

# Building Nurse Well-Being Through Peer Support Circles



## AT A GLANCE

Oregon Health & Science University (OHSU) implemented Peer Learning Circles (PLCs) to shift wellness from individual “self-care” toward collective healing and belonging. Thirty-five nurses across inpatient, pediatric, and ambulatory units joined peer-led discussion groups to build morale and professional connection. Early participants showed statistically significant gains in morale, belonging, and perceived cohesion, while later cohorts maintained baseline resilience.

## CHALLENGES

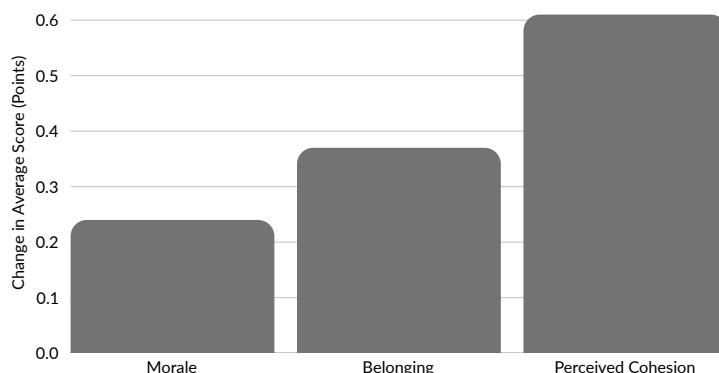
OHSU nurses identified burnout, moral distress, and isolation as key post-pandemic challenges. Traditional wellness programs relied on personal responsibility for resilience, neglecting relational and organizational causes of distress.

## SOLUTIONS

The PLC initiative trained nurses as peer facilitators to lead trauma-informed, narrative-based dialogue circles, fostering reflection and psychological safety. Data collection measured both participation processes and outcomes across four time points (baseline, post-intervention, 6-month, and 12-month).

## RESULTS

Average Score Increases After Peer Learning Circles  
Data from Well-Being Index and Perceived Cohesion Scale (2025)



## Key Outcomes

Peer Learning Circles strengthened team cohesion and professional identity. Early participants demonstrated clear dose-related gains, while later cohorts maintained stability despite organizational disruptions. Well-Being Index scores remained unchanged, indicating the intervention’s impact was concentrated in relational and professional domains.



**+ 1.00**

Point increase in overall cohesion per additional session (early cohort).



**+ 0.61**

Point increase in perceived cohesion associated with session attendance across all participants

## LESSONS LEARNED

Sustained participation required early recruitment and protected time for nurses to attend sessions without workload conflict. Organizational stressors such as layoffs and union negotiations disrupted continuity and group safety, underscoring the need for institutional stability when implementing peer-based interventions. The team found that meeting every two weeks, rather than monthly, helped maintain connection and emotional momentum among participants. Additionally, facilitator debriefing proved essential for preventing emotional fatigue and secondary trauma, supporting the well-being of those leading the circles.

Workplace Well-Being and Safety Infrastructure