



PREVALENCE OF MINDFULNESS AMONG DOCTORS: A CROSS-SECTIONAL STUDY IN PUNE, INDIA

Management

Farzeen Ansari

MBA, Ph.D. Scholar, Savitribai Phule Pune University.

Anjum Sayyad*

Ph.D., Associate Professor, Anjuman Khairul Islam's Poona Institute of Management Sciences and Entrepreneurship. *Corresponding Author

ABSTRACT

Mindfulness is an important component for healthcare professionals, especially for doctors. This helps in managing stress levels, improves the doctor-patient interaction and promotes emotional well-being. A cross-sectional study was conducted in Pune, India, from June to December 2024. Data were collected from 400 doctors using a questionnaire that assessed various domains of mindfulness, through face-to-face interviews ($n = 180$) and online surveys ($n = 220$). Descriptive Statistics were used to present the results. Fourteen items were analyzed using the questionnaire. The Composite Mindfulness Index (CMI) revealed that 22% of doctors demonstrated high mindfulness, 67% had moderate mindfulness, and 11% showed low mindfulness. Strengths identified included patient awareness and a non-judgmental attitude, while emotional regulation emerged as a common weakness. The study indicated a moderate level of mindfulness among doctors. To enhance mindfulness and reduce stress, interventions such as mindfulness awareness programs, training initiatives, and workplace modifications are recommended.

KEYWORDS

Mindfulness, Doctors, Prevalence, Self-awareness

INTRODUCTION

Mindfulness is a state of open and non-judgmental awareness of the present moment [1]. It is essential for medical professionals working in high-stress settings. The ability to stay emotionally composed and focused can significantly affect diagnostic accuracy, communication with patients, and overall job satisfaction [2,3]. Given the constant exposure to emotionally demanding situations and time-sensitive decisions, cultivating mindfulness can serve as a protective factor against burnout and compassion fatigue. Moreover, mindful practitioners are more likely to exhibit empathy, patience, and clarity in communication, which are essential for building trust and fostering therapeutic relationships with patients [4,5]. Data on the prevalence of mindfulness in India is limited. Therefore, the present study was done to address this limitation and study mindfulness among doctors in Pune.

METHODOLOGY

This was a cross-sectional study conducted in Pune, India, from June to December 2024. The study involved 400 doctors, of whom 180 responses were obtained via face-to-face interviews, and the remaining 220 responses were obtained using Google Forms. The questionnaire was developed from a previous literature review and refined through expert feedback to ensure content validity. Data collection was carried out using a structured questionnaire comprising seven sections. Each item was rated using a 5-point Likert scale, where 1 indicated 'Strongly Disagree' and 5 indicated 'Strongly Agree', allowing for the measurement of participants' perceptions and experiences related to workplace mindfulness. Those hospitals that permitted data collection were included in the study. All hospitals were more than 30-bedded. Before the main study, a pilot study was conducted on 10% of the sample to test the clarity and feasibility of the instrument. Each interview during the pilot phase lasted approximately 10–15 minutes, and as no significant issues were identified, the same questionnaire was retained for the final study.

Participants were informed about the nature and purpose of the study, and their participation was entirely voluntary. Informed consent was obtained from all respondents, and permission for data collection was secured from the respective hospitals. Confidentiality and anonymity of participant responses were strictly maintained throughout the research process. Reverse-scoring was applied where necessary. Ethical clearance was obtained from the Institutional Ethics Committee.

Data were analyzed using descriptive statistics, composite scoring (CMI) was done, and the gap in mindfulness was identified.

RESULTS

For analysis purposes, scores less than 3 were classified as low, 3 to 3.99 were classified as moderate and above 4 were considered to be high.

Table 1: Mean Scores And Mindfulness Level

Item	Mean Score	Mindfulness Level
1. Awareness of physical sensations	3.30	Moderate
2. Non-judgemental attitude with difficult patients	3.87	High
3. Awareness during emergencies	3.76	High
4. Mental/emotional check-ins during the day	2.62	Low
5. Feeling mentally drained after patient care (reverse)	3.53	Moderate
6. Difficulty staying calm in stress (reverse)	2.68	Low
7. Overlooking self-care (reverse)	2.87	Low
8. Reacting emotionally (reverse)	2.73	Low
9. Worrying about outcomes (reverse)	2.78	Low
10. Awareness of impact on patients	3.75	High
11. Noticing patient expressions	3.99	High
12. Hurrying with exams (reverse)	2.77	Low
13. Lost in thought during documentation (reverse)	2.42	Low
14. Difficulty letting go of work worries (reverse)	2.88	Low

Table 1 shows that out of the 14 questions, 4 items showed high mindfulness, 2 items showed moderate, and 8 items showed low mindfulness.

Further, in order to assess the composite mindfulness score, a total of 14 questions was obtained. The maximum score being 70, and the lowest being 14.

Table 2: Composite Mindfulness Index (CMI)

CMI Range	Interpretation	N (%)
50–65	High Mindfulness	89 (22)
40–49	Moderate Mindfulness	266 (67)
< 40	Low Mindfulness	45 (11)

Table 2 shows that only 22% had high mindfulness; the majority, that is 67% were in the moderate mindfulness category.

Figure 1: Mindfulness Gap

The major gaps identified were lost in thought during documentation, mental check-ins, staying calm in stress, emotional reactivity and hurrying exams under workload.

DISCUSSION

This study showed that the majority of doctors demonstrated moderate mindfulness. Factors like managing stress and staying calm were the factors that needed attention. Similar findings were seen in other studies as well [3], where an inverse relationship was observed between mindfulness and workplace stress among Spanish primary

care providers. Another study reported that mindfulness training helped improve doctors' mental well-being [2]. Tailored interventions help improve the mental health of doctors [1].

Recommendations

Enhancing mindfulness among medical professionals is imperative for promoting both individual well-being and quality patient care. This can be effectively achieved through structured interventions such as mindfulness training programs, mindfulness-based stress reduction (MBSR) initiatives, regular workshops, and consistent monitoring and assessment mechanisms. Incorporating practical tools like mindfulness apps, scheduled breaks, and guided breathing exercises can further support daily mindfulness practice. From a policy standpoint, reducing excessive workload, integrating supportive technologies such as mobile applications and medical scribes where appropriate, and establishing formal feedback systems are crucial steps. Ongoing evaluation and institutional support can significantly contribute to sustaining physician well-being and improving healthcare delivery.

CONCLUSION

The study conducted in Pune, India, revealed a moderate level of mindfulness among medical professionals, highlighting the need for interventions to enhance this competency. Given the demanding nature of the healthcare profession and the growing evidence linking mindfulness to improved well-being and clinical performance, it is imperative to bridge this gap through strategic efforts.

The implementation of structured mindfulness training programs, integrated into medical education and professional development, can significantly enhance self-awareness, emotional regulation, and stress management among doctors. In addition, regular workshops and reflective sessions can provide opportunities for continuous learning and reinforcement of mindfulness practices in a supportive peer environment.

Equally important is the creation of a supportive workplace culture that prioritises mental well-being, encourages open communication, and provides accessible resources for self-care. By fostering such an environment, healthcare institutions can empower doctors to build resilience, maintain emotional balance, and deliver compassionate, patient-centred care.

In conclusion, a sustained and institutionally supported commitment to mindfulness can play a transformative role in enhancing the personal and professional lives of medical practitioners, ultimately contributing to better healthcare outcomes.

REFERENCES

1. Aeschbach, V. M., et al. (2022). The Effects of a Tailored Mindfulness-Based Program on the Positive Mental Health of Resident Physicians. *Mindfulness*, 13, 1292–1306.
2. Knudsen, R. K., et al. (2020). Healthcare professionals' experiences of using mindfulness training in a cardiology department. *Scand J Caring Sci*, 34(4), 1018–1026.
3. Magallón-Botaya, R., et al. (2021). Mindfulness in primary care and its relationship with work stress: A multicentric study. *BMC Family Practice*, 22, 29.
4. Krasner, M. S., et al. (2009). Association of an educational program in mindful communication with burnout, empathy, and attitudes among primary care physicians.
5. Shapiro, S. L., et al. (2005). Mindfulness-based stress reduction for healthcare professionals: Results from a randomized trial. *Int J Stress Manag*, 12(2), 164–176.
6. Smith, S. A., & Haynes, T. F. (2020). Mindfulness training for physicians: A narrative review. *Int J Psychiatry Med*, 55(1), 3–22.