BEING INTENTIONAL ABOUT WORKPLACE MINDFULNESS PROGRAMS

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SUMMARY: In the past decade mindfulness practices, one component of employee and organizational wellbeing, have become more prevalent in workplaces. How can organizations design and implement workplace mindfulness programs? To answer that question, a short history of mindfulness programs is presented. Further, types of workplace mindfulness programs and their corresponding emphases and benefits are discussed. The pros and cons of mindfulness practices are identified as well as cautions when designing workplace mindfulness programs. The business case for supporting mindfulness as a dimension of employee wellness and healthcare is presented.

Introduction

As a dimension of employee wellbeing and healthcare, mindfulness has become a buzzword in healthcare during the past few years. Simply put, mindfulness has been defined by Kabat-Zinn, the creator of Mindfulness Based Stress Reduction (MBSR) programs, as “awareness, cultivated by paying attention in a sustained and particular way: on purpose, in the present moment and non-judgmentally” (2012/2016, p. 1). In essence, “mindfulness describes a comprehensive, integrated approach toward improving health and productivity in work environments” (Solon & Kratz, 2016, p. 31).

Organizations such as Apple and Google have embraced mindfulness and have implemented programs to foster employee wellness, resulting in “better performance, heightened creativity, deeper self-awareness, and increased charisma—not to mention greater peace of mind” (Harvard Business Review Press, 2017, p. back cover), all of which contribute to an enhanced business bottom line. In addition to Apple and Google, other notable organizations that provide mindfulness programs for their employees include Accenture, American Express, General Electric, Ikea, KLM, Microsoft, Nike, Ogilvy, Roche, Royal Bank of Canada, and Sony (Hougaard, Carter, & Coutts, 2015). Smolkin (2016) reported that 22% of organizations currently have mindfulness programs.

This article presents information about the history of mindfulness, the types of workplace mindfulness programs, the pros and cons of organizational mindfulness programs, and the business case for supporting mindfulness as a dimension of employee wellness and healthcare.

Short History of Mindfulness

Mindfulness practices have a long history stemming from Eastern traditions such as Buddhism and Taoism (Brendel, 2017). In 1979 mindfulness-based stress reduction programs were launched at the University of Massachusetts by Kabat-Zinn. Langer wrote the classic book Mindfulness in 1989. In 1996 the first empirical research project about mindfulness in the workplace was conducted. The mobile mindfulness app Headspace was made available in 2012. In 2013 the number of articles about mindfulness totaled 549. Mindful, a new magazine, was launched in 2013 to promote mindfulness. Time magazine featured The Mindful Revolution on its cover in 2014. A mindfulness segment featuring Anderson Cooper was aired on the television show 60 Minutes in 2014 (Frey & Totten, 2015). The coverage of mindfulness has grown dramatically in recent years.
Types of Workplace Mindfulness Program

Generally speaking, mindfulness programs can be classified as contemplative or non-contemplative. Contemplative-based mindfulness programs are those that “emphasize shortened versions of contemplative practices such as meditation” (Yeganeh & Good, 2016, p. 26). Non-contemplative based programs introduce practices that focus on “analyzing automatic routines, shifting attention to the five senses, and mindful thinking” (Yeganeh & Good, 2016, p. 26).

In addition to seated meditation, contemplative-based mindfulness programs can include practices such as walking meditation, focused breathing activities (pranayama), yoga in its many forms, chanting, and tai chi and its variant forms. These longstanding contemplative Oriental practices are widely perceived by healthcare professionals as means for reducing stress and increasing employee wellbeing (e.g., Dwivedi, Kumari, & Nagendra, 2015). All of these practices require a moderate amount of intentionality, which is conscious awareness of what you are doing and why you are doing it, and engagement, which is full and active participation.

Practitioners find that many traditional but difficult-to-master exotic contemplative practices appeal to only some employees. For example, employees who have xenophobic tendencies and strong cultural attachment to the American way of life may shy away from foreign-originated contemplative-type health and wellness activities such as meditation and chanting. For those who have experienced trauma or post-traumatic stress disorder (PTSD), the closing of eyes during meditation activities may cause anxiety. Others may perceive the names of certain common yoga poses such as savasana (corpse pose, which is traditionally the last pose practiced in a yoga class because it is relaxing) as revolting and culturally unacceptable. Atheists oftentimes object to engaging in the anjali mudra (prayer pose with the palms of the hands together by the heart center), another common yoga pose, because of their beliefs. The Sanskrit yoga vocabulary used by most teachers puzzles and alienates some neophyte yoga learners. Chanting may be perceived as having a mystical or spiritual connotation that can be objectionable or unacceptable to some employees. Others may frown upon these contemplative practices and embrace easier-to-master less traditional but more practically oriented non-contemplative techniques such as journaling and mindful eating.

Non-contemplative mindfulness programs consist of three basic approaches: modifying automatic responses, focusing on the five senses, and thinking mindfully. Modifying automatic responses involves moving from subconscious autopilot reactions to consciously aware ways when necessary. Such automatic behaviors are helpful when they are appropriate; in other words, these behaviors “enable us to save energy for new situations by reducing energy spent on the things we do every day” (Yeganeh & Good, 2016, p. 27). In new situations, automatic responses should be set aside to avoid catastrophic thinking and related calamities.

Focusing on the five senses of seeing, hearing, touching, smelling, and tasting allows employees to disrupt their automatic response patterns and to obtain a more accurate multisensory perspective of reality. Noticing the details of the workplace environment shifts the observer’s mind to the senses. For example, seeing a colleague’s facial expressions while speaking shifts the observer’s attention by engaging in the present moment (Yeganeh & Good, 2016). While some may perceive engaging the senses as a passive or useless activity, “intentionally engaging the senses is a powerful way to shape how we pay attention to the present moment” (Yeganeh & Good, 2016, p. 29).

Mindful thinking focuses around accepting the moment rather than rejecting it. The practice of acceptance allows employees to switch from the unhealthful, stress-inducing worrying mode to the healthful, stress-reducing caring mode (Yeganeh & Good, 2016). For example, rather than responding to a colleague who is unprepared for a meeting by thinking “I can’t believe this person is not fully prepared; what a waste of everyone’s time when we all have lots of work to do,” a mindful thinker might depersonalize the situation and think “I am very annoyed by this; it’s all right for me to be angry with unprepared colleagues occasionally.” This acceptance of the emotion allows the person to move on to address the situation constructively.
Pros and Cons of Organizational Mindfulness

The pros and cons of selected organizational mindfulness practices are presented in Table 1. Most of the listed mindfulness practices are contemplative with journaling and mindful eating standing out as non-contemplative practices. Primary benefits and drawbacks are presented.

Table 1
Primary Intended Benefits and Primary Potential Drawbacks of Selected Mindfulness Practices

<table>
<thead>
<tr>
<th>Mindfulness practice</th>
<th>Intended benefits</th>
<th>Potential drawbacks</th>
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<tbody>
<tr>
<td>Meditation</td>
<td>Reduces stress levels</td>
<td>Misguided beliefs that meditation requires long periods of time</td>
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<tr>
<td>Pranayama* (breathing practices)</td>
<td>Increased level of energy</td>
<td>Perceived by some as difficult to experience calmness</td>
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<td></td>
<td>Can promote sleep</td>
<td>Perceived confusion about which yoga style(s) to practice</td>
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<td></td>
<td></td>
<td>Viewed as costly at yoga studios (except for community classes)</td>
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<tr>
<td>Yoga</td>
<td>Reduces stress levels</td>
<td></td>
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<tr>
<td></td>
<td>Fosters mind-body connection</td>
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<tr>
<td>Chanting</td>
<td>Clears the mind</td>
<td>Requires a separate room</td>
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<td></td>
<td></td>
<td>Inhibited participant responses</td>
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<tr>
<td>Journaling</td>
<td>Allows processing of emotions</td>
<td>Can be done virtually anywhere, any time</td>
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<tr>
<td></td>
<td>May reduce stress levels</td>
<td>Considered difficult by some</td>
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<tr>
<td>Mindful eating</td>
<td>Allows focus on food consumed</td>
<td>Requires self-discipline</td>
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<td></td>
<td>Identifies emotional eaters</td>
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<td></td>
<td>Reduces tendency to eat on autopilot</td>
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*Note. Benefit varies depending on the type of breath practiced.

Most of Fidelity’s 2016 survey of Employer-Sponsored Health and Wellbeing revealed that the level of employee engagement in wellness programs ranged from 10% for consulting a life coach to 53% when employees completed a basic health survey (Fry, 2017). Lewis (as cited by Fry, 2017, p. 99) distinguishes wellness programs and benefits that are done for employees from “wellness done to employees,” which includes compulsory weight-loss programs among other initiatives.

The language used during a wellbeing program can influence the acceptance of the mindfulness program. Reitz (2016/2017) suggests using the words “performance” and “attention” in addition to the word “mindfulness” during presentations and workshops since the word “mindfulness” has a negative connotation for some people and its use may discourage employee participation.

Silcox (2016) recommends using the following strategies when introducing and building a wellbeing program: (a) involve employees in policy development, (b) use multiple media to communicate about the wellbeing program, (c) use company data (e.g., about absences) and data gleaned from employee surveys when designing a wellness program, (d) determine how to hook
employees who typically do not participate in wellness programs (men often participate at a lower rate than do women), (e) follow and evaluate wellness program participation rates, (f) consider holding workplace competitions and giving recognition, (g) schedule health seminars and fairs featuring speakers from outside the firm, (h) consider using interactive activities since they have been found to sustain interest, (i) schedule a launch for each new wellbeing activity, (j) provide staff with adequate notice about events to encourage participation, and (k) give employees time off from work responsibilities to engage in wellbeing activities.

One potential practice is to have employees complete a mindfulness questionnaire twice: once as a pretest before training begins and again following the training as a posttest measure. While there are several instruments from which to choose, a commonly used public domain measure is the Five Facet Mindfulness Questionnaire (FFMQ). The FFMQ focuses on the five mindfulness components of observing, describing, detaching, acting mindfully, and loving yourself (being self-compassionate) (Baer, Smith, Hopkins, Krietemeyer, & Toney, 2006; Strosahl & Robinson, 2015).

Forty workplace mindfulness intervention programs disseminated in the literature were analyzed by Jamieson and Tuckey (2017, p. 189). Of these intervention programs, 22 investigated the “effect of mindfulness interventions on at least one aspect of employee health or well-being.” Results from three of the less robust studies did not support the use of mindfulness intervention programs in the workplace; nevertheless, most of the studies produced results that corroborate the efficacy of mindfulness programs. Duarte and Pinto-Gouveia (2016) introduced a six-week mindfulness-based intervention program to oncology nurses. This intervention involved exposure to mindful eating, mindful communication, pranayama (breathing exercises), and various types of meditation and appeared to reduce burnout and helped to decrease compassion fatigue.

Workplace mindfulness programs should be voluntary, not imposed on employees (Brendel, 2017). The voluntary nature of workplace mindfulness programs encourages employee participation.

**Business Case for Supporting Mindfulness**

The current business environment has been dubbed the attention economy in which “the ability to maintain focus and concentration is every bit as important as technical or management skills” (Hougaard & Carter, 2017, p. 40). Langer (2017), who has conducted mindfulness research for over 40 years, identifies better performance, greater innovation, enhanced charisma, a lower level of procrastination, and being less judgmental about other people as mindfulness practice benefits.

Congleton, Holzel, and Lazar (2017) assert that mindfulness research results have revealed that mindfulness is now a necessity for executives. Two areas of the brain that are positively affected by mindfulness practice are the anterior cingulate cortex, important in self-regulation, and the hippocampus, which is central to resilience (Congleton et al., 2017).

Chakravorty (2017, p. 29) reported that a mindfulness program introduced in a critical care unit (CCU) resulted in “a significant increase in throughput, (e.g., number of patients admitted in CCU per year), a decrease in work-in-process (e.g., average number of hours in CCU per patient), and an increase in quality (e.g., live discharge) with a slight decrease in cost.” Staff were encouraged to engage in meditation for five to ten minutes every few hours. Prior to treating a patient, staff were asked to “clear their mind[s] for one to two minutes” and taught “to communicate often with other caregivers about patient condition.”

Although research has indicated that mindfulness training provides several benefits, practicing mindfulness is not a panacea for all ills. While mindfulness practice is a valuable endeavor, the practice is only one of several potential offerings that can be beneficial for employees. As Connolly, Stuhlmacher, and Cellar (2016) so elegantly stated, “Given the variety of objectives, techniques, and outcomes, it is imperative that mindfulness training receives mindful scrutiny” (p. 682). Above all, it is important to acknowledge that results from workplace mindfulness programs take time to become apparent (Adams, 2016).
Conclusion

Workplace mindfulness programs have become widespread—perhaps even trendy—over the last decade. While several research studies have demonstrated various wellbeing benefits stemming from corporate mindfulness programs including decreased costs, diminished compassion fatigue, and reduction of stress levels, care should be taken in the design and implementation of workplace mindfulness programs with experts. Involving employees during the program design, implementation, and follow-up stages is critical to the success and sustainability of mindfulness program participation. Evaluation of program results should be conducted on an ongoing basis to determine the efficacy of the program and to identify aspects that should be added, changed, or omitted. Follow-up training offerings would be a mindful practice to encourage employee and program sustainability.

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References


