Episode 237 – Danna Bodenheimer: The Imposter Syndrome within the Social Work Profession: Recognizing Your True Potential

[00:00:08] Welcome to IN SOCIAL WORK the podcast series of the University of Buffalo School of Social Work at W.W. W. dot. In social work. Dot org. We're glad you could join us today. The purpose of social work is to engage practitioners and researchers and lifelong learning and to promote research to practice and practice research. We educate we connect. We care. We're in social work.

[00:00:38] Hello and welcome to inSocialWork. This is Louanne Bakk and I'll be your host for this episode. A feeling that's common within the social work profession is there have been an imposter or a fraud imposter syndrome or that sensation that one is faking it or inauthentic. It's particularly prevalent among new social work graduates. This in turn can lead to feelings of stress anxiety and dissatisfaction with our work. In this episode Dr. Danna Bodenheimer defines the concept of imposter syndrome as it relates to the social work profession and discusses how NY social work students often fail to recognize the value and the benefits of their work. Tactics to help ease feelings of inauthenticity are provided and include ways in which field supervision can be used to help move students from this false sense of self Dr. Bodenheimer describes how multiple external factors contribute to shaping the sensation of falseness and offer self talk strategies that can aid and diminishing feelings of insecurity and incompetence. The episode concludes by emphasizing the need to avoid isolation build relationships with peers and recognize the essential work that is being performed by the social work profession. Danna Bodenheimer is a licensed clinical social worker and is the author of Real World clinical social work. Find your voice and find your way. She received her doctorate in social work at the University of Pennsylvania and is the founder of the walnut psychotherapy center. In addition to her clinical practice Dr. Bodenheimer teaches at Bryn Mawr College graduate school of social work and social research. She was interviewed in February 2013 by Dr. Laura Lewis director of field education here at the UB school social work. All right we have with us today Danna Bodenheimer. How are you today.

[00:02:59] I'm good thanks for asking.

[00:03:01] We're happy to have you with us. And this is Laura Lewis I'm the director of field education here at the UB school of social work and I can't wait to hear from you about some of the trends that you're seeing and the psychological experience of MSW students and graduates. Can you tell us a little bit about that.

[00:03:22] To be totally frank I haven't been teaching since this past summer. Things are fresh for me but not as fresh as they typically are. Meaning that like I haven't been in the classroom today so I just wanted to be transparent about that. So some of the psychological themes I've found. First of all a tremendous amount of hope for me about what social work can do and willingness on the part of social work students that this is the field they chose knowing that they're going to be launched into a very complex social and political environment and feeling like they now have a degree in hand that will help them target some of the issues that are bothering them the most. I feel like in the first year of social work school there's a lot of students who had been debating between doing psychology programs social work programs. And by the time students graduate I think that there's this real pride in having chosen social work pride in the social work ethic pride and a focus on oppressed population and a fear that they did not get enough years of education. So I think that people can graduate after five years and that are prepared or when you're not feel prepared. But so were students after two years I think had a slight fear though I can't overgeneralize that they don't know what's going to happen once they're finally really out there not in a holding environment of an educational institution. I think that there's a tremendous duality between confidence and pride in what social work does and insecurity and anxiety that each individual won't be able to do it right.

Right away.

[00:05:05] That really resonates with me and I think about when I first meet students when they come into the program the tremendous amount of optimism that they have about going into a profession where they can help people and also I agree with what you're saying and they can you can tell you know their comfort with being in a place that really is makes sense for them being in a profession that really makes where they really feel like they're fit and but also a tremendous amount of responsibility around doing this work. There's no question about that. How would you define impostor syndrome.

[00:05:39] The idea of imposter syndrome was first coined as a notion in 1978 by two psychologists who noticed that there were large portions of the population who felt that they were going to be found out at any given time who are walking around feeling like they were faking it or who felt that their knowledge and skill were being performed but not something that they authentically felt or could internalize as real. So given these trends how much of what you're seeing is a byproduct of becoming a social worker where we're looking not just at helping people but this larger context versus just people entering the professional work world. What is specific about this for social work in your mind. Well I think what's specific about it is that there's a projection onto the field of social work that social workers have answers to questions that nobody actually has answers to. There is this sort of really complex interplay between somebody newly graduated and in the field for the first time and sometimes in a professional position for the first time and then a tremendous amount of transference onto the idea of what social work can do which is often anything people don't have a really refined understanding of what social workers can and can't do. So I often feel that new social workers are holding the fantasy of the people they're working with that they can transform lives almost instantaneously and dealing with the reality of the limitations of what being a human but to being a social worker I think gets folks up for some really large internal struggles. I think students tend to have a very unrealistic idea about what it is they can actually do you know getting out in the real world is very different. Yes there's that but there's also that social work students have a hard time recognizing how much they're actually doing. So I hear so frequently from students I feel like all I'm doing is sitting and talking to somebody. It's not real. This isn't real clinical work. This isn't real social work. This is a real therapy. Whatever the case might be this is not real if management and I want to say that there's so much happening in that dialogue there's so much tension and the building of attachment and attunement that recurring that the work was subtle is quite great and sometimes really hard to recognize that you're doing.

[00:08:14] That's so true. And I struggle as a field director and how to talk to students about this sometimes because it sounds overly simplistic when I say some about how much value there is and just simply being present with our clients. But I know from my own experience the power of that I think sometimes students get so caught up inside of their heads thinking about all of the things they want to try to do and all of the strategies they're learning that those things tend to get in the way then of being able to really sit with someone and be present with them.

[00:08:54] Yes. And to recognize the benefits that are actually occurring as they're sitting with that person

[00:09:00] Right. And also the idea that the expectation I think that our clients will look to us for all the answers when and reality you know we we bring to the table some knowledge and some expertise but much of the solutions and things that contribute to a client's success actually come from the client. So what are some of the realities of the social work field that you think do contribute to this experience a feeling like an impostor.

[00:09:33] So I think that it's multi-dimensional. There's several different entities that active

surveillance body is to social work right so that might be an insurance company. It might be a credentialing entity. It might be a supervisor. It might be a school board and oftentimes views are not necessarily social workers who are looking at our work and they're describing to us what we should be doing right. Like you should be targeting these treatment goals throughout out of session and you should be focused on these treatment goals as you possibly can because of course the economic and it makes sense and it's what somebody outside of the field would expect. But when you actually sit with somebody you know a treatment plan doesn't necessarily play into that dialogue. So there's the feeling I think that social workers have that's like I'm not really doing what I'm supposed to be doing. I'm not really doing what I've been told to do. I'm not even really doing what I'm documenting that I'm doing right because at the end of every session there needs to be some sort of case note that describes the concrete outcome of a dialogue and the nature of a dialogue is that there is not a concrete outcome. You know it's a pretty elusive process to really know what the curve. So I think that social workers unfortunately have to create a good amount of fiction to defend their work and to translate their work to the entity is that sort of pay attention to their work and monitors their work. So for example I have a supervisee who works in a charter school. She gets all her performance evaluations from a principal a principal is measuring outcomes via grades attendance truancy behaviors in a classroom a social worker is studying attachment. The self-regulation of trauma the impact of poverty. And somehow every time she gets an evaluation it's not really based on the work she's doing. It's based on like how are your outcomes measurable. And I think that this creates this kind of false sense of self when you're trying to interface with systems that don't really understand the complicated nuance and texture of what goes on in social work. I think that that's one of the realities of the field. Another reality of the field is that we have clinicians who graduated a month ago two months ago and by their third month at work they have a caseload of 90 people. They can't see all those people every week. They might not even be able to see those people every month and then all of a sudden this feeling like not doing this well I'm not really able to keep up with the need is too high. And the reality of what one person can do in any given week conflicts with this need and I think a tremendous feeling of shame can evolve out of that which turns to an internal critique of oneself rather than an externalization of the problems in the system think that there's two other dimensions to my conceptualization of what makes somebody feel like a social work impostor. The third is just social work education which I happen to think is one of the most radical spaces where education is occurring in this country. Like I think it's where amazing conversations are happening where we're trying to keep things incredibly cutting ads and we're trying to both keep up with evolving trends and evidence that evidence based practices while also paying tribute to our past. All of that said it's a lot to do in two years. So somebody might go to a job interview right after graduating and the interviewee says So how do you practice. And a graduate will say well I use CBT and inside of themselves they think I really only spent a week on CBT or two weeks of CBT and I know I need to come up with an answer so I'm coming up with an answer. But the truth is I don't really know how I practice and I think that because social work has this pressure to fit so much in just such a small period of time and there's so much pressure for a level of competency for new graduates that it's even upon graduation and in interview that we find that we're like constructing something that occurred in our education that hasn't really occurred. That said I think that there's a lot that does happen in a social work classroom and in social work education that social work institutions aren't really claiming and taking like enough credit for like I think processes of self reflection are developed I think a study on learning racism develops. I think understanding our part as like a mechanic in a very large complex system develops. And I think that understanding the complexity of trauma which usually occurs repression and marginalization and poverty is also something that develops. I don't feel like in syllabuses necessarily says that this is what's being taught and that students understand that this is actually something tangible that they're graduating with and it's because so many spaces keep asking for. What are your skills and what can you produce. That's not an easy question to answer given the complexity of what social work education is trying to teach. So we're sort of left being like I can help somebody cope. They're mindful now and it's kind of like I don't think that that was being asked social workers in terms of

like what skills do you have to really get at the talent that gets developed in educational settings.

[00:15:12] Almost like there is a mismatch of sorts. When we're in this incredibly complex and wonderful field of social work but we're constantly having to translate it for other people in terms. And I think that's what you mean by this idea of imposter syndrome. Right.

[00:15:31] Yes. Yes. That we sort of graduate and move towards graduation with a false sense of self about what we are confident that what we can do start to develop like a lot of internal doubts about our capacities and feel like when we're selling ourselves we're not really selling the truth of what we're able to do because we haven't really been empowered to articulate it in the way that we should.

[00:15:57] And this isn't really being normalized. You know this experience of feeling like an imposter isn't being something that's not discussed it's not being normalized as people aren't alone in these kinds of feelings it's rather common. Do you think that there are ways that supervision which is rather unique to our profession social work supervision can be used to help ease students out of that feeling of being a fraud.

[00:16:24] I think that supervision is one of the most beautiful pieces of our work. I think it's sort of the intergenerational transmission of practice wisdom and experience in a way that we hold so dear. And I think supervision is probably the most fundamental piece of social work success. That being said unfortunately I think that social work supervisors are often as stressed as in terms new social workers. So really creating and protecting the time for supervision I think can be challenging when it happens. I think amazing things grow. And I also feel like the way that supervision used to happen which was like sort of more oriented towards process and process recordings and reflections on actual client interactions has moved towards more of an evaluation of treatment planning and compliance with larger systems like insurance companies. So it's sort of like. So can I check your paperwork how's your paper. And I think supervision can become problematically focused on tasks. That said I think that task driven supervision is not unimportant. I just wish that we could formally set aside a time for supervision of clinical engagement and supervision around tasks that they don't get so muddied because the tasks almost always take precedence because of the pressure to perform and offer proof of progress.

[00:17:59] I would agree with that. I think you know that in some ways social work has to reclaim this idea of clinical supervision and opportunities to process with our colleagues with our supervisors

[00:18:15] And I get it. Like I supervise so many people a week and I try so hard to keep focus on the clinical supervision and the development of a clinician and I'm also like you to properly assess for suicide and can we go through every step of that. And what is your district plan and what was your safety plan. And it's really easy to get kind of caught up in the stuff that makes us anxious in order to be efficient and deal with the limitations of how much time everybody has.

[00:18:46] Yeah that really rings true for me too. I do think there's hope though and the longer you do it the better you get at it so that you learn to address the very concrete things that need to be done and remind yourself you get in the habit of stepping stepping back and then thinking about larger processes as well. How is the person in front of me really experiencing this. Let me not get you know that this is a real human being you know doing the work with real people. It's not just about tasks

[00:19:20] Right. Right exactly. And I always encourage my students to really advocate for their supervision because I think that it's scary to demand your supervision needs get met and the more

that students advocate for it I think the better equipped they are to negotiate the complexities of the field. Absolutely. So students can really be you know trying to have a strong voice about supervision and protecting that time. How how can social workers maybe make use of feeling like an imposter to possibly enhance their work. So I think that's a great question truly believe that part of the feeling of being an imposter is a projection a projection from many different systems that are asking questions that are really hard to answer. So let's just take for example you had somebody who was placed inpatient for acute suicidality and is homeless and has no real infrastructure in her life. And you're in charge and discharge planning. Probably you're going to feel lost. You're going to feel confused and you're going to feel like the options you're offering are less than ideal. And when you slip that feeling through the lens of realizing that this is a projection this is what the client is feeling and experiencing in the world they are lost they don't know what systems will help them. They have doubts about the capacity for the world to hold their life. And when you start to develop empathy as a result of the anxiety that's growing in you because you know that part of the reason it's growing in you is because it's growing in your client. I think it eases how painful the feeling of being an impostor can be and that it can really deepen our capacity to sit with the internal life of our client that is really interesting. So is a relationship almost between you know your own anxiety or this feeling of being an impostor and recognizing when transference potentially anger countertransference is occurring and then using that to inform the work that you're doing. Social worker can think of it in terms of interacting with a quiet now interacting with the staff right. Let's just go back to the idea of the hospital. So you're sandwiched between the clients and the psychiatrist and the psychologist who you're working with and they're sort of like. So what's the discharge plan. And you feel totally lost and confused. I think that also can be used to help you understand that the way that other fields are functioning is also with fear and doubt. So rather than taking it all in like there's something wrong I don't know what I'm doing. You can look more critically about what a psychologist really feeling confident about what is a psychiatrist really feeling confident about and realize that we're all kind of guessing and hoping to do our best. But we don't know how to fix homelessness. We don't know how to prescribe to cure addiction. If we did those problems wouldn't exist. So I think that part of the way to negotiate imposter syndrome or the feeling of being an imposter is to realize how much we all don't know and how much we're all just attempting to do our best. So when we get into this headspace where we think other feel hold expertise beyond our own I think we diminish just how lost many of us are feeling but also how much we're all doing that that's with exactly what we have right now and that every client you meet and every situation you see is different than what anybody has ever seen before. Every single time. So there's nothing you could have actually been precisely taught that could have prepared you for any given moment.

[00:23:12] So that sounds a little bit scary from a student perspective. Are there any self Talk kinds of strategies that students and social workers can use to help them overcome feelings of insecurity and incompetence.

[00:23:27] Yes absolutely. So first and foremost I think it's really important for a social worker to picture how language develops in a child. A child cannot develop language if they're not in the presence of others. They won't learn it. There's no way. And the only way that language is acquired which is one of the most essential skills anybody has is because people simply talk around them and to them and I want to help restore Social Workers understanding that the little exchange of language onto it so bolsters clients well now in addition to that sitting and talking to somebody from a neurobiological perspective there's so much research that shows this helps increase neural pathways and helps give people new ways of thinking and being in the world. When you feel like I've never done this before. I don't know what I'm doing. You have to realize that literally being in the presence of somebody looking at them listening to them and being curious about them is creating change on a neurobiological level just like it would for any developing baby. Right. That means simple tasks that you don't really know that you're doing. Every word you say that a kid never has

never heard before is how they learn that word work we're doing is always in the service of developing strengths in the client and I feel like that work is so subtle and nuanced and hard to name and it doesn't mean it's not occurring. And I truly believe that the authentic curiosity with which social workers approach people clients mine in and of itself is curative. To be curious about the life of an addict the life of a cancer patient the life of a homeless person is a feeling that other people are not holding about that person and that authentic curiosity literally humanizes in a way that brings somebody back to life.

[00:25:24] I'm so glad that you used that word curiosity certainly as something that I tried to talk to students about. Sometimes I feel like they don't believe that gosh it can't really be that important right. But but then you know when you add the word authentic the other word that came to mind was being genuine. Those principles that are so part and parcel of what we do as social workers are key ingredients you know for a reason they really work. People need to feel that you know when people feel that they've genuinely being listened to and you're genuinely interested and understanding where they're coming from. Amazing things can happen. So you really want students to be able to hang in there and feel supported until they get there.

[00:26:14] Yes I also want students to understand that attachment meaning like literally took like your client and wanting to sit with them serves as a lubricant for the client's own ability to self explore. And by offering the possibility of that attachment you're giving your clients more comfort in their search within their own mind. So it's like without the presence of attachment going inside one's mind feels terrifying and in the presence of attachment it gets easier and less scary. And the lights go on and if all anybody ever does is a social worker is build attachment. I would think that that sets our field apart.

[00:26:55] I agree. It's all about that relationship and doing well and creating. Like your I like that word attachment. Well I really like the way that you're talking about this. This approach to teaching students is kind of clinical piece to it I think is really helpful framework. How do you think the role of social work in the world might play into the experience in this feeling like an impostor.

[00:27:23] I think what social work seeks to do which sets it apart from other fields is that it tends to hold or it attempts to make dichotomies false. It says there is no real difference between the micro and macro. There is no real difference between policy and clinical work. There is no real difference between the individual psyche and the group psyche and you know the world's pain is our pain. And so I feel like what social worker does is try to hold tension in ways that others feel are not always as open. So you could be sitting with a psychologist who is and I love because this is not to criticize the court system to comment on what's different about social work. Psychologists might hold up the DSM as the thing that most clearly indicates what is going on with a client and a social worker might say yes these are the symptoms. On the twenty eighth of the month when somebody is on disability check has run out on the first of the month. The symptoms don't look this way. So holding multiple systems in mind when you're interfacing with your you're like No it's just this. No it's just that no it's only there I think can be something that feels disheartening because it's not really reflected in the world around us. We're not really equipped to be thinking as three dimensional way as social work hopes that we will do I think there's a loneliness.

[00:28:55] Yeah a sense of isolation potentially yes and a sense of a deeper knowing about how many intersecting things are occurring at any one time and a wish for the people around you to and know exactly that. Thank you so much. Damn I really feel like I've learned some new ways of thinking about about that will help me and and supporting our students as they go out into the field knowing that this is an issue for them and for social workers who are already out there practicing. Is there anything you would like to add as we come to a close that you think might be helpful for people.

[00:29:39] No I mean I think we want to add that there's never been a more important time to be a social worker. And I really do mean that I think that there are so many different crises unfolding right now in our country whether it's the opiate epidemic or that health care is really at risk. I think social workers are people who are equipped to be dealing with this era of this moment. So I'm hoping that people though they may feel doubt also recognize that their work is of the utmost essential nature right now. And I would also suggest that building any sort of peer relationships with other social workers is self-sustaining. Having a conversation with just one other social worker a week can change the way that the song feel. I think last but not least there is something about being in the field of social work that makes it feel like there's scarcity all around and there is a lot of scarcity. There's also a tremendous amount of abundance. And I think that that abundance which can just take the shape of a really good supervision session or a great walk outside or just one good session can be really really nourishing. So I would encourage social workers to be looking more towards what's abundant rather than what's there. I think that's a really inspiring message. Danna thank you so much.

[00:31:05] Sure. My pleasure.

[00:31:07] You've been listening to Dr. Danna Bodenheimer's discussion on the impostor syndrome within the social work profession. I'm Louanne Bakk. Please join us again at inSocialWork.

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