Social Workers, Burnout, and Self-Care:

A Public Health Issue

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Abstract

Social workers have a complex role of providing social services with compassion and empathy while working tirelessly, enduring burnout at some level in their careers. The consequences of burnout can be harmful to workers, the people who they service, their families and careers. This public health issue is impacting social workers globally and is the impetus in exploring burnout to assist social workers with identifying the stressors that can lead to burnout and formulate plans to alleviate stress by using self-care tools. Social workers can use these tools to help prevent future stressors from their involvement in providing services to individuals, families, groups, communities, and organizations. This paper reviews the literature that explores burnout of social workers and provides self-care tools to use in daily practice.

Introduction

Social work is a highly stressful career and is notorious for creating burn out from the many tasks and services rendered, political and community demands, client advocacy, and administrative and funding issues that affect their work. Careers in social services, along with many other helping professions, have been identified as a stress-inducing, time-consuming profession. The stress that is produced while providing social services is well known for many helping professionals; however, many have felt that it is their mission to provide services regardless of the stressors or potential for burnout.[1] The accumulation of stress and burnout have been a complaint of many helping professionals in various fields and is widely acknowledged to play a key role in work retention and turnovers.[2] Although many have found their careers to be rewarding, the ability to complete daily tasks has been proven to be cumbersome. In surveying the literature, it has been recognized that social workers may experience higher levels of stress and resulting burnout than comparable occupational groups.[3] It is an occupational hazard that is a critical health issue affecting many social service providers.[3] The literature provided will explore the stress that leads to burnout and the implementation of self-care practices that can be used to combat this public health issue that could ultimately affect the care that is provided to consumers.

With a constant demand for social services, social workers often find themselves overwhelmed, overworked, and emotionally fatigued. Like healthcare workers, social workers are susceptible to burnout. Due to services in stressful and complex situations, social workers are more at-risk for chronic stress resulting in burnout. Burnout is often associated with increased levels of absenteeism, higher turnover rates, and negative work attitudes.[4] Additionally, literature indicates that social workers in Western countries have reported higher levels of stress, which attributed to higher levels of sicknesses among workers.[4]

Burnout

Burnout is defined as a psychological condition that results from chronic stress related to working with people.[5] From literature it has been observed that burnout is a buzz word for many personal and social problems. It has been researched since the mid- 1970's, and is a widespread and continuing threat in many human-service-related fields.[5] Burnout causes job dissatisfaction, job withdrawal, absenteeism, and turnover.[5] Herbert J Freudenberger initially discovered and evaluated burnout in health and social services fields.[6] He defined burnout as a display of negative feelings felt by workers in helping professions due to long-term exhaustion, diminished interest, and low feelings of personal satisfaction at work.[7] It was later defined as "stress without let-up," a sense of negativity building up while performance in many areas of your life is breaking down.[8]

Freudenberg suggested that high achievers were more likely to suffer from burnout and suggested that there are key factors that contribute to the person that suffers from burnout, such as environmental stress, personality, and individual response to stress.[6,7] He suggested that burnout is the result of perfectionists who fail to delegate authority and who also strive hard due to constant pressure, performing at an elevated level of stress and tension.[6,7] He also pointed out an important fact of childhood incongruence in the family, in which a sufferer of burnout can be the result of an attempt to live up to a role provided by an overachieving parent. Further suggesting that those that come from an impoverished background can burn out because of their desire to succeed.[6] It is also believed that burnout can be a result of someone who works extremely hard, is stressed, and sets high personal standards of achievement.[7]

Burn out is divided into three different scopes; which are emotional exhaustion, where the person becomes emotionally drained; depersonalization, where pessimism and withdrawal can be a result; and a low sense of personal accomplishment.[6,7] Burnout is also defined as "emotional collapse or breakdown that sometimes comes as the result of chronic stress"[9] regarding their job-related roles and responsibilities. Freudenberg further suggests that the lack of recognition of efforts to attain achievement exasperates the condition, especially if one has elevated level of expectations, burnout can be a result.[6,7]

Symptoms of Burnout

There are many physical symptoms of burnout which are identifiable, while there are many which are emotionally hidden for fear of losing employment or being labeled. It is characterized by the state of extreme physical, emotional, and mental exhaustion, demonstrated by a decrease in motivation, and performance.[5,10] It can eventually take over the body and mind resulting in physical signs such as: headaches, stomach aches, cold and flu viruses, sleeplessness, chest pain, sweaty palms, and fear of losing control and dermatological problems.[5,10] Poor concentration, instability, cynicism, anxiety, and frustration are also demonstrated. Additionally, workers who experience job burnout experience psychological stress, professional dissatisfaction, lack of motivation, emotional detachment, and feelings of emotional overload and exhaustion.[5] Job burnout has caused many to drop out of work and detach from their workplace where the worker is physically present but emotionally absent. For people who stay on the job, burnout leads to lower productivity and impaired quality of work.[7] As burnout diminishes opportunities for positive experiences at work, it is associated with decreased job satisfaction and a reduced commitment to the job or the organization.[5]

Workers suffering from burnout exhibit symptoms that disrupt all levels of their beings, such as psychological, physiological, emotional, interpersonal, and spiritual. Physically, burnout can manifest in forms such as the susceptibility of catching colds and viruses, having muscular tension, irritability, and chronic exhaustion.[5,7] Burnout can be displayed as depression, anxiety attacks, and lack of creativity, loss of enjoyment, irritability, mood swings, suicidal ideations, cynicism, and perfectionism.[5,7,10] The consequences of burnout can be harmful to the workers, the people who they serve, their families and their employment. Additionally, interpersonal problems in marriage can cause higher rates of divorce and adultery due to burnout.[11]

Family Impact of Burnout

Burnout is detrimental to the family as a unit and is multifaceted. Several people attempt to hide their unhappiness and frustration; however, most families can often see beyond the charade and see the fatigue, withdrawal, and discouragement that their loved one is experiencing. It can be a costly situation to the individual, their family, and their career.[6] Unfortunately, the cost of burnout and the lack of self- care affects everyone that encounters the exhausted social worker. Freudenberger found in four case examples that it is important for the therapist to untangle the family's views and management of stress.[6] He examined their responses by reviewing their changes during a period of burnout. He found that family therapy could help a family experiencing burnout if the factors contributing to the stressful situations are clearly defined and the person suffering from burnout is not blamed for the families' problems.[6]

Many social workers have chosen the field in social services and helping professions due to the concerns and problems that they have experienced within their own families, which can add to the stress of provision of services. Burnout involves both personal and situational factors, and it is important that the root of the issues are identified in order to combat burnout.[7] Sometimes the incongruity of the job's roles and the personality of the worker are at fault for the stressful situations.[5,7,10] Or the ethical dilemmas between personal and agency views can lead to the issues with burnout.[7] In a study of the effects of burnout and work stress on family relationships, it was found that social workers who experienced increased burn out were likely to also demonstrate episodes of depression, anxiety, irritability, and lower marital satisfaction.[11]

The Maslach Burnout Inventory (MBI)

The popular interest and study of the dynamics associated with burnout has stimulated the creation of several burnout inventories. The Maslach Burnout Inventory (MBI) is the most widely used instrument on burnout within research and has been widely used with helping professionals. There are three initial tools that were produced for human services, educators, and general professionals. However, others have adapted the Maslach Burnout Inventory to fit their own profession, with permission. The initial research regarding burnout was accomplished by completing surveys, questionnaires, and field interviews of staff in various human services fields.[10] In their findings, Maslach, Jackson, &Leiter indicated that burnout is the key contributor in the worsening of quality of service and care of staff, staff turnover, absenteeism, and low morale. Their findings also found that because of burnout, staff's personal and interpersonal lives were deteriorating.[10] There were incidences of drug and alcohol use, separation and divorce, physical dysfunction and exhaustion and insomnia.[5,7,10] Due to these findings and their work on further defining the concept of burnout, Maslach created an instrument, the Maslach Burnout Inventory (MBI) to assess the three phases of burnout.[5,10] The tool consists of 22 items divided

into 3 sections with items written in statements of personal feelings and attitudes using a 7- point scale from 0 (never) to 6 (everyday). MBI specifications according to Maslach et al. (1997) the MBI should consist of 22 items, which contains 9 items for emotional exhaustion, 5 items for depersonalization, and 8 items for personal accomplishments. The instrument is timed and must be completed privately and in 10-15 minutes. The information gathered must be kept confidential and the respondents should not be sensitized to the issue of burnout and should not know that the tool is a burnout measure.[10]

One of the largest studies of burnout among social workers was conducted in the UK. The workers completed the Maslach Burnout Inventory which assessed their propensity for burnout. The study was conducted by Cooper[12] with 1,359 frontline social workers of which 70% had six or more years of experience. The social workers in the study worked in all areas of the profession including child welfare, gerontology, and mental health.[12] In most of the social workers who responded, the study found 73% of the respondents had elevated levels of emotional exhaustion. One and four (26%) reported high-level of depersonalization. Which could cause social workers to become hardened towards the provision of services. However, there were remarkably elevated levels of personal accomplishment (91%) who also felt positively about their influence as service providers.[12]

Self-Care

Evident with many social workers, the neglectful push to exhaustion leading to burnout has hindered the opportunity for self-care practices. For many years, from this author's observations, self-care has been a fad, a topic of discussion in trainings and workshops and a hashtag written by millennials. Most critical to social work practice is the application of self-care practices. The implementation of these practices is widely recognized and can serve as a means of empowerment and personal well-being in ways that are deemed constructive and positive.[13] In a culture that glorifies stress, self-care is a way to find balance while serving others and should be given sincere consideration. This author believes it is an action in which a person intentionally decides that they will participate in activities that will create a peace of mind, tranquility of soul and rejuvenation of body while serving others, working hard in their profession or enduring hardship. It challenges people to care for themselves first before they could care for others while taking the initiative to self – manage and self- correct.[13] It is also an opportunity to give to self and also receive care and support from others by realizing the need for assistance from others.

Self-Care Tools

Mindfulness

Mindfulness, developed from the Buddhist traditions, is commonly defined as a way of paying attention, being on purpose and in the present moment, nonjudgmentally.[14] Although adapted from the Buddhist meditative traditions, is a term used to describe a practice of meditative awareness.[14] It has been shown to be effective in psychotherapy and as a self -care practice for mental health therapists asserting that mindfulness teaches awareness to deepen groundedness, presence and connection with others and the world, further explaining that self-care is essential to mental health practitioner training and professional efficacy.[14] It is a simple but not easy practice that encourages moment to moment experiences, analyzing thoughts and emotions. Sitting in silence is a way to incorporate mindfulness as a form of relaxation, following breaths,

Mindfulness can be experienced simply by sitting in silence allowing an opportunity to follow each breath as a form of relaxation, to reframe feelings and celebrate empathy. These practices can impact the level of tolerance for work life issues and difficulties.

In a Mindfulness - based social work and self-care (MBSWSC) research study conducted by Maddock, McGuigan & McCusker,[15] on stress, burnout, anxiety, and depression, found that their MBSWSC program was a useful program that improved the mental health and well-being outcomes for social workers. The study's findings also suggest that social workers who use the MBSWSC program are more likely to experience less burnout and improved mental wellbeing.[15]

Yoga

Yoga, a mind body intervention, started in India over 4000 years ago. This discipline is one in which asceticism and meditation meet with spirituality, the experience of spirituality, and the nature of existence. According to Chong, Tsunaka, Tsang Chan and Wai Ming,[16] the term yoga comes from the Sansskrit word Yui, which means to unite or to yoke. To unite the mind, body and spirit is the goal of this practice.[16] Although there is a spiritual element to the discipline of Yoga, many have used it as an opportunity to enhance physical postures also called "asanas," control breathing "ipranayama," and meditation "dhyana". Chong et al., defines the five traditional forms of yoga: gyan, karma, bhakti, raja and hatha yoga.[16] The traditional form that most Westerners use for stress reduction, stretching, breathing and meditation is hatha yoga. This form of yoga has been proven to reduce signs of psychological stress. It is also seen as a form of mind – body therapy for many clinical disorders and conditions, as well as for maintenance and disease prevention.[16]

Yoga has been proven across many scenarios as an intervention that can help alleviate stress, decrease physiological disorders and conditions, and prevent burnout. Social workers and helping professionals can use a yoga way of life to get to the root of their stress and learn how to change their emotional, psychological, and spiritual way of thinking to better be able to process their stress and alleviate it while serving others.[15] It is found that yoga helps a person identify their stressors and the root of their stress which makes them more aware of their situation and allows better responses.[15] The results of this experiment proved that by incorporating yoga into their life, it can significantly reduce job burnout of managers.

Conclusion

Encouraging self-care practices should be the responsibility of administration in all social work professions. Implementing opportunities for staff to indulge in self-care practices in social work practice is vital for the continued opportunity to provide services effectively and efficiently. Many social workers have endured years of compassion fatigue, vicarious trauma, and burnout. For continued provision of services to individuals, families, groups, communities and organizations, it is absolutely necessary to encourage workers to care for themselves and understand the signs and symptoms of burnout. The tools presented may not be effective for many social workers; however, it is the responsibility of the worker to ensure that they are mindful of their effectiveness and adequately monitor whether they are deteriorating because of the services that they are providing.

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