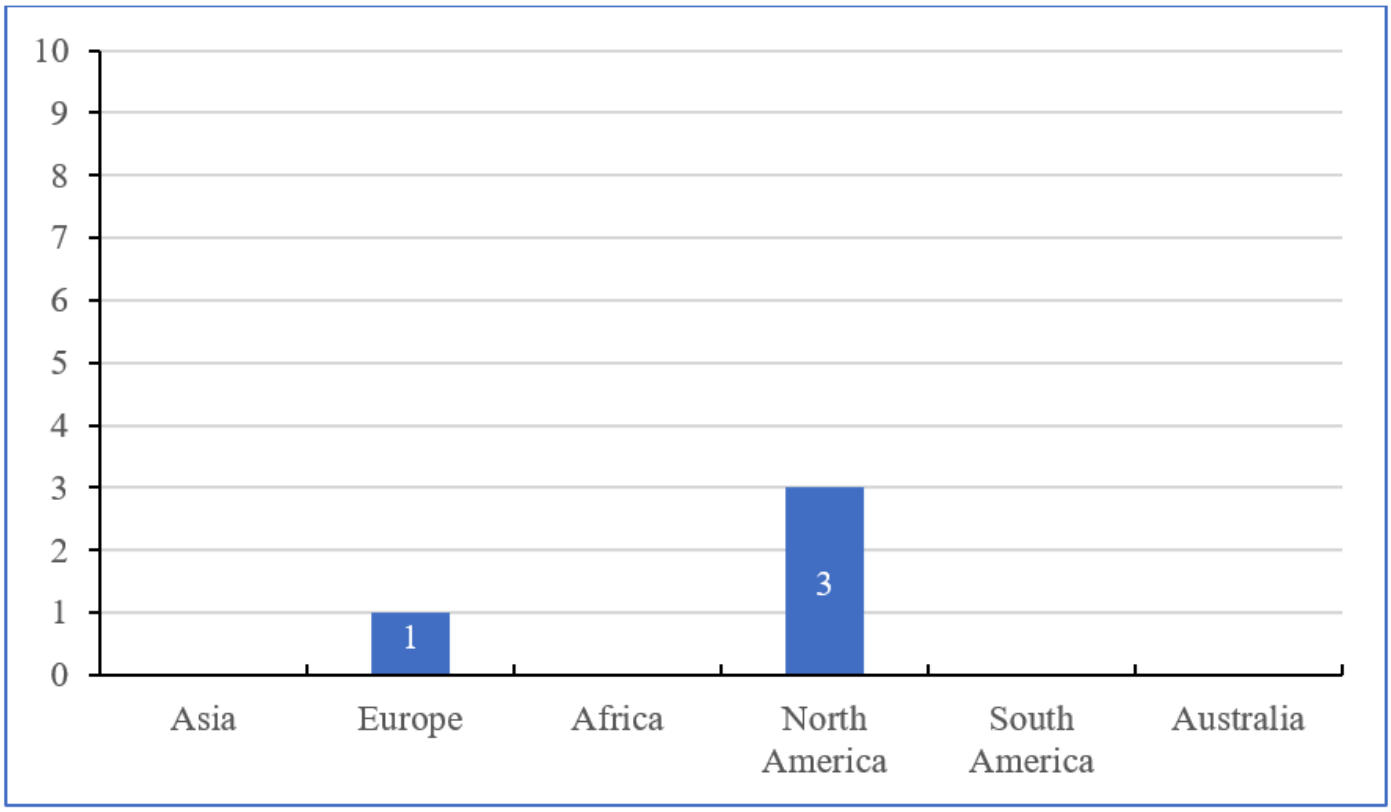


Figure 1

Number of top universities offering MBSR program across six continents.

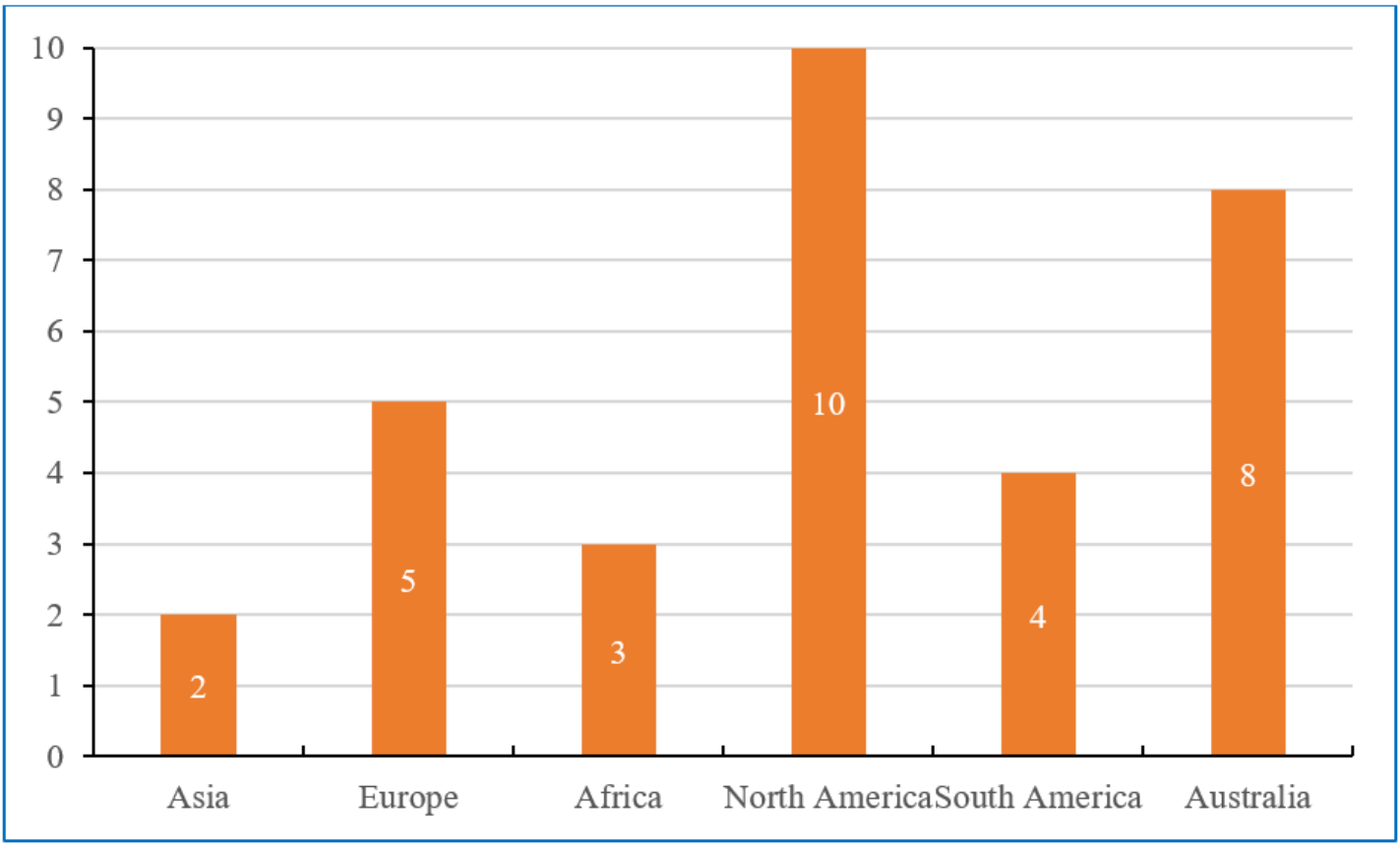


Figure 2

number of top universities offering alternative mindfulness classes by continent

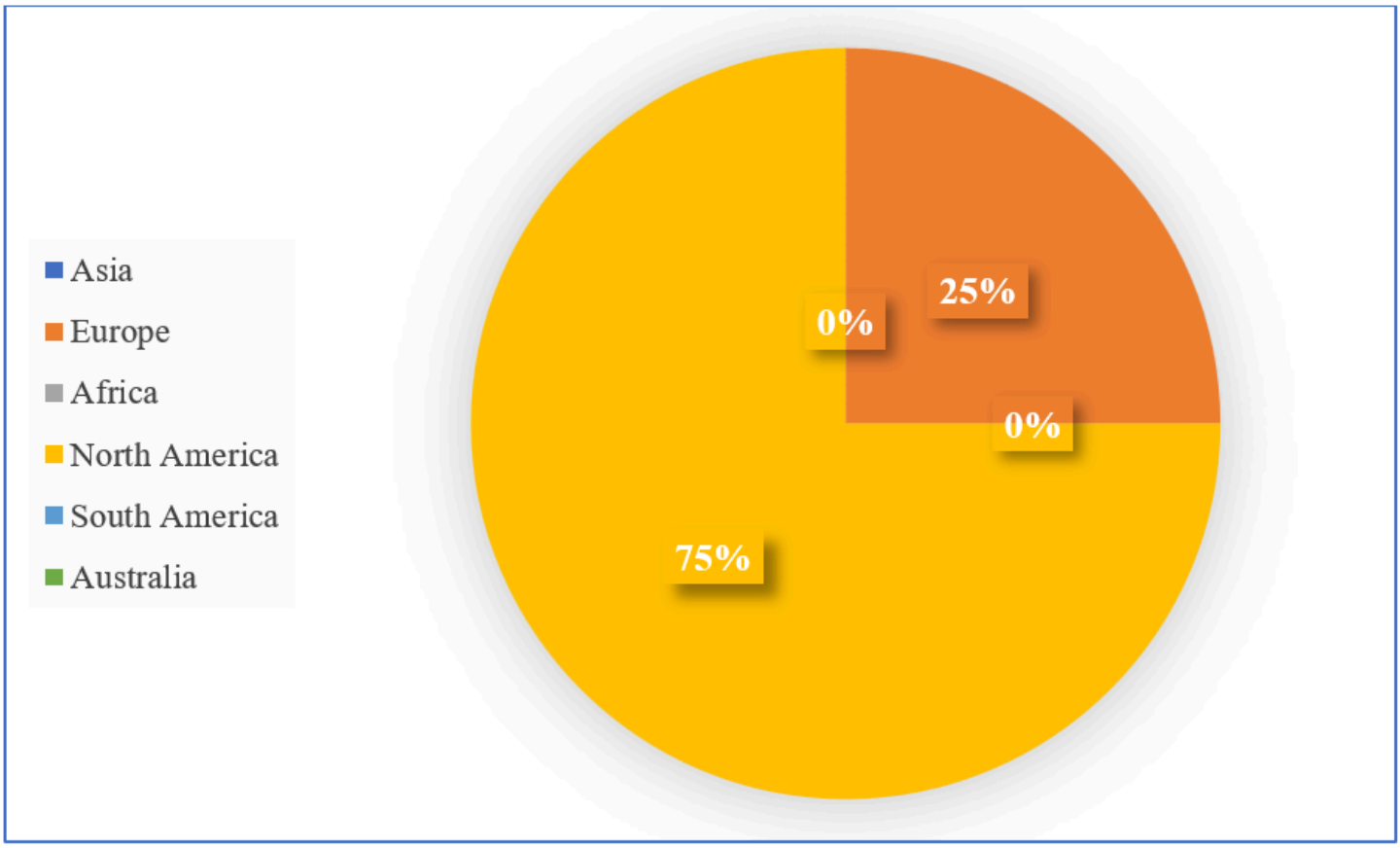


Figure 3

Distribution of MBSR programs across top universities by continent.

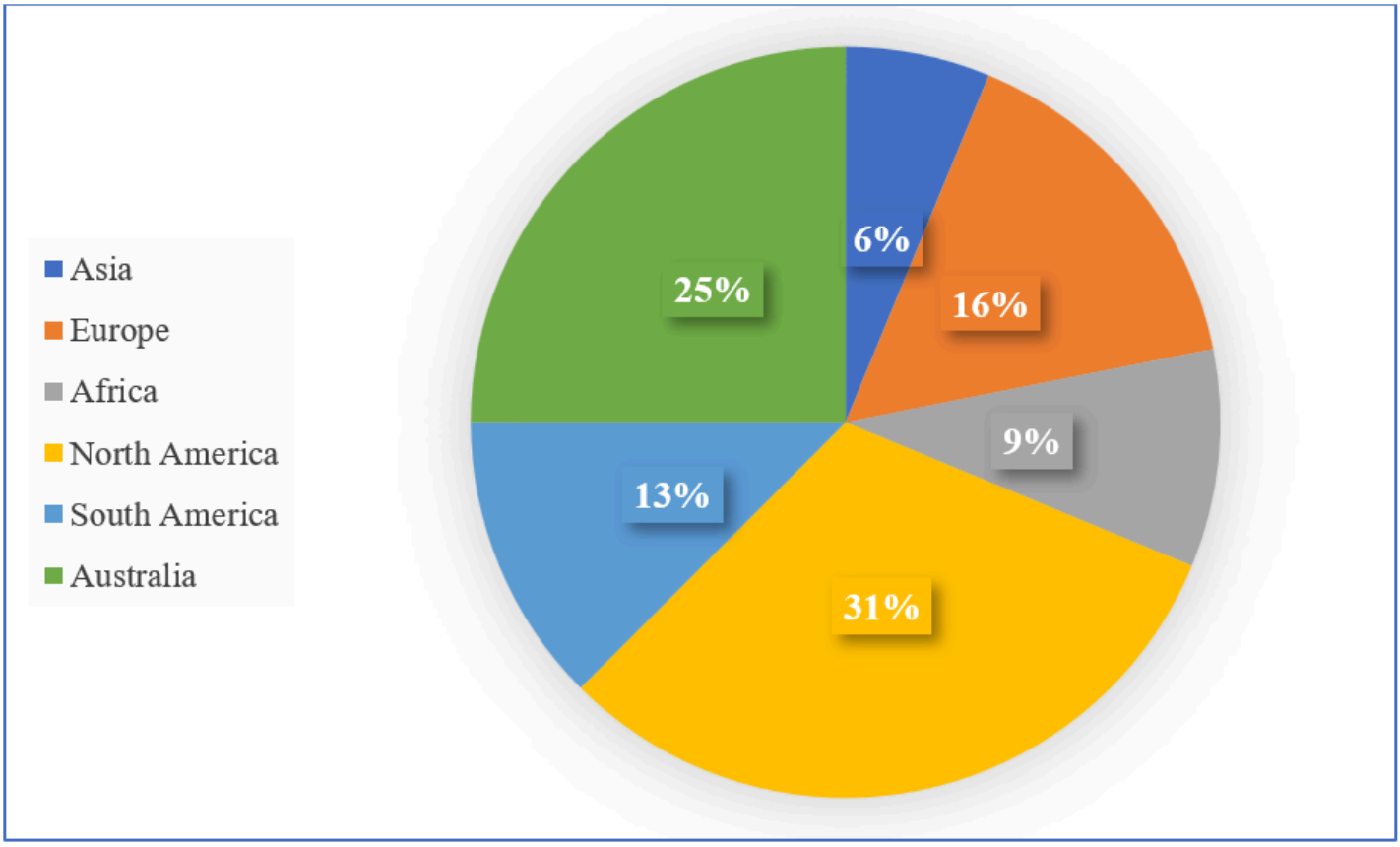


Figure 4

Distribution of alternative mindfulness programs among top universities by continent.

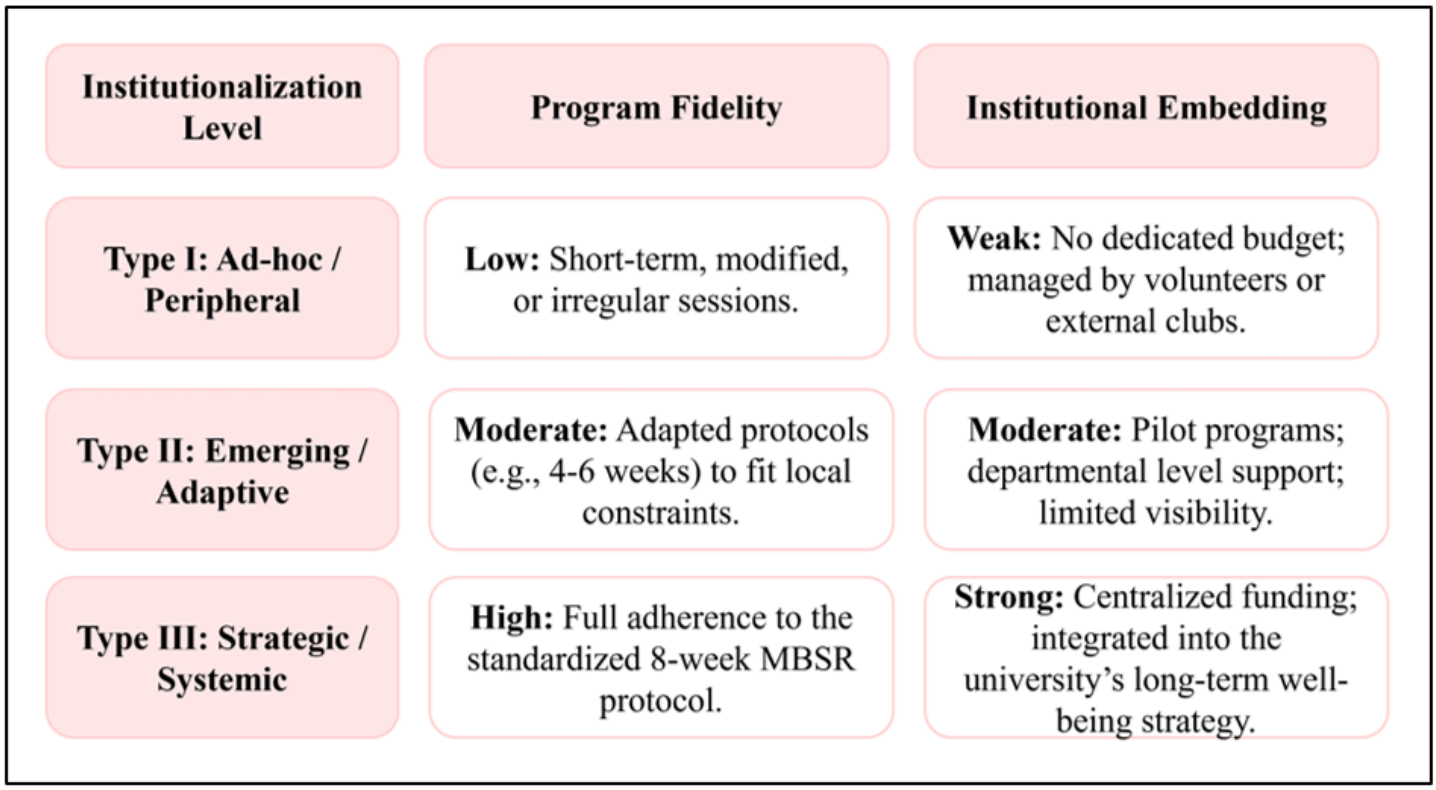


Figure 5

Figure 4. The Global MBSR Institutionalization Matrix (GMIM)