



EXAMINING THE IMPACT OF SELF-CARE ON WORK- RELATED OUTCOMES

SEPTEMBER 2019

CONTACT US

Questions or comments regarding findings can be directed to the FSPSF Principal Investigator, Dr. Dina Wilke, at dwilke@fsu.edu or (850) 644-9597.

BACKGROUND

Up to 50% of child welfare workers will experience secondary traumatic stress¹ and workers perceive that job-related stress impacts their mental health (e.g., anxiety, isolation); physical health (e.g., fatigue, weight gain); and work-life balance.² A recent statewide study of child welfare workers in Kentucky found that workers develop a host of unhealthy habits and behaviors, experience physical and mental health problems, and lack work-life balance that they specifically attribute to their position.²

Self-care is an essential strategy for those engaged in high-stress positions, and self-care has been shown to lower levels of burnout among child welfare workers.³ In spite of this, limited research with child welfare workers shows only modest engagement in self-care practices.⁴

This study explores self-reported emotional health, physical health, and spiritual health self-care activities of child welfare workers and their impact on measures of work-related outcomes.

METHODS

The Florida Study of Professional for Safe Families is a longitudinal study of child welfare workers recruited for participation during their pre-service training. Participants were surveyed during training (baseline) and every six months thereafter. Data for this analysis were taken from wave 3, approximately 12 months on the job. At wave 3, we asked workers about a variety of work-related outcomes. For this analysis, we are examining how the frequency of self-care activities impacts job satisfaction, burnout, stress, time pressure, secondary traumatic stress, work self-efficacy, and work/family balance. Each of these outcomes uses a standardized scale.

To capture self-care behavior, workers indicated how frequently they engaged in physical, emotional, and spiritual health activities in the past four weeks. This was dichotomized into less than one time per week and at least once per week for each category. Those who indicated engaging in a particular type of self-care were asked to provide an example of their typical activities.

The sample is a cohort of 970 FSPSF participants who remained working in child welfare at 12-months. Frequencies and percentages were calculated to examine how often workers engaged in self-care activities, and a linear regression was used to test what impact the type of self-care activity had on each work-related outcome.

¹ National Child Traumatic Stress Network. (2011). Secondary traumatic stress: A fact sheet for child-serving professionals. Retrieved from <https://www.nctsn.org/resources/secondary-traumatic-stress-fact-sheet-child-serving-professionals>

² Griffiths, A., Royse, D., & Walker, R. (2018). Stress among child protective service workers: Self-reported health consequences. *Children and Youth Services Review*, 90, 46-53.

³ Salloum, A., Kondrat, D. C., Johnco, C., & Olson, K. R. (2015). The role of self-care on compassion satisfaction, burnout and secondary trauma among child welfare workers. *Children and Youth Services Review*, 49, 54-61.

⁴ Miller, J. J., Donohue-Dioh, J., Niu, C., Grise-Owens, E., & Poklembova, Z. (2019). Examining the self-care practices of child welfare workers: A national perspective. *Children and Youth Services Review*, 99, 240-245.








RESULTS

Overall, about half of child welfare workers indicated they engaged in some type of self-care activity at least one time per week; specifically, 50.8% reported physical health activities, 51.4% reported emotional health activities, and 47.0% engaged in spiritual health activities.

Regression results are provided in Table 1. Spiritual health activities had a limited impact on work-related outcomes, only increasing perceptions of a positive work/life balance. Moreover, none of the self-care categories impacted perceptions of work self-efficacy. However, weekly activities supporting emotional health improved all other work-related outcomes, and engaging in physical self-care improved all other outcomes except secondary traumatic stress.

Finally, workers who indicated they engaged in self-care activities were asked to provide an example of that activity, and there is much overlap in how participants define their self-care. For example, yoga was frequently listed as an activity for physical, emotional, and spiritual self-care. Spiritual activities and exercise were also often mentioned as emotional self-care. Moreover, while physical health activity largely involved sports or working out, and spiritual activity largely involved prayer or religious service attendance, examples of emotional self-care were much more varied and included relaxation activities, engaging in hobbies, spending time with family/friends, and seeking mental health services.

Table 1. Regression results using categories of self-care to predict work-related outcomes.

		Physical Self-Care	Emotional Self-Care	Spiritual Self-Care
	JOB SATISFACTION	↑	↑	
	BURNOUT	↓	↓	
	STRESS	↓	↓	
	TIME PRESSURE	↓	↓	
	SECONDARY TRAUMATIC STRESS		↓	
	WORK SELF-EFFICACY			
	WORK/LIFE BALANCE	↑	↑	↑

NOTE: A (↑) symbol indicates that self-care activities increase the outcome and a (↓) symbol indicates that self-care activities decrease the outcome.

RECOMMENDATIONS

Overall, weekly self-care activities focusing on physical and emotional health improve several important employment outcomes that are often associated with turnover. Moreover, it appears that self-care is less about a specific activity, or a specific category of activities, and more about workers perceiving they are engaging in some type of weekly physical or emotional self-care practices. Agency leadership should support the importance of self-care and develop a culture promoting self-care as an integral part of doing child welfare work. Strategies can include:

- Prominently addressing self-care during pre-service training and on-boarding activities, including education on how focusing on physical and emotional health buffers against some of the emotional challenges of child welfare work
- Utilizing supportive supervision to develop individualized self-care plans with workers considering their specific circumstances
- Utilizing time during supervision to discuss self-care and identify strategies for engaging in weekly self-care activities
- Partnering with local businesses to provide free or reduced-costs services for a variety of self-care activities such as gym memberships, massages, or yoga classes
- Providing “quiet spaces” at work for employees to use for brief periods of relaxation, guided mediation, or other reflective activities

Funding Provided By:



**FLORIDA
INSTITUTE
FOR CHILD
WELFARE**
AT FLORIDA STATE UNIVERSITY