



UHASSELT

KNOWLEDGE IN ACTION

Faculty of Business Economics

Master of Management

Master's thesis

Mindfulness and burn-out

Tamar Orjonikidze

Thesis presented in fulfillment of the requirements for the degree of Master of Management, specialization Strategy and Innovation Management

SUPERVISOR :

dr. Frederike SCHOLZ



UHASSELT

KNOWLEDGE IN ACTION

www.uhasselt.be
Universiteit Hasselt
Campus Hasselt:
Martelarenlaan 42 | 3500 Hasselt
Campus Diepenbeek:
Agoralaan Gebouw D | 3590 Diepenbeek

2020

2021



Faculty of Business Economics

Master of Management

Master's thesis

Mindfulness and burn-out

Tamar Orjonikidze

Thesis presented in fulfillment of the requirements for the degree of Master of Management, specialization Strategy and Innovation Management

SUPERVISOR :

dr. Frederike SCHOLZ

This master thesis was written during the COVID-19 crisis in 2020-2021. This global health crisis has had an impact on the (writing) process, the research activities and the research results that are at the basis of this thesis. There was an impact on the determination of the research method and the data collection.

Acknowledgements

I would like to express deep appreciation and gratitude to my thesis supervisor Dr. Frederike Scholz. This research journey would not have been possible without her continuous support. Her patience, extremely valuable feedback and overall insights in my work have made this an interesting experience for me. I could not have imagined having a better advisor and mentor for my thesis.

I deeply thank my husband Irakli Tsertsvadze who has been by my side all the way in this study year, encouraging and motivating me constantly. Without his incredible understanding, support, and confidence, I could not have achieved this amazing accomplishment.

I would like to express my gratitude to my family for their trust and confidence in me. Their love motivated and strengthened me throughout this challenging year.

I thank the staff of the faculty of Business Economics at Hasselt University for their support and guidance to complete this thesis successfully.

Lastly, I thank everyone who have supported me to complete the research work directly or indirectly.

Table of Contents

Preface.....	1
Introduction.....	6
Literature review	8
Burnout.....	8
Causes of Burnout	9
Personal Causes.....	9
Organizational Causes	10
Societal Causes	11
The consequences of Burnout.....	12
Burnout Interventions	13
Person directed interventions.....	13
Organization-directed interventions.....	13
Combined interventions.....	14
Return to work after burnout.....	14
Mindfulness	15
Mindfulness at Workplace	16
The Relationship between Mindfulness and Burnout.....	17
Mindfulness and Return to Work after burnout	18
The purpose of the study	20
Methodology	22
Research design.....	22
Participants and data collection.....	23
Data Analysis	25
Ethics	25
Limitations	27

Results	28
The experiences of returning to work after burnout	28
Support mechanisms of workplaces addressing employees with burnout experience.....	29
The influence of mindfulness on employees with burnout experience.....	31
Conclusion	33
Recommendations.....	34
Bibliography.....	35
Appendices	42
Appendix A: Informed consent form of online survey	42
Appendix B: Online Survey Questionnaire	43
Appendix C: Call for participation for the ganizations.....	45
Appendix D: Call for participation - social media post	47

List of Tables & Figures

Table 1. List of Participants	24
Figure 1. Coding Tree.....	26

Preface

In the last decades, the world of work has changed dramatically due to globalization, digitalization and societal transformations, this resulted in a complex and intense work processes that require more flexibility and mobility from the employees (Mack, Khare, Krämer, & Burgartz, 2015). This changes in the world of work led to the increased work-related stress which affects mental ill health of the employees, resulting in an increased number of sick leaves (Parent-Thirion, Fernández-Macías, Hurley, & Vermeylen, 2007). These sick leaves are often linked to chronic work stress and exhaustion, which is similar to the core dimension of burnout in various definitions.

Given the high prevalence of burnout in Belgium since the number of Belgians that have been incapacitated for work for more than a year due to a burnout or depression has increased by 40 percent in 4 years (RIZIV,2021), the present study focused on the employees with burnout history in Belgium. This study investigated their experiences of returning to work after burnout to examine how mindfulness practices can support them during the reintegration period. The aim of this study was to explain how employees in Belgium experience returning to work after sick leave due to burnout and how mindfulness practices can support them by conducting a qualitative study and giving voice to the employees with burnout experience.

The current study found that the recovery from burnout is a complex and a long-term process that continuous after returning back to work. Moreover, it has been demonstrated that the employees with burnout do not receive the appropriate support from their workplaces throughout the recovery. This study suggests mindfulness practices as the organizational support mechanism for the employees that return to work after burnout since it has been found to have a positive influence on the employees by helping them regulate stress and improve their overall wellbeing.

Introduction

Globalization, digitization, and societal transformations have dramatically changed the world of work in the last decades, which has led to a more complex and intense work processes that require more flexibility and mobility from the employees (Mack, Khare, Krämer, & Burgartz, 2015). Increased workloads, longer work hours, and work-family conflict tend to be factors that create remarkable pressure for employees and can significantly reduce their work productivity and commitment to an organization (Perrone, Ægisdóttir, Webb, & Blalock, 2006). Work-related stress has been identified as a major source of health problems and sickness absences in the European Union countries, as more than 40 million individuals across the European Union countries reported work-related stress as a cause of work-related illness (Parent-Thirion, Fernández-Macías, Hurley, & Vermeylen, 2007).

The changes in the world of work led to the increased work-related stress, consequently, this has caused a problem of a mental ill health of employees, which results in an increased number of sick leaves. Sick leaves due to mental ill health are the major problem that affects not only the individual but also the workplace and society as a whole (Rajgopal, 2010).

For the individual, sick leave can be the beginning of job dismissal, and even permanent exclusion from the labor market. For workplaces, sick leave denotes loss of manpower, payments for temporary workers, and increased job turnover. For society, sick leaves mean payments to sickness benefits and decreased productivity (Borritz, Rugulies, Christensen, Villadsen, & Kristensen, 2006). These sick leaves are frequently linked to long-term work stress and exhaustion, which is similar to the core dimension of burnout in various definitions.

In Belgium, stress and burnout are responsible for one-third of all sickness absences from work in the country. Furthermore, the rise of mental health conditions (including burnout and depression) to a large extent explains the increase in the number of people that permanently leave work due to health conditions (European Trade Union Institute, 2019). Moreover, according to the latest figures by RIZIV (2021), the number of Belgians that have been incapacitated for work for more than a year due to a burnout or depression has increased in 2020 by 40% compared to the numbers of 2016.

Burnout is a persistent state of ill-being which is related to the job and is characterized by three dimensions: exhaustion, cynicism, and reduced professional efficacy (Leiter, Bakker, & Maslach, 2014). Burnout is strongly related to workload and time pressure, role conflict and role ambiguity, lack of feedback, lack of social support, lack of autonomy and lack of participation in decision-making (Maslach, Schaufeli & Leiter, 2001). Burnout results from long-term stress related to an inappropriately managed work environment (WHO, 2019) and has adverse effects on the health and work-related outcomes of employees.

As burnout is a critical issue in the modern business environment, number of organizational practices have been developed to address this growing work wellbeing risk and to mitigate its adverse consequences (Newton, Ohrt, Guest, & Wymer, 2020). Among them, mindfulness is recognized as one of the organizational practices for enhancing the well-being of employees. Mindfulness at the organization is expected to promote not only individual well-being but also organizational productivity, agility, and innovative strength (Greiser & Martini, 2018). Mindfulness encompasses a wide range of traits, practices, and processes that all emphasize the ability to be present in the moment through nonjudgmental attention and awareness (Kabat-Zinn,1994).

In recent years, interest in mindfulness among organizational scholars and practitioners has grown rapidly (e.g. Dane, 2011; Glomb, Duffy, Bono, & Yang, 2011; Reb, Narayanan, & Chaturvedi, 2012; Allen et al, 2015; Lomas et al, 2017; Eby et al, 2019; Vonderlin, Biermann, Bohus, & Lyssenko, 2020). Number of papers have argued the positive impact of Mindfulness on reducing stress and preventing burnout. But the influence of Mindfulness practices on the employees that return to work after sick leave due to Burnout has not been properly examined so far. This thesis aims to address this gap by investigating the experiences of the employees with burnout history in Belgium and understanding how mindfulness practices can support them to return to work after sick leave due to burnout.

The following chapter introduces the review of the literature to provide the reader with an overview of relevant studies on burnout and mindfulness.

Literature review

This chapter provides an overview of previous research on burnout and mindfulness. The following sections describe the definition, causes and impact of burnout, followed by the intervention strategies to alleviate burnout and the description of the process of returning to work after burnout. The definition and benefits of mindfulness at workplace are provided, followed by a review of research on the relationship between mindfulness and burnout including the impact of mindfulness on return to work after sick leave due to burnout. Finally, the research questions and the purpose of the study are explained.

Burnout

Burnout is a mental health condition that is caused by chronic interpersonal stressors at work (Maslach & Leiter, 2016).

According to the report published by Eurofound (2018), the classification of burnout differs in various European countries. Some define burnout as a disease, while others classify it as a syndrome.

The most widely used definition by Maslach, Jackson and Leiter (1996) has been acknowledged recently by the World Health Organization (2019) that included burnout as an occupational condition in ICD-11. According to this definition, burnout is a persistent, job-related state of ill-being which is caused by a chronic stress at the job (Leiter, Bakker, & Maslach, 2014; Näätänen, Aro, Matthiesen, & Salmela-Aro, 2003).

Burnout is characterized by three dimensions: exhaustion, cynicism, and reduced professional efficacy. Exhaustion is a state of physical and emotional fatigue that occurs when one's own demands or the ones of the environment constantly surmount the resources that is available to the individual. Cynicism is defined as questioning the value of one's work and separating oneself from it. Tasks are frequently accomplished mechanically, and the individual is not motivated to improve. Cynicism is frequently replaced with depersonalization in human service professions, which refers to psychological detachment from social interactions and difficulty expressing genuine interest towards others at work (Maslach & Jackson, 1981; Kinnunen et al, 2020). Reduced professional efficacy refers to experiencing one's capabilities as inadequate for satisfactory performance at work. The person is prone to have a negative self-perception and a persistent sense of inadequacy at work. Despite the fact that burnout is commonly thought to be three-dimensional, some researchers argue that it should be one-dimensional, since considerable number of researchers agreed that exhaustion is the main causal factor in the development of burnout (Kristensen, Borritz, Villadsen, & Christensen, 2005; Lee & Ashforth, 1996).

Burnout is seen as a consequence of the perceived disparity between the demands of the job and the material and emotional resources that are available to the employee. When demands in the organization are especially high, it becomes impossible to manage the stress that is associated with these working conditions (Beheshtifar & Omidvar, 2013).

Burnout influences not only individuals but also organizations, because it increases sick leaves (Borritz et al, 2006), turnover intentions (Alarcon, 2011) and actual turnover (Young, 2015), and reduces job performance (Taris, 2006).

A recent Gallup (2019) study of almost 12,700 full-time employees worldwide showed that 28% of respondents reported feeling burned out at work regularly or forever. Furthermore, an extra 48% reported that they were feeling burned out typically. The data of this study suggest that most full-time employees — nearly eight in ten — experience burnout at work. These findings demonstrate that burnout is a common problem of modern workforce worldwide.

Given the high prevalence and negative consequences of burnout, researchers have focused their efforts on identifying the sources of burnout, hence the causes of burnout have been indicated in numerous studies over the years (Ghorpade, Lackritz, & Singh, 2007).

Causes of Burnout

Within the debates around burnout, researchers have identified different causes of burnout. Firstly, the vulnerability to burnout may emerge from personal factors. Secondly, factors that are specific to certain organizations can play significant role in the emergence burnout among employees. And thirdly, societal factors such as social, cultural and economic forces that shape the modern organizational context are also of high importance in the development of burnout.

Personal Causes

Several studies suggest that burnout is related to the characteristics that are specific to certain individuals (Lee & Ashforth, 1996). The dimensions of the five-factor model of personality have been found to be associated with burnout (Swider & Zimmerman, 2010). This model describes principal aspects of individual's personality according to the traits of neuroticism, extraversion, openness, agreeableness and conscientiousness. A study by Ahola (2012) found that workers with higher scores in neuroticism and lower scores in conscientiousness, extraversion and agreeableness, have been reported to be more vulnerable to burnout. Langelaan, Bakker, Van Doornen, and Schaufeli (2006) suggest that the positive link between neuroticism and burnout can be explained by the fact that neuroticism may reflect a tendency towards aggravated reactions to stressful situations. For example, employees with high levels of neuroticism perceive work environment as significantly more

threatening, which leads to low performances and an increased vulnerability to the development of burnout. Moreover, according to Vlăduț and Kallay (2010), the positive association between neuroticism and burnout is due to neuroticism's ability to escalate the impact of job-demands on burnout (individuals with high levels of neuroticism feel more exhausted due to daily hassles). Additionally, burnout has been linked to alexithymia and a lack of sense of coherence (Kalimo, Pahkin, Mutanen & Toppinen-Tanner, 2003; Mattila et al, 2007).

Age is another individual characteristic that is strongly associated with burnout (Maslach et al, 2001; Schaufeli & Buunk, 2002). Burnout symptoms appear to decrease in frequency and severity with age, with young employees being more predisposed to burnout than those over the age of 35 (Schaufeli & Enzmann, 1998; Maslach, 2006).

Gender differences are not a strong predictor of burnout, according to Maslach (2006), although there are distinct dimensional differences in burnout between male and female employees. Male employees, for example, report higher degrees of burnout on the dimension of cynicism, while female employees report higher levels of emotional exhaustion, according to Ahola (2007). These findings could be linked to gender stereotypes, but they could also reflect a mix-up of gender and occupational profile type (e.g., in common sense nurses are supposed to be female, firefighters or police officers - male).

Burnout may also be influenced by the marital status, as single employees are more prone to burnout than those who live in couple, are married, or even divorced (Mo, 1991; Maslach, 2006).

Besides the personal characteristics, the factors specific to certain organizations also play an important role in developing burnout among employees.

Organizational Causes

Number of researchers have focused on various organizational causes of burnout.

In their analysis and review of the research about burnout, Maslach et al (2001) found that work overload, role ambiguity and conflict, lack of appropriate reward and job resources were strongly connected to burnout. Specifically, burnout arises when work demands exceed the amount of time available to meet these demands and the energy levels surpass the rate of energy recovery (work overload), when there is a lack of information to execute the job properly (role ambiguity), and when there are conflicting job demands that must to be completed (role conflict). Therefore, employees who have high work overload, role ambiguity, and role conflict are more prone to burnout than those with less conflicting work demands and enough information to properly perform their jobs (Bakker & Demerouti, 2007).

Moreover, a lack of appropriate reward and recognition for the work that employees do increases their vulnerability to burnout. Insufficient financial, institutional or social reward and recognition devalues both the work and the employees, and is strongly linked with feelings of inefficacy (Maslach & Leiter, 2016).

Additionally, a study by Bakker & Demerouti (2007) concluded that burnout is less likely to develop when there are less job demands and more job resources such as employee autonomy, positive feedback, external rewards, sense of community and positive work culture.

In their meta-analysis of burnout, Lee, Lim, Yang, and Lee (2011) investigated the five predictors of burnout among psychotherapists. The five predictors were job stress (e.g., feeling overwhelmed by job-related tasks), over-involvement (e.g., working for the client for too long), self-control (e.g., autonomy), job support (e.g., receiving constructive feedback from supervisors or colleagues), and professional identity (e.g., classifying oneself according to occupation-related beliefs, experiences, and values). Four of the predictors (job stress, over-involvement, self-control, and professional identity) have shown to be significantly related with the three dimensions of burnout (emotional exhaustion, depersonalization, and reduced personal accomplishment). In particular, job stress and over-involvement were most positively related to emotional exhaustion. Self-control and professional identity, on the other hand, were found to have the strongest negative relationship with reduced personal achievement and depersonalization. This means that higher stress levels and acts of over-extending oneself are linked to the risk of emotional exhaustion. Higher levels of autonomy and professional identity are linked to a less negative, dehumanizing attitude toward others and lessened sense of reduced personal accomplishment.

Although research has evinced that there are significant organizational factors that may predict the development of burnout, it is also important to mention societal causes, since these are the causes that form the modern organizational context.

Societal Causes

The culture of capitalism is characterised by changing demands, systemic disloyalty, aversions towards specialisation, unilateral resolutions, transactional relationships and expedient decisions (Moss & Couchman, 2012).

Modern capitalism, that is often referred to as 'neoliberalism', has created a world in which everything is about competition and productivity, and as a result, corporations are demanding more out of their employees creating high stress situations (Illing, 2019). Consequently, stressful workplaces lead to the increased chances of the emergence of burnout among employees.

Hence, the global prevalence of burnout is driven by the general dynamics of the labor market which is characterized by a constant increase in the quantitative and qualitative job demands, a pressure to complete the tasks quickly, and an increasing job uncertainty and insecurity. This context causes the raising cognitive, emotional, social, and digital work overload in countless professions, the widespread intensification and acceleration of working time and the decrease in the time devoted to rest, the difficulty of maintaining work-life balance. This collection of transformations creates fertile ground for a constant work-related stress, which is considered as the major risk factor of burnout (Blanch, Ochoa, & Caballero, 2018).

Hence, burnout is a complex phenomenon which is caused by number of different factors. In order to understand this complex phenomenon better, it is of high importance to describe the adverse outcomes that burnout entails.

The consequences of Burnout

The importance of burnout, both for the individual and the workplace, is highlighted by its significant outcomes.

Burnout is associated with different forms of withdrawal, such as turnover, absenteeism and intention to leave the job. Although, on the other hand, for people that stay on the job, burnout can lead to a decreased effectiveness and productivity at the job. Consequently, it is associated with reduced job satisfaction and a decreased commitment to the workplace. Moreover, burned-out employees have a negative impact on their colleagues, since they cause personal conflict and disrupt job tasks (Maslach et al, 2001).

Initially, the three dimensions of burnout (exhaustion, cynicism, professional inefficacy) were studied primarily among employees only within the healthcare industry, however, accumulating evidence has suggested that burnout can be generalized to employees in other occupations (Demerouti, Bakker, Nachreiner, & Schaufeli, 2001), and therefore, the concept of burnout is now applied to the general working population regardless of occupation (Park & Nam, 2019).

Burnout is detrimental to the individual because it negatively affects mental wellbeing, and can even lead to depression (Brown & Ryan, 2003). Moreover, insomnia, worry and the feeling of helplessness can also accompany burnout (Quick, Quick, Nelson, & Hurrell, 1997; Lee & Ashforth, 1990).

The significance of burnout is extremely well illustrated by its association with various organizational and personal problems. Burnout symptoms are classified on a scale from A to Z (from anxiety to lack of zeal) within the burnout literature, which includes affective, cognitive, behavioral, and motivational symptoms (Schaufeli & Enzmann, 1998). Therefore, the development of effective treatment programs to address this growing work wellbeing risk and to mitigate its adverse effects is crucial.

Burnout Interventions

The applied nature of burnout research has raised calls for effective intervention across the research literature. Diverse intervention strategies have been proposed, with some focusing on treating burnout after it has occurred, whereas others focus on the prevention of burnout (Boštjančič & Koracin 2014).

Current paper focuses on returning to work after burnout, therefore, we only focus on organizational intervention programs for alleviating burnout. These interventions can be classified into person-directed, organization-directed, or the combination of the both types (person-directed & organization-directed) interventions (Awa, Plaumann, & Walter, 2010).

Person directed interventions

Person-directed approaches include counseling, mindfulness and meditation programs, psychotherapy, cognitive behavioral therapy interventions, training on coping and psychosocial skills, communication skills training, peer support groups, relaxation techniques, stress management workshops, physical activity, and music-making (Kinnunen et al, 2020; Lee, 2015).

Although Maslach et al. (2001) concluded that interventions aimed at improving individual coping mechanisms for dealing with burnout are relatively not effective at work, a later review of the literature by Awa, Plaumann, and Walter (2010) contradicted the conclusions of Maslach et al (2001). According to Awa et al. (2010), more than 80% of the reviewed person-directed interventions have resulted in a significant burnout reduction. Their conclusions indicated that person directed interventions generated a considerable decrease of burnout.

Organization-directed interventions

Organization-directed interventions aim to target the working environment, which can range from simple changes in schedule and reductions in the intensity of workload to more ambitious organizational reforms (Awa et al, 2010).

Organization-directed interventions typically imply changes in work evaluation, job redesign, clarification of role expectations, modifying job demands and enhancing job control, increasing the level of participation in decision making, ensuring a better fit of the employee with the work environment, improving working conditions, the training of managers, performance-based incentives, cultivating interpersonal relations with colleagues and clients and creating a supportive corporate culture (Awa et al, 2010, Yib & Rowlinson, 2009).

Maslach et al (2001) propose that in order to achieve significant decrease of burnout, person-directed interventions should be accompanied by organizational change.

Combined interventions

Research suggests that combining person-directed and organization-directed interventions can significantly reduce burnout (Awa et al, 2010). As burnout is developed through a complex interplay between factors within employees and factors within the organizational context. Hence, interventions should target both employees and their working contexts, in order to decrease burnout complaints and promote full return to work (Maslach & Goldberg, 1998).

Maslach et al (2001) suggest that intervention programs should focus on ways to promote engagement rather than solely on alleviating burnout because engagement is more closely connected with the idea of improving the quality of work–life of a person. In this view, promoting congruence between people and their jobs entails providing resources that go beyond filling existing gaps or providing monetary or material assistance. Instead, organizations could provide instruments that encourage intrinsic motivation, which would result in improved professional involvement, enthusiasm, and significance.

Return to work after burnout

Return to work (RTW) refers to the resumption of work tasks or work hours after a period of sick leave (Hees, Nieuwenhuijsen, Koeter, Bültmann, & Schene, 2012). RTW is a multifactorial, multifaceted process, that is driven by a variety of elements that involve individual, social, economic, and work-related issues (Labriola, Lund, Christensen & Kristensen, 2006).

It is important to emphasize that returning to work after sickness absence does not necessarily imply that someone has fully recovered from their health concerns (De Rijk et al, 2009). Young et al (2005) offers two explanations for this process. On the one hand, returning to work can be considered an outcome, e.g., de facto starting to work again; however, it can also refer to a process, which starts with the initials steps of functional recovery and results in complete vocational capacity (Young et al, 2005).

To date, only few studies have focused specifically on identifying factors related to the process of returning to work after sick leave due to burnout (Ahola, Toppinen-Tanner, & Seppänen, 2017).

A study by Boštjančič & Koracin 2014 focuses on the factors associated with return to work after sick leave due to burnout. A qualitative research among 27 individuals of various professions in Slovenia examined changes in their personal values, as well as challenges and support factors that they experienced when they returned back to work.

The findings of this study showed that burned-out individuals only gradually return to work after recovery. Moreover, when they return back to work, they encounter changes in work values, work effectiveness and personality. The identified obstacles of returning to work concerned changes in their self-image and occurrence of negative feelings and prejudices in themselves and others. Furthermore,

the work effectiveness of burned-out individuals have decreased after experiencing burnout and increased only slowly during the recovery process.

Hence, this study demonstrated that rehabilitation from burnout is a complex process that can be characterized by various obstacles, so it is crucial to support burned-out employees by effective organizational strategies to facilitate the process of return to work.

Mindfulness

Among the intervention strategies to address burnout in organizations Mindfulness practices are gaining increasing attention. Mindfulness is a person-directed intervention and is widely used by the organizations both for preventing and treating burnout (Kinnunen et al, 2018).

Reduced stress-related pressures, enhanced engagement, and performance are among the reasons that make mindfulness of particular interest and potential value within an organizational environment, according to a review conducted by Allen et al. (2015). Given the significant costs associated with employee stress, the benefits of mindfulness as a stress-reduction technique are extremely important for the organizations (Anger et al, 2015).

Mindfulness is linked to the improved mental health and wellbeing (Powell, 2018). It is an ancient concept, since the roots of mindfulness lie in various lines of Buddhist thought dating back over two millennia (Brown, Ryan, & Creswell, 2007). Mindfulness has been defined by Kabat-Zinn (1994) as non-judgmental, purposeful attention to the present moment and has been praised as a "revolution" in well-being practices (Boyce, 2011).

The essence of mindfulness is described by the ability to pay attention to both internal (e.g., bodily sensations, cognitions) and external (e.g., social interactions, environmental surroundings) stimuli, doing so in a way that does not evoke judgment or evaluation (Glomb et al, 2011).

Mindfulness can be contrasted with mindlessness. Being mindless refers to not paying attention to or being aware of the actions one is doing or the internal states and processes (e.g., emotions) one is going through. Mindlessness manifests itself in a variety of ways, including daydreaming, autopiloting activities, worrying about the future, and ruminating about the past (Brown & Ryan, 2003).

The Five Facet Mindfulness Questionnaire (FFMQ) is an applicable instrument for studying mindfulness practices in empirical research (Baer et al, 2006). FFMQ assesses five mindfulness facets: describing, observing, acting with awareness, non-judging, and non-reacting. Describing is explained as the ability to verbally describe observed stimuli; observing is the ability to notice internal and external stimuli such as thoughts, sensations, and feelings; acting with awareness refers to acting consciously, rather than mechanically; non-judging is the ability to avoid evaluating one's feelings, sensations and

thoughts; and non-reactivity refers to the ability to let thoughts and feelings flow in and out without attaching and/or reacting impulsively to them (Kinnunen et al, 2020).

The proposed advantages of Mindfulness practices extend beyond personal well-being to crucial elements of organizational functioning (Hülshager, Alberts, Feinholdt, & Lang, 2013).

Mindfulness at Workplace

Building on enthusiastic reports from pioneering firms since the late 1980s, mindfulness practices for the employees gained popularity when a number of large companies—the most prominent being Google, General Mills, Intel, and Target—launched them in the 2000s (Gelles, 2015). Meanwhile, the industry of offering mindfulness and/or meditation-related services has grown into a multibillion-dollar industry (Wolever et al, 2012).

In recent years, organizational scholars started to examine the role of mindfulness practices at the workplace (e.g. Dane, 2011; Glomb, Duffy, Bono, & Yang, 2011; Weick & Sutcliffe 2006; Reb, Narayanan & Chaturvedi 2014; Allen et al, 2015; Lomas et al, 2017; Eby et al, 2019; Vonderlin et al, 2020). These scholars focused on organizational benefits of mindfulness, namely mindfulness allows organizations to perform more reliably (Weick & Sutcliffe 2006) and to perform better even in high-velocity environments (Dane, 2011). Furthermore, it has been suggested that being mindful helps employees in self-regulating their behavior to achieve better social relationships, enhanced well-being, and higher task performance (Glomb et al, 2011).

Another benefit of Mindfulness practices for organizations have been suggested by Reb, Narayanan and Chaturvedi (2014), their research examined the role of employee mindfulness for turnover intentions and task performance. According to the findings of this study, more mindful employees expressed lower turnover intentions and better task performance. These relationships were mediated by a specific burnout dimension - emotional exhaustion.

The integrative framework proposed by Good et al 2016 on the impact of Mindfulness on human functioning relates Mindfulness to workplace outcomes. According to this framework, Mindfulness affects human functioning principally through attention which then alters other domains of basic functioning including emotion, cognition, behavior and physiology. These effects on functional domains are suggested to influence a variety of workplace outcomes such as performance, relationships, and well-being.

Mindfulness interventions have been applied in various occupational sectors and industries. The growing number of systematic reviews analyzing mindfulness practices across different occupational groups are consistent in identifying health and well-being (e.g., perceived stress, anxiety, burnout) as the most commonly studied outcome category of mindfulness practices in the workplace (Donaldson-

Feilder, Lewis & Yarker, 2019; Boellinghaus, Jones, & Hutton, 2014; Irving, Dobkin, & Park, 2009; Burton, Burgess, Koutsopoulou, & Hugh-Jones 2016. Vonderlin et al, 2020; Eby et al, 2019; Janssen, Heerkens, Kuijer, Heijden, & Engels, 2018; Lomas et al, 2017).

Furthermore, these reviews have revealed that specific occupational characteristics and demands of professional groups must be recognized. Because of their high interpersonal demands and physical stress, health care professionals appear to be a reasonable target group for mindfulness activities (Burton et al, 2016). At the same time, this target group may be predisposed to cultivate mindfulness skills (Irving et al, 2009). On the contrary, in the case of "tough, male" jobs like police officers or firefighters, a less favorable climate for mindfulness activities may prevail, because of the social norms, attitudes, and expectations that may reduce impact and acceptance rate of mindfulness practices (Krick & Felfe 2020).

According to the current research, the mindfulness of leaders, organizational culture, and other setting variables not only affect the collective mindfulness inside organizations (Sutcliffe, Vogus, & Dane, 2016), but are also connected to the individual outcomes of mindfulness practices (Sutcliffe, Vogus, & Dane, 2016). (Reb et al, 2012). These factors may also impact how individuals perceive and accept individually oriented mindfulness practices within the occupational health strategies (Vonderlin et al, 2020).

Over the years, researchers have linked mindfulness with burnout, the following section reviews the relationships found between mindfulness and burnout.

The Relationship between Mindfulness and Burnout

Number of studies have assessed the application of mindfulness as a mitigation solution for job burnout.

To date, the majority of studies have focused on the application of mindfulness for addressing job burnout in healthcare industry. Various studies have found that participating in mindfulness practices reduces burnout among health care providers, including physicians, nurses and psychologists (Fortney, Luchterhand, Zakletskaia, Zgierska, & Rakel, 2013; Goodman & Schorling 2012).

Roeser et al (2013) investigated the effects of mindfulness interventions on psychological and physiological indicators of teachers' stress and burnout. A total of 113 elementary and secondary school teachers (89% of whom were female) from United States and Canada. Similar to the studies of healthcare professionals, this study also demonstrated reduced level of occupational stress and burnout post-program and during the 3 month follow-up period, moreover, participants showed improved focused attention and working memory capacity. The findings of this research suggest that mindfulness assists teachers in managing work-related stress and alleviating burnout by helping them

to develop self-regulatory resources to handle the social, cognitive, and emotional demands of their job.

Besides the studies focusing on certain professions, various studies have examined the impact of mindfulness on burnout in the employees of different occupations. A study by Kinnunen et al (2020) separated the facets of mindfulness and aimed to understand the effectiveness of mindfulness practices in alleviating burnout among the employees of various occupations in Finland, that were still working with burnout symptoms. The five facets of mindfulness according to FFMQ (observing, describing, acting with awareness, non-judging, and non-reacting) were examined to see if they mediated the changes of burnout during an intervention program that lasted for 8 weeks and during a 10-month follow-up after the interventions. The differences between the changes in three dimensions of burnout (exhaustion, cynicism, and reduced professional efficacy) that were mediated by mindfulness facets have also been investigated in this research. The results of this study showed that improving mindfulness skills via Mindfulness practices could be effective in alleviating burnout symptoms. Moreover, according to this study, Mindfulness interventions appeared to be effective for all burnout dimensions. Furthermore, this study revealed that the skills acquired during the intervention program can have long-lasting positive effects on burnout, as burnout improvements lasted during the follow-ups as well.

The majority of studies, including the studies discussed above, have focused on the employees suffering from burnout that were still on the job and have not taken the sickness absence due to burnout. These studies investigated the role of mindfulness in alleviating burnout among the employees that stayed on the job, and overall, all these studies agreed on the fact that mindfulness decreases burnout of the employees of certain occupations (healthcare, education), as well as of the employees of various professions. But burnout might result in a both short-term or long-term sick leave (Consiglio, Borgogni, Alessandri & Schaufeli, 2013), thus it is important to identify the studies that link mindfulness and RTW after burnout.

Mindfulness and Return to Work after burnout

As discussed above, Return to work (RTW) after burnout is a complex and long-term process, thus it is interesting to discuss the link between mindfulness and RTW after burnout. Although, a limited number of literature has linked mindfulness to RTW after burnout.

A quantitative study conducted by Vindholmen, Høigaard, Espnes, & Seiler (2014) in Norway investigated how mindfulness predicts work reentry. More specifically, this study linked mindfulness to Quality of Life (QOL). The surprising result of this study was that there was no overall direct effect of mindfulness on work ability or RTW. The main finding of the study was that mindfulness had the

indirect effect on both RTW and work ability via QOL. According to this research, mindfulness practices improve QOL, which in turn impacts work ability and RTW positively.

Another study by Netterstrøm & Bech (2010) that was carried out in Denmark, also focused on RTW after burnout. This study explored the impact of the multidisciplinary stress treatment program which included mindfulness, on the individuals that were on a sick leave. This research found an increase in proportion of participants achieving successful RTW in the intervention group (66% and 67%) compared with the control group (36%). These effects are significant, as the proportion of participants achieving RTW in the intervention group nearly doubled when comparing to the results of the control group.

The reviewed literature suggests that mindfulness practices can be used to alleviate burnout. Although, there is a limited information regarding the impact of mindfulness on RTW after burnout. The two quantitative studies that were discussed above, provide the contradictory evidence regarding the impact of mindfulness on RTW after burnout, since the study by Vindholmen et al. showed the indirect effect through QOL on RTW after burnout, whereas, the study by Netterstrøm & Bech suggests the direct effect, although this study adopted multidisciplinary intervention approach, hence it is not clear to what extent did mindfulness practices contributed to the positive impact on RTW.

The purpose of the study

The purpose of the present study is to link mindfulness with the process of returning back to work after burnout. This study aims to investigate how burned-out individuals experience return to work after burnout and how can they be supported by mindfulness practices to successfully return back to the labor market.

According to the literature review, the majority of studies have assessed the impact of mindfulness in eliminating burnout dimensions and symptoms. But only few studies have linked mindfulness with the factors associated with RTW after sick leave due to burnout. Furthermore, the literature suggests the contradictory evidence regarding the impact of mindfulness on RTW after burnout, since the study by Vindholmen et al (2014) showed the indirect effect on RTW after burnout whereas, the study by Netterstrøm & Bech (2010) suggests the direct effect, moreover, both of these studies adopted quantitative method and they focused on the individuals still on a sick leave, hence, it remains unclear how mindfulness practices can be linked with the factors that are associated during the RTW process. This study aims to address this gap in the literature by conducting qualitative research on the employees of various professions that took sick leave due to burnout and have returned to work after this experience.

This study focuses on the employees from Belgium where burnout is a common problem. Stress and burnout are responsible for one-third of all sickness absences from work in Belgium (European Trade Union Institute, 2019). These sick leaves are associated with considerable costs, for example, only in 2019 the cost for long-term disability caused by depression or burnout estimated to more than 1.5 billion euros in Belgium (RIZIV, 2021).

Moreover, the situation in Belgium can be further complicated by the current Covid-19 crisis which has caused a shift in the way companies operate, many companies had to switch to a remote work, forcing employees to adapt to the new reality. On the other hand, essential employees like healthcare providers, grocery store workers, transportation workers, and more, had to report to work every day to provide the essential services. Both types of employees are at high risk of stress, that could affect their wellbeing and lead to burnout (Mayer, 2021). This can possibly be a reason for the recent increase in long-term absences from work in Belgium. According to the latest figures by RIZIV (2021), the number of Belgians that have been incapacitated for work for more than a year due to a burnout or depression rose to over 111,000 employees in 2020, which is 40% increase compared to the numbers of 2016.

The increase in the long-term sickness absences due to burnout and high costs that are associated to it clearly demonstrate the need for the effective organizational practices in order to support the recovery and reintegration of the employees in Belgium. Therefore, it is important to understand burnout from as many aspects as possible, including how employees recover from it. Understanding the RTW

experiences of burned-out individuals would benefit organizations and leaders to create better working environments for their employees.

The goal of this thesis is to investigate the return-to-work experiences of the employees with burnout and to explain how they can be supported with Mindfulness practices. This study focuses on the individuals from Belgium, where to the best of author's knowledge, the link between RTW after burnout and mindfulness has not been examined so far.

The research aimed to answer the following questions:

1. How do employees experience returning to work after burnout?
2. How do employees with burnout history experience the existing organizational support practices?
3. How can mindfulness practices support employees during RTW after burnout?

Methodology

This chapter presents the method of the study that was used to conduct this research, as well as a justification for the use of this method. The chapter sets out the description of the research process, how it was designed to give voice to the employees with burnout history as participants, how the sample was accessed, how the data were analysed, which ethical guidelines were followed and what limitations did the study encounter.

Research design

As it has been discussed in the literature review, only few studies have linked mindfulness with the factors associated with RTW after sick leave due to burnout. Moreover, all of these studies used quantitative methods. Hence, since there is limited information about the topic, it was decided to adopt a qualitative research design that seeks to contextualize the understanding of phenomena, explain behavior and beliefs, identify processes, and understand the contexts of the participant's experiences (Hennink, Hutter & Bailey, 2020). The online qualitative survey method has been used in this study since it has recently been identified as a qualitative research tool that prioritizes qualitative research values and harnesses the rich potential of qualitative data (Braun, Clarke, Boulton, Davey, & McEvoy, 2020). Moreover, qualitative survey provides one distinctive characteristic among qualitative data collection methods – a 'wide-angle lens' on the topic of interest, allowing to capture a diversity of experiences, perspectives, or sense-making (Braun, Clarke, & Gray, 2017). This diversity refers to exploring a range of voices and sense-making, which is particularly important when researching an unexplored or underexplored area (Braun et al., 2020).

An online qualitative survey was used to collect the data because of its flexibility and openness in addressing the research questions and, currently, the safest method during the time of COVID-19 pandemic. Moreover, the decision to carry out an online survey was taken for further pragmatic reasons: the online survey gave the opportunity to participants to be flexible in terms of time and place to answer the questions, moreover, they could possibly feel more comfortable answering questions relating to personal experiences in writing, without meeting anyone.

The research focused on individuals from Belgium given the high prevalence of sick leaves due to burnout in the country, as according to the latest figures published by RIZIV (2021), almost 112,000 Belgians had been incapacitated for work for more than a year due to burnout or depression, which is a 40% increase compared to the numbers from 2016.

The basis for the study were open-ended questions in multiple languages (English, Dutch, French) referring to the period after recognized burnout. The series of open-ended questions were presented in a fixed and standard order to all participants. Because participants responded by typing responses in

their own words, rather than selecting from pre-determined response options, the survey produced the rich and complex accounts of the type of sense-making, hence the survey was able to capture participants' subjective experiences, positionings, narratives and discourses, which is especially important for qualitative research (Braun & Clarke, 2013).

Participants for the study were selected through purposeful sampling, the inclusion criteria for the participation in the study was that the individuals have previously experienced burnout at work and lived in Belgium. Purposeful sampling is a qualitative research technique that is widely used for identifying and selecting information-rich cases in order to make the most productive use of limited resources (Patton, 2002). This entails identifying and selecting individuals or groups of individuals who are particularly knowledgeable about or experienced in a topic of interest (Cresswell & Plano Clark, 2011; Palinkas, Horwitz, Green, Wisdom, Duan, & Hoagwood, 2015).

Participants and data collection

Participants were recruited through the organizations in Belgium that were contacted by email with the proposal to share the call for participation within their employees. The participants from Belgium have also been recruited through social media (LinkedIn, Facebook). The inclusion criteria for participating in the study was that participants have experienced burnout at work in the past.

Ten individuals from Belgium with burnout history responded to the researcher's invitation and participated in the study in April and May 2021. The participants' average age was 44 years (ranging from 30–58 years). The sample included 8 women and 2 men. Table 1 demonstrates details of the participants in terms of their pseudonyms, age, employment status, job position, the date of recognized burnout and the RTW information (whether they returned to the same job or changed job after sick leave). 9 participants have practiced mindfulness after burnout and 1 participant has never practiced mindfulness.

The basis for the study was the online survey with open-ended questions, which referred to the period after recognized burnout and aimed at answering the research questions. Survey included 1 close-ended question, which identified if participants have practiced mindfulness or not, those that did not practice mindfulness, received a different set of open-ended questions, aimed at identifying their opinion and possible influence of it.

The questions were divided into several topics such as demographics, burnout experience (causes, signs), recovery experience, process of returning to work, changes of the view of work after burnout, support mechanisms from the workplace, mindfulness experiences and impact of mindfulness.

Participants have received the invitation via email and social media to access the online survey. The first page of the survey provided information about the study and participants provided consent to

participate by clicking the 'agree' button, then participants were taken to the survey itself. Participation in the study was voluntary, anonymous and in compliance with GDPR. No incentive was offered for participants to complete the survey.

Table 1. List of Participants

Participant	Age	Employment status	Position	Recognized Burnout date	RTW
Laura	45	Employed part-time	Child care coordinator	2019	Same job
Jan	43	Employed full-time	Clerk	2019	Same job
Anna	32	On sick leave	-	2019	Failed return to the same job
Rita	58	On sick leave, doing voluntary work part-time	-	2019	
Sarah	45	Employed part-time	Administrative assistant	2016	Changed job
Karoline	55	Employed part-time	Child coach	2016	Changed job
Marie	57	On Sick leave	HR manager	2019	2x failed return to the same job
Silvie	40	Employed full-time	Childcare Educator	2018	Same job
Marc	40	Employed full-time	Teacher	2013	Same job
Victoria	30	Employed part-time	Marketing manager	2019	Same job

Data Analysis

As the survey was designed in multiple languages for the individuals in Belgium that have experienced burnout, the responses recorded in Dutch language were translated in English language before analysing the data.

Qualitative data from the survey was analysed using Braun and Clarke's (2006) reflexive thematic analysis. No software was used in the analysis and data were manually open coded through an iterative process.

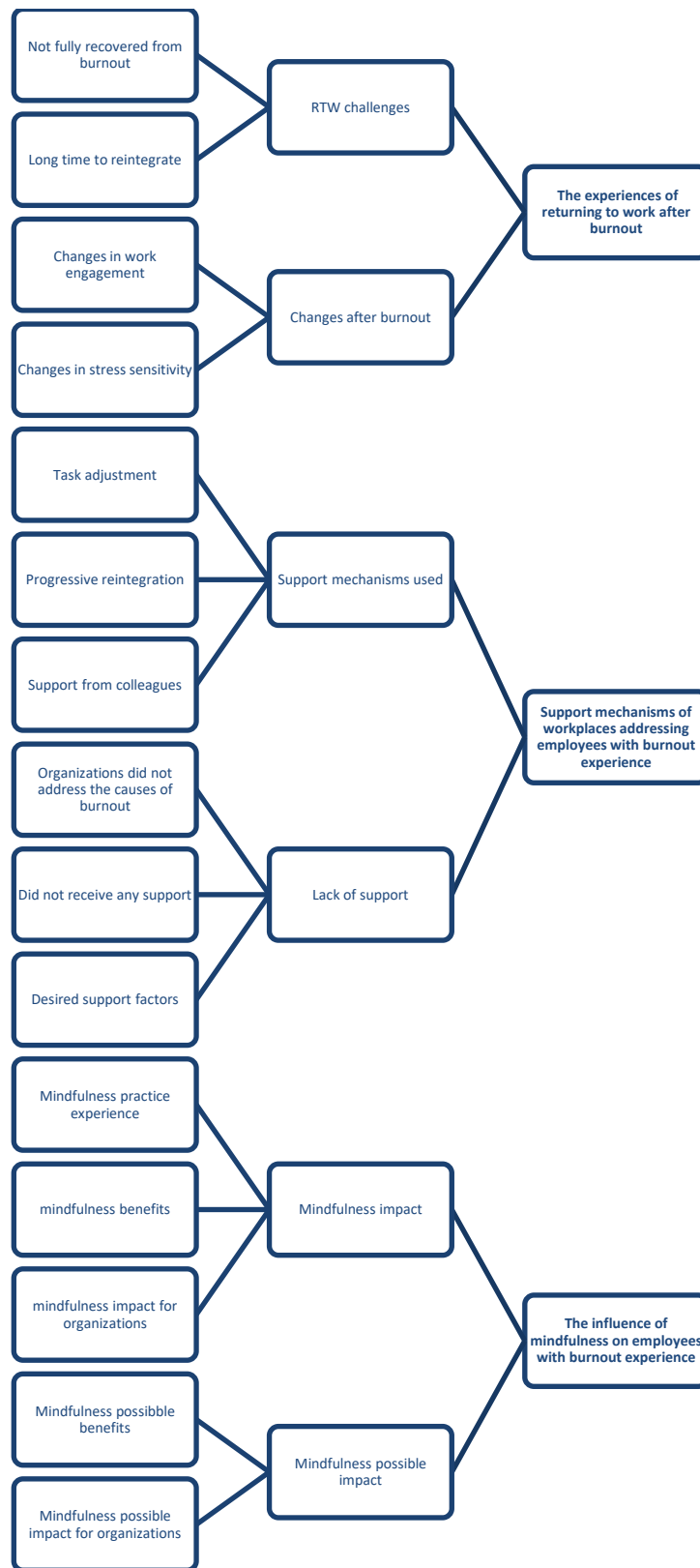
The research investigator followed Braun and Clarke's (2006) six-stage process, which included reading and re-reading the dataset to become familiar with its content. Initial codes were subsequently created. Initial themes were developed during the coding process. The themes were reviewed and organised, and the final three themes were established in correspondence with the research questions: 1) Experiences of returning to work after burnout; 2) Support mechanisms of workplaces addressing the employees with burnout experience; 3) The influence of mindfulness on the employees with burnout experience (Figure 1).

The dataset was treated as one cohesive dataset, coding, and developing analytic patterns across the entire dataset.

Ethics

According to the ethical considerations for a qualitative research (Miller, Birch, Mauthner & Jessop, 2012) the following ethical guidelines were put into place for the present research. The research data remained confidential throughout the study. The details of the study were communicated to all participants. Research participants were aware that their participation in the study was completely voluntary and anonymous. They were informed about the academic purpose of the study. Anonymity and confidentiality of this study are ensured as only the research investigator can access the research data.

Figure 1. Coding Tree



Limitations

The limitation of the study sample is that it represents those individuals who responded to the call and who were willing to share their experiences. Findings may therefore not be fully generalisable to the full co-cohort of individuals who experienced burnout and returned to work after this experience. However, the findings still contribute to the scarce literature concerning the experiences of reintegration to work after burnout and giving voice to this group.

Another limitation of the study can be considered using online qualitative survey method since qualitative surveys can be considered as less flexible tool for qualitative research, because they lack opportunities for probing participants' accounts or asking follow-up questions. Initially, the study was supposed to be conducted in forms of interviews, but there were difficulties in recruiting participants, firstly, due to language barriers, since the study was conducted in Belgium, where majorly spoken languages are Dutch and French, interviews in English were not suitable for everyone, hence, online survey in multiple languages could mitigate language barriers. Moreover, this study was carried out during the COVID-19 crisis and conducting physical interviews with participants were not feasible. Hence, the online survey gave the opportunity to participants to be flexible in terms of language, time and place to answer the questions and it was also a safe and suitable method during the period of COVID-19 pandemic.

The following chapter presents the results of the study along the three themes identified during the data analysis in accordance to the research questions.

Results

This chapter sets out of the results of the present study. The findings of this study are divided in three themes according to the research questions: Experiences of returning to work after burnout; Support mechanisms of workplaces addressing employees with burnout experience; and The influence of mindfulness on the employees with burnout experience. Finally, the recommendations of the participants of this study are presented.

The experiences of returning to work after burnout

How do employees experience return to work after burnout?

The results of the study showed that recovering from burnout is a complex and lengthy process. Even though, 8 participants have returned to work after burnout and are currently working, most of them feel that they have not recovered yet. More specifically, the participants mentioned still being stress sensitive and that they get tired easily.

'I don't know if you ever fully recover from a burnout. I am still stress sensitive, try to avoid too many stimuli. When the pressure gets higher at my new job, I am very sensitive to it.'
(Jan)

'Feeling better doesn't happen overnight. In the beginning you think you feel better only to fall back again which is very frustrating. Only now, more than a year later I feel like I don't have "severe" relapses anymore. I do have to keep paying attention though. Stress remains pernicious to my body. And it took a long time for me to be able to fully function again.'
(Silvie)

In spite of the fact that it has been more than a year since both Jan and Silvie returned to work after burnout, they still notice signs of it. This indicates that returning back to work after burnout does not mean that the employees have fully recovered from it.

Besides still noticing signs of burnout, the majority of participants also mentioned changes of the view of work after returning to work. Burnout has changed the view of work among the participants that returned to work and also for those participants that failed to return. The majority of the participants (8 out of 10) have explained that their perception of work has changed and now they perceive work as a less important aspect of their life:

'Work was the most important aspect of my life, I took it too seriously, now I learned to pay more attention to other aspects of my life-friends, family, hobbies and now I work to live instead of the other way around.' (Victoria)

Moreover, the majority of the participants including Laura, also indicated that they have become less ambitious, they express less initiative and try not to invest too much of themselves in work:

'I am no longer taking the responsibility when there is a request from my management. I let others take the initiative.' (Laura)

Along with other participants, Laura's motivation of work has decreased after RTW. This indicates that the work engagement of the employees decreases after experiencing burnout.

The results of this study are similar to the findings of Boštjančič & Koracin (2014), that also demonstrated that burned-out individuals only slowly recover from burnout, and when they return back to work they encounter changes in work values. Hence, RTW is a complex process and it is necessary to support the individuals that are undergoing through this process.

Support mechanisms of workplaces addressing employees with burnout experience

How do employees with burnout history experience the existing organizational support practices?

While participants of this study were describing their experiences of burnout, personal and organizational causes of burnout emerged. Similar to findings of Maslach et al. (2001) the most common organizational cause was high workload - 6 participants considered it as one of the causes of burnout, another cause was stressful work environment that was named by 4 of the participants including high pressure and tight deadlines.

Other organizational factors that were highlighted by the participants include management issues. Sarah mentioned ineffective change management as a cause of burnout:

'A change in management which meant that the support and the close team spirit within our team disappeared. Previously I felt supported and encouraged by my previous team leader.' (Sarah)

The experience of Sarah, clearly highlights the importance of the culture and support at the organization, since the disappearance of support from the management has led to burnout.

As returning to work after burnout is a challenging process, it is important for organizations to support the employees during this process. However, the results of this study indicated that, organizations do not support the employees by addressing the causes of the burnout as the majority of participants (7 out of 10), along with Marc indicated that their workplaces have not addressed the factors that led to their burnout:

'Never had an in-depth conversation with a supervisor. There are colleagues now, today, who still drop out with the same reasons I did then.' (Marc)

Moreover, while describing the desired support mechanisms from their workplaces, just like Marc, other participants too have indicated that they would have liked to have in-depth conversations with the management to explain the factors causing their burnout. Hence, most of the participants, including Victoria wanted to be heard by their workplaces to tackle the causes of burnout.

'There was no in-depth conversation to try to understand the reasons to prevent it from happening to others. I think they could have shown more interest.' (Victoria)

However, participants did mention support factors that they received from their workplaces during RTW process. Most of the participants declared that they were offered gradual return to work after burnout. Moreover, some of the participants mentioned support from the colleagues and 1 participant mentioned career counselling. Whereas, 3 participants indicated that there was no support at all from their workplace.

'No support. Even the opposite, more new tasks added.'(Marie)

As mentioned by Marie, who tried to return to her workplace twice and failed to reintegrate and is currently on a sick leave again, she did not receive any support from her workplace. The example of Marie clearly illustrates the importance and significance of organizational support for a successful reintegration to work.

In general, the results of this study demonstrate that the participants did not receive the appropriate support from their workplaces, which was necessary and important during RTW process. Burnout recovery is a long-term and complex process, in which the organization also has to participate. The participants with burnout history that were involved in the study expressed a need for forms of assistance upon returning to work, which includes organizing and connecting various support factors.

The influence of mindfulness on employees with burnout experience

How can mindfulness practices support employees during RTW after burnout?

9 out of 10 participants of this study have practiced mindfulness, and most of them (7 out of 9) have started practicing it after recognized burnout, with the advice of their psychotherapist or burnout coach, 4 of them practiced with their therapists and 3 practiced independently at home.

The fact that none of the participants have practiced mindfulness within their organizations indicates that, in spite of the fact that mindfulness practices within organizations are gaining popularity worldwide (Gelles, 2015), they are not commonly used in organizations in Belgium. The duration of mindfulness practices within the participants of this study ranged between 20 to 40 minutes.

Most of the participants have indicated the overall positive impact of mindfulness on their wellbeing by helping them process their emotions and calm down. Similar to the findings of Allen et al. (2015), most of the participants including Victoria indicated that mindfulness helped them to relieve stress:

'It helped me to relax, relieve stress, become more peaceful and calm.' (Victoria)

Taking into account that most of the participants including Victoria have not fully recovered from burnout and have become more sensitive to stress after returning to work, mindfulness practices are shown to be helpful for them during the recovery and RTW process, since as described by the participants mindfulness practices represent a useful 'tool' that helps them calm down in stressful situations.

As discussed above, mindfulness practices were not offered by the workplaces of the participants. The majority of the participants (7 out of 10) indicated that they think that their workplaces could benefit from mindfulness practices. Jan explained that his workplace should focus more on the wellbeing of the employees.

'Absolutely! But I think we need to start doing this (mindfulness) much earlier and make it mandatory in the training package. Our training and work culture are completely focused on DOING, and not on BEING.' (Jan)

Even Marie, that has never practiced mindfulness, after reading the definition of it, indicated that she would like to try to practice it as in her opinion, it could help her sleep better and find peace, moreover, along with other participants, she also indicated that her workplace could benefit from mindfulness practices as it can help employees stay calm in stressful situations and keep functioning.

Thus, the findings of this study are complementary to the findings of a quantitative study by Netterstrøm & Bech (2010) that found positive influence of mindfulness on RTW after burnout. However, the present study complements the findings by Netterstrøm & Bech by giving voice to the

employees with burnout history and explaining their experiences of RTW, which clearly highlights the need for implementing forms of assistance upon returning to work: this involves organization of various support factors from the workplaces including mindfulness practices.

Hence, the results of present study suggest that as the participants lacked the support from their workplaces during the recovery and RTW process, organization should support them more during this challenging process, given the difficulties recovering from burnout and the changes that they encounter upon returning which is decreased work engagement and motivation. This study suggests mindfulness practices as one of the support mechanisms for the workplaces, since all of the participants of this study indicated the positive influence of mindfulness practices on their wellbeing.

Participants were also asked to share their recommendations to the people that are recovering from burnout. The most common recommendation from the participants was to get guidance from the professional as they highlighted the importance of sharing the feelings and asking for help. Jan shared the recommendation based on his own experience:

'No matter how tired you are, get outside in nature, go hiking, biking. Realize that you mean less to the work than the work means to you. Get support from a good coach or psychologist. And don't resort to medications. They only solve symptoms, not the causes. Do yoga, meditation, mindfulness and learn to relax again. Do not let yourself go, but keep feeding yourself with culture, music, relaxation, but also literally with healthy food. Use the time given to you to start a new hobby, something that gives you satisfaction. Many people will give well-intentioned advice, but no one can feel what you feel. Realize that burnout is a signal from your body that certain things need to be different in your life.' (Jan).

The quote by Jan perfectly illustrates the complexity of the recovery process from burnout. As this process is individual for everyone, still he shares useful advises for the burned-out individuals, among which mindfulness practices are also mentioned. This can once again indicate and highlight the value of mindfulness practices for the employees during the recovery from burnout.

Conclusion

The present study linked mindfulness practices with the factors associated with return to work after burnout by investigating the experiences of the individuals with burnout history in Belgium. The aim of this study was to explain how employees in Belgium experience returning to work after burnout and how mindfulness practices can support them during this process by conducting qualitative study and giving voice to the employees with burnout experience.

This study contributes to the scarce literature linking Return to Work (RTW) after burnout and mindfulness as only few studies have linked mindfulness with the factors associated with RTW after sick leave due to burnout. Moreover, the literature suggests the contrasting findings regarding the influence of mindfulness on RTW after burnout, since the study by Vindholmen et al. (2014) showed the indirect effect on RTW after burnout whereas, the study by Netterstrøm & Bech (2010) suggests the direct effect, moreover, both of these studies adopted quantitative method and they focused on the individuals still on a sick leave, hence, there is a little information about linking mindfulness practices with RTW process itself. This study addressed this gap in the literature by conducting qualitative research on the employees of various professions that took sick leave due to burnout and have returned to work after this experience.

This study focuses on the employees from Belgium where burnout is a common problem. Stress and burnout are responsible for one-third of all sickness absences from work in Belgium (European Trade Union Institute, 2019). These sick leaves are associated with considerable costs, for example, in Belgium in 2019 the cost for long-term disability caused by depression or burnout estimated to more than 1.5 billion euros (RIZIV, 2021).

The current study found that the recovery from burnout is a complex and long-term process that continuous after returning back to work. Moreover, the employees encounter changes in their view of work, since as demonstrated in this study work engagement of the employees decreases after experiencing burnout. Hence, it is of high importance to support the employees during this period, however, this study demonstrated that the employees with burnout do not receive the appropriate support from their workplaces upon returning to work. Moreover, this study suggested mindfulness practices as organizational support mechanism for the employees that return to work after burnout since it has been found to have a positive influence on the employees by helping them regulate stress, and improve their overall wellbeing.

This study demonstrated the importance of the organizational support of the employees that return to work after burnout in Belgium. Given the high prevalence of burnout in the country (European Trade Union Institute, 2019) and the growing number of long-term sickness absences due to burnout (RIZIV, 2021) organizations should pay more attention to support the employees for a successful return to work by implementing various support mechanisms including mindfulness practices, as it has been

demonstrated in this study, mindfulness practices are not commonly used at the organizations in Belgium.

Given the benefits of mindfulness practices on the overall wellbeing of the employees, organizational leaders can incorporate mindfulness practices in their work cultures and programs to help increase their employees' wellbeing, help them recover from burnout and fully reintegrate back to work so that they can thrive inside and outside the organization.

Recommendations

Recovering from burnout is a complex and long-term process, in which the organization also needs to participate. Similar to the findings of Boštjančič & Koracin (2014), the participants involved in the present study also indicated a need for implementing various support mechanisms by their organizations. Hence, this study revealed that employers need to have greater awareness about burnout, its causes, consequences and about the ways to support and assist their employees during the recovery process. Since this study only explored the experiences of the employees with burnout history, it would be interesting for further studies to also explore the perspectives of Belgian employers about the extent of their awareness of causes and consequences of burnout, the challenges that they encounter when employees return to work after burnout, what organizational support factors they use and how open they are to integrate the mindfulness practices within their organizations.

The present study has also demonstrated the positive influence of mindfulness practices on the wellbeing of the employees that return to work after burnout, however the participants of this study practiced mindfulness independently from their workplaces, as their workplaces did not offer mindfulness practices, hence it would be interesting to study the possible impact of mindfulness practices within certain organizations that offer mindfulness practices to their employees, to better understand the value and influence of the mindfulness practices within the organizational context.

Bibliography

1. Ahola, K. (2007). Occupational burnout and health. (People and work research reports, 81). Helsinki, Finland: Finnish Institute of Occupational Health.
2. Ahola, K. (2012). Understanding and preventing worker burnout. OSH Wiki platform, EU-OSHA. Retrieved from:
https://oshwiki.eu/wiki/Understanding_and_Preventing_Worker_Burnout
3. Ahola, K., Toppinen-Tanner, S., & Seppänen, J. (2017). Interventions to alleviate burnout symptoms and to support return to work among employees with burnout: Systematic review and meta-analysis. *Burnout Research*, 4, 1–11.
4. Alarcon, G. M. (2011). A meta-analysis of burnout with job demands, resources, and attitudes. *Journal of Vocational Behavior*, 79, 549–562.
5. Allen, T. D., Eby, L. T., Conley, K. M., Williamson, R. L., Mancini, V. S., & Mitchell, M. E. (2015). What do we really know about the effects of mindfulness-based training in the workplace? *Industrial and Organizational Psychology*, 8, 652–661.
6. Anger, W. K., Elliot, D. L., Bodner, T., Olson, R., Rohlman, D. S., Truxillo, D. M., Kuehl, K. S., Hammer, L. B., & Montgomery, D. (2015). Effectiveness of total worker health interventions. *Journal of occupational health psychology*, 20(2), 226–247.
7. Awa WL, Plaumann M, Walter U. (2010). Burnout prevention: a review of intervention programs. *Patient Education and Counseling*. 78(2):184–190.
8. Baer, R. A., Smith, G. T., Hopkins, J., Krietemeyer, J., & Toney, L. (2006). Using self-report assessment methods to explore facets of mindfulness. *Assessment*, 13(1), 27–45.
9. Bakker, A. B., & Demerouti, E. (2007). The job demands–resources model: State of the art. *Journal of Managerial Psychology*, 22(3), 309–328.
10. Beheshtifar, M., & Omidvar, A. (2013). Causes to Create Job Burnout in Organizations. *International Journal of Academic Research in Business and Social Sciences*. 3. 2222-6990.
11. Blanch, J.M., Ochoa, P., & Caballero, M.F. (2018). Over Engagement, Protective or Risk Factor of Burnout?
12. Boellinghaus, I., Jones, F. W., & Hutton, J. (2014). The role of mindfulness and loving-kindness meditation in cultivating self-compassion and other-focused concern in health care professionals. *Mindfulness*, 5(2), 129–138.
13. Borritz, M., Rugulies, R., Christensen, K. B., Villadsen, E., & Kristensen, T. S. (2006). Burnout as a predictor of self-reported sickness absence among human service workers: Prospective findings from three year follow up of the PUMA study. *Occupational and Environmental Medicine*, 63, 98–106.
14. Boštjančič, E., & Koracin, N. (2014). Returning to work after suffering from burnout syndrome: Perceived changes in personality, views, values, and behaviors connected with work. *Psihologija*. 47. 131-147.
15. Boyce, B. (2011). *The Mindfulness Revolution*. Boston, MA: Shambhala.

16. Braun V., & Clarke V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3:2, 77-101.
17. Braun V., & Clarke V. (2013). *Successful Qualitative Research: A Practical Guide for Beginners*.
18. Braun, V., Clarke, V., & Gray, D. (2017). Innovations in qualitative methods. In B. Gough (Ed.), *The Palgrave handbook of critical social psychology* (pp. 243–266). Palgrave Macmillan.
19. Braun, V., Clarke, V., Boulton, E., Davey, L., & McEvoy, C. (2020). The online survey as a qualitative research tool. *International Journal of Social Research Methodology*, 1–14.
20. Brown, K. W., & Ryan, R. M. (2003). The benefits of being present: Mindfulness and its role in psychological wellbeing. *Journal of Personality and Social Psychology*, 84, 822–848.
21. Brown, K. W., Ryan, R. M., & Creswell, J. D. (2007). Addressing fundamental questions about mindfulness. *Psychological Inquiry*, 18(4), 272–281
22. Burton, A., Burgess, C., Dean, S., Koutsopoulou, G. Z., & Hugh-Jones, S. (2016). How effective are mindfulness-based interventions for reducing stress among healthcare professionals? A systematic review and meta-analysis. *Stress and health: journal of the International Society for the Investigation of Stress*, 33(1), 3–13.
23. Consiglio, C., Borgogni, L., Alessandri, G., & Schaufeli, W.B. (2013). Does self-efficacy matter for burnout and sickness absenteeism? The mediating role of demands and resources at the individual and team levels, *Work & Stress*, 27:1, 22-42.
24. Cresswell J.W., Plano Clark V.L. (2011) *Designing and conducting mixed method research*. 2nd Sage; Thousand Oaks.
25. Dane, E. (2011). Paying Attention to Mindfulness and Its Effects on Task Performance in the Workplace. *Journal of Management*, 37(4), 997–1018.
26. De Rijk, A., Janssen, N., Van Lierop, B., Alexanderson, K., & Nijhuis, F. (2009). A behavioral approach to RTW after sickness absence: the development of instruments for the assessment of motivational determinants, motivation and key actors' attitudes. *Work* (Reading, Mass.), 33(3), 273–285.
27. Demerouti, E., Bakker, A. B., Nachreiner, F., & Schaufeli, W. B. (2001). The job demands-resources model of burnout. *Journal of Applied Psychology*, 86, 499–512
28. Donaldson -Feilder, E., Lewis, R., & Yarker, J. (2019). What outcomes have mindfulness and meditation interventions for managers and leaders achieved? A systematic review. *European Journal of Work and Organizational Psychology*, 28(1), 11–29
29. Eby, L. T., Allen, T. D., Conley, K. M., et al. (2019) 'Mindfulness-Based Training Interventions for Employees: A Qualitative Review of the Literature', *Human Resource Management Review* 29: 156–178.
30. EU-OSHA – European Agency for Safety and Health at Work (2016, August 23). *Managing stress and psychosocial risks E-guide*.
31. Eurofound (2018). *Burnout in the workplace: A review of data and policy responses in the EU*. Publications Office of the European Union, Luxembourg.

32. European Trade Union Institute. (2019, February 19). Burnout: faced with an epidemic, Belgium launches a pilot project. Retrieved from <https://www.etui.org/topics/health-safety-working-conditions/news-list/burnout-faced-with-an-epidemic-belgium-launches-a-pilot-project>
33. Fletcher, L., & Hayes, S. C. (2005). Relational frame theory, acceptance and commitment therapy, and a functional analytic definition of mindfulness. *Journal of Rational-Emotive & Cognitive-Behavior Therapy*, 23(4), 315–336
34. Fortney, L., Luchterhand, C., Zakletskaia, L., Zgierska, A., & Rakel, D. (2013). Abbreviated mindfulness intervention for job satisfaction, quality of life, and compassion in primary care clinicians: A pilot study. *Annals of Family Medicine*, 11, 412–420.
35. Gelles, D. (2015). *Mindful work: how meditation is changing business from the inside out*. New York: Houghton Mifflin Harcourt.
36. Ghorpade, J., Lackritz, J. & Singh, G. (2007). Burnout and Personality: Evidence From Academia. *Journal of Career Assessment*, 15(2), 240-256.
37. Glomb, T. M., Duffy, M. K., Bono, J. E., & Yang, T. (2011). Mindfulness at work. *Research in Personnel and Human Resources Management*, 30, 115–157.
38. Good, D. J., Lyddy, C. J., Glomb, T. M., Bono, J. E., Brown, K. W., Duffy, M. K., Baer, R. A., Brewer, J. A., & Lazar, S. W. (2016). Contemplating Mindfulness at Work: An Integrative Review. *Journal of Management*, 42(1), 114–142.
39. Goodman, M. J., & Schorling, J. B. (2012). A mindfulness course decreases burnout and improves well-being among healthcare providers. *International Journal of Psychiatry in Medicine*, 43, 119–128.
40. Greiser, C., & Martini, J. P. (2018). *Unleashing the power of mindfulness in corporations*. Boston consulting group. Retrieved from https://image-src.bcg.com/Images/BCG-Unleashing-the-Power-of-Mindfulness-in-Corporations-Apr-2018_tcm9-190679.pdf
41. Hees, H. L., Nieuwenhuijsen, K., Koeter, M. W., Bültmann, U., & Schene, A. H. (2012). Towards a new definition of return-to-work outcomes in common mental disorders from a multi-stakeholder perspective. *PloS one*, 7(6), e39947.
42. Hennink, M., Hutter, I., & Bailey, A. (2020). *Qualitative Research Methods*. SAGE: London, UK.
43. Hülsheger, U. R., Alberts, H. J. E. M., Feinholdt, A., & Lang, J. W. B. (2013). Benefits of mindfulness at work: the role of mindfulness in emotion regulation, emotional exhaustion, and job satisfaction. *Journal of applied Psychology*, 98(2), 310–325.
44. Illing, S. (2019). Why are millennials burned out? Capitalism. Author Malcolm Harris on why millennials need a revolution. *Vox*. Retrieved from <https://www.vox.com/2019/2/4/18185383/millennials-capitalism-burned-out-malcolm-harris>
45. Irving, J. A., Dobkin, P. L., & Park, J. (2009). Cultivating mindfulness in health care professionals: a review of empirical studies of mindfulness-based stress reduction (MBSR). *Complementary Therapies in Clinical Practice*, 15(2), 61–66.

46. Janssen, M., Heerkens, Y., Kuijer, W., van der Heijden, B., & Engels, J. (2018). Effects of mindfulness-based stress reduction on employees' mental health: a systematic review. *PLoS One*, 13(1), e0191332.
47. Kabat-Zinn, J. (1994). *Wherever You Go, There You Are: Mindfulness Meditation in Everyday Life*. New York, NY: Hyperion Books.
48. Kalimo, R., Pahkin, K., Mutanen, P. & Toppinen-Tanner, S. (2003). Staying well or burning out at work: work characteristics and personal resources as long-term predictors. *Work & Stress*, Vol. 17, pp.109-122.
49. Kinnunen, S. M., Puolakanaho, A., Mäkikangas, A., Tolvanen, A., & Lappalainen, R. (2020). Does a mindfulness-, acceptance-, and value-based intervention for burnout have long-term effects on different levels of subjective well-being? *International Journal of Stress Management*, 27(1), 82–87.
50. Krick, A., & Felfe, J. (2020). Who benefits from mindfulness? The moderating role of personality and social norms for the effectiveness on psychological and physiological outcomes among police officers. *Journal of Occupational Health Psychology*, 25(2), 99–112.
51. Kristensen, T. S., Borritz, M., Villadsen, E., & Christensen, K. B. (2005). The Copenhagen Burnout Inventory: A new tool for the assessment of burnout. *Work & Stress*, 19(3), 192–207.
52. Labriola, M., Lund, T., Christensen, K. B., & Kristensen, T. S. (2006). Multilevel analysis of individual and contextual factors as predictors of return to work. *Journal of occupational and environmental medicine*, 48(11), 1181–1188.
53. Langelaan, S., Bakker, A. B., van Doornen, L. J. P, & Schaufeli, W. B. (2006). Burnout and work engagement: Do individual differences make a difference? *Personality and Individual Differences*, 40, 521–532.
54. Lee, J., Lim, N., Yang, E., & Lee, S. M. (2011). Antecedents and consequences of three dimensions of burnout in psychotherapists: A meta-analysis. *Professional Psychology: Research and Practice*, 42, 252-258.
55. Lee, R. T. (2015). Wellbeing and Burnout in the Workplace, *Psychology of*. *International Encyclopedia of the Social & Behavioral Sciences (Second Edition)*. Elsevier, 534-536.
56. Lee, R. T., & Ashforth, B. E. (1990). On the meaning of Maslach's three dimensions of burnout. *Journal of Applied Psychology*, 75, 743–747.
57. Lee, R. T., & Ashforth, B. E. (1996). A meta-analytic examination of the correlates of the three dimensions of job burnout. *Journal of Applied Psychology*, 81(2), 123–133.
58. Leiter, M. P., Bakker, A. B., & Maslach, C. (2014). *Burnout at work: a psychological perspective*. East Sussex: Psychology Press.
59. Lomas, T., Medina, J. C., Ivtzan, I., Rupprecht, S., Hart, R., & EiroaOrosa, F. J. (2017). The impact of mindfulness on well-being and performance in the workplace: an inclusive systematic review of the empirical literature. *European Journal of Work and Organizational Psychology*, 26(4), 492–513.

60. Mack, O., Khare, A., Krämer, A., & Burgartz, T. (2015). *Managing in a VUCA world*. Basel: Springer.
61. Maslach, C. & Goldberg, J. (1998). Prevention of burnout: New perspectives. *Applied and Preventive Psychology*, 7, 63–74.
62. 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* (pp. 37-53). Information Age Publishing, U.S.A.
63. Maslach, C., & Jackson, S. (1981). The measurement of experienced burnout. *Journal of Occupational Behaviour*, 2(2), 99–113.
64. Maslach, C., & Leiter, M. P. (2016). Understanding the burnout experience: recent research and its implications for psychiatry. *World psychiatry: official journal of the World Psychiatric Association (WPA)*, 15(2), 103–111.
65. Maslach, C., Jackson, S.E. & Leiter, M.P. (1996), MBI: The Maslach Burnout Inventory.
66. Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). Job burnout. Fiske, S. T., Schacter, D. L., & Zahn-Waxler, C. eds. *Annual Review of Psychology*, 52, 397–422
67. Mattila, A., Ahola, K., Honkonen, T., Salminen, J. K., Huhtala, H. & Joukamaa, M. (2007). Alexithymia and occupational burnout are strongly associated in working population. *Journal of Psychosomatic Research*, Vol. 62, pp. 657-665.
68. Mayer, K. (2021). Burnout is soaring during COVID-19: How can employers help?. *Human Resource executive*. Retrieved from: <https://hrexecutive.com/burnout-is-soaring-during-covid-19-how-can-employers-help/>
69. Miller, T., & Birch, M. & Mauthner, M. & Jessop, J. (2012). *Ethics in Qualitative Research*. SAGE: London, UK.
70. Mo, K-W. (1991). Teacher burnout: Relations with stress, personality, and social support. *Education Journal*, 19, 3-11.
71. Moss, S. A., & Couchman, G. (2012). The conflict between the interventions that prevent burnout and the culture of modern capitalism: The benefits of ambivalent emotions. *Australian and New Zealand Journal of Organisational Psychology*, 5(1), 13–24.
72. Näätänen, P., Aro, A., Matthiesen, S., & Salmela-Aro, K. (2003). *Bergen Burnout Indicator 15*. Helsinki: Edita.
73. Netterstrøm B. & Bech P. (2010). Effect of a multidisciplinary stress treatment programme on the return to work rate for persons with work-related stress. A non-randomized controlled study from a stress clinic. *BMC Public Health* 2010; 10: 658.
74. Newton, T.L., Ohrt, J.H., Guest, J.D. & Wymer, B. (2020). Influence of Mindfulness, Emotion Regulation, and Perceived Social Support on Burnout. *Counselor Preparation*, 59: 252-266.
75. Palinkas, L. A., Horwitz, S. M., Green, C. A., Wisdom, J. P., Duan, N., & Hoagwood, K. (2015). Purposeful Sampling for Qualitative Data Collection and Analysis in Mixed Method Implementation Research. *Administration and policy in mental health*, 42(5), 533–544

76. Parent-Thirion, A., Fernández-Macías, E., Hurley, J., & Vermeulen, G. (2007). Fourth European survey on working conditions. Dublin: European Foundation for the Improvement of Living Standards.
77. Park, H.I. and Nam, S.K. (2019). From Role Conflict to Job Burnout: A Mediation Model Moderated by Mindfulness. *The Career Development Quarterly*, 68: 129-144.
78. Patton M.Q. (2002). *Qualitative research and evaluation methods*. 3rd Sage Publications; Thousand Oaks.
79. Perrone, K. M., Ægisdóttir, S., Webb, L. K., & Blalock, R. H. (2006). Work-Family Interface: Commitment, Conflict, Coping, and Satisfaction. *Journal of Career Development*, 32(3), 286–300.
80. Powell, A. (2018). Researchers study how it seems to change the brain in depressed patients. *The Harvard Gazette*. Retrieved from: <https://news.harvard.edu/gazette/story/2018/04/harvard-researchers-study-how-mindfulness-may-change-the-brain-in-depressed-patients/>
81. Quick, J. C., Quick, J. D., Nelson, D. L., & Hurrell, J. J. (1997). *Preventive stress management in organizations*. Washington, DC: American Psychological Association.
82. Rajgopal T. (2010). Mental well-being at the workplace. *Indian journal of occupational and environmental medicine*, 14(3), 63–65.
83. Reb, J., Narayanan, J., & Chaturvedi, S. (2014). Leading mindfully: Two studies on the influence of supervisor trait mindfulness on employee well-being and performance. *Mindfulness*, 5, 36–45.
84. RIZIV. (2021). Langdurige arbeidsongeschiktheid: Hoeveel langdurige burn-outs en depressies? Hoeveel kost dat aan uitkeringen?. Retrieved from: <https://www.riziv.fgov.be/nl/statistieken/uitkeringen/Paginas/langdurige-arbeidsongeschiktheid-burnout-depressie.aspx>
85. Roeser, R., Schonert, K., Jha, A., Cullen, M., Wallace, L., Wilensky, R. et al. (2013). Mindfulness Training and Reductions in Teacher Stress and Burnout: Results From Two Randomized, Waitlist-Control Field Trials. *Journal of Educational Psychology*.
86. Schaufeli, W. B., & Buunk, B. P. (2002) Burnout: An overview of 25 years of research and theorizing. In M. J. Schabracq, J. A. M. Winnubst, & C. L. Cooper (Eds.), *Handbook of work and health psychology* (pp. 383–425). Chichester, England: Wiley.
87. Schaufeli, W. B., & Enzmann, D. (1998). *The burnout companion to study and practice: A critical analysis*. London: Taylor & Francis.
88. Sutcliffe, K. M., Vogus, T. J., & Dane, E. (2016). Mindfulness in organizations: A cross-level review. *Annual Review of Organizational Psychology and Organizational Behavior*, 3, 55–81.
89. Swider, B.W., & Zimmerman, R. (2010). Born to burnout: A meta-analytic path model of personality, job burnout, and work outcomes. *Journal of Vocational Behavior*, 76, 487-506.
90. Taris, T. W. (2006). Is there a relationship between burnout and objective performance? A critical review of 16 studies. *Work & Stress*, 20, 316–334.

91. Vindholmen, S., Høigaard, R., Espnes, G. A., & Seiler, S. (2014). Return to work after vocational rehabilitation: does mindfulness matter?. *Psychology research and behavior management*, 7, 77–88. <https://doi.org/10.2147/PRBM.S56013>
92. Vlăduț, C. I., & Kállay, É. (2010). Work stress, personal life, and burnout. Causes, consequences, possible remedies—A theoretical review. *Cognition, Brain, Behavior: An Interdisciplinary Journal*, 14(3), 261–280.
93. Vonderlin, R., Biermann, M., Bohus, M., & Lyssenko, L. (2020). Mindfulness-based programs in the workplace: A meta-analysis of randomized controlled trials. *Mindfulness*, 11(7), 1579–1598.
94. Weick, K., & Sutcliffe, K. (2006). Mindfulness and the Quality of Organizational Attention. *Organization Science*, 17, 514-524.
95. WHO (2019, May 28). Burn-out an "occupational phenomenon": International Classification of Diseases. Retrieved from: https://www.who.int/mental_health/evidence/burn-out/en/
96. Wigert, B., & Agrawal, S. (2018). Employee burnout, part 1: the five main causes. Gallup. 2018.
97. Wolever, R. Q., Bobinet, K. J., McCabe, K., Mackenzie, E. R., Fekete, E., Kusnick, C. A., & Baime, M. (2012). Effective and viable mind-body stress reduction in the workplace: a randomized controlled trial. *Journal of occupational health psychology*, 17(2), 246–258.
98. Yip, B., & Rowlinson, S. (2009). Job Redesign as an Intervention Strategy of Burnout: Organizational Perspective. *Journal of Construction Engineering and Management-asce*, 135, 737-745.
99. Young, A. E., Roessler, R. T., Wasiak, R., McPherson, K. M., van Poppel, M. N., & Anema, J. R. (2005). A developmental conceptualization of return to work. *Journal of occupational rehabilitation*, 15(4), 557–568.
100. Young, S. (2015). Understanding substance abuse counselor turnover due to burnout: A theoretical perspective. *Journal of Human Behavior in the Social Environment*, 25, 675–686.

Appendices

Appendix A: Informed consent form of the online survey

You are invited to participate in a web-based online survey.

This is a research conducted by Tamar Orjonikidze a Master of Management student at Hasselt University in Belgium.

The purpose of the research is to investigate how mindfulness interventions can help burned-out individuals to recover and return to the labor market.

It will take you 20 minutes to complete the survey.

Your rights as a research participant:

- Your participation in this survey is entirely voluntary.
- You do not have to answer any question or take part in the research study if you feel the question(s) are too personal.
- We comply with GDPR regulations. We do not collect identifying information such as your name, email address, or IP address. Therefore, your responses will remain anonymous.
- The information that we collect from this research project will be stored on the database of Hasselt University. After the study is completed, the records will be deleted.
- If you prefer to use a different format to participate in this research or if you have any questions about the rights of research participants or research-related concerns please contact Tamar Orjonikidze via email: tamar.orjonikidze@student.uhasselt.be

ELECTRONIC CONSENT: Please select your choice below.

Clicking on the "agree" button below indicates that:

- you have read the above information
- you voluntarily agree to participate
- you are at least 18 years of age

Appendix B: Online Survey Questionnaire

1. Please state your profile (age, gender, country, education level)
2. How would you describe your current employment situation? (employed/unemployed/on sick leave, position, industry/sector)
3. Do you consider yourself as a disabled person?
 - a) What disability do you have?
4. As you have experienced burnout in the past, please describe how the burnout process happened.
 - a) When did you experience burnout?
 - b) What warning signs did you notice first?
5. In your opinion, what factors caused your burnout?
6. Please describe how the recovery process from burnout happened.
 - a) When did you notice first signs of improvement?
 - b) What helped you to feel better again?
 - c) If you do not feel you have recovered from your burnout yet, please explain why?
7. How, if at all, has your view of work changed before and after experiencing burnout?
8. Please move to the question number 9 if you have NOT returned to work after sick leave due to burnout.

Describe your experience of returning to work after sick leave:

 - a) Did you return to the same job or did you change your job?
 - b) Were there any difficulties during this process?
9. How if at all, has your workplace addressed the factors that caused your burnout?
10. How, if at all, did your workplace support you during the burnout recovery process?
11. What do you think your workplace could do to support you during the process of recovery from burnout (including the process of returning to work after sick leave)?
12. What advice would you give to people who are recovering from burnout and returning back to work?
13. Mindfulness is a type of meditation in which you focus on being intensely aware of what you're sensing and feeling in the moment, without interpretation or judgment (Kabat-Zinn, 2004).
14. Practicing mindfulness involves breathing methods, guided imagery, and other practices to relax the body and mind and help reduce stress.
15. Please choose the mindfulness types that you have practiced (multiple choice possible)
 - a) Breath awareness meditation
 - b) Body scan or progressive relaxation

- c) Guided imagery
 - d) Zen meditation
 - e) Kundalini yoga
 - f) I have practiced mindfulness, but not sure which type of mindfulness it was
 - g) I have never practiced mindfulness
 - h) Other; please explain
16. Please, describe the setting in which you practiced mindfulness.
 17. Where did you practice mindfulness?
 18. How long did it last (minutes/hours)?
 19. Who initiated this practice?
 20. When did you practice mindfulness (before or after experiencing burnout)?
 21. How, if at all, did mindfulness practices affect your mental wellbeing?
 22. How, if at all, did mindfulness practices influenced or not influenced you during the recovery from burnout?
 23. Do you think your workplace can benefit from mindfulness practices?
 24. How if at all, have mindfulness practices influenced you and your life?

If the answer to question 15 is option g) I have never practiced mindfulness:

15. Would you like to try to practice the mindfulness and why?
16. How if at all, do you think mindfulness practices could influenced or not influenced you during the recovery process from burnout?
17. How if at all, do you think mindfulness practices could influence or not influence your workplace?

Appendix C: Call for participation for the organizations

Dear,

I am a Master of Management student at Hasselt University in Belgium. For my Master's thesis supervised by Dr. Frederike Scholz, I am researching how individuals with burnout experience reintegrate back into work.

I am interested in the process of returning back to work after burn-out and how Mindfulness interventions can help burned-out individuals to reparticipate in the labor market and what other personal benefits it can bring to them.

For this research I am looking for volunteers that have experienced burnout before and have returned to work after this experience.

Complying with the Ethics of undertaking research, the research will be done in form of anonymous online surveys, personal data of participants will be protected in compliance with GDPR.

I would be very grateful if you could support my research and could share the call for participation with your employees.

The positive aspect of your participation could be the insights from the thesis that I will happily share with you after completion, which could be interesting for the HR policies within your organization to better understand what happens with the employees after burnout, how they might perceive work after that and how beneficial can be using Mindfulness to help them return to work.

Please do not hesitate to get in contact with me if you have any further questions/concerns etc via email.

I look forward to hearing back from you.

Best regards,

Tamar Orjonikidze

Beste

Ik ben een Master of Management student aan de Universiteit Hasselt. Voor mijn Masterproef onderzoek ik de reïntegratie van de medewerkers na een burn-out. Ik ben geïnteresseerd in de mogelijke verandering in de arbeidsbeleving van de medewerkers na een burn-out en hoe verschillende technieken, zoals mindfulness, hen kunnen helpen om opnieuw deel te nemen aan de arbeidsmarkt.

Het onderzoek zal worden gedaan in de vorm van interviews (online) met de medewerkers die eerder een burn-out hebben meegemaakt en zich met mindfulness hebben beziggehouden, de interviews zullen anoniem zijn.

Ik zal u zeer dankbaar zijn als u mij zou kunnen helpen met mijn onderzoek en mij zou kunnen benoemen tot de verschillende mensen binnen uw organisatie die eerder een burnout hebben meegemaakt.

Ik denk dat dit onderzoek ook interessant kan zijn voor uw organisatie, met name voor het HR-beleid, om een beeld te krijgen van wat er met de medewerkers gebeurt na een burnout, hoe ze het werk daarna ervaren en hoe nuttig het kan zijn om verschillende technieken zoals Mindfulness in te zetten om hen weer aan het werk te krijgen.

Ik kijk uit naar uw antwoord,

Mvg,

Tamar Orjonikidze

Appendix D: Call for participation - social media post

Hello,

I am a Master of Management student at Hasselt University in Belgium. For my Master's thesis, I am investigating how individuals with a burnout experience reintegrate into the workforce.

For this research, I am looking for volunteers who have previously experienced burnout and returned to work after this experience.

I would be very grateful if you would support my research and participate in the study if you have experienced burnout before. Here is a link to the anonymous survey with open questions that takes 20 minutes to complete (languages can be changed on the right side of the page): *(link to the survey)*

If you have any questions/concerns about the research via comments below, private message or email: tamar.orjonikidze@student.uhasselt.be

Kind regards,

Tamar Orjonikidze

Hallo,

Ik ben een Master of Management student aan de Universiteit Hasselt in België. Voor mijn Masterproef onderzoek ik hoe individuen met een burn-out ervaring re-integreren in de beroepsbevolking.

Voor dit onderzoek ben ik op zoek naar vrijwilligers die eerder een burnout hebben ervaren en na deze ervaring weer aan het werk zijn gegaan.

Ik zou u zeer dankbaar zijn als u mijn onderzoek zou willen steunen en mee zou willen doen aan het onderzoek als u eerder burnout heeft ervaren. Hier is een link naar de anonieme enquête met open vragen die 15 minuten duurt om in te vullen (taal kan worden veranderd in het Nederlands aan de rechterkant van de pagina): *(link to the survey)*

Als u vragen/bezorgdheden hebt over het onderzoek via opmerkingen hieronder, privébericht of e-mail: tamar.orjonikidze@student.uhasselt.be

Met vriendelijke groet,

Tamar Orjonikidze