

Mindful leadership training augments mindfulness, compassion, and well-being

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Introduction

Authentic leaders are genuine, trustworthy, reliable, and believable individuals; they act from the heart, with passion and compassion¹, lead by example, and work to create a context within which followers can be true to themselves². Higher authenticity can enhance psychological well-being, personal autonomy, desire for positive relationships, sense of purpose, mastery over environments, and motivation to grow as leaders³. Individuals demonstrating this type of high-quality leadership can also influence the psychological well-being of followers⁴, and work-related performance of individuals, groups, and organizations⁵.

Given the importance of authentic leadership for intrapersonal, interpersonal, and organizational outcomes, there has been recent interest in nurturing and developing this particular leadership style. One way to do this is through mindfulness⁶ – defined as ‘paying attention in a particular way; on purpose, in the present moment, and nonjudgmentally’⁷, or ‘the state of being attentive to and aware of what is taking place in the present’⁸. Not only has regular mindfulness-based practice been shown to decrease psychological distress⁹ and burnout symptoms¹⁰, and to increase empathy⁹, self-compassion, mental well-being, and quality of life¹⁰, research also shows that mindfulness enhances authentic functioning which allows one to be more engaged in work¹¹.

Compassion is a trait often at the epicenter of discussions of ways to improve healthcare and human services. Thus, a particular interest of ours focused on a cluster of traits touching on compassion. These are compassion¹², self-compassion¹³, and fears of compassion¹⁴. The present study examines the ability of a particular training program – Cultivating Leadership Presence through Mindfulness© as developed by the Institute for Mindful Leadership – to foster an increase in mindfulness and to durably strengthen well-being and the cluster of traits focused on compassion in leaders in healthcare and human service organizations. It is important as well to document how changes induced by training behave over time. Specifically, we searched for changes in leaders/supervisors’ compassion and well-being after mindful leadership training. Leaders/supervisors in health and human service organizations enrolled in 4.5 day live-in retreat designed to teach individuals the practice of mindfulness meditation and skills central to mindful leadership. It was hypothesized that mindful leadership training would induce changes in mindfulness and that subsequent changes in compassion, self-compassion, fears of compassion, work engagement, and personal well-being would occur. We hypothesized further that the changes collectively would act to reduce stress.

Participants and Procedures

Leaders and supervisors ($N = 10$) in health and human services organizations from the Province of Manitoba in Canada participated in an intensive 4.5 day mindful leadership training (MLT) program.

MLT was taught by instructors trained at the Oasis Institute for Mindfulness-based Professional Training at the Center for Mindfulness in Medicine, Health Care, and Society, University of Massachusetts, and both instructors were members of the Institute for Mindful Leadership. Participants practiced mindfulness meditation, mindful-leadership exercises, and mindful stretching/movements to counteract stress, establish greater balance of body and mind, reconnect to their leadership principles and stimulate well-being and health.

To assess the impact of MLT, participants completed questionnaires designed to measure mindfulness, compassion, and stress. The compassion scales touched on fears of compassion, self-compassion, and compassion for others. The participants completed these questionnaires prior to training and then again at three time points following MLT: immediately, 3-months, and 6-months post-training.

Measures and Results

Five Facet Mindfulness Questionnaire (FFMQ):

A 39-item scale designed to measure the component skills of mindfulness: observing, describing, acting with awareness, non-judging of inner experience, and non-reactivity to inner experience¹⁵.

Results: Significant increases in participants’ perception of their mindfulness for non-judging and non-reactivity were observed following MLT at both the 3-month and 6-month post-training comparisons [$t(4) > 2.63, p < .06, d > 1.85$, in these analyses]. See Figure 1.

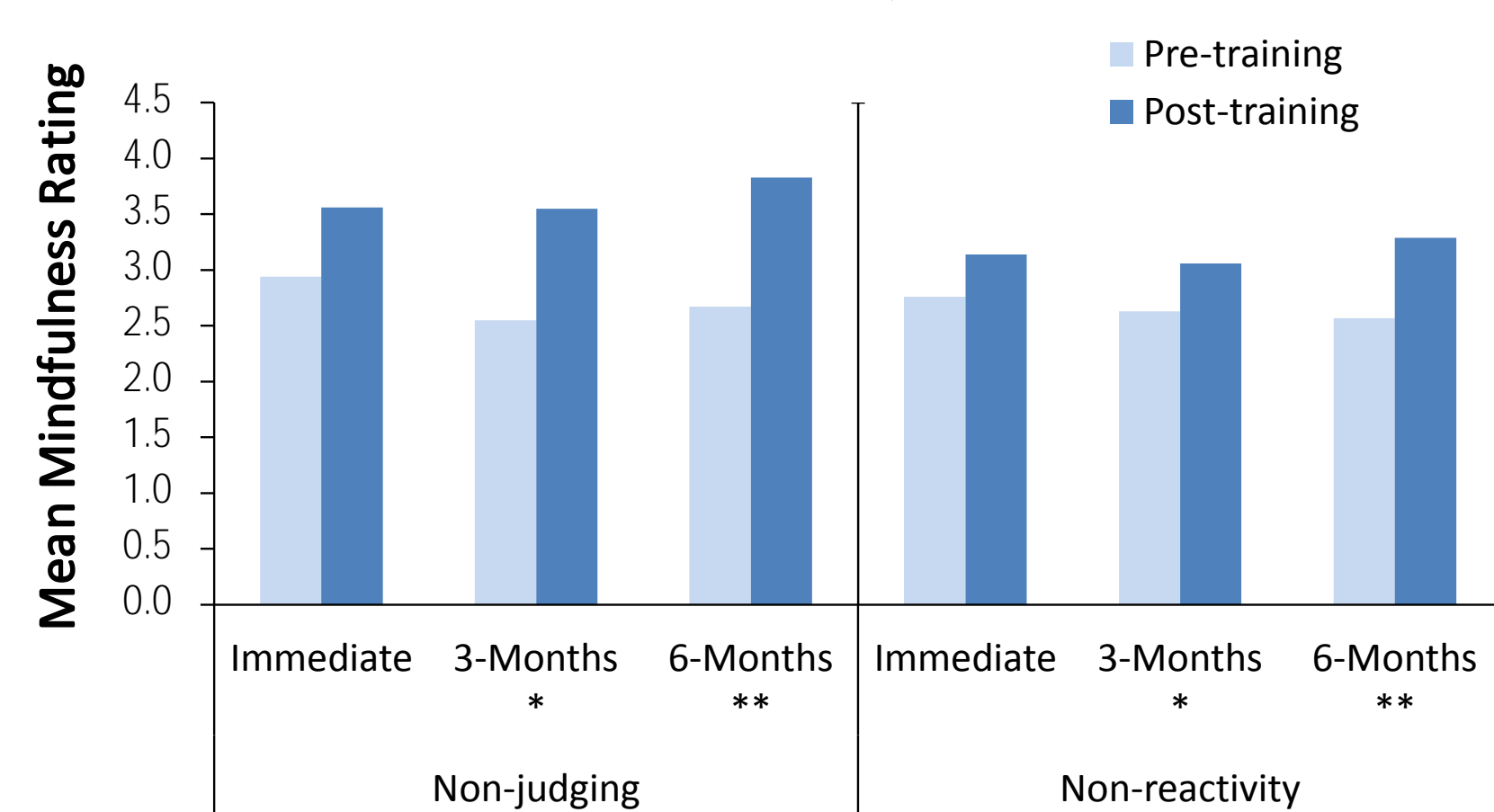


Figure 1. Five Facet Mindfulness

Notes: The pre-training means differ across the panels of Figure 1 because of attrition. Analyses are paired sample *t*s. All *p*-values are two-tailed. **p* = .10, ***p* = .05

Fears of Compassion Scales:

A set of three scales based on 38 items that measure (a) the fear of expressing compassion towards self, (b) the fear of expressing compassion for others, and (c) the fear of responding to compassion from others¹⁴.

Results: Participants reported significant decreases in fears of compassion on all three fears of compassion scales at the 3-month post-training comparison [$t(4) > 3.59, p < .05, d > 1.66$, for all analyses]. See Figure 2.

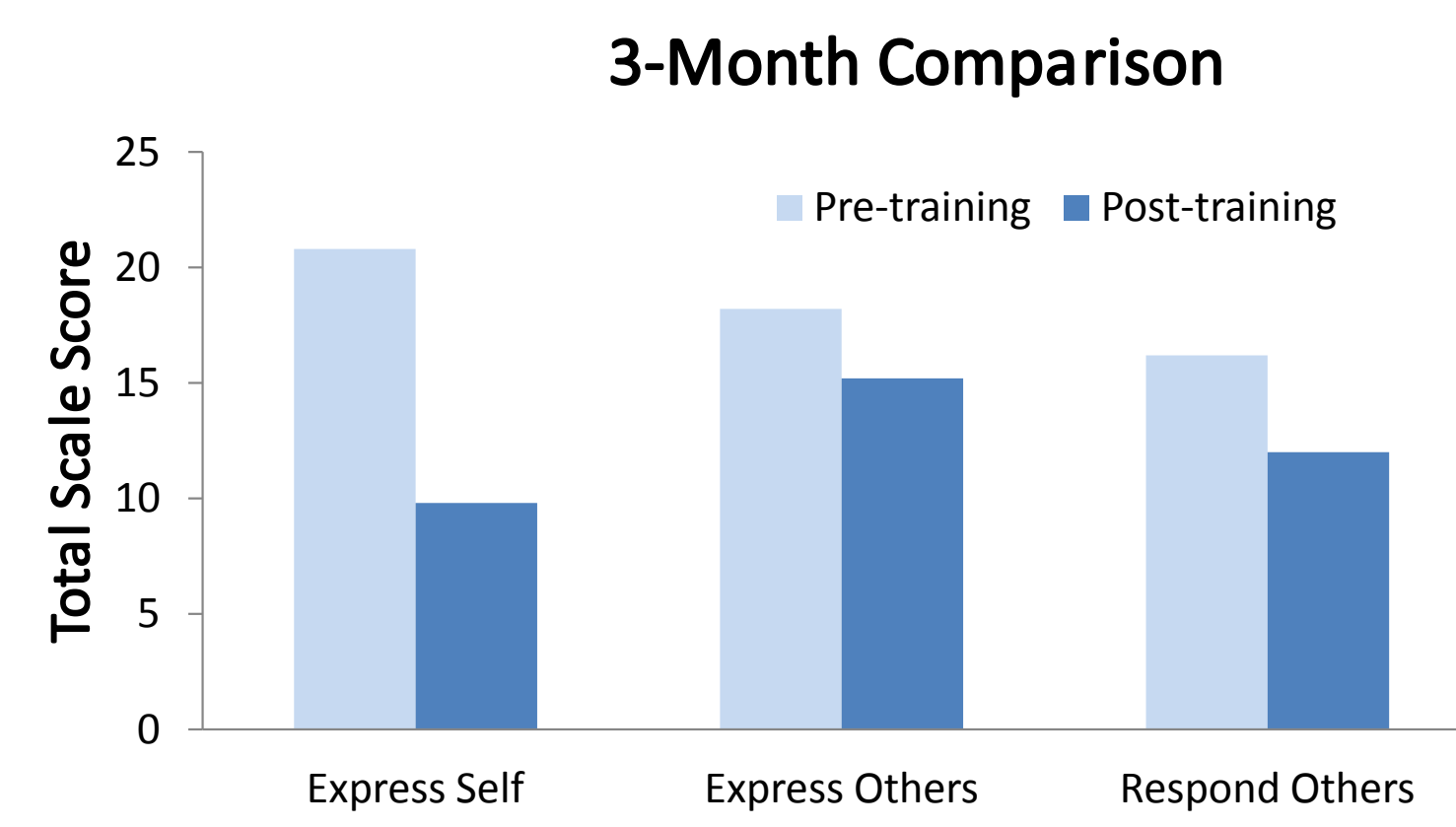


Figure 2. Fears of Compassion

Participants also reported a marginally significant decrease in fear of self-compassion immediately following MLT [$t(5) > 2.03, p = .10, d = 1.00$]. All other analyses of the immediate and 6-month post-training comparisons were not significant.

Compassion Scales:

Self-Compassion Scale: A scale of 26-items designed to evaluate the capacity to extend compassion to oneself. The scale includes subscales to assess self-kindness, self-judgment, common humanity, isolation, mindfulness, and over-identification¹³.

Compassion Scale: A 24-item scale for assessing perceptions of compassion for others. The scale includes subscales to assess kindness, fear of indifference, common humanity, separation, mindfulness, and disengagement¹².

Results: At the 3-month comparison following MLT, participants perceived themselves as more compassionate not only toward themselves but also toward others [$t(4) > 3.16, p < .05, d > 1.49$, for all analyses]. See Figure 3.

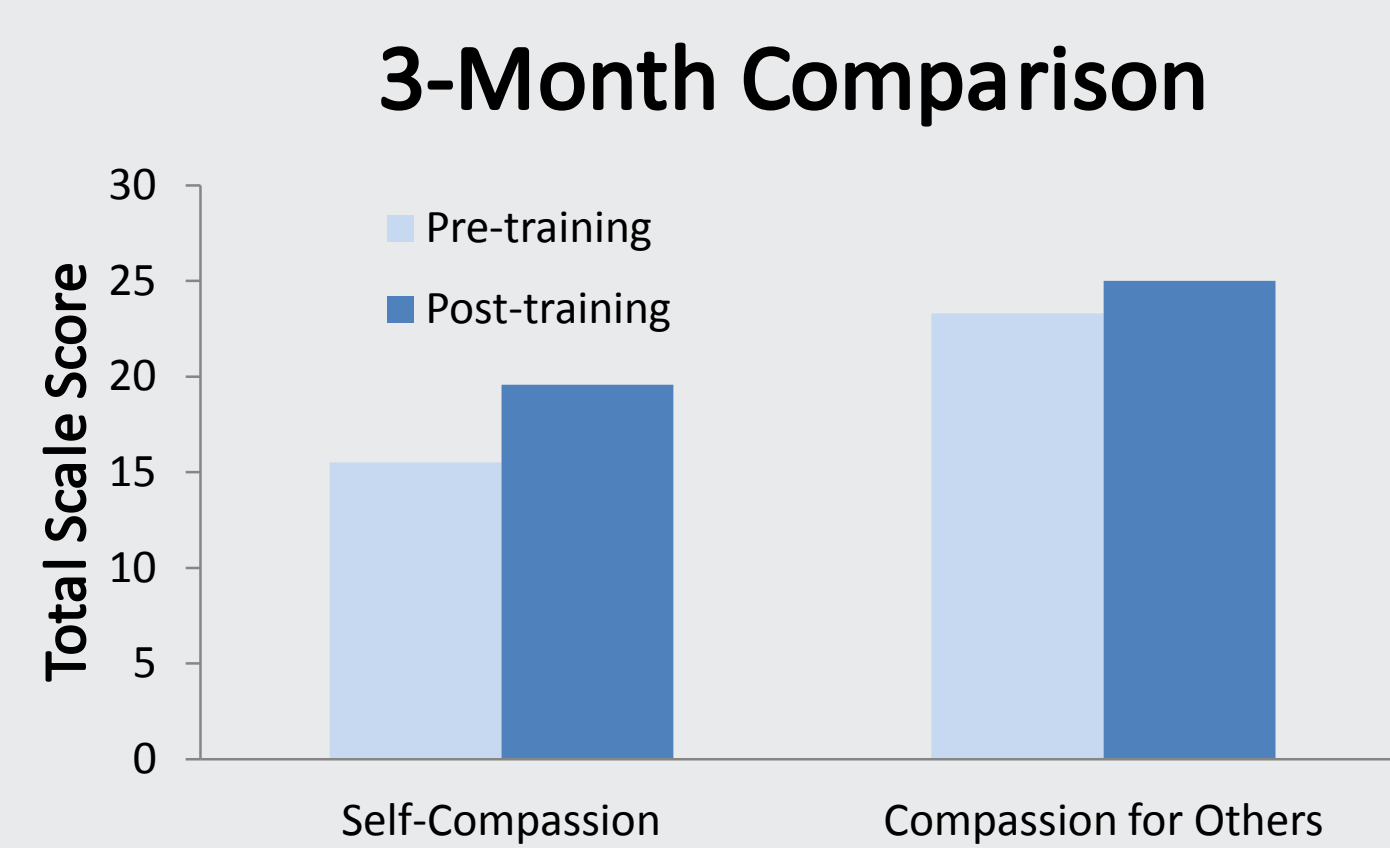


Figure 3. Compassion

Further analysis of the Self-Compassion subscales revealed a significant increase in mindfulness, and significant decreases in self-judgment and over-identification [$t(4) > 2.91, p < .05, d > 1.15$, for all analyses]. Analysis of the Compassion subscales showed participants became more mindful and less indifferent [$t(4) > 3.2, p < .05, d > 1.22$, for all analyses].

All analyses of the immediate and 6-month post-training comparisons were not significant.

Perceived Stress Scale-10 Item (PSS-10):

A 10-item scale designed to measure perceptions of the degree of the unpredictability, uncontrollability, and overloadedness during the previous month¹⁶.

Results: Although participants reported lower stress levels 3-months post-training [$t(4) = 3.81, p < .05, d = 2.38$], participants reported higher stress levels than those reported in the general population both before and after training [$t(5) = 7.78, p < .001, d = 3.18$ and $t(4) = 5.70, p < .01, d = 2.55$, respectively]. See Figure 4.

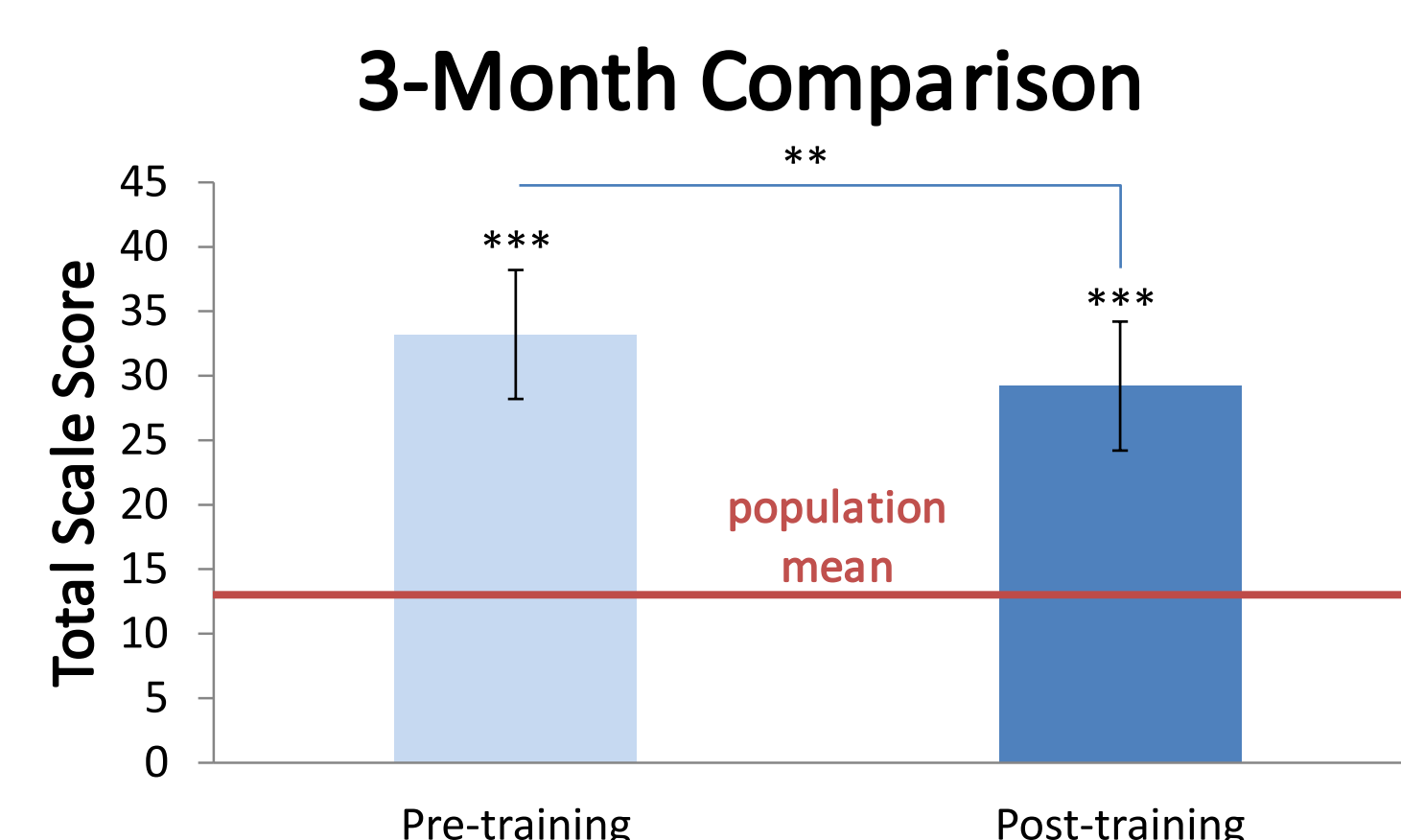


Figure 4. Perceived Stress

Note: Figure 4 error bars are 95% confidence intervals. ****p* < .01

All other analyses comparing pre-training stress levels to post-training stress levels both immediately and 6-months following MLT were not significant. However, at both of these post-training intervals, participants reported significantly higher stress levels than those reported in the general population [$t(5) = 5.90, p < .01, d = 2.41$ and $t(2) = 4.81, p < .05, d = 2.78$, respectively].

Discussion

The present study was conducted as a first study investigating the ability of a particular program of mindfulness-based leadership training – developed and implemented by the Institute for Mindful Leadership – to be an effective means of improving leadership qualities, especially those touching upon compassion, and ultimately organizations. The expectation was that changes in mindfulness and compassion might be accompanied by increases in well-being and, in particular, by a reduction in perceived stress. The present results are limited by a small sample size and attrition in participation at the time points removed from the training. This, in particular, clouds the interpretation of data collected six months following training. The study is also limited by virtue of the omission of effects produced on workers’ perceptions of a changed workplace following their leaders training. In this first study we wished to have an understanding of the effects of the training on the leaders in order to more effectively shape the questions asked of employees. In a subsequent study, employees’ compassion and well-being will be studied after their leaders/supervisors complete mindful leadership training; as will how changes in both groups relate to one another.

Despite these limitations, several interesting trends emerged. A particular interest with respect to the leaders is their ability to infuse the authoritative dimensions of their work with compassion. Genuine caring for the self and others can foster leadership that is integral and inspires. Three months after the training all five of the scales clustering on compassion were significantly different than at the beginning of training. Here, all five measures manifest statistically significant changes in the desired direction. Self-Compassion and Compassion have increased while the three Fear of Compassion Scales have decreased. Examination of the Self-Compassion subscales is interesting. Statistically significant decreases in self-judgment and over-identification, and a significant increase in mindfulness occur. Somewhat similar changes occur with compassion. Leaders became more mindful and less indifferent. It is noteworthy increased mindfulness is a common denominator in the self-compassion and compassion subscales. Our impression is that managers who are more mindful, less self-judgmental, less indifferent, and less over-identified will simply be healthier and more effective. The testing of this expectation is part of the experimental program we have planned.

It is extremely important that the increases in mindfulness, compassion and self-compassion and decreases on the three fears of compassion scales are accompanied by increased well-being. Most notably, perceived stress declined substantially. However, it is also noteworthy that after the intervention-associated decline in stress, stress levels still differed markedly from the population mean. This suggests that stress reduction must remain an important objective for this group. It also sounds a cautionary note. Stress levels that are reduced but which remain so far above the population mean may not be detectable by the employees of the leaders being studied.

The changes reported herein clearly suggest that mindful leadership training has the capacity to produce measurable, statistically significant changes that are important to individuals and to organizations and are indeed worthy of continuing investigation.

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