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Editorial

Team Mindfulness for Healthcare Burnout Reduction

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Editorial

Earlier this year, an editorial by this author was published in the Journal of Mental Health Disorders [1] presenting the case for maintaining a focus on burnout in medical students. Burnout is defined as that point when work becomes unpleasant, unfulfilling, and meaningless—leading to exhaustion, cynicism and ineffectiveness [2]. Globally, burnout has been identified as highest in healthcare professionals [3] and is especially noted in medical students, who are found at an elevated risk for depression and suicide [4]. The previous editorial highlighted the role of parental pressure on medical students with perceived parental career expectations as the major factor in younger, non-Western-background medical student stress leading to their burnout [5]. What the editorial didn't discuss was the type of intervention that can be successful in reducing burnout in healthcare professionals generally—the role of team mindfulness.

Introducing Team Mindfulness

One component to reduce burnout in healthcare professionals is to encourage team mindfulness. A construct first developed in 2017, team mindfulness is recognized as "a shared belief among team members that their interactions are defined by a non-judgmental awareness and an attention in processing within-team experiences" [6] (p. 326). With respect to how a meeting environment is created and maintained, team mindfulness is found to enhance work-related personal fulfillment [7] and is evident when team members' experiences, objectives, tasks, roles, and structures are collectively and regularly acknowledged non-judgmentally by team members [8]. To date, there has been little research related to the value of team mindfulness in reducing burnout in healthcare professionals other than previous research by the author in this regard [9-12] and one other publication [13]. What is

identified as most important for team mindfulness in reducing burnout within groups is promoting trust among team members, as trust has been found to have positive effects in organizations on employee well-being and performance [14]. Trust promotes work engagement—a positive and fulfilling work-related state of mind characterized by vigor, dedication, and absorption in the task at hand [15]. Aspects necessary for reengagement by healthcare professionals who sustain burnout include the need for professional autonomy and a feeling of community based on trust with fair and equitable treatment among members [16].

An Effective Approach in Promoting Team Mindfulness

One specific series of in-person academic meetings intended to reduce burnout in healthcare professionals was able to develop team mindfulness and work engagement through creating this type of autonomy and trust among team members. The Health Narratives Research Group (HeNReG) provided academic group meetings for researchers who selfidentify as experiencing research burnout. It was designed to take each participant's story that initiated their health interest and evolve it into a narrative with a particular point of view with the help of weekly writing prompts and the questions posed by participants regarding responses to the writing prompts. The features of the group have been reported elsewhere [9]. When the HeNReG met in person, the group was able to display team mindfulness [11] based on personal autonomy supported, and trust developed, among group members by representing each of the necessary ingredients: receptive, open, and non-judgmental experiential processing and aware attention to present perceptions in relation to the function of the group [6]. However, when the group was required to move online during the COVID-19 pandemic one aspect of team mindfulness—active listening—was lost, reducing the

trust in the group as a whole. If high-quality relationships are developed between the individual members and the group leader, this has been identified to decrease the likelihood of group conflict, permitting the promotion of team mindfulness [7]. Yet, it has also been recognized that external threats and mixed messages result in a reduction of team mindfulness [17]. As the external threat of the pandemic was the reason for the HeNReG moving online, limitations imposed by COVID-19 may have been a cause of the decrease in team mindfulness when the group met online only.

Conclusion

Team mindfulness has been recognized as a distinct area for study only in the last six years. During that time, although there has been interest in team mindfulness in general [18-23], there has been very little research done with respect to how team mindfulness can positively affect burnout in healthcare professionals. It has been noted for the HeNReG to achieve the trust necessary to display team mindfulness, in-person meetings are imperative to support the required active listening among group members. Although other aspects of team mindfulness are retained in the online setting if the group facilitator develops high-quality relationships with the group members, active listening has not been seen to continue. COVID-19 limitations to meetings are now over. Consequently, those looking for a means to help reduce burnout in healthcare professions are advised to adapt the successful in-person method of the HeNReG for use with their healthcare team.

Conflicts of Interest

The author has no conflicts of interest to declare.

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