Episode 117 - Kori Bloomquist: Social Worker Self-Care: Practice, Perceptions, and Professional Well-Being

[00:00:08] Welcome to in social work. The podcast series of the University of Buffalo School of Social Work at www.insocialwork.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 to research. We're in social work. Hello I'm Charles Sims. One of your host of in social work. I'd like to take a moment to address you our listeners. Thanks for downloading more than 400000 of our podcast. We'd like to know what you think of them. Please take a couple of minutes to tell us what you like or don't like about the podcast. If you're an educator and you're using our podcast and your courses how are you using them in your teaching. If you are a professional practitioner how have the podcast influenced your work. We would also like to know what you'd like to see us do next. Please go to our website at www.insocialwork.org and click the contact us tab. We look forward to hearing from you again. Thanks for listening. There is little doubt that social work can be stressful. The needs of those that social workers work with time and documentation pressures professional and societal expectations and the use of self in the work all can conspire to create significant demand on the professional social worker.

[00:01:49] Guarding against burnout is something that social workers hear about from the early days of their training and practice understanding that burnout can have serious implications for the delivery of services as well as lead to turnover. Agencies also must be concerned about the stress experienced by its workforce to address this very real concern there has been increasing discussion on the role of self care in social work practice. In broad terms self care may be defined as a set of activities and practices that a person engages in regularly to reduce their stress and maintain and enhance their well-being. To understand the practical aspects of self care today's guest discusses research conducted by herself and her colleagues Kori Bloomquist is a Ph.D. student visiting lecturer and a research assistant at the Indiana University's School of Social Work. Ms. Bloomquist received her B.S. W. and MSW from Indiana University and has practiced in gerontology disability services mental health and child welfare. In this episode Ms. Bloomquist discusses her research related to social worker self care practices and perceptions and professional well-being she describes. From that research social workers reported self care practices across five domains as well as their perceptions of that self care. Additionally she discusses relationships between social worker self care practices and perceptions and indicators of professional well-being that include compassion satisfaction secondary traumatic stress burnout and the intention to leave one's position Ms Bloomquist closes the interview by discussing implications for social work education practice and research. Our guest was interviewed by Elaine Hammond a part time member of the faculty at the University at Buffalo School of Social Work. Hello Kori. Let's start talking about the work that you've done in terms of looking at social work self care and how that both supports and may interfere with practice with longevity in the profession with satisfaction in the profession. Let's start right beginning.

[00:04:21] How did you first get interested in doing this. Sure. Well I am a doctoral student at the Indiana University School of Social Work and this research project regarding social worker self care actually started as a class assignment for the doctoral quantitative research course that I took during my coursework for my Ph.D. and we were asked by a professor Dr. hay lung Kim to consider a topic of interest and collaborate with peers with similar interests conceptualize a research project and then carry it out all the way from conceptualizations through data collection and report writing. So as I said we were asked to pick a topic of interest and collaborate with peers to develop that group research project and being aware of those dynamics of group research. I decided to form a group with two fellow doctoral students Leila wood and Kristen Trainor because we knew that we

could work in a way that would be synergistic and collaborative and we felt that that was really an essential step to completing a successful group research project. So that was great and was a great way to start. But we all had very different individual primary areas of interest in terms of research so mine was child welfare. Lee was a domestic violence and Kristen'sn was criminal justice. But we were able to come to some common ground with respect to our interests and the value of social worker stuff here as we were all either current or former practitioners and had spent time in the field and all of us were approaching the end of our doctoral coursework and we recognized the importance of healthy social workers.

[00:06:06] So thus our agreed upon research topic social worker self care emerged and we really wanted to look at the relationships that existed between social worker self care practice and social worker self care perceptions and then some various indicators of professional well-being both positive indicators as well as negative indicators because you believe that when thinking about well-being and professional well-being specifically there are indicators on both sides of that. Absolutely especially the perception. It's so interesting to me. So many social workers that I meet as students and early in the career really see the self care piece as simply one additional requirement that they're trying to add to this pile of requirements and it so often feel burdensome to them. Absolutely and I'm sure we'll talk about it later in the interview but self care perceptions really emerged as one of the key predictors in terms of professional well-being. Actually the most predictive indicators of professional well-being. So I'm excited to talk with you about what we've found in terms of social workers perceptions of self care. Well before we move on though I would like to touch a little bit on this aspect of doing this study as a class requirement. I think so often students find themselves doing projects like this as a class requirement and they may miss the incredible opportunities for practice and for contribution to the profession that are possible in everyday study. Absolutely and I think the word that you used opportunity was key.

[00:08:03] We saw this as an opportunity to not only learn ourselves but contribute to the knowledge base in a way that would be positive and effective and that we could disseminate this knowledge to educators of social workers current practitioners and other researchers who might be interested in the topic of social work or self care I really think that it was a rather brilliant part of the work that you did to work move right into how you recruited for the sample. Ok so there were two inclusion criteria for our study. First that the respondent must be currently practicing social work and that links to one of our indicators of professional well-being specifically intend to turnover which is a cognitive psychological process that one goes through when they are considering leaving their current job. So if we had responded weren't currently practicing we wouldn't be able to measure that intent to turnover. So first inclusion criteria was that the respondent needed to be currently practicing social work. And second that the respondent earned an MSW degree from a CSWE accredited MSW program. So we decided to tackle this with some vigor. We contacted all 217 accredited MSW programs across the country. We did this by email and there were three of us as I mentioned in our research team. So we divided up the work and tackled that. So we asked each of those 217 programs about their potential interest in a research study that would look at social worker self care and professional well-being and their subsequent willingness to assist in the recruitment process by sending out a web based survey that we designed to their MSW alumni list serve. And if we did not hear back from the school upon our initial request we sent a follow up email to each of those school. So take that number 217 and double it. And those were our initial unfollowed contact.

[00:10:14] So of those 217 schools that we contacted 32 indicated that they had interest in our project and that they would be willing to help with recruitment so that came to a response rate of about 15 percent. When we sent those recruitment emails it included a link to the Web based survey that we design through Qualtrics and then the schools forwarded that email with the link to the survey to their MSW alumni listserv and we actually had an opportunity to present some of our

findings at APM the annual program meeting for the CSWE this past fall and had others in the audience who said that they had also participated. It was really great to see human beings behind these web based responses so that was an exciting part of our research in this process as well. So in all our efforts resulted in a total of 900 and 71 respondents and those respondents were from 42 states and the District of Columbia and of those 971 786 met the inclusion criteria. So we ended up with an eye end of 786 MSW level practicing social workers that wanted to share with us about their social workers self care care practice and perceptions and their overall professional well-being. So we had a great sample great turnout for this project. I just bought myself a little curious as you say 42 state and the District of Columbia. Were there any pork that steak with a steak that you didn't find represented fairly evenly distributed. Do you have parts of the countries that you find yourself wondering what health care practices like. You know we had a pretty representative sample across the United States.

[00:12:18] We did see the Midwest was probably more responsive than some of the other states and as I said earlier I'm a student at the school of social work in Indiana and we had a big response from Indiana so I'm not sure if that impart it from people within the school and within the community being knowledgeable about our research efforts and that could have biased their decision to participate slightly. But we had representation from the East Coast from the north from the south and from the West Coast. So we were pretty happy with that and we also asked a question about urban versus rural area of practice and about 30 percent of our sample indicated that they practice in a rural setting and we were really happy about that too. So we had over 200 respondents that were able to share with us that practice in a rural area the wonderful I had also shared that my practice is primarily in a rural environment. Despite the fact that I'm associated with the urban university and I'm so happy you were able to hear from those colleagues of mine in a rural setting. So we've got the recruitment you've got a really nice sample going what initial data where you collected. Sure. As I said earlier developed a web based survey through Qualtrics that included multiple components. So in an effort to study social workers self care practice social worker self care perceptions and positive and negative indicators of professional well-being. We had a few different scales within our instruments. We wanted to look at compassion satisfaction secondary traumatic stress burnout and intentional turnover. As those indicators of professional well-being we know that others exist but there are established scales out there that have been used in tons of studies that are reliable and valid.

[00:14:18] So we wanted to start this endeavor with regard to social workers self care and professional well-being using some established measures. So our instrument included demographic and background questions. Two established instruments. One the procul five developed by Stam and the other. The intent to turn over scale developed by Galloway Gottlieb and Barnham and then to self develop measures which were based upon available that literature on social worker self care and perceptions. One that explored self care practices across Thai's domains and then the other the self care perceptions scale included 11 questions related to one's value of self care perceived effectiveness and perceived barriers as well as ones employers perceptions of self care and ones MSW programs perceptions and value of self care. Again things that really interest me anything else on the data before we go right into what did you find. Maybe just a little bit on our sample. We found that our sample was pretty representative in terms of NASW social work demographics our sample was predominantly female Caucasian and not Hispanic or Latino and the average age of our participants was 41 and we weren't really surprised by that because we were looking at folks with an MSW and of those who responded they had about nine and a half years of practice experience. So that sort of matches up when we think of traditional students entering and graduating from an MSW program and on average respondents had been in their current position for about five years. So that is a little bit more about our sample.

[00:16:13] Additionally the majority of respondents were licensed and they served in full time

clinical positions in which they spent over half of their week in direct contact with clients which we thought was an important question to ask when we're thinking about self care and thinking about indicators of professional well-being such as burnout and intent to turnover and secondary traumatic stress. We really wanted to better understand that piece of direct contact with clients and how that might play into one's professional well-being. Absolutely and certainly perhaps although we'll take a little time at the end to talk about what next steps might be either for you or someone you are working group or perhaps for one of our listeners who is interested in taking this research to another step. Yes it is so fascinating to see if there are differences in perception around self care and around self care skills are used in different areas of the work. Yes. So what did you learn. We learned so much and I'll speak statistically first and then sort of break it down from there. So we used multiple regression to predict scores on each of those four indicators of professional well-being compassion satisfaction instant turnover burnout and secondary traumatic stress and we used nine predictor variables. Two of those were self care practice and self care perception. And then we had some background demographic variables as well. So overall that regression model with all of our predictive variables was statistically significant for each of those four indicators of professional well-being. So our analyses revealed some pretty interesting findings. We found that there were five significant predictors for less burnout or lower levels of burnout among respondents and those included self care perceptions and ones engagement in professional self care activites emotional self care activities and spiritual self care activities as well as more years of post MSW experience.

[00:18:28] When we looked at the indicator of secondary traumatic stress we found two significant predictors and those were self their perceptions and more years of post MSW experience and we weren't really surprised that we didn't have any significance in terms of particular domains of self care practice that were predictive. Because the literature tells us that secondary traumatic stress is thought to have more of an immediate onset when compared to some of the other wellbeing indicators such as burnout that accumulates over time. So it seems reasonable to think that ongoing self care practice may be somewhat less effective in mediating the onset of secondary traumatic stress. When we looked at intent to turnover which again is that psychological process that cognitive process that a person goes through prior to leaving their job. We found four significant predictors those were self-care perceptions and professional self care engagement more years of post MSW experience and greater annual income. So we found some social and economic factors come into play with intent to turn over more so than specific self care practice domains so that wasn't really surprising either. And that's an area of interest that some audience numbers when we've talked about our research in the past. We're interested and so we would like to know more about this phenomenon of intent to turnover and what we can do and if there are socioeconomic factors involved in that process and our initial findings say yes that is something to consider. Finally we looked at compassions satisfaction and we think of compassion satisfaction as that pleasure that is derived from helping others and serving others. And we feel that that is a key component of professional well-being especially among social workers in helping roles.

[00:20:40] So we found three significant predictors of ones greater compassion satisfaction again self care perceptions as well as two domains of social work or self care practice. That being engagement in emotional self caring activities and engagement in professional self care engagements. So interesting findings there and we found that the more positive perceptions that respondents had about self care and the more they spent time engaging in emotional self care practice and professional self care practice the more they reported that higher level of optimism that they derived from their work of helping others. And we felt that was really important because compassion satisfaction has been linked to worker longevity which is important for continuity when it comes to agencies and their sustainability as well as client outcomes. When workers stay with their agencies and with their clients there's research this suggest that clients have a better and more positive quality experience with that relationship with helping professionals. So from what we've learned about those buffering the effects of post MSW years of experience in terms of professional

well-being supporting compassion satisfaction especially and potentially through self care could really have positive implications for social workers themselves in maintaining their positions. Agencies in maintaining their workforce that is happy and derives pleasure from their work and then ultimately benefiting clients. So we felt that our findings related to compassions satisfaction were really important as I'm listening to you speak about compassion satisfaction and how that is more likely to keep social workers in their positions for a longer period of time.

[00:22:40] Then I began to find myself going back to the intent turnover thinking that again if someone is in their position for a longer period of time they are more likely to be available for raises or some of that increase in income that protects against intent to turn over. So it really seems to me as though agencies don't always have a lot of they don't always have a lot to say. A lot of persuasion. in terms of self care for their employees. But income. To a point. Even in our economy. Something that they can control and use that perhaps as an incentive to take better care of oneself. agreed. Another thing that is really jumping out at me and is because of my own emphasis in practice is that spiritual of self care did not pop way to the top in any of your domain. That is correct. Actually among the five self care domains it ranked lowest in frequency of engagement I find that fascinating partially because research would tell us that encouraging clients to consider what brings them meaning in life can be so important in helping them to fund courage that it takes to make changes and meet the challenges that they are asking us to help them make. And yet it does not come to the top of the research for practitioners. Absolutely and as a social work educator teaching social work practice we talk about the role of spirituality in as you said as sometimes a motivating factor. A potential area that does give meaning to existence gives meaning to behavior. And yes we were quite surprised as well to find it at the lowest end of our scale in terms of frequency of practice. It also popped to the top.

[00:24:59] I think of some of the work that come out of Stanford really comes to the top in terms of resilience spirituality as well as very specifically spirituality through a religious lens can be so important in resilience. And yet it just doesn't show up. Did you or your team have any thoughts about that. Well one thought we have relates to our methodology and the types of analyses that we did. So we and future research either as a team or individually or others out there who might be interested in exploring this we're interested in potentially doing some factor analysis of our scales in terms of those domains of self care practice to kind of see which factors hang together because it's possible that our respondents don't conceptualize spirituality based upon the choices they were given in that domain. So that's something that we are interested in exploring. I find myself wondering if it is somehow rolled into the emotional engagement and potentially psychological as well both of those seem that they would have components but spirituality and emotional self care and psychological self care that there is some interrelatedness definitely among the loose domain. It's fascinating. You've talked about some of these major findings. As you and your team have thought about this and I understand again you come from a very different perspective. It sounds as though you come from different emphases in your major doctoral work as well. But what are some of the implications that you find here. Sure. And I think to speak to the implications I want to touch on a little bit more about the self care perceptions issue.

[00:26:54] So as I said earlier some of the questions that we ask in terms of the respondents perceptions of self care related to their own value of self care their MSW programs the value of self care as well as their MSW programs teaching of self care how to engage in self care practice effectively as well as their employers value of self care and then subsequently their employer's teaching of how to engage in self care practice effectively. And then some of the barriers that exist and perceived ease of engagement in self care practice. So what we found is that respondents overwhelmingly value self care 94 percent of respondents said yes I agree or strongly agree that self care practice is valued personally on a personal level and quite a few respondents about 64 percent said my MSW program also values self care but far less believed that their program effectively

taught them how to engage in self care practice and similarly about half of respondents said that their employer values self care but less than a fourth of respondents said that their employers taught them how to effectively engage in health care practice. So we see that as a gap especially when considering that professional self care engagement is predictive of less burnout and more compassion satisfaction and less intent turnover. So teaching folks in the workplace how joined agents self care practice seems that it could be beneficial for the workers the agency and again ultimately the client. And additionally it's great as you know one of the core values of social work practice is competence. And we often hear that in order to be able to take care of others you have to take care of yourself so that value does come into play when we think about social worker self care and taking that from the academic world out into practice.

[00:29:08] Research also tells us that when students begin a consistent self care regimen as students they're more likely to take that with them out into the field and continue to practice self care when they're practicing with clients. So there seems to be a gap there. But I also think that points to another core value of social work practice which is the dignity and worth of the person. And while we recognize the utmost importance of putting client's needs ahead of our own in practice to really embody that value of dignity and worth of a person we need to really embody that ourselves as human beings and have that of an expectation for ourselves as well as our clients because we as social workers are also worthy of dignity and self-worth and value and those things can be accomplished. I believe through establishing and valuing and embodying self care practice as part of your daily life as well as your professional life. Well and you're preaching to the choir here to a point in our specific discussion as I had shared with you previously. It is a major focus of my own teaching no matter what it is I'm teaching them to some very specific teaching and training around self care for professionals especially those who work in trauma informed environments. But helping practitioners and students to make what seems to be a cognitive leap from the value and dignity and worth of the client the self-determination of the client to having themselves participate in that same group of humanity is difficult. Well what about some of the future research issues. Are there questions then that are lingering for you.

[00:31:09] You've talked a little bit about additional factor analysis but things that you personally are beginning to feel passionate about following up with in this research. Yes the factor analysis is something just sort of structurally in for sound research we think would be positive and could really carry this type of research with regard to social work or self care practice some perceptions forward and really help to make it even stronger and even more valuable to contributing to the knowledge base. So that's something that we're interested in something that you pointed out earlier was exploring the potential similarities or differences among social workers and varied areas of practice. So when we ask about demographic and background information we often who asked respondents to indicate their area of practice and we had a wide range we had about 18 different areas of practice ranging from child welfare to mental health to health care. And it would be exciting I feel to really explore the ways that folks in different areas of practice perceive. And then also engage in self care practice. So that's an area that we're excited to look into further as well. And also this was a quantitative research project but I am a qualitative researcher at heart. So there are definitely qualitative questions that emerge from this research and I think the quantitative and qualitative research should complement each other. So I think it would be exciting to really do some qualitative work with respect to those barriers to self care practice. And you had mentioned earlier that students sometimes reveal that self care practice can be just one more thing it can be something else on their plate to do. And so really digging into that.

[00:33:11] And I think that connects well with another one of our findings when we ask respondents to tell us what is the greatest barrier or what prevents you from engaging in self care practice. When we gave them a list of potential responses they said that their professional responsibilities prevented them most often from engaging in self care practice and that's concerning because we know that

professional self care is an important protective factor when it comes to indicators such as burnout have an intent to turnover and that there is a gap between the employer's value of self care and their ability to teach their employees and their workers how to effectively engage. So again that qualitative piece of really exploring that perceived barrier those perceived barriers of engagement in self care seems exciting to me or does I think it would add a lot of richness tear data. I remember as we were preparing for this that one of those areas that I began to think of as an interesting qualitative area as you had mentioned that intent to turn over practitioners who engage in therapeutic supports for themselves counselling psychotherapy have a slightly higher intent to turn over. And I found that a fascinating little nugget. I think that you might be referring to one of our surprise findings regarding psychological self care. Let me speak to that a little bit but we found one particularly perplexing finding and that was that respondents who engaged in psychological self care actually had higher levels of those negative indicators of professional well-being. So psychological self caring engagement actually was a significant predictor of more burn out more secondary traumatic stress and a greater intent to turn over from one's professional pool.

[00:35:19] And that surprised us to a certain extent when we thought about it quite a bit and our initial thoughts regarding that finding were that perhaps folks who are engaging in some of those psychological self care activities such as practicing being mindful participating in their own therapy taking time for reflection setting goals for them so are in fact perhaps more aware or more in tune with those phenomena related to work related stressors and including burnout and secondary traumatic stress and intent to turnover and we definitely would like to explore that finding greater. And I think that we could do that through qualitative research in addition to some possible quantitative work as well. That one really fascinates me it really partially because I teach so much from a mindfulness perspective. And yet if mindfulness actually does increase intent turnover eventually agencies will want me to speak. There doesn't work out very well. We talked a little bit about how spirituality did not pop at all. I imagine that was one of them. This was one. Were there other surprises in there. You know I could speak to the aspect of spirituality with particular attention to our rural participants. We found that in the general sense rural practitioners engagement and self care activities were no greater or no less than those in urban settings. However exploring literature related to the role of spirituality especially in rural communities led us to a hypothesis that rural practitioners would engage in spiritual self care activities more than their urban counterparts but that in fact was not the case. As spirituality again ranked the lowest among those five domains.

[00:37:20] And when I think of you talking about how you had a slightly larger concentration from the centre of the country which we know from the research to have a slightly higher concentration of folks who engage in spiritual and explicitly religious activities on a regular basis it is surprise. It is and we did present some of our research regarding social workers health care and professional wellbeing at the annual Rural Social Work Conference and we asked our audience members to give us ideas about that and there were quite a few folks who were rural practitioners themselves that said when it comes to participating in spiritual activities such as attending spiritual services there is a great potential for dual relationships to exist and they spoke to them that oftentimes they will not participate in social collective gathering type spiritual activities to avoid some of those dual relationships that often do occur in more rural settings. And that's a very good point. Certainly another area that where some quantitative but absolutely a qualitative approach would really add some richness to that finding where how can our listeners learn more about us. Are you in your team. Looking at publication. We are currently looking at publications we're in the process of finalizing a manuscript that we hope to submit for review and the eventual publication. Regarding the broader study which is what I spoke primarily today about social workers self care and professional well-being as a whole and also interested and possibly developing a manuscript related to the rural work and exploring those aspects that I've indicated to a lesser degree but still that are out there that are interesting and we hope to do future research. We have a big data set and lots of different areas to explore.

[00:39:36] So there is future work to come from this study and sort of the offshoots that piqued our interest. That is wonderful. Finally what are there one or two things that you really hope today's listeners will take away. I really hope that today's listeners will take away that social workers do value self care. They believe that it's important but that there is a gap in perceived value and teaching current and future social workers how to engage in self care that's effective for them and it's going to be a personal journey. But more attention needs to be paid and I think there's the potential for more attention to be paid in the classroom as well as in the field to supporting one another as a profession. And even though that journey of self care and sustaining that in a way that creates a healthy individual by recognizing this need we as social work researchers educators supervisors practitioners can work collectively to recognize the dignity and worthiness of each individual social worker and that I believe will benefit our profession and the people that we serve in the end. Thank you. That was very eloquently phrased. Thank you very much. Thank you. And thank you so much for being with us today. We really appreciate your time. We appreciate your passion. Please as well extend our thanks to the other members of your team. Absolutely it's been my pleasure. You have been listening to Kori Bloomquist discussing self care practices and social work. This is your host Charles Sims inviting you to join us again at in social work. Hi I'm Nancy Smith professor and dean of the University at Buffalo School of Social Work. Thanks for listening to our podcast.

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