



From Burnout to Balance: A Mixed-Method Study on Mindfulness-Based Stress Reduction (MBSR) in ABA Practitioners

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ABSTRACT

Burnout is a significant concern among Applied Behavior Analysis (ABA) therapists due to the emotionally demanding nature of their work with individuals diagnosed with Autism Spectrum Disorder (ASD). This study aimed to examine the effectiveness of Mindfulness-Based Stress Reduction (MBSR) in reducing burnout and enhancing mindfulness among ABA therapists in Pakistan. A quantitative pre-post design was used, involving 12 ABA therapists who participated in an eight-week MBSR program. The Maslach Burnout Inventory (MBI) and Five Facet Mindfulness Questionnaire (FFMQ) were administered before and after the intervention. Results indicated significant reductions in overall burnout, particularly in emotional exhaustion and depersonalization, while personal accomplishment scores increased post-intervention. Likewise, mindfulness scores improved significantly across all five subscales. Correlational analysis revealed a strong negative association between mindfulness and burnout components, suggesting that higher mindfulness was linked with lower emotional exhaustion and depersonalization, and greater personal accomplishment. Additionally, therapists with fewer years of experience, younger age, and longer working hours reported higher burnout levels. These findings highlight the potential of MBSR as a practical and accessible tool to enhance emotional regulation, resilience, and professional sustainability in high-stress therapeutic settings. Limitations include small sample size and lack of follow-up data. Future research should explore long-

term effects and use larger, more diverse samples.

Keywords: Burnout, Mindfulness, MBSR, ABA Therapists, Emotional Exhaustion, Stress Reduction

INTRODUCTION

Burnout is a growing concern among professionals working in emotionally intensive environments, particularly those in the field of Applied Behavior Analysis (ABA). ABA therapists frequently engage with children diagnosed with Autism Spectrum Disorder (ASD), requiring sustained emotional, mental, and physical involvement. The continuous exposure to behavioral challenges, documentation demands, and client needs contributes to elevated stress levels. Burnout, as defined by Maslach and Leiter, includes emotional exhaustion, depersonalization, and reduced personal accomplishment. These symptoms impair the therapist's ability to maintain empathy and effectiveness. Prolonged burnout can lead to absenteeism, reduced job satisfaction, and even career withdrawal. Identifying strategies to address therapist burnout is essential for both personal well-being and service quality.

Mindfulness-Based Stress Reduction (MBSR) is a structured eight-week program designed to help individuals manage stress through meditation, breathing, and body awareness. Developed by Jon Kabat-Zinn, MBSR emphasizes non-judgmental, present-moment awareness to promote emotional regulation. Numerous studies support its effectiveness in reducing anxiety, depression, and occupational burnout. For ABA therapists, the ability to stay present and composed during high-stress situations is crucial. Mindfulness training can serve as a buffer against emotional overload and improve overall professional functioning. However, despite global evidence, its use among ABA therapists in South Asian contexts remains under-researched. This presents a significant gap in culturally relevant mental health interventions.

Research highlights that mindfulness enhances self-regulation, cognitive flexibility, and emotional resilience all essential traits for therapists. Regular mindfulness practice enables professionals to pause and reflect rather than react impulsively under pressure. This helps reduce automatic stress responses and strengthens therapist-client rapport. Global findings indicate that mindfulness significantly lowers emotional exhaustion and promotes job satisfaction across various caregiving roles. For ABA therapists specifically, it can aid in managing behavioral crises and preventing compassion fatigue. However, localized studies in Pakistan are minimal, especially those exploring MBSR's structured impact. This underscores the need to assess its relevance and efficacy within the Pakistani therapeutic landscape.

The current study investigates the effectiveness of MBSR in reducing burnout among ABA therapists in Pakistan. Using a pre-post research design, the study evaluates changes in burnout and mindfulness levels using standardized tools (MBI and FFMQ). It aims to determine whether structured mindfulness training can serve

as a sustainable mental health resource for therapists. The study also explores how demographic factors such as age, work hours, and experience influence burnout outcomes. Findings are expected to support the integration of MBSR in professional development programs. By addressing burnout through mindfulness, this research may contribute to improving both therapist well-being and quality of care.

Theoretical Framework

The current study is grounded in the principles of Mindfulness Theory and the Job Demands-Resources (JD-R) Model, which together offer a strong foundation for understanding the relationship between mindfulness-based interventions and burnout in ABA therapists.

Mindfulness Theory

Mindfulness Theory, as proposed by Kabat-Zinn (1990), emphasizes purposeful, present-moment awareness with an attitude of non-judgment. According to this theory, mindfulness enhances emotional regulation, reduces automatic stress responses, and builds psychological flexibility. Practicing mindfulness through structured programs such as Mindfulness-Based Stress Reduction (MBSR) allows individuals to better manage occupational stressors by increasing awareness of their thoughts and emotions without being overwhelmed by them. This theory supports the use of MBSR to improve emotional resilience and reduce the psychological symptoms associated with burnout.

Job Demands-Resources (JD-R) Model

In addition, the Job Demands-Resources (JD-R) Model (Demerouti et al., 2001) explains how job characteristics influence employee well-being. According to the JD-R model, burnout occurs when job demands such as emotional strain, workload, and client behavioral challenges exceed available job or personal resources, such as emotional support, coping strategies, and mental resilience. MBSR can be understood as a personal resource within this framework, helping therapists manage stress, preserve energy, and protect against emotional exhaustion. By strengthening internal coping abilities, MBSR may serve as a buffer between job demands and the negative effects of burnout.

These two theoretical foundations collectively explain how mindfulness practices like MBSR can reduce burnout by equipping ABA therapists with greater emotional regulation, cognitive flexibility, and psychological endurance. This framework supports the hypothesis that MBSR will lead to decreased burnout symptoms among ABA therapists in high-stress environments such as those in Pakistan.

Objectives of the Study

1. To evaluate the effectiveness of an eight-week Mindfulness-Based Stress Reduction (MBSR) program in reducing burnout among ABA therapists.
2. To assess the relationship between mindfulness levels and burnout dimensions (emotional exhaustion and depersonalization) among ABA therapists.
3. To examine whether demographic variables such as years of experience and working hours influence burnout levels in ABA therapists.

Hypotheses of the Study

- a. ABA therapists who participate in the MBSR program will show a significant reduction in burnout scores from pre-test to post-test.
- b. There is a significant negative correlation between mindfulness levels and burnout dimensions (emotional exhaustion and depersonalization) among ABA therapists.
- c. Therapists with fewer years of experience and those working more than 40 hours per week will report significantly higher levels of burnout.

LITERATURE REVIEW

Burnout is a psychological condition resulting from prolonged occupational stress, characterized by emotional exhaustion, depersonalization, and a reduced sense of personal accomplishment. It is especially prevalent in caregiving professions such as healthcare, education, and behavioral therapy. ABA therapists often experience high emotional strain due to the complex needs of clients with Autism Spectrum Disorder (ASD). Studies by Maslach and Leiter (2016) emphasize how chronic exposure to emotionally demanding roles leads to burnout. This condition can impair professional effectiveness, reduce empathy, and contribute to early career exit. Research shows that organizational demands, workload, and emotional labor contribute heavily to burnout. Addressing these challenges through proactive interventions is vital to protect therapist well-being.

Mindfulness-Based Stress Reduction (MBSR), developed by Jon Kabat-Zinn, is an eight-week program aimed at reducing stress through meditation, breathwork, and awareness practices. It has shown efficacy in improving emotional regulation, decreasing anxiety, and enhancing psychological resilience. Numerous meta-analyses (e.g., Khoury et al., 2015) confirm that MBSR leads to significant reductions in burnout across healthcare and mental health professions. These effects are attributed to increased self-awareness, emotional clarity, and reduced reactivity. For professionals in emotionally taxing roles, mindfulness offers a structured method to manage internal stress. Despite extensive research abroad, there is limited empirical evidence on MBSR's application among ABA therapists in Pakistan. Exploring this within a local context is necessary to validate its cross-cultural relevance.

Recent studies show that mindfulness enhances professionals' ability to remain emotionally balanced and ethically grounded under stress. For instance, Singh et al. (2020) found that ABA therapists trained in mindfulness reported better emotional control and stronger therapeutic rapport. Similarly, Burton et al. (2017) noted improvements in personal accomplishment and reductions in depersonalization among clinicians after MBSR training. Mindfulness also fosters self-compassion, which is essential for professionals exposed to behavioral crises or client trauma. These findings support the idea that MBSR strengthens internal coping resources, particularly in emotionally demanding settings. However, few studies have explored these outcomes in low-resource environments like Pakistan. Therefore, culturally informed investigations are crucial.

Indigenous research in Pakistan suggests that culturally adapted mindfulness, including spiritual or faith-based reflection, is both acceptable and effective. Bukhari and Haider (2023) found that mindfulness improved emotional endurance and job satisfaction among Pakistani therapists. Other studies emphasize the importance of integrating mindfulness with Islamic values such as *sabr* (patience) and *tawakkul* (trust in God). This enhances its relevance and long-term sustainability in local settings. Given the emotional toll of ABA therapy and the scarcity of mental health resources in Pakistan, MBSR presents a promising, low-cost solution. Research evaluating its impact can provide vital guidance for therapist support systems in South Asia. This study contributes to that emerging body of culturally rooted mindfulness research.

RESEARCH METHODOLOGY

This chapter outlines the research design, population and sample, instrumentation, data collection procedure, and data analysis strategy used to evaluate the effectiveness of Mindfulness-Based Stress Reduction (MBSR) on burnout, perceived stress, and mindfulness in Applied Behavior Analysis (ABA) therapists.

Research Design

This study uses a pre-post experimental design to assess the impact of an eight-week MBSR program on burnout, perceived stress, and mindfulness. Data were collected at two points before and after the intervention to measure changes over time. A quantitative approach with validated tools were used to evaluate the outcomes.

Population and Sampling

The **target population** consists of certified ABA therapists currently practicing in clinical or educational settings in Pakistan. The sample were drawn from this population using **convenience sampling**, with recruitment occurring through special education centers, ABA clinics, and professional therapist networks.

Sample Size

The study were include 12 participants, arranged in a group therapy format for the MBSR sessions. A group size of around 10–15 participants is commonly recommended for mindfulness-based interventions to ensure active participation, group cohesion, and effective facilitation (Kabat-Zinn, 1990). This size is also appropriate for pilot or preliminary studies aimed at detecting moderate effect sizes within subjects.

Research Instruments

Three standardized psychometric tools were used to measure the variables under investigation:

Maslach Burnout Inventory (MBI)

The MBI is a 22-item standardized self-report instrument used to measure occupational burnout across three subscales:

- Emotional Exhaustion (9 items)

- Depersonalization (5 items)
- Personal Accomplishment (8 items)

Each item is rated on a 7-point Likert scale ranging from 0 (Never) to 6 (Every day). Higher scores on EE and DP, and lower scores on PA, are indicative of greater burnout. The MBI has demonstrated high internal consistency with Cronbach's alpha values typically exceeding .80, making it a reliable tool in occupational and healthcare research (Maslach et al., 1996).

Five Facet Mindfulness Questionnaire (FFMQ)

The FFMQ is a 39-item self-report scale designed to assess mindfulness through five facets:

- Observing (8 items)
- Describing (8 items)
- Acting with Awareness (8 items)
- Nonjudging of Inner Experience (8 items)
- Nonreactivity to Inner Experience (7 items)

Each item is rated on a 5-point Likert scale, from 1 (Never or very rarely true) to 5 (Very often or always true). The FFMQ is suitable for evaluating mindfulness in both clinical and non-clinical populations and is especially effective in assessing changes resulting from mindfulness-based interventions like MBSR. The scale has demonstrated excellent psychometric properties, with Cronbach's alpha values ranging from .75 to .91 across subscales (Baer et al., 2006).

Procedure

Participants were recruited from ABA clinics and online therapist forums and provided informed consent before participation. Baseline assessments using the Maslach Burnout Inventory (MBI) and Five Facet Mindfulness Questionnaire (FFMQ) were completed prior to the intervention. The eight-week Mindfulness-Based Stress Reduction (MBSR) program, adapted from Kabat-Zinn (1990), involved weekly 90-minute sessions facilitated by a trained instructor, alongside daily home practice. The program covered mindfulness concepts, body awareness, emotional regulation, interpersonal mindfulness, and self-care techniques. After completion, participants retook the MBI and FFMQ to evaluate changes. Data were analyzed using paired t-tests and other relevant statistical methods to determine intervention effectiveness.

Ethical Considerations

This study adhered to ethical standards for psychological research. Informed consent was obtained from all participants, who were free to withdraw at any time without consequence. Confidentiality was ensured through anonymous identifiers and secure data storage. Participants' emotional well-being was monitored throughout the intervention, with referrals provided if any distress arose. The study received approval from the appropriate institutional ethics review board, ensuring compliance with ethical guidelines.

RESULTS

This chapter presents the results of statistical analyses conducted to test the hypotheses regarding the effectiveness of Mindfulness-Based Stress Reduction (MBSR) in reducing burnout and enhancing mindfulness among ABA therapists. Data analysis was performed using SPSS version 20 and includes descriptive statistics, reliability analysis, paired sample t-tests, correlation, and group comparisons.

Descriptive Statistics

Descriptive statistics were used to describe the demographic characteristics and key continuous variables of the participants (N = 12).

Table 1: Descriptive Statistics of Continuous Demographic Variables

Variable	Mean	SD	Min	Max
Age (years)	26.42	3.47	22	34
Years of Experience	3.50	1.78	1	7
Work Hours per Week	40.25	7.04	28	52
Hours of Sleep per Day	6.92	1.04	5	9
Number of Siblings	3.67	1.15	2	6

Reliability Analysis

Cronbach's alpha was computed to assess the internal consistency of the measurement scales.

Table 2: Internal Consistency of Burnout and Mindfulness Scales (N = 12)

Scale	α	No. of Items
Burnout (Total)	.87	22
Emotional Exhaustion (EE)	.84	9
Depersonalization (DP)	.81	5
Personal Accomplishment (PA)	.89	8
Mindfulness (FFMQ Total)	.91	29

All scales demonstrated acceptable to excellent reliability ($\alpha > .80$).

Table 3: Paired Sample t-Test for Burnout and Mindfulness Scores (N = 12)

Variable	Pre-test M	SD	Post-test M	SD	t	df	p
Burnout Total	104.83	9.76	95.25	8.92	4.31	11	.001**
Emotional Exhaustion	39.75	4.25	34.08	4.00	4.12	11	.002**
Depersonalization	21.67	2.75	18.25	2.42	3.78	11	.003**
Personal Accomplishment	43.42	5.14	47.00	4.85	-3.02	11	.011*
Mindfulness (Total)	55.08	6.21	63.92	5.88	-5.17	11	<.001**

Note: *p < .05, **p < .01

Interpretation: All changes from pre- to post-test were statistically significant. Burnout levels decreased significantly, while mindfulness increased significantly.

Table 4: Pearson Correlation Between Burnout and Mindfulness (N = 12)

Variables	Mindfulness (Pre)	Mindfulness (Post)
Burnout (Pre)	-.62**	-.58*
Burnout (Post)	-.55*	-.64**
Emotional Exhaustion (Post)	-.63*	-.63*
Depersonalization (Post)	-.61*	-.61*

Note: * $p < .05$, ** $p < .01$

Interpretation: Significant negative correlations were found between mindfulness and burnout components, particularly emotional exhaustion and depersonalization.

Table 5: Correlation Between Years of Experience and Burnout (N = 12)

Variable	r	p
Burnout Total	-.58*	.045
Emotional Exhaustion	-.61*	.042

Interpretation: A significant negative correlation indicates that less experienced therapists reported higher burnout.

Table 6: Independent Samples t-Test by Weekly Work Hours (N = 12)

Variable	≤ 40 hrs (n=6)	> 40 hrs (n=6)	t	df	p	Cohen's d
Burnout Total	98.17 (7.22)	111.50 (6.48)	-3.72	10	.004**	1.75
Emotional Exhaustion	35.17 (2.40)	44.33 (3.27)	-5.03	10	.001**	2.00
Depersonalization	19.00 (1.67)	24.33 (2.16)	-4.58	10	.001**	1.90

Interpretation: Therapists working more than 40 hours reported significantly higher burnout.

Table 7: Correlation Between Age and Burnout Subscales (N = 12)

Variable	r	p
Emotional Exhaustion	-.66*	.022
Depersonalization	-.61*	.031

Interpretation: Younger therapists experienced more burnout symptoms, a trend consistent with the experience-related.

Table 8: One-Way ANOVA – Burnout by Education Level (N = 12)

Source	SS	df	MS	F	p
Between Groups	64.72	2	32.36	0.32	.733
Within Groups	1003.89	9	111.54		
Total	1068.61	11			

Interpretation: There was no significant difference in burnout scores across educational levels.

Summary of Results

- **Hypothesis 1 supported:** MBSR led to a significant reduction in burnout and increase in mindfulness ($p < .05$).
- **Hypothesis 2 supported:** Mindfulness was significantly negatively correlated

with burnout, especially emotional exhaustion and depersonalization ($r = -.64$ to $-.61$).

- **Hypothesis 3 supported:** Less experienced therapists and those working more than 40 hours/week reported higher burnout. Age was also negatively correlated with burnout.
- **Additional Findings:** No significant differences in burnout were found based on education level.

DISCUSSION

This chapter provides a comprehensive interpretation of the findings of the current study, which aimed to examine the impact of Mindfulness-Based Stress Reduction (MBSR) on burnout and mindfulness among Applied Behavior Analysis (ABA) therapists. The study also explored how burnout levels varied with experience, age, and working hours. The discussion is organized around the three hypotheses tested and is contextualized within relevant theoretical and empirical literature.

The findings of first hypothesis is strongly supported. There was a statistically significant decrease in total burnout scores from pre- to post-test, including a significant reduction in emotional exhaustion and depersonalization and a meaningful increase in personal accomplishment. Simultaneously, mindfulness scores increased significantly after the eight-week MBSR program. These results are consistent with prior research indicating that mindfulness-based interventions are effective in alleviating symptoms of burnout in helping professions (Krasner et al., 2009; Shapiro et al., 2005). MBSR encourages present-moment awareness, emotional regulation, and non-reactivity skills that are crucial for therapists who often deal with emotionally intense or repetitive work environments. By focusing attention on the present and cultivating self-compassion, therapists may become less overwhelmed by the cumulative emotional demands of their work.

The significant reduction in emotional exhaustion is particularly important because it is considered the core component of burnout. Similarly, the decrease in depersonalization a detached or cynical response toward clients is encouraging, as it reflects an increase in empathy and connection with clients. The rise in personal accomplishment implies that therapists not only felt less stressed but also experienced greater competence and satisfaction in their roles after the MBSR training. Furthermore, the increase in mindfulness scores indicates that the participants were able to successfully learn and incorporate mindfulness techniques into their daily lives and professional practice. This suggests that the MBSR program was not only effective in reducing burnout but also in enhancing psychological resources that support well-being and professional performance.

Second hypothesis was also supported. Correlation analyses revealed a significant negative relationship between overall mindfulness and all three subscales of burnout, both at pre- and post-test. The strongest negative correlations were observed between mindfulness and emotional exhaustion, as well as between mindfulness and depersonalization. These findings align with theoretical models that

suggest mindfulness serves as a protective buffer against the development of burnout (Baer et al., 2006). Mindfulness fosters greater self-awareness and emotional regulation, enabling therapists to better manage stressful encounters, maintain empathy, and avoid over-identification with their clients' struggles. In this study, therapists who reported higher mindfulness were less likely to experience exhaustion or emotional detachment, even when working under challenging conditions.

The post-intervention correlations were slightly stronger than those recorded at baseline, indicating that the improvement in mindfulness skills through the MBSR program may have had a direct influence on lowering burnout symptoms. This supports the idea that mindfulness is not merely a trait but can be cultivated through systematic training, leading to tangible improvements in psychological health.

Third hypothesis was fully supported by the results. A significant negative correlation was found between years of experience and burnout, especially emotional exhaustion. Additionally, therapists working more than 40 hours per week had significantly higher burnout scores across all subscales, with large effect sizes. These findings are consistent with the Job Demands-Resources (JD-R) model (Demerouti et al., 2001), which posits that burnout occurs when job demands exceed the resources available to cope. Less experienced therapists may not yet have developed the coping strategies, emotional boundaries, or time management skills necessary to deal effectively with work-related stressors. The significant relationship between age and burnout further supports this point, as younger therapists reported more symptoms of emotional exhaustion and depersonalization.

Therapists with excessive workloads are at heightened risk of burnout, regardless of experience. Those working more than 40 hours per week likely faced a cumulative effect of emotional and physical fatigue, leading to diminished personal efficacy and increased cynicism. These findings highlight the critical importance of workload management and early-career support systems in ABA settings.

Interestingly, the study found no significant difference in burnout scores across education levels, suggesting that higher academic qualifications do not necessarily protect against burnout. This finding aligns with previous studies indicating that burnout is more closely linked to work-related stressors and personal coping resources than to formal education.

Moreover, age was negatively correlated with burnout symptoms, particularly emotional exhaustion and depersonalization. This suggests that older or more mature therapists may have better self-regulation and stress management skills, possibly acquired through both personal development and professional experience.

Together, these findings emphasize that burnout is a multifactorial issue, influenced by personal factors (e.g., age, experience), organizational conditions (e.g., workload), and psychological traits (e.g., mindfulness).

Implications for Practice

The outcomes of this study hold important implications for individual therapists, organizational policy, and the broader field of mental health and

behavioral support. For individual ABA therapists, the findings suggest that incorporating mindfulness practices such as those taught in the MBSR program can serve as an effective personal coping strategy to manage occupational stress and reduce the risk of burnout. These practices can be integrated into daily routines to promote emotional balance, enhance self-awareness, and improve overall well-being. From an organizational perspective, employers should recognize the value of mindfulness-based interventions and consider integrating such programs into ongoing professional development and employee wellness initiatives. Supporting staff with structured mindfulness training and monitoring workloads, particularly for early-career therapists, can help reduce burnout and improve job satisfaction. Lastly, for the wider field of behavioral therapy and occupational health, this study contributes to the growing body of research supporting mindfulness as a viable psychological intervention. It also sheds light on the unique stressors faced by ABA therapists, a population that has received limited attention in burnout research, and underscores the need for further studies in this area to guide evidence-based policy and practice.

Limitations

While the findings are promising, the study is not without limitations. The sample size was small ($N = 12$), which limits the generalizability of the results and statistical power. A larger and more diverse sample would provide greater confidence in the results. The study also relied on self-report measures, which may be subject to social desirability bias or inaccurate self-assessment.

Furthermore, the study lacked a control group, making it difficult to rule out other factors that may have contributed to the observed changes. Longitudinal follow-up was not conducted, so the long-term sustainability of the effects remains unknown.

Recommendations for Future Research

Future studies should aim to build on the current findings by addressing several methodological and contextual limitations. First, future research should employ larger, randomized samples to enhance the generalizability and statistical power of the results. Incorporating a control group or utilizing a randomized controlled trial (RCT) design would also be essential in establishing causal relationships between MBSR participation and reductions in burnout. Additionally, longitudinal designs with extended follow-up periods should be used to determine the sustainability of MBSR's effects over time. It would also be valuable to include qualitative components, such as interviews or open-ended surveys, to capture participants' lived experiences and personal reflections on the mindfulness intervention. Lastly, future research should investigate how organizational factors such as workplace culture, leadership style, and support systems may influence the effectiveness of MBSR and contribute to the overall well-being of ABA therapists. These directions would provide a more comprehensive understanding of how mindfulness interventions function within complex professional environments.

CONCLUSION

This study aimed to evaluate the effectiveness of Mindfulness-Based Stress Reduction (MBSR) in reducing burnout and enhancing mindfulness among Applied Behavior Analysis (ABA) therapists, and the findings offer strong evidence supporting MBSR as a beneficial intervention for this professional group. The results confirmed all three hypotheses proposed at the outset. Firstly, therapists who completed the eight-week MBSR program exhibited significant decreases in overall burnout, including reductions in emotional exhaustion and depersonalization, as well as a meaningful increase in personal accomplishment and mindfulness levels. This demonstrates that MBSR not only mitigates the detrimental effects of burnout but also promotes positive psychological qualities that contribute to improved therapeutic practice and professional functioning. Secondly, the study revealed a significant negative correlation between mindfulness and burnout, particularly within the critical dimensions of emotional exhaustion and depersonalization. These findings align with theoretical perspectives that position mindfulness as a protective mechanism against workplace stress by enhancing present-moment awareness, emotional self-regulation, and resilience. Thirdly, the data highlighted that younger therapists, those with fewer years of experience, and individuals working over 40 hours per week reported higher burnout levels. This underscores the pressing need to address occupational stressors early in a therapist's career and the importance of organizational support, particularly for those with heavier workloads. While the study's relatively small sample size and absence of a control group limit the broad applicability of the results, the consistency of the findings with existing research strengthens their validity and underscores the potential value of MBSR within occupational health strategies tailored for ABA professionals. In summary, integrating mindfulness-based practices such as MBSR into routine training and ongoing support systems for ABA therapists offers a promising, sustainable approach to managing burnout. Given the emotionally demanding nature of ABA work, organizations are encouraged to invest in evidence-based mindfulness interventions to promote therapist well-being, enhance professional satisfaction, and ultimately improve the quality of care provided to clients.

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