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Protective Factors of Burnout: Resilience and Mindfulness

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Abstract

The aim of present research is to study the combined effects of two variables, namely, mindfulness and resilience on one outcome measure, namely, Burnout as well as investigating the relative contribution of mindfulness and resilience to reduce Burnout among college students. Individuals face persistent stress and demands in their personal and professional lives and remain at a constant risk of Burnout due to academic work, pressure and high competition. Burnout affects the mental health and performance of young adults. Mindfulness and Resilience have been recognized as protective factors against Burnout and helps to cope with the stress associated with it. The study composed a sample of 74 individuals (Male=34, Female=40) using The Five Facet Mindfulness Questionnaire (FFMQ-15), Brief Resilience Scale (BRS) and Oldenburg Burnout Inventory (OLBI-S). Quantitative research design has been used and Regression analysis found significant predictors (Mindfulness and Resilience) of Burnout. The obtained results for regression analysis, the F= 11.081, p<0.001 values indicates that the concerned factors have significant impact on Burnout and the R² value found 0.238 which depicts 23.8% of the total variance for Burnout. It concluded that increased Mindfulness and Resilience among college students leads to lower feelings of Burnout. Interventions, trainings, workshops and counseling become necessary in educational perspectives to provide the coping strategies with the negative outcomes of Burnout through practices of Mindfulness and Resilience.

Keywords: Mindfulness, Resilience, Burnout

1. Introduction

As a college student, feelings of fatigue, reduced performance and detachment are experiences that might happen after a person has had a packed and challenging couple of days. It along with several other emotions factoring in, is defined as Burnout. The 11th division of the ICD-11 (International Classification of Diseases) defines Burnout as an occupational phenomenon. While not being classified as a medical condition, Burnout has its signs and symptoms. It is caused by exposure to chronic workplace stress which is then poorly managed. It is characterised by three dimensions, according to the ICD-11:

- Feelings of energy depletion and exhaustion
- Elevated internal separation from one's job, or emotions of negativism or cynicism related to one's job; and
- Reduced professional efficacy.





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Above mentioned factors play a major part in reducing interest and willingness to engage in productive work and complete tasks. In an educational setting, Burnout may occur due to hectic schedules, extreme academic workloads and struggle to keep up with certain expectations. Burnout is most often defined as an internal emotional response caused by external stimuli and the psychological state amassed from prolonged emotional or psychological stress, commonly when working (Adriaenssens et al., 2015). Poor management of extended and prolonged stress factors in to cause loss in motivation, decreases focus, impairs creativity and eventually leads to manifestations in the individual's physical health. Headaches become a common occurrence, loss of appetite becomes usual, and healthy living patterns get disrupted (Bakker et al., 2014).

Burnout has been perceived to be a common phenomenon occurring amongst college students in favour of academic pressures and future uncertainties. Concurrent family demands limited or no physical exercise, poor time management, unrealistic goals, difficult relationships, and piles of work are a few of the factors which directly lead to Burnout. It is also important to note that Burnout does not happen overnight, instead it develops through persistent exposure to chronic stress and managing stress poorly. Overload, role vagueness, extrinsic sense of gratification, satisfaction and job resources have been found to predict Burnout (Maslach et al. (2001). Therefore, it can be said that when an individual has excessive workloads, lesser time available and low energy and recovery, or conflicting roles, found more likely to experience Burnout.

To combat such feelings of Burnout, Mindfulness and Resilience have been found effective. While it is a relatively new aspect of research, the relationship between these has been established. Since it has been linked to benefits in attention, acceptance, cognitive, emotional, behavioural, and physiological areas, Mindfulness has gained popularity in recent years and has been shown to be an effective method for reducing Burnout. (Charoensukmongkol, 2013; Di Benedetto et al., 2014; Duarte et al., 2016; Good et al., 2016).

In basic terms, Mindfulness can be defined as an attentive, aware, non-judgmental and present-focused state (Brown et al., 2003). Mindfulness has been considered as a trail, as well as a state (Sternberg, 2000). While being a state, it can be chosen by an individual, but being considered as a trait, Mindfulness can be adopted on a day-to-day basis and having the ability to be improved and cultivated through practice. A wide variety of aspects improve once Mindfulness becomes a regular practice within an individual, such as physiological wellbeing, mental and spiritual wellbeing, tolerating and managing distress, emotional intelligence, psychological flexibility, and preventing Burnout.

Researchers argue that Mindfulness is a promising factor against Burnout and combating the psychological distress that it causes. It is mainly because Mindfulness enables a person to deal better with all kinds of negative emotions by being tolerant and accepting of them (Shapiro, 2012). Finding a realistic balance is the essence of Mindfulness and problems arise when its realistic balance between goad directedness and non-judgmental acceptance has been lost. Mindfulness can also lead a person to introspect and gain insight, epiphanies and knowledge about themselves and their identities. It also helps recognise unhealthy behaviour patterns which might be hindering productivity. An individual is thus enabled to make better choices and bring about positive change through hope and knowledge.

Thus, to address Burnout, Mindfulness targets a moment-by-moment experience while also being nonjudgmental and present minded. It goes through intentions. Mindfulness based interventions such as Mindfulness-based cognitive therapy (MBCT) and Mindfulness-based stress reduction (MBSR) are



found to be especially effective for reducing stress, anxiety and depression, commonly caused due to Burnout.

Resilience is another factor recognised by research, which helps in managing Burnout (Harker et al, 2016; Rushton et al., 2015). Resilience refers to the capacity to withstand certain difficulties while also bouncing back from such tough situations by being mentally strong. According to the APA, Resilience is defined as the process and after-effect of successfully accommodating to tough or demanding life experiences, especially through mental, emotional, and behavioural inflexibility and adaptation to extrinsic and intrinsic adversities. Several factors contribute to Resilience and how well an individual adapts to adversities, some of which are:

- the manner in which an individual perceives and engages with their environment
- the social resources available to them and their quality
- coping strategies which are specific to the individual.

Psychologists have noted that such skills can be developed and cultivated in an individual through practice to achieve greater Resilience. A resilient individual can be recognised through their survivor mentality, emotional control, rational problem solving, self-acceptance, self- compassion and having a healthy social support system. Uncertainty is a part of life, and how one copes with it determines the quality of their life. In the face of setbacks, such as Burnout, using this mental strength to remain hopeful and move forward is a sign of Resilience. Along with mental Resilience, emotional Resilience is just as important.

The way one handles emotions to remain calm and optimistic and in control when faced with tough times is representative of emotional Resilience. The locus of control in a resilient individual is usually high, which means that they have the belief that their actions play a significant part in determining the outcome of certain events. Resilience can be seen as a personal trait, process as well as an outcome which helps in protecting against trauma impacts (Burns et al. 2010; Hu et al., 2015), while also acknowledging cognitive and behavioural proclivity that help in coping with and successfully overcoming challenges.

In today's fast paced world, Resilience becomes a very important factor in dealing with distress and Burnout (Connor, 2006). Such people are able to adapt better to changes as they can realize its importance and can induce positive emotions while also responding constructively (Fredrickson et al. 2003; Shin et al. 2012). Resiliency results in stronger realist view, flexibility, improvisation, creativity and satisfaction.

This study aims to establish further evidence towards Mindfulness and Resilience in helping lower Burnout amongst undergraduate students. It is important to cultivate results that can benefit the education process and help to develop better curriculums and systems for efficient as well as effective learning. Students should receive guidance from the education system while dealing with difficulties like Burnout. Mindfulness and Resilience-based interventions can be taught and fostered amongst students to equip them in the face of adversities and demanding college work.

2. Literature Review

Gerson (2020) conducted qualitative research on combining Mindfulness and Resilience training to address occupational Burnout. It established that Burnout is a phenomenon which involves struggle with managing certain aspects of a job, leading to rumination about the past and worry about the future.



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Resilience is an important factor in helping cope with such stressful situations. Another factor, Mindfulness is closely related to numerous positive psychological outcomes such as low levels of worry, anxiety, depression, and anger and higher levels of hope, gratitude, happiness and vitality. Memory, self-regulation, executive functioning and impulsivity are mechanisms which have been found to be related to Mindfulness. The intervention was conclusive of the fact that Mindfulness lowered perceived stress and psychological distress. Burnout was not as heavily impacted due to it being a multi-faceted and complex factor that cannot simply be explained through the singular concept of Mindfulness. It may be beneficial for an individual's long-term well-being to actively prioritize pursuing and managing things that are under one's control. Taking internal responsibility to improve and change behaviours are some factors which predict Resilience and should be taught to adults for better quality of life.

Hanson et al. (2020) conducted a mixed method study by on Burnout, Resilience and perception of Mindfulness programs among general practice trainees, on 120 second- and third-year GP trainees. The research found that General practice (GP) trainees experience stress and Burnout and have a degree of desire for their wellbeing through Resilience support and Mindfulness programs. The trainees felt that Mindfulness was not viewed as a solid concept that could actually be of help. Accepting weakness and perceived lack of skills has been found to negatively impact these practitioners and risk Burnout. Benefits of better mental health and work-life balance achieve a more well-rounded set of skills to deal with the pressures serve as reason to include Mindfulness training.

Lee et al. (2020) studied Mindfulness, Resilience, emotional exhaustion and turnover intention through 246 physical educators. The study establishes a positive relationship between Mindfulness and Resilience and a negative association of Resilience with emotional exhaustion and turnover intention. It can be said that while Resilience partially explained the relationship between the two variables, emotional exhaustion fully explained the link between Resilience and turnover intention. Interventions aimed at Mindfulness show positive promise in populations of school children, adolescents and various other groups. Mindfulness, a fluid skill, has the capacity to be improved with practices such as meditation, Pilates, Gyro-kinesis and Taiji Quan. Apart from these, various structured programs focused on listening, not passing judgments, self- regulation, compassion and emotional awareness also prove to be immensely helpful with improved job- related attitudes and enhanced wellbeing. Deflecting feelings of emotional exhaustion is another crucial aspect of Resilience that is cultivated through these techniques.

Merdiaty et al. (2020) carried out another quantitative study which analysed Mindfulness as a mediator in the effect of Resilience on Burnout, with a sample of 250 workers. A direct influence is found between Resilience and Mindfulness; and Resilience and Burnout. It is determined by the study that Mindfulness is a direct factor to combat against Burnout, and Resilience is indirectly connected to Burnout, along with Mindfulness as a mediator. Meditation as a medium of relief has immense benefits to minimize the struggles related to Burnout. Job performances are greatly affected due to repeated exposure to stressors which can lead to Burnout. Workers and employees must be aware of their feelings and emotions in terms of Burnout and be willing to lower these levels. They should know that these techniques can be of use to them. They can then recognize Resilience and Mindfulness as a method to cope with Burnout. Such practices are useful in better organizational outputs along with the personal wellbeing of its employees.

Elkady (2019) conducted a survey research on 130 female nurses to study Mindfulness and Resilience as predictors of job burnout among nurses in public hospitals and concluded that nursing is a stressful



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profession which leads to reduced job satisfaction and increased intent to abandon the profession altogether. However, nurses who possess resiliency and the ability to respond to career difficulties with Mindfulness are seen to stand strong in such stressful situations. Significant correlations were found between resiliency, Mindfulness, and job satisfaction, and job Burnout prevention programs should include Mindfulness and Resilience, two very important factors. Mindfulness correlates positively with Resilience and negatively with job Burnout, it also one of the factors which encourages wellbeing, emotional intelligence, empathy, self- compassion, and Resilience; and buffers against Burnout, stress and other negative consequences. Mindfulness is a protective factor against Burnout and is also positively associated with self-compassion.

Tu et al. (2019) conducted a significant study by using the survey method to examine Mindfulness and Resilience as predictors of Burnout in 176 individuals. The study found that there has been increased association with attention, cognition, emotion, behaviours, and physiological benefits and Mindfulness along with Resilience to cope up with Burnout. It has been found to reduce stress, depression and anxiety and improve overall wellbeing. The findings of the study indicate that while both Mindfulness and Resilience have been linked negatively with Burnout, Mindfulness is a better predictor. It may possibly be because of the relaxing and calming properties that Mindfulness-based interventions offer. Focusing on the present moment allows the mind to have an increased awareness and to focus on themselves instead of being judgmental and having ruminating thoughts which cause emotional exhaustion and physical fatigue, two basic factors which induce Burnout. Therefore, it can be said that individuals with high Mindfulness is a stronger predictor of Burnout than Resilience.

Murali et al. (2018) conducted a study on Burnout, Resilience, and described that Burnout as a common issue among medical and surgical professionals, with physicians reporting higher rates compared to other fields and experiencing it even during medical school. There are various personal, professional, and organizational factors associated with physician Burnout, and interventions to reduce Burnout often focus on Resilience and Mindfulness. Resilience can potentially protect against Burnout and mediate the relationship between Burnout and mental health. Self- compassion and Mindfulness are often essential components of Resilience and can be taught. Additionally, finding meaning in work and intrinsic motivation can also protect against Burnout.

Lebares et al. (2017) conducted a study of Burnout and psychological on 566 surgical residents. The study examined the relationship between dispositional Mindfulness and Resilience in surgical trainees. The findings showed that higher dispositional Mindfulness was associated with a lower risk of Burnout, severe stress, and distress symptoms. These results suggest that dispositional Mindfulness could be a trainable asset that enhances stress-Resilience in surgical trainees. The study suggests that Mindfulness training could be a critical component of any intervention aimed at enhancing stress Resilience and preventing or treating Burnout in surgical trainees. The study also found that overwhelming stress, in the absence of adequate coping skills, has a critical relationship to Burnout, although the direction of causality is not clear. It is noted that a toxic threshold of stress seems to exist, as evidenced by the remarkably high prevalence of distress symptoms and the dramatic increase in risk when high stress is present. The study provides evidence that dispositional Mindfulness is a potentially modifiable personal characteristic that confers Resilience to stress in surgical trainees. Mindfulness training may be a critical component of any intervention aimed at enhancing stress fress training may be a critical component of any intervention aimed at enhancing or treating Burnout in this population.



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Matingbay et al. (2017) used a quasi-experimental design and conducted their study on 50 nurses to study Resilience, anxiety, stress, happiness, and Burnout. The research concluded that the Stress Management and Resilience Training Program (SMART) is an intervention to decrease stress, anxiety, and Burnout. It was used as an intervention for nursing professionals and did result in significant improvements across levels of anxiety, stress, Mindfulness, happiness, and Burnout. The results showed effectiveness as soon as 8 weeks, with the maximum decrease being in anxiety levels.

Harker et al. (2016) conducted survey research on 133 human service professionals to explore Resilience and Mindfulness as preventative factors against psychological distress and Burnout. The study found that lower levels of psychological stress, burnout, and secondary traumatic stress can be achieved by cultivating Mindfulness and Resilience. These factors play a part in minimizing risk of negative psychological outcomes. While the results indicated a relation between low levels of Burnout and higher levels of Resilience and Mindfulness, high Resilience had a better significance to low levels of psychological stress. Mindfulness was not as significant in terms of predicting stress. Burnout, in turn, was found to be a predictor of psychological distress. It was concluded that learning and practicing Resilience and Mindfulness will help in managing issues of Burnout and stress.

Goldhagen et al. (2015) studied stress and Burnout in medical residents and the impact of Mindfulnessbased Resilience training and determined that stress and Burnout in medical residents is imminent and prevalent. It can be reduced by Mindfulness-based Resilience interventions which although don't have direct effect on stress and Burnout but result in lowering stress and Burnout scores at later time points. A review of studies done also shows that stress reduction programs for medical residents such as meditation practice, half-day workshops and coping interventions show improvements, however further research is necessary. It is concluded that Burnout is related to self-reported stress levels. Findings suggest that resiliency training can be helpful for residents who perceive their residency to be stressful.

Montero-Marin et al. (2015) studied Mindfulness, Resilience, Burnout subtypes, positive affect and negative affect through a cross-sectional study design on 622 Spanish primary care physicians. The research concluded that Burnout has several subtypes which are influenced by both Resilience and Mindfulness, but their impact may be seen in different ways. While initial stages of Burnout can be treated effectively through Mindfulness interventions, more advanced and complex Burnout stages can be treated through Resilience-based interventions. Mindfulness helps prevent vulnerability to various psychopathological disorders, like depression, as it is a stable trait according to neuro-imaging findings and other biological variables. It was found that Mindfulness had a negative but moderate relationship with overload, which is the first stage of Burnout. On the other hand, Resilience had a negative but moderately high relationship with neglect, which indicates that high levels of engagement could be related to Resilience, potentially mediated by positive affect. Resilience and Mindfulness may work well together to prevent Burnout. Resilience promotes balanced involvement, personal growth, and engagement while recovering positive affect.

Olsen et al. (2015) studied Resilience, Mindfulness and Burnout in paediatric residents through a crosssectional survey method. A sample of 45 first-year paediatric and medicine- paediatric residents was analysed. Study examined the relationships between Mindfulness, Resilience, self-compassion and Burnout. It was found that these individuals more often than not, meet the criteria for Burnout despite showing relatively high levels of Resilience, self-compassion and Mindfulness. It occurs due to the high prevalence of emotional exhaustion and targeting emotional exhaustion is important for interventions focused on Mindfulness and self-compassion. Self-compassion was found to be positively associated



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with emotional intelligence. Such trainings can improve quality of life, decrease Burnout and result in betterment of trainable qualities among medical professionals. On the patient front, it leads to improvement in quality of care and increase empathy.

Abott et al. (2014) studied Mindfulness-Based Stress Reduction Mindfulness-Based Cognitive Therapy, and conducted a meta-analysis of randomised controlled trials of 578 participants and found that Mindfulness based stress reduction (MBSR) and Mindfulness based cognitive therapy (MBCT) interventions have proven to be useful in providing psychological benefits. Coping strategies help patients with vascular diseases in the long-term to deal with the perceived psychological stress. Mindfulness based approaches to aid with coping, healing and mental health of such patients has been linked to have promising psychosocial effects. Mindfulness interventions are also effective on individuals who do not necessarily have high levels of anxiety, stress and depression and benefits to their perceived emotional well-being and psychological health, reducing rumination, and improving behavioural self-regulation. Apart from dealing with distressing signals, it helps in regulating a wide variety of mood states. Greater self-compassion, mindful movements such as yoga and increased physical activity are examples of some beneficial interventions, even though their specific mechanisms are unknown.

Baer et al. (2006) applied exploratory factor analyses to explore facets of Mindfulness of 613 undergraduate psychology students and the study found that Mindfulness is a multifaceted construct with five distinct facets, and four of these facets (describe, act with awareness, non-judge, and non-react) consistently relate to a variety of other variables in expected ways. The study also suggests that Mindfulness is a skill that can be developed with practice, and non-reactivity and non-judging of inner experience are useful facets that may operationalize acceptance. The study further found that four Mindfulness facets are significantly related to psychological symptoms in the expected direction, and three of these contribute independently to the prediction of symptom level, suggesting that the skills are important in teaching Mindfulness for purposes of symptom reduction. Overall, the study highlights the importance of measuring complex constructs at the facet level for understanding their relations with other variables and suggests that Mindfulness training can contribute to reductions in symptoms and improved well- being.

3. Methodology

Objective

The main objectives are as follows: -

- 1. To study the impact of Mindfulness on Burnout
- 2. To study the impact of Resilience on Burnout.

Variables

Independent Variable: - **Mindfulness and Resilience** Dependent Variable: - **Burnout**

Hypothesis

The following hypotheses were formulated: -

- 1. H₀- It is expected that there will be no negative impact of Mindfulness on Burnout.
- 2. H₀- It is expected that there will be no negative impact of Resilience on Burnout.



Research Design

A quantitative research design was adopted to study the influence of independent variables on dependent variable. Numerical data was taken through Google Forms with reliable and valid standardized tools.

Data Collection

The Google form was distributed to undergraduate students and all were chosen through random sampling from Delhi NCR region of India. The research consisted of a total of 37 questions from 3 different scales. Before every attempt, the participants were given the guarantee of confidentiality and were then instructed to respond in an honest and impartial manner. There was no time limit for the task but were asked to complete it as soon as possible.

Tools

The Five Facet Mindfulness Questionnaire (FFMQ-15)-

Given by Bear et al. (2015), FFMQ-15 is a self-report measure consisting of 15 items which measures Mindfulness through five subscales, namely- Observation, describing, acting with awareness, non-judgment, and non-reactivity. The subscales have high levels of reliability and internal consistency, with the Cronbach alphas for the subscales in the range of 0.73-0.91. Evaluation has also revealed the FFMQ-15 to have high validity. All 15 items have 5 options, ranging from "Never or very rarely true" to "Very often or always true". The scoring also ranged from 1 to 5, 1 being for "Never or very rarely true" and 5 being for "Very often or always true". No items have reversed scoring. The FFMQ-15 was adapted from the original FFMQ-39 which consisted of a total of 39 items with the same subtypes. Upon testing, the FFMQ-39 and FFMQ-15 were found to have significant similarities in their constructs. Their convergent validities were very similar. Hence, for briefer surveys, FFMQ-15 is a good and applicable alternative (Gu et al., 2016).

Brief Resilience Scale (BRS)-

Smith et al. (2008) gave the Brief Resilience Scale which is a 6-item measure with responses on a 5point Likert-type Scale. The responses range from "Strongly disagree" to "Strongly agree" with a score of (1) to (5) respectively. Half of the items, however, are reverse scored to avoid any response bias. A higher average score shows high Resilience, and a low score indicates low resiliency in the individual. The average scores of participants, if ranging from 1.00 to 2.99 indicates low Resilience, 3.00 to 4.30 indicate normal Resilience and 4.31 to 5.00 is indicative of high Resilience. The Cronbach's alpha coefficient reported for BRS ranges from .80 - .91.

Oldenburg Burnout Inventory (OLBI-S)-

Reis et al. (2014) adapted the original OLBI, which measured occupational Burnout, to OLBI-S, which is a validated version measuring academic Burnout, suitable for students. It is a 16-item scale with responses ranging on a 4-point Likert-type scale, (1) for "Strongly agree" and (4) for "Strongly disagree". 8 of the 16 items were reverse scored. The Cronbach's alpha coefficients ranged from $\alpha = 0.81$ to $\alpha = 0.83$ for OLBI-S. The scale measures Burnout with respect to academic exhaustion and disengagement. A high score indicated high Burnout levels whereas low scores show lower Burnout rates.



Participants

A sample of N=74 was collected which comprised of college students. All of the participants were selected through random sampling in the Delhi NCR region. An age bracket of 18-25 years was set which all the participants fulfilled. Although a random sampling method was adopted, a gender ratio of 40 females (54.1%) and 34 (45.9%) males was obtained.

Procedure

For the study the Google Forms using standardized questionnaires namely- The Five Facet Mindfulness Questionnaire (FFMQ-15), Brief Resilience Scale (BRS) and Oldenburg Burnout Inventory (OLBI-S). The study contained the appropriate instructions for the participants along with demographic information and 37 items from the questionnaires. The participants were ensured of confidentiality and were encouraged to respond as truthfully as possible, with answers relevant to their current situation. The demographic information included e-mail address, name, age, gender, educational qualification was also collected.

Data Analysis

The data was analysed by using the IBM SPSS software. Regression analysis was applied as the aims to determine the impact of concerned variables.

4. Result

The study seeks to investigate the effect of Mindfulness and Resilience on Burnout. The dependent variable (Burnout) was regressed on predicting variables of Mindfulness and Resilience. The independent variables significantly predict Burnout. F (2,71) = 11.081, p<0.001 which indicates that these factors have significant impact on Burnout. Moreover, the R2 value= 0.238 depicts that the model explains 23.8% of the variance in Burnout.

	Hypothesis	Regression weights	В	t	p-value	Results
	H ₀ 1	Mindfulness Burnout	-0.280	-3.336	0.001	Supported
	H ₀ 2	Resilience 🗆 Burnout	-0.494	-2.132	0.036	Supported
R	0.488					
F (2,71)	11.081**					

Table 1: Hypothesis Results-

5. Conclusion

The H01 evaluates that Mindfulness significantly and negatively affects Burnout. The results revealed (B=-0.280 t=-3.336 p=<.001). The negative B value indicates a negative relationship between Mindfulness and Burnout, i.e., when Mindfulness increases, Burnout decreases. The t value which, if greater than +2.00 or lesser than -2.00 indicates that it is significant. p value is 0.001, which is less than the acceptable value of 0.05 (p<0.05) and null hypothesis can be rejected as the data is significant. Hence, H01 is rejected through statistical analysis.

The H02 evaluates that Resilience significantly and negatively affects Burnout. The results revealed (B=-0.494, t=-2.132, p=0.036). The negative B value indicates a negative relationship between



Resilience and Burnout, i.e., when Resilience increases, Burnout decreases. The t value which, if greater than +2.00 or lesser than -2.00 indicates that it is significant. p value is 0.001, which is less than the acceptable value of 0.05 (p<0.05) and null hypothesis can be rejected as the data is significant. Hence, H02 was rejected.

6. Discussion

Mindfulness and Resilience have been linked to reduce Burnout levels in students currently pursuing undergraduate courses in Delhi NCR region. Burnout can be defined as a state of mental, emotional and physical exhaustion, as mentioned earlier. The increasingly competitive academic and professional world causes students to be faced with long-term stress, worry and anxiety about their future and careers. It becomes incredibly imperative to address these issues with proper management by facing them head on. Adopting effective and proper Mindfulness and resiliency techniques to deal with stressors related to academics to cope with demanding work, deadlines, assignments, examinations, and other stressors in the academic life of an individual will lead to Experiences of decreased job performance and job satisfaction, increased absenteeism, Experiences of being burdened are some of these negative outcomes. These outcomes then manifest into physical health problems, such as heart problems, unhealthy blood-pressure, constant headaches, decreased immunity and overall fatigue. Habits such as binge eating, disruptive sleep patterns and minimal physical activity ultimately leads to living an extremely unhealthy lifestyle which can make the individual vulnerable to various physical and mental health problems.

In the context of Burnout, Mindfulness and Resilience have emerged to be protective factors. Successfully adopting Mindfulness and Resilience involves being in touch with the present moment, learning to accept reality of situations, managing emotions intelligently, being non-judgmental and nonreactive, while also being strong and tough while facing adversaries. Students will then be able to show more interest and engagement in their studies. The educational sector, at higher level of studies has great potential to benefit from interventions aiming to build Mindfulness and Resilience in the students. A consistent report of individuals with high Mindfulness and Resilience showing lower levels of Burnout is a strong indicator of the effectiveness of such skills. Being resilient through difficult situations helps one understand and react better to situations and thus cope with stress in a better way. Bouncing back from setbacks becomes an essential factor as it prevents from spending too much time thinking about the wrong and unnecessary thing and thereby decreasing efficiency and productivity in academics. A healthy lifestyle of adopting a positive outlook in life ultimately leads to better quality of life and increased happiness. Thus, building Mindfulness and Resilience should be encouraged through counseling, interventions, or workshops among students so that all are equipped to deal with inevitable tough times in a healthy way. Further research is needed to explore the specific mechanisms by which Resilience and Mindfulness exert their protective effects, and to develop effective interventions for promoting these protective factors in the educational setting.

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