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Professional Satisfaction within the Mental Health System

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Professional Satisfaction within the Mental Health System

by

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Presented to the Faculty of the
School of Social Work
St. Catherine University and the University of St. Thomas
In Partial fulfillment of the Requirements for the Degree of

Master of Social Work

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The Clinical Research Project is a graduation requirement for MSW students at St. Catherine University - University of St. Thomas School of Social Work in St. Paul, Minnesota and is conducted within a nine-month time frame to demonstrate facility with basic social research methods. Students must independently conceptualize a research problem, formulate a research design that is approved by a research committee and the university Institutional Review Board, implement the project, and publicly present the findings of the study. This project is neither a Master's thesis nor a dissertation.

Abstract

Professionals providing mental health services experience various challenges that may put their potential to provide best practice and quality services at risk. The primary research question for this study is: How does a social worker derive satisfaction from their work within the mental health system? This study used a qualitative research design and was conducted through the completion of 8 in-depth, semi-structured interviews with mental health social workers. Several themes emerged from the research: Personal Satisfaction, Realistic Expectations, The Little Things, Self-Responsibility, Influence vs. Control, Sense of Support, The Value of Empathy, and Compassion and Self-Compassion. Through review of the literature in addition to these findings, it was determined that while social workers are insightful into why they enjoy the work they do, they acknowledge the various challenges that can act as barriers to their satisfaction. Assisting them in combating implications of these challenges is their ability to set realistic expectations both of themselves and their clients. What social workers struggle with, however, is the ability to effectively care for themselves either through self-care or by using the concept of self-compassion. Social workers can improve their knowledge and awareness of these topics, ultimately improving their satisfaction, which will also improve the way in which they provide services to clients.

Keywords: Professional Satisfaction, Mental Health, Self Compassion, Self-Care

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To my fellow social workers: The work you do is invaluable. Know your worth and care for yourself and you will continue to move mountains.

Professional Satisfaction within the Mental Health System

The social work profession is made up of individuals who share similar values. Specific values are identified within the NASW Code of Ethics. Throughout the history of the profession, these values have been identified by the NASW as the “foundation of social work’s unique purpose and perspective” (National Association of Social Workers, 1999, p. 1) and include: service, social justice, dignity and worth of the person, importance of human relationships, integrity, and competence. These values, in conjunction with the ethical standards also identified within the NASW Code of Ethics, provide a framework for social workers and assist them in providing best practice to each and every client.

This study will focus on the social work professionals working within the mental health system. According to the National Alliance for Mental Illness (NAMI), 1 in 5 adults in the U.S. experience mental illness in a given year (National Alliance for Mental Illness, 2016). Social workers have the potential to combat stigma and provide support, encouragement, and care in order to assist individuals experiencing mental illness improve and maintain their quality of life. Social work is one, among many, professions that work within the mental health system to assist individuals experiencing mental illness in a variety of ways.

In addition to the prevalent experience of mental illness, approximately 1 in 17 adults in the U.S. experience a serious mental illness, which interferes with or limits one or more major life activities (National Alliance on Mental Illness, 2016). NAMI (2016) describes mental illness as a condition that affects a person’s thinking, feeling or mood, which may also affect one’s ability to relate to others and function each day. Mental health disorders include, but are not limited to, Anxiety Disorders, Bipolar Disorder, Borderline Personality Disorder, Depression,

Obsessive-Compulsive Disorder, Posttraumatic Stress Disorder, Schizoaffective Disorder, and Schizophrenia (National Alliance on Mental Illness, 2016).

NAMI (2016) put together a list of social statistics that demonstrate the potential implications of the lack of treatment, lack of quality services, as well as the stigma associated with mental illness. These statistics include: an estimated 26% of homeless adults staying in shelters live with serious mental illness, approximately 20% of state prisoners have “a recent history” of mental illness, and over 37% of students with a mental health condition age 14-21 drop out of school. Additionally, suicide is the 10th leading cause of death in the U.S, and only 41% of adults in the U.S. experiencing mental illness received mental health services in the past year. Due to the prevalence of mental illness as well as the lack of treatment and lack of quality services, it is crucial that social workers providing mental health services are willing and able to provide best practice and quality services.

According to the NASW (2016), social work is recognized by federal law and the National Institutes of Health as one of five core mental health professions. “There are more clinically trained social workers-over 200,000-than psychiatrists, psychologists, and psychiatric nurses combined” (Social Work Profession section, 2016, para. 11). Social workers, whether licensed at an undergraduate, graduate, or clinical level, provide services such as psychoeducation, case management, individual and group therapy and counseling, inpatient and outpatient services, advocacy, as well as additional services that support healthy living (National Alliance on Mental Illness, Mental Health Professionals, 2015).

Social workers, in general, as well as social workers within the mental health system, face many challenges that can make this work incredibly difficult and can cause professionals to

experience a great amount of stress. Stress can be due to any number of reasons such as stressful environmental conditions, traumatic experiences, and a lack of resources and support (Wagaman, Geiger, Shockley, & Segal, 2014). Research conducted by Marc & Osvat (2013) was completed based on the idea that individuals involved in professions that require intense relationships with people are more prone to negative effects of stressors. Participants in the study identified factors such as excessive professional demands, time constraints, limitations of social work interventions, lack of appreciation and reward for their work, lack of support from supervisors and colleagues, repetitive work, lack of rest, and family life concerns. They further identified that symptoms stemmed from various stressors including emotional and physical exhaustion, feeling overwhelmed, sleep disorders, impatience, giving up recreation and diminished motivation and job satisfaction (Marc et al., 2013).

Through research within the UK conducted by Huxley, Sherrill, Gately, Webber, Mears, Pajak, and Katona (2005), it was concluded that social workers working within the mental health system value face to face contact with clients and their commitment to their clients plays a major role in job retention. Despite this, identified barriers to professional satisfaction such as not feeling valued within their organization as well as within society and lack of support from colleagues and supervisory roles were highlighted. Their research ultimately suggested that without focus on improving these barriers, employers will continue to struggle with recruitment and retention of mental health social workers (Huxley et al., 2005).

While professional satisfaction looks different for everyone, it is worthwhile to explore potential risks and preventative strategies that may assist with deriving satisfaction from social

work practice within the mental health system. It will essentially be the responsibility of social workers to determine what works well for them in obtaining the level of satisfaction they desire.

Literature Review

Social work is a profession filled with various challenges. This Literature Review will focus specifically on professionals providing services within the mental health system, the challenges that can arise from working within mental health as well as ways in which mental health providers can combat these challenges. Specifically, this literature review will explore the concepts of burnout and compassion fatigue and the self-care mental health professionals engage in to assist them with managing from day to day. Acker (1999) identifies that social workers often expect client outcomes of insight, progress, and change. When working within the field of mental health, however, the inability to observe these expected outcomes may instill a sense of failure within social workers. This sense of failure, in combination with additional stressors, can lead to other implications such as burnout and compassion fatigue.

Burnout

A study conducted by Coffey, Dugdill, and Tattersall (2004) requested that social workers, working within social service in England, identify the most difficult aspects of their work. Responses included “lack of time and rigid timescales in which to do the job properly”, “Issues around their various needs, especially in terms of challenging behavior, abusive/demanding clients”, and “lack of staff to cover the workload” (Coffey et al., p. 740). These stressors can lead to burnout.

While it will be of focus to identify ways in which professional satisfaction is obtained, it is important to first identify various risks within the profession related to personal satisfaction. Burnout has been observed as a phenomenon amongst social workers and is an important aspect of social work practice. Diaconescu (2015) identified that burnout is often observed in those with a “high degree of enthusiasm” in their desires to help others and manifests itself as “chronic physical and emotional fatigue, the depletion of the empathic resources and of compassion, boredom, cynicism, diminution of enthusiasm, temporary distress and depression” (Diaconescu, 2015 p. 57).

Burnout has been defined in many ways; however, is often categorized by three dimensions: emotional exhaustion, depersonalization, and reduced personal accomplishment (Morse, Salyers, Rollins, Monroe-DeVita, & Pfahler, 2012). These dimensions are often preceded by an amount of stress experienced within practice, with which it is difficult to cope effectively. Newell and MacNeil (2010) identify emotional exhaustion as a state that occurs when the social worker’s resources become unavailable due to the needs, demands, and expectations of their clients. Depersonalization occurs when a social worker’s response to their clients becomes negative, cynical, or detached. Social workers may experience reduced sense of personal accomplishment when they experience inadequacy based on their client’s inability to respond to treatment, despite their best efforts (Newell et. al, 2010, p. 59). Morse et al. (2012) note that high levels of burnout signify that mental health professionals lack the resources to deal with the demands of their work.

Practice within human service settings is a large risk factor in developing burnout due to the emotional expectations such as regularly repressing or displaying emotions and the chronic use of empathy (Newell et al., 2010). According to Newell et. al., (2010), the process of

professional burnout is something that occurs overtime and in response to a combination of personal factors, the population the professional is working with, as well as organizational factors. Signs that one may be experiencing burnout include tardiness, absenteeism, low performance, clinical errors, and isolation. Knowledge of burnout within the mental health field is “necessary and useful both for understanding and supporting the persons who ask the social services for help, as well as for the purpose of self-knowledge” (Diaconescu, 2015, p. 58).

Compassion Fatigue

Similar to the concept of burnout is another challenge that can occur among mental health providers: Compassion Fatigue. Diaconescu (2015) conducted research by reviewing and analyzing specialized literature focused on social work and burnout within the mental health field. It was concluded that compassion fatigue, which differs from the concept of burnout, occurs when one has experienced a fatigue of empathy, compassion, and hope both for oneself as well as for others. Compassion fatigue may also negatively affect one’s personal and professional life (Diaconescu, 2015). Implications of this phenomenon include experiencing distress within the workplace which may lead professionals to contribute to a negative and potentially toxic professional environment. In addition, one experiencing compassion fatigue may be predisposed to clinical errors and may lose their once respectful demeanor toward their clients.

“The very act of being compassionate and empathetic extracts a cost under most circumstances. In our effort to view the world from the perspective of the suffering we suffer” (Figley, p. 1434). The Compassion Stress and Fatigue Model is a model developed by Figley originally in 1995, and has since received revisions. This model includes concepts that predict

compassion fatigue. Included are both causes of compassion fatigue and concepts to prevent and treat compassion fatigue including: Empathic Ability, Empathic Concern, Exposure to Clients, Empathic Response, Compassion Stress, Sense of Achievement, Disengagement, Prolonged Exposure, Traumatic Recollections, and Life Disruption.

In the midst of compassion fatigue, mental health providers must strive for compassion satisfaction. Compassion satisfaction has been shown to be an important factor associated with professional satisfaction. Figley and Radey (2007) focused their research on the topic of “compassion satisfaction”, more specifically, developing a model for creating a sense of compassion satisfaction or “feelings of fulfillment with clients, rooted in positive psychology and expanded to incorporate the social work perspective” (Figley et al., 2007, p. 207). They expressed belief that it is as important to be educated on optimism and compassion satisfaction as it is to be educated on compassion fatigue. In addition, they identified a method to establish a higher positivity-negativity ratio, which consists of the combination of engaging with a positive affect, obtaining positive physical, intellectual, and social resources, as well as practicing effective self-care.

Self-Care

Despite the stressors experienced, many social workers are able to find much enjoyment through their work due to their ability to cope effectively with adverse situations. Carpenter, Schneider, Brandon, and Wooff (2003) studied those working within multidisciplinary mental health teams and concluded that high job satisfaction is associated with patient-related activities. It is also concluded, in reference to the above information, that patient-related activities can

impact challenges such as burnout and compassion fatigue. In order, then, to limit the negative implications, one must develop self-care and coping strategies based on their individual needs.

Coping can be described as a person's change in behavior in order to meet demands that cause stress. According to Collins (2008), there are two different methods of coping: problem-focused coping and emotion-focused coping. Problem-focused coping is aimed at finding solutions to problems or altering the source of stress in order to better prevent or manage stress experienced. Emotion-focused coping refers to reducing or managing the emotional distress associated with the situation.

One can assist in developing skills by utilizing a cognitive-behavioral approach, an organization-directed approach, or combining the two approaches, which is thought to have the best results (Wagaman et al., 2014). The cognitive-behavioral approach encourages individuals to develop ways to enhance job competency through training and education, skill development, fostering relaxation and social support, and increasing individual coping skills. The organization-directed approach encourages individuals to make changes to their work process and their supervision and supervisory relationship, as well as increase their participation in decision making.

An article written by van Breda (2016) focused on developing resiliency within human service organizations, defining human service organizations as vulnerable. The vulnerability of these organizations is due to a number of challenges, such as, the vulnerable populations served, large caseloads, inadequate funding, ineffective management, etc. According to van Breda, resiliency is developed by focusing on 3 aspects of an organization: the organization itself, the organization's staff, and the services the organization provides. While social work is a client

oriented field, it is crucial for social workers to engage in proper self-care in order to decrease possible implications caused by the immense stressors experienced. Acknowledgement of stressors and development of effective coping skills will be of great value to human service employees. Coping skills identified in this article included self-care, managing boundaries, prioritizing work, being assertive regarding workload, and use of counseling.

In 2007, a NASW Workforce Survey gathered information regarding how social workers cope with the stressors at work. In response to stressors, social workers engage in activities to assist them in coping with stress experienced. “People’s resilience and ability to manage stress and its symptoms depend on their use of strategies to help them: (a) cope with stressors, and (b) regain a sense of competence and mastery over their situations” (Arrington, 2008, p. 7). Participating social workers identified coping skills such as meditation, therapy, prescription medication, spiritual development, yoga, painting, etc. Additional coping skills identified include smoking, drinking alcohol, and being absent from work. “Over time, work-related stress can result in burnout, increased risk for workplace injury, impaired performance, poor mental health, impaired cognitive functioning, decreased concentration, and health-related problems for social workers” (Arrington, 2008, p. 13).

Recent scholars have emphasized the importance of teaching self-care to students and practitioners. A study completed by Diaconescu (2015) assessed multiple studies revolving around social work, burnout, compassion fatigue, and trauma. Through completion of research, she identified that interventions should be implemented into course work prior to graduation in order to further assess their impact on social workers and the abilities needed to effectively cope with burnout. Interventions identified included training of relaxation and meditations for stress

reduction and body awareness, identifying individual anxious and depressive cognitions, and peer counseling.

Miller (2015) identified 7 self-care strategies as well as developed a technique to assist practitioners in assessing their individual self-care techniques. The identified 7 self-care strategies include: Exercise, Mindfulness, Relational Connections, Altruism and Social Actions, Meaning, Pleasure and Enjoyment, and Deepening Self-Awareness. “Self-care is multi-directional; it can involve an inward journey but also involves focusing outside ourselves” (Miller, 2015, p. 52). Miller concludes by encouraging social workers in considering self-care as an essential aspect of social work practice stating that self-care assists in “fostering balance, resilience and an overall sense of well-being” (Miller, 2015, p. 56).

Self-Care and Professional Satisfaction

Social workers may be driven by internal motivation; however, this motivation can be halted due to the various stressors social workers face. Due to various stressors, concerns can occur within the recruitment and retention of staff, staff morale, anxiety related to staff work, and job satisfaction (Collins, 2008). Professional dissatisfaction can lead to detrimental outcomes such as negative attitudes, employee turnover, and physical and mental health concerns, which can be a result of the intense stressors experienced by social workers.

Research conducted by Judge and Bono (2001) completed a meta-analysis of the relationship of four traits related to professional satisfaction. These traits include self-esteem, generalized self-efficacy, locus of control, and emotional stability. They concluded through their meta-analysis, as well as through qualitative reviews, that all 4 traits correlate to professional

satisfaction. Self-care practices can assist one in further developing and maintaining these traits to assist in deriving satisfaction from one's work.

Miller (2015) noted that self-care strategies are important for both clients and professionals due to the ability to assist individuals in managing stressors as well as developing sources of strength and resiliency. Self-care practices aid in fostering balance, resilience, an overall sense of well-being, all of which further aid to the development of professional satisfaction. "Social work is a noble profession not only because of its aspirations and values, but because practitioners are willing to deeply engage with the suffering of others" (Miller, 2015, p. 56).

Conclusions

Mental health professionals, such as social workers, are at risk for experiencing impairments in their professional lives that may negatively affect their therapeutic effectiveness when working with their clients (Richards, Campenni, & Muse-Burke, 2010). They experience several stressors, and frequently experience the challenges of burnout and compassion fatigue. Self-care is considered an important practice for social workers, given the problems of burnout and compassion fatigue faced by mental health professionals. This study strives to explore the ways in which social workers set themselves up for successful careers in the mental health field where they feel competent, supported, valued, and able to cope with stressors they experience. The primary research question for this study is: How does a social worker derive satisfaction from their work within the mental health system?

Conceptual Framework

Self-Compassion

The conceptual framework for this research is derived from the concept of self-compassion. Self-compassion is a mindfulness practice derived from Buddhism and has since become increasingly utilized in Western culture. In order to practice self-compassion, one must have the ability to identify and acknowledge their own pain and suffering and refrain from becoming consumed by these feelings. Neff (2003) describes that self-compassion is derived from the core word compassion, which involves non-judgmental awareness of the suffering of others in order for kindness to be directed toward it and desire to remove the suffering experienced. Neff notes that people are often much more unkind to themselves than they would ever act toward others, which may be due to a fear of egotism, self-indulgence, or self-centeredness. The theory behind self-compassion, however, is that less judgment placed on oneself allows for less judgment to occur towards others. Derived from the Buddhist concept, self-compassion represents a balance between concern with oneself and concern with others, identifying that all individuals should be treated with kindness and care. "...A compassionate attitude toward oneself is needed to avoid falsely separating oneself from the rest of humanity" (Neff, 2003, p. 96).

According to Neff (2003), Self-compassion includes three main components: (a) self-kindness, (b) common humanity, and (c) mindfulness. Integrating these three components is thought to assist with developing a self-compassionate frame of mind. "Self-compassion is relevant when considering personal inadequacies, mistakes, and failures, as well as when confronting painful life situations that are outside our control" (Germer and Neff, p. 856). Self-

kindness includes exhibiting understanding toward ourselves when we suffer, fail, or feel inadequate, rather than ignoring these feelings and engaging with self-criticism. “When this reality is accepted with sympathy and kindness, greater emotional equanimity is experienced” (Neff, 2009, p. 2). Common humility refers to knowledge and understanding that all humans suffer and humans experience little control over their suffering. Mindfulness requires seeking balance for our negative emotions so that no feeling is suppressed or exaggerated (Neff, 2009).

In acknowledging and understanding that all humans experience suffering, social workers can better practice the compassion they have for others with themselves. “A belief in human interconnectedness leads to the recognition that failure and suffering are shared by all people, and protects against feeling singled out and withdrawing into our pain” (Ying, 2009, p. 311). In an article written by Ying (2009), mindfulness in self-compassion is emphasized. Ying expresses that if one has a mindful awareness toward oneself and one’s experiences, self-blame is decreased significantly which allows one to increase self-compassion. Effective mindfulness based practices, derived from Buddhist practice, essentially allow social workers to provide best practice. These concepts can assist social workers in engaging in self-care practices that are effective for them. These practices do not need to be followed traditionally. By taking ideas from the traditional practices, one can develop practices that are self-compassionate.

Methods

Research Design

This study conducted research on professional satisfaction among social workers practicing within the mental health system. This is a qualitative research design and research was conducted through the completion of in-depth, semi-structured interviews. The interviews

provided candid opinions as well as personal and professional insight from current social workers providing mental health services. This research assessed social workers' perceptions of the concepts of burnout, compassion fatigue, and self-care as they relate to direct practice. This research was conducted on the premise that social workers who experience professional satisfaction will better provide best practice and effective services to their clients. Once completed, the interviews were transcribed and analyzed to determine varying codes and themes.

Sample

The researcher obtained the research sample through snowball sampling. The researcher initially identified mental health social workers, with whom she has a professional connection. These professionals were contacted in order to request participation within this research. From there, the researcher asked that the social workers identify additional mental health social workers with whom they have either a professional or personal connection, in order for the researcher to further contact and request participation. The researcher interviewed 8 participants. These participants, at the time of the interview, were working as social workers and providing mental health services. Participants worked within a variety of settings and held varying social work licenses. Specific licensure was not directly questioned for this study.

Protection of Human Subjects

The research proposal was submitted to the Institutional Review Board (IRB) at the University of St. Thomas for approval due to its use of a human subject design. Before each interview, the researcher provided a consent form to the participants, noting the purpose of the study and reviewing any potential detrimental outcomes that may arise through the interview process. The consent form included information about the research being conducted, the

procedure of the study, risks and benefits associated with participation, confidentiality, and reiterating the voluntary nature of the study. All requirements were followed. See Appendix B.

Data Collection

A list of questions was developed by the researcher. Previous research and professional experience of the researcher were assessed in order to guide question development. The interview questions addressed topics such as personal traits and characteristics, practice experience within mental health, knowledge and/or experience with burnout and compassion fatigue, use of self-care strategies, and overall professional satisfaction. Despite the questions acting as a form of structure to guide the interview, additional questions may have been asked spontaneously in order to receive further information, clarification, examples, etc. The interviews were estimated to last 30-45 minutes, depending, and were conducted in a location, chosen by the participant and researcher that maintained confidentiality for the participant. The interview was recorded in order for the researcher to complete accurate transcription. Following transcription and further analysis, the recording, and additional resources utilized for transcription, were destroyed.

Analysis Technique

As was earlier stated, the completed interviews were transcribed, reviewed, and analyzed along with additional research. By reviewing the transcriptions, similar codes were identified and reviewed in order for themes to be further developed. Once interviews were transcribed, similar codes and themes quickly emerged.

Results

From this research, 8 themes were determined. The researcher found each of these themes to be equally important, therefore, did not want to limit the results to a certain number of themes. These themes will be discussed in more detail throughout this section.

Personal Satisfaction

This theme was identified as respondents reflected on why they entered the social work field in the first place and what keeps them coming back each day. Respondents expressed individual reasons as to how they have been able to experience personal satisfaction within their work. They described, several times throughout their interviews, the need for social workers to feel good about their work in order to experience satisfaction within their work. As these first quotes demonstrate, much of the satisfaction comes from social workers feeling as if they are making a difference.

I just feel like I derive satisfaction when I feel like I'm doing a good amount of work, helping a client get to where they want to be. So, if I feel like I'm putting in a solid effort with a client and if I feel like I'm putting in the amount of effort that I fully can be, then I'm able to kind of be satisfied with that.

I want to be at work, I want to be with the people that I work with. I love just interacting with the residents every day. I like all of it really. I think it's easy for me to remind myself, oh I really like going to my job, I have a great job, I really enjoy it.

I feel that I'm helping people, I feel that I'm making a difference.

I think I get satisfaction from my work just knowing that you helped someone or you cared for someone.

Feeling like you're doing something for the greater good. I think that's how I derive some of the satisfaction out of it. Knowing that it's a good thing to care for people and to try to understand them.

While some respondents described finding satisfaction in interaction and helping clients, others were more specific about focusing on strengths and empowerment, principles that are found among social workers.

I think knowing that there is a lot of hope in the field and that personally, I am somebody who can see that or can pull out people's strengths and will continue to serve people the best that I can. And believing that I am good at what I do.

Finding ways to let someone feel empowered and being able to also have that self-determination, as well, can be pretty rewarding.

One respondent spoke of this satisfaction coming from the mental stimulation and learning on the job.

I love what I do. It's so interesting to me and it's so satisfying to me and like I said, I learn something new every day. It's stimulating mentally. I love it. I can't see myself doing anything else, I guess. I don't know where else I'd be.

Realistic Expectations

The social workers within this study identified the importance of setting realistic expectations both of themselves as well as of their clients. The expectations one has were identified through their individual assessments of possible causes for burnout and/or compassion fatigue as well as the advice they would give to other mental health professionals.

I remember coming out of grad school for my first social work job and thinking, I might change the world. I'm going to just change it and everything will be good. But you've got to be realistic too. You've got know that there's a lot of obstacles in your way. But don't fear them. Just know that they're there.

The following quotes identify setting realistic expectations as they relate to clients, including the level of involvement within their treatment, clients' varying levels of progression, and allowing for self-determination.

I'm not always upset if I don't get somebody to engage in their treatment goal. I guess having some of that understanding that not everything is going to be perfect. And being ok with that kind of stuff... I care that people are well and that people are doing ok and that people have the things they need.

There are definitely times where you could feel disappointment because it seems like it's something that could easily get done but sometimes just reminding yourself that it's ok as long as someone's not being a harm to themselves or others, is the biggest example I can give. Like ok, we'll try again.

To not come out with too many expectations. Not to not have them, but to remember that your client has that self-determination and you're here to empower them and, you know, it's not about you, it's about them. Yeah, you want to feel like you're accomplishing something but if you have such high expectations or are really looking to accomplish this one thing, to be ok with the fact that it might not happen. And I think coming in with that mindset or learning a little bit about that mindset is a good thing to have. But also not to get so into that mindset that you shouldn't expect anything, because then you're really going to get nowhere. And again, I think that's part of too much stress or burnout, having absolutely no expectations for yourself or your clients.

The Little Things

This theme was identified simply by the respondents identifying the fact that various small successes have the potential to make big differences within the social work field.

Especially as they relate to the satisfaction a social worker can experience through observing and embracing all improvements, these successes are critical, regardless of how big or small.

The residents and clients that I get to work alongside with. The little progressions and the big progressions and, in a sense, you get to see them grow.

Celebrate those cool stories, little ways that clients make improvements or something that a colleague did that's really great. Anything that you can celebrate. It's important to keep those milestones, those good things, on our minds.

And to celebrate the things that do go well. Like the small things... I feel like we get more small accomplishments than really large ones.

Little things like that are rewarding too. It's not just the big successful stories. Being able to own, for a teenager, to own their own story, their own life experiences, that kind of stuff. It's rewarding to be a part of that process.

I think I get the most satisfaction from the little things in my work that I see with the people that I'm working with. That would totally not, to the general society, seem like a big win but to remember to be with them where they're at and to celebrate those little victories and just know that maybe just listening made such a big difference for them to know that they can be open and honest with someone and not be shut down and supported. And I think I get a lot of satisfaction in just recognizing those little things and those little changes.

It is evident that the little things may act as a powerful driving force for social workers.

The ability to recognize the little things that occur within this field acts as an important element of professional satisfaction. Respondents identified various ways in which clients make improvements such as showing their vulnerability, improvement in personal hygiene, development of confidence, etc. As one respondent described, social workers have the ability to recognize the various successes that others may not acknowledge. This recognition can, not only, assist with personal and professional satisfaction among social workers, but it may be incredibly valued by clients as well.

Self-Responsibility

This theme encompasses codes such as the need for self-awareness and the importance of using that awareness to assess the need for self-care, supervision, a change of employment, etc. in order to combat concerns such as burnout or compassion fatigue. Respondents identified the importance of assessing the setting and population social workers are working in/with to determine whether or not it is a good fit for them.

I feel like, going back to the self reflection piece, if I hit a point where a certain population or my job is getting to the point where I actually don't like the patient or the clients or the setting, then for me, that would be time to find something else to do. Because I believe clients can feel it. If you're internally insincere, disingenuous, it will show through.

I have changed jobs. That's nobody's dream but it worked really well for me. And really just forcing myself to engage in some type of activity whether it's doing something or reading a book or going for a walk or just engaging in something that's just for me.

I think just knowing what settings you like to work in, what type of clients you enjoy working with. And, although I believe to a degree we're called on to help everyone we can possible... being honest with ourselves if there's one very specific type of person that we wouldn't be very good with.

Respondents also identified the importance and benefit of fully utilizing supervision and consultation groups as well as individual sessions to ensure the ability to process stressful situations and express questions or concerns as they relate to the social worker as well as client services.

Get supervision, get good supervision, if you don't feel like you have good supervision at your agency, invest in outside supervision even if you might have to pay for it.

Consultation groups, good supervision. Balance between work and home. Definitely making sure that I'm engaging in pleasant activities as well as work, and balancing that.

So within that, finding yourself a really good supervisor. To help you through that process. And/or an outside therapist, if that's something someone really needs to work through before they're able to do the work they're going to do.

Effectively using supervision or consultation. And not just sitting back and letting other people talk and fill the time but actually utilizing the experience and the knowledge of the people that you're doing supervision and consultation with.

Actually being open to the shortcomings that you're falling into with your coworkers and your supervisors so that way they can help mitigate some of the risk factors and help get through it with their own experiences.

In addition, respondents focused on the importance of self-awareness and actively caring for themselves, however that may look for specific individuals. Respondents identified self-care practices as they relate to developing professional satisfaction.

My burnout level would be reactionary. If I react to an obscenity or someone's raised volume and I match it with theirs in a very unprofessional way, I know that that's when I

need to walk away, I need to take a break, maybe a vacation day. But that's how I assess myself.

Just focus on being able to compartmentalize and leave work at work and home at home and even though it's sometimes going to follow you a little, be really aware of that... So definitely the awareness and then taking action, like maybe you're in a bad mood and maybe you don't want to go do something but maybe giving yourself a little pep talk and going out and doing something for yourself. Or making sure that you have some time to relax.

Taking care of yourself. And remembering that in order to, I'm no expert obviously, but in order to have a stable or life long career in the field, I think you're going to have to put time into taking care of yourself.

Are you doing the things that help you relax, and deal with the stress of taking on the heavy burdens, the information that clients share with us? So just paying attention to those internal changes. Mindfulness is great for that. To be aware of what our body's telling us.

Respondents were strong in their perspective that it is ultimately up to the social workers to be intentional about the things they are doing to care for themselves, including seeking supervision, participating in therapy, engaging in effective self-care, etc.

Influence vs. Control

This theme identifies the importance of acknowledging that being a social worker does not mean being in control. Instead, social workers have the ability to positively influence clients through encouragement, education, support, individualized interventions, etc. Respondents identified the potential harm of taking on full responsibility of clients, their symptoms, actions, decisions, difficulties, etc.

And I think it's really hard, you know, that they're doing so great and then not taking responsibility for the fact that maybe they're not now, if that makes sense.

Not personalizing. It's hard because you want to have empathy and you want to care about your clients and when they are struggling, it's hard to stay professional or not take on all of that weight that comes along with somebody attempting suicide or somebody being admitted to the hospital, all of those really heavy things.

And owning, as a therapist or mental health clinician, owning their lack of progress can be a huge burnout risk as well.

And to not burden yourself with so many things. It's one thing at a time. You've got to learn how to prioritize. And it's never your fault. A lot of people will say that it is, but you know it's never your fault. Because you didn't make those decisions. You're there to help and to guide and assist. Yeah, you may be called a case manager or a program manager. You manage but you don't make choices. They have the ability to make any kind of bad decision they want in that moment and it's never going to be your fault. And just remember that. Don't take on that burden.

We think we can take on a lot because that is kind of the ideal, like you're helping people in terrible situations and you're the strong person. You're supposed to be a strong person... You know, this is my job. This is what I'm supposed to be doing. I'm supposed to be helping them. Like, I don't matter in this situation. Which is true, I think when you're meeting with someone, your focus is the person in front of you, the resident, the client, and not yourself.

I think in mental health, you need to come in with definitely an open mind and that it's about your client not about you. And it's going to be really hard if someone really doesn't want to do the thing that's good for them. And you can try as you might, but it might not go anywhere and being ok with that. Being ok with that ambiguity and being ok with the fact that things aren't always going to get fixed per say. Their mental health might not improve in great measures and being ok with that.

I think the other issues that I've seen or other difficulties working in the field, as a professional, not personalizing progress or lack of progress, lack of success. Which is very difficult because we're all in this field to help people and when it feels like you have nothing more to provide to somebody or there's nothing else you can do to help them, I think it's really easy to personalize that and take on responsibility for that.

Not personalizing things. Not personalizing the struggles that my clients have and allowing them to also take responsibility for their success as well.

Sense of Support

The importance of support derived from the respondent's place of employment, team of colleagues, their supervisor, as well as family was evident throughout the interview process. The respondents identified the positive impact of various supports.

Trust in your coworkers. Because ultimately, when you enter this field of work of long term care, you're going to be going into a team and they're going to have shared experiences. Probably not the exact one that you have, but they've probably been there

before and they can offer you that support that you may need in that time and just say that you're ok because I've done it too and it makes you feel like you're not alone.

I think a lot of it has to do with the agency you work for and do you feel supported, are you comfortable talking to your coworkers about those types of things?

Leaning on peers, colleagues and, when appropriate, supervisors can really help normalize a situation and can help you feel that you're not alone; it can remind you that there's a team that's with you.

I think what I love about where I work right now is the feeling of the community, with both residents as well as the staff.

I also have a really great coworker group and I make sure to have fun at work every day and that's huge.

I think the people. And I said this already, but definitely the people. The team that I'm a part of. The residents and clients that I get to work alongside with... And being a part of a team is cool. Because you get to know them. You get to know their lives. You get to be a part of their lives. You share this one connection and you get to sit back and laugh about the struggles and obstacles you've been through together. That keeps me coming back. And the respect that everyone has for one another.

I think burnout is different for everyone. What I've heard is sometimes we don't recognize it in ourselves and to lean on colleagues really to look out for each other.

Respondents also identified the negative impact colleagues can have on professional satisfaction as well as the implications of lacking environmental support.

I think my burnout was more related to working with other professionals within the mental health field more so than some of the consumers or the clients...And that for me is really exhausting to try to work with other professionals who can't necessarily differentiate someone from a diagnosis.

I think definitely, just not having the staff, not having the support, definitely led to some burnout.

The Value of Empathy

The respondents offered insight into the importance of empathy within the mental health field as well as the implications of lacking empathy. Empathy was frequently identified within the interviews as a personal characteristic that assists them within their practice.

So I try to carry empathy with me to make sure that I can practice with the utmost integrity and passion. Because I think that just kind of builds into empathy. When you're able to see it from another side, you do work with passion.

I think that to be a good worker in a mental health field, you have to have empathy for people... I think you really have to be able to imagine and put yourself in somebody else's shoes and imagine how they might be experiencing something and imagine what that must feel like for them.

I guess it's when the professional lacks the ability to have an empathetic response appropriate to the situation at hand and being able to recognize that even though it might seem minor, or the same thing over and over again, it is a major issue in the person's life; otherwise they wouldn't be talking to you about it.

I think that that's just the main thing, to have at least some sense of empathy for the people that you're working with. Otherwise, I don't see how someone could do it. Like, I could see people trying and getting really burnt out because, if you don't really care about who you're working with and who you're serving and what you're doing, then I can't imagine someone would want to stay in the field.

While the respondents highlighted the value of empathy, they also identified the challenges that can come with practicing empathy. Respondents explored what may happen when social workers lack a balance of boundaries or realistic expectations of what they can accomplish on behalf of clients or how much care and concern they can give toward clients.

We have to have empathy and care for other people and have compassion for other people, but I think it becomes fatigue when that person or that person's situation is like constantly on your mind and almost takes over your own compassion for others or not being able to kind of really have that compassion or that empathy toward others.

Just struggling to have that empathy for your clients and kind of, unconditionally have empathy. That because you are working yourself too hard, you no longer have the energy for the work you are doing or the same energy for the work that you're doing.

Compassion and Self-Compassion

The respondents provided responses highlighting the importance of self-compassion and the impact that has on the services provided to clients. The social workers also identified the impact self-compassion has on their overall satisfaction.

Well, being kind to yourself. Not being hard on yourself, in terms of judging yourself, judging the work that you do, allowing yourself to make mistakes, allowing yourself to learn from things instead of beating yourself up about things. Taking breaks when you need them or allowing yourself to practice self-care.

But I think we have to practice what we preach. If our own mental health is not managed even, it's going to be really hard to serve our clients in the best way that they deserve. I think it can be easy to think that you can suck it up and go about your day, but it is important, in terms of the work that we do, to practice it.

I would just say, that would be being as nice to myself and as non-judgmental of myself as I am with the people that I work with.

And if I don't make progress with this patient, being compassionate with yourself and saying that doesn't mean I'm a failure, it means I still have room to learn. And you know, seeking out other people's experiences and knowledge and saying, it's ok that this didn't work, why didn't this work, and how to I keep from falling into this again. Because if you repeatedly make the same mistake, you're going to start to take that on as a personal issue. So I think just being aware of it can alleviate a lot of that.

I think it's important because then you get to see how valuable you are. You need to be your own advocate first and foremost to continue to tell yourself that you belong, that you are good enough because the world can be a mean place and you've got to be good to yourself. So I think it's very important.

It was observed that respondents had difficulty describing the concept of self-compassion. It was evident that this may have been due to either lack of knowledge and exposure to the concept of self-compassion, as well as the difficult nature of focusing attention on oneself, which conflicts with some views of being client-centered.

Oh man, that seems like the hardest one to answer. Self-compassion. I think maybe it's being ok with yourself in a situation you're in or where you're at with yourself and being able to understand that. I mean compassion towards others is trying to understand where someone is at and how to help. Understanding where someone's at and being ok with that and being able to provide them with the service or help that they maybe need and I guess maybe that can also be the same for self-compassion. Just understanding yourself and being able to care for and understand yourself and being able to move yourself forward, I guess. Like you would a client. I think it's a little bit of that. I don't know how else to explain it other than understanding and caring about who you are, what you're doing. And maybe you're not in a good place, but being able to understand that about yourself and find ways to deal with that or whatever it might be.

That's probably the hardest one you've asked so far. That kind of, sometimes, get's pushed to the side. You know, I try not to but in this line of work, the patient needs always comes first.

That's a good question. I don't know. I don't know if I've ever used that really. That term. Well, being kind to yourself. Not being hard on yourself, in terms of judging yourself, judging the work that you do, allowing yourself to make mistakes, allowing yourself to learn from things instead of beating yourself up about things. Taking breaks when you need them or allowing yourself to practice self-care.

Discussion

Interpretation of Findings

It was evident, through completion of the interviews, that several factors influence the ability to derive and maintain professional satisfaction among social workers within the mental health system. There were evident similarities among the respondents, affirming the professional characteristics and ethics of social workers. Similarities were outlined within the Themes - Personal Satisfaction, Realistic Expectations, The Little Things, Self-Responsibility, Influence vs. Control, Sense of Support, The Value of Empathy, and Compassion and Self-Compassion.

It is evident that social workers derive much satisfaction from a sense of personal accomplishment, impacting their ability to achieve personal satisfaction. Many highlighted their reasons for entering the field as well as their reasons for staying in the field based on their ability to feel as though they are doing good, assisting someone in some way, or making a difference.

As professionals, it is understandable that social workers would enter the field with expectations; both of themselves as well as the clients they serve. It was stressed throughout the interviews, however, that respondents feel strongly about the importance of ensuring that set expectations are realistic. Respondents identified that unrealistic expectations may lead to concerns such as burnout and compassion fatigue, due to the fact that expectations, especially within the mental health field, may not be achieved.

Throughout the interview process, five of eight respondents identified the strength in celebrating the little things. It can be determined that, especially within the mental health field, the ability to acknowledge the little things as big accomplishments can assist in overall satisfaction and assist in developing an overall sense of accomplishment. Changes in great measures may be difficult to experience within mental health and to develop acceptance of that will be invaluable to professional satisfaction.

Respondents provided much insight into the need for social workers to take responsibility into their ability to develop and maintain professional satisfaction. Social workers can easily get caught up in the various stressors that are out of their control and allow that to determine their level of satisfaction. However, social workers have much control as to how they will combat various stressors such as incorporating supervision and self-care into their practice.

The interviews demonstrated much awareness into the contrast of influence and control. Social workers explained the implications one can experience when they take full control or responsibility for their clients. The satisfaction of a social worker can be negatively impacted if they own or personalize the negative experiences their clients go through. Realizing and understanding that social workers are doing all they can for the best interest of their clients and to be accepting of outcomes will be crucial.

It is the livelihood of social workers to act as a support for their clients. In order to do this to their best potential, social workers need to be supported as well. Respondents identified the benefits of feeling supported from colleagues and supervisors. They also expressed the negative impact a lack of support can have on both their personal and professional lives.

One of the core strengths of social workers is the ability to act with empathy. Respondents identified that empathy is a characteristic that assists them greatly within their

practice. They also described the negative impact that a lack of empathy can have on the social worker, but more importantly, the quality of services that are provided to clients.

Another core strength of social workers is their ability to act with compassion. As many are focused on exhibiting compassion to their clients, they may fail to act compassionately toward themselves. It was observed through these interviews, that describing the concept of self-compassion was difficult for many of the respondents. Once this concept was acknowledged, however, it was evident that respondents found it important for social workers to practice.

Findings and the Literature

Research from the literature shows that the commitment social workers within the mental health field have for their clients assists with satisfaction and retention. While this plays a major role in their overall satisfaction, factors such as feeling undervalued or unsupported by colleagues, supervisory roles, as well as society can negatively affect the ability to achieve satisfaction (Huxley et. al., 2005). These findings were congruent with findings from this research study. Respondents were able to acknowledge the various reasons as to why they entered the field, such as the desire to help others. Additionally, they were very clear of the many factors that can act as barriers in enjoying the work they do.

Research from the literature also identified that social workers tend to expect client outcomes of insight, progress, and change (Acker 1999), and may struggle when these outcomes are not experienced. Respondents in this study, however, appeared to have great insight into the fact that setting realistic expectations will be crucial in achieving and maintaining overall satisfaction. In fact, this concept was expressed when asked to consider advice that they would give to new mental health professionals.

It was clear through completion of interviews that despite knowledge and awareness of the risks associated with challenges such as burnout and compassion fatigue and the benefit of utilizing effective coping strategies, such as self-care, social workers experience difficulty implementing self-care practices in their daily routine. When directly questioned, many respondents appeared disappointed in this, expressing that they don't do as well as they should in terms of engaging in self-care or if they do, it may not be enough, indicating that they know how important practicing self-care may be for social workers.

Strengths and Limitations

There were a few limitations identified in this study. The first is the lack of research encompassing the impact that psychiatric symptoms experienced by clients can have on professionals. It would be of value to be able to identify if clients' mental health status affects the ability for social workers to obtain and maintain job satisfaction. If this study were to be revised, additional questions specifically related to coping with the behavior of clients experiencing psychiatric symptoms would be included.

Another limitation identified in this study is the experience of the interview respondent. It was assessed that interviewing a social worker with much experience in mental health may be more beneficial than a social worker with minimal experience. The respondent's ability to effectively cope with various stressors as well as their identified sense of resiliency may have hindered the development of solid research related to this topic. Additional research specifying the amount of professional experience may be helpful in identifying factors of professional satisfaction.

One strength of this study was allowing social workers to reflect on their practice throughout communication during the interview. One perspective may be that social workers do

not often discuss the concepts related to professional satisfaction on a regular basis. The interviews allowed for candid discussion of these topics, essentially reminding social workers why they entered the field in the first place and the various aspects that keep them coming back.

Another strength from this study is the varying experiences the respondents have. The mental health field is a large field and can encompass many varying social work roles. Respondents were employed in a variety of settings within the mental health field and research was able to identify the differences and similarities that can occur among the many social workers within the mental health field.

Implications for Social Work Practice

This study highlighted the importance of social workers having the opportunity to communicate about professional satisfaction with colleagues and supervisors. It was observed that it was beneficial for respondents to discuss the topic of professional satisfaction and other challenges related to burnout, compassion fatigue, and self-care. Due to challenges experienced within the profession, social workers may get wrapped up in the negative aspects, which may ultimately lead them toward forgetting what it is they enjoy from their work.

The social workers participating in this study had particular difficulty providing responses when questioned about the concept of self-compassion. This may be due to lack of knowledge and awareness of this topic or, perhaps, it is difficult for social workers to communicate about or engage in self-compassion. Regardless of how they responded, social workers were unanimous in determining that it would be beneficial for social workers to practice self-compassion. It would be beneficial for social workers to improve their understanding of self-compassion in order for them to implement it within their practice, ultimately improving their direct practice with clients.

Implications for Policy

Respondents highlighted the importance of having self-responsibility in regards to their individual well-being and satisfaction. However, giving social workers an easier way to do so will be incredibly valuable. It should be of priority to have agency involvement and awareness of how social workers are coping. Exploring ways of incorporating this within organizations would not only be helpful in ensuring the safety and satisfaction of social workers but assisting in the overall retention within the organization as well. It may be of additional benefit for social workers to feel empowered to utilize services just as they are compelled to provide them. Agencies could assist in the knowledge and awareness of mental health professionals by providing educational materials covering topics such as self-care, self-compassion, and mental health. By focusing on the health of their employees, agencies may be better equipped to ensure that best quality of services are being provided. This could also drastically improve the profession of social work in its entirety.

It was also assessed throughout review of the literature that personal or organizational interventions may not be able to be successfully applied to all social workers within the mental health field. This is due to the fact that all social workers, organizational environment, and challenges are unique to each experience. Because of this, developing effective ways to combat stressors that lead to burnout and decrease professional satisfaction must be individualized. Despite this, it will remain the responsibility of the organization as well as the social worker themselves, to develop an individualized plan. Open discussions regarding challenges and stressors experienced, effective coping mechanisms, and suggestions for organizational improvements should occur regularly amongst social workers, their colleagues, and their administration.

Implications for Research

The findings of this study reflected the lack of knowledge and awareness of the concept of self-compassion. As previously identified, many respondents had difficulty when asked to describe this concept, offering statements such as “That’s probably the hardest one you’ve asked so far” and “That’s a good question. I don’t know”. Once discussion on this subject was initiated, respondents expressed strong opinions on its potential benefits to social work practice. It would be of value to expand research on this topic and address benefits as they may relate to social work practice. It may be beneficial to start by exploring if self-compassion is studied in BSW/MSW programs. Surveys or in-depth interviews focusing on self-compassion could be useful for this research.

It was also noted that while respondents exhibited knowledge and understanding of the importance of self-care, it may be difficult for self-care practices to actually be implemented in practice. It would be interesting to assess the barriers of self-care follow through. Is it a factor of lack of education, the lack of motivation experienced by social workers to care for themselves, or other factors? Again, surveys and/or in-depth interviews may be helpful in identifying various barriers.

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Appendix A

Dear _____ ,

You are invited to participate within a research study to assess job satisfaction among social workers practicing directly within the mental health field. The purpose of the study is to assess how social workers providing services to clients with mental illness are best able to derive satisfaction from their work. You are eligible to participate because you are currently practicing as a social worker and providing services within the field of mental health. Should you decide to participate, you will be asked to participate in a semi-structured interview, during which you will provide responses to a variety of questions regarding work within mental health, the challenges and implications of this, participation within self-care, etc.

Please also see the attached consent form. Please utilize this consent form to assist you in making your decision of whether or not you'd like to participate.

You can use this email, or contact by phone, to communicate your decision as well as to ask any questions or communicate concerns.

Thank you,

Mary Pat Seter

Appendix B

Consent Form

Job Satisfaction among Social Workers within the Mental Health Field

983882-1

You are invited to participate in a research study about job satisfaction within the profession of social work and, more specifically, within the mental health field. You were selected as a possible participant because of your role as a social work practitioner providing mental health services. You are eligible to participate in this study because you have received a social work license, regardless of specific licensure. The following information is provided in order to help you make an informed decision whether or not you would like to participate. Please read this form and ask any questions you may have before agreeing to be in the study.

This study is being conducted by Mary Pat Seter, a graduate student at the School of Social Work, University of St. Thomas/St. Catherine University and is being advised by Dr. Lance Peterson. This study was approved by the Institutional Review Board at the University of St. Thomas.

Background Information

The purpose of this study is to better understand what factors influence job satisfaction for social workers working within the mental health system. This study is being conducted based on the idea that if social workers experience job satisfaction, they will be better able to provide best practice and beneficial services. Various factors such as professional burnout, compassion fatigue, and self-care will be assessed, as they relate to professional satisfaction.

Procedures

If you agree to participate in this study, I will ask you to do the following things: Participate in a 30-45 minute semi-structured interview. This interview will be audio recorded in order to more easily transcribe responses and apply them to additional research.

Risks and Benefits of Being in the Study

The study has risks. This study includes a risk of possible emotional distress due to the content of the interview questions. Questions may prompt you to recall personal experiences within your practice that may elicit feelings of distress. The risk for probing for personal or sensitive information is due to the fact that you will be asked to disclose information that you have personally experienced. The risk of a sense of mental fatigue or embarrassment may occur if you sense you struggle with burnout, compassion fatigue, or engaging in self-care.

The researcher, a Licensed Social Worker, will facilitate the interview at a comfortable pace and will assess for any signs of discomfort, distress and resistance throughout. The researcher will provide reminders and reassurance of your ability to withdraw from the study at any time. The researcher will also provide reassurance that it can be difficult to answer honestly and ensure that your decision to cease participation will be fully accepted and respected.

There are no direct benefits for participating in this study.

Privacy

Your privacy will be protected while you participate in this study. The interview will take place within an agreed upon space that will accommodate for privacy and does not compromise confidentiality. Your personal information will be collected initially, in order to communicate effectively with you. Following the interview, identifying information will be kept in a locked drawer at the researcher's place of employment until it is destroyed. Only the researcher will have access to the key. Personal information will be destroyed once it is coded.

Confidentiality

The records of this study will be kept confidential. In any sort of report I publish, I will not include information that will make it possible to identify you. The types of records I will create include signed consent forms, audio recordings, and interview transcriptions. Signed consent forms will be kept in a locked drawer at the researcher's place of employment. Audio Recordings will be saved to the researcher's phone, which is password protected, until transcription is completed. Once completed, the audio recordings will be deleted. Interview transcriptions, after being completed in an offline Word document, will be saved within Google Docs, which will be password protected. Additional notes will be saved to the researcher's computer, which is password protected. The passwords will not be shared in order to further protect confidentiality of data. All signed consent forms will be kept for a minimum of three years upon completion of the study. Institutional Review Board officials at the University of St. Thomas reserve the right to inspect all research records to ensure compliance.

Voluntary Nature of the Study

Your participation in this study is entirely voluntary. Your decision whether or not to participate will not affect your current or future relations with The researcher, Mary Pat Seter, her advisor, Dr. Lance Peterson, St. Catherine University, the School of Social Work, or the University of St. Thomas. There are no penalties or consequences if you choose not to participate. If you decide to participate, you are free to withdraw at any time without penalty or loss of any benefits to which you are otherwise entitled. Should you decide to withdraw, data collected about you will not be

used. You can withdraw by notifying the researcher or her advisor. You are also free to skip any questions I may ask.

Contacts and Questions

My name is Mary Pat Seter. You may ask any questions you have now and any time during or after the research procedures. If you have questions later, you may contact me at 952-201-8261 or my advisor, Dr. Lance Peterson at 651-962-5811. You may also contact the University of St. Thomas Institutional Review Board at 651-962-6035 or muen0526@stthomas.edu with any questions or concerns.

Statement of Consent

I have had a conversation with the researcher about this study and have read the above information. My questions have been answered to my satisfaction. I consent to participate in the study. I am at least 18 years of age. I give permission to be audio recorded during this study.

You will be given a copy of this form to keep for your records.

Signature of Study Participant

Date

Print Name of Study Participant

Signature of Researcher

Date

Appendix C

Interview: Professional Satisfaction among Mental Health Professionals

- 1) Why did you choose a profession within the mental health system?
- 2) What are the most difficult aspects of working within mental health?
- 3) What are the most rewarding aspects of working within mental health?
- 4) What personal characteristics do you believe assist you in your everyday practice within the mental health system?
- 5) How would you describe the concept of burnout?
- 6) Have you experienced a level burnout within your professional career?
- 7) How would you describe the concept of compassion-fatigue?
- 8) Have you experienced a level of compassion-fatigue within your professional career?
- 9) Why do you believe burnout and/or compassion-fatigue are so common among social workers within the mental health system?
- 10) How do burnout and/or compassion-fatigue affect direct practice with clients?
- 11) Do you engage with self-care? Why or why not?
- 12) What self-care practices do you engage in?
- 13) How would you describe the concept of self-compassion?
- 14) Why or why not is self-compassion important for social workers to practice?
- 15) How have you been able to derive satisfaction from your work?
- 16) What advice would you give to new mental health professionals about handling the stressors experienced within their practice?
- 17) Overall, what do you believe keeps you coming back to work day after day?