

Emotional intelligence, reflective abilities and wellbeing in social workers and related skills in predicting wellbeing and performance in social work practice project report



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Emotional intelligence, reflective abilities and wellbeing in social workers and related skills in predicting wellbeing and performance in social work practice

Abstract

In order to inform the curriculum and the development of supportive structures to support the work-related wellbeing of trainee social workers, this research project had several aims. It examined the key motivators to enter social work, together with the sources of social support and the coping strategies that students draw on to help them manage the demands of study and placement experiences. Several emotional and social competencies (i.e. emotional intelligence, reflective ability, empathy and social competence) are also investigated as potential predictors of resilience. Also examined was whether resilience predicted psychological distress, and the role played by resilience in the relationship between emotional intelligence and distress was assessed.

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Executive summary

The high levels of stress and burnout endemic to social work have been found to contribute to the current recruitment and retention problems in the UK. It has been argued that resilience is a protective factor that enhances the ability to manage stress and promotes wellbeing in the social care context. Little is known, however, about the individual difference factors that promote resilience in this context, or whether resilience does, in fact, protect the wellbeing of pre- and post-qualified staff.

In order to inform the curriculum and the development of supportive structures to support the work-related wellbeing of trainee social workers, this research project had several aims. It examined the key motivators to enter social work, together with the sources of social support and the coping strategies that students draw on to help them manage the demands of study and placement experiences. Several emotional and social competencies (i.e. emotional intelligence, reflective ability, empathy and social competence) are also investigated as potential predictors of resilience. Also examined was whether resilience predicted psychological distress, and the role played by resilience in the relationship between emotional intelligence and distress was assessed.

A sample of 240 social work students was utilised. Intrinsic sources of motivation, such as caring for people and helping to reduce social inequalities were endorsed more frequently than extrinsic factor such as salary and career opportunities. Students who were more intrinsically motivated tended to be more resilient and less distressed. A wide range of sources of social support was drawn upon by social work students, both within and external to the university setting. The most commonly endorsed ways of coping with stress were problem focused, such as planning, positive reframing, active coping and instrumental support. Positive reframing, acceptance and substance use were the key predictors of resilience and psychological distress. The emotional and social competencies together explained 47% of the variance in resilience. Resilience fully mediated the negative association between emotional intelligence and psychological distress, highlighting the importance of inter- and intra-individual emotional competencies in promoting resilience and enhancing wellbeing. How these findings might inform the curriculum to help trainees enhance resistance to workplace stress is explored and the actions that have been taken to address the findings discussed. Research on the nature of resilience in trainee social workers and how to enhance this through the curriculum and other support structures is ongoing.

Background

Although research findings suggest that social workers gain considerable satisfaction from their work, they tend to report higher levels of work-related stress and burnout than many other occupational groups (Lloyd, King & Chenoweth., 2002; Rose, 2003; Johnson, Cooper, Cartwright, Donald, Taylor & Millet, 2005; Collins, 2008). Work-related stress has serious implications for the mental and physical wellbeing of social workers; the provision of care may also be compromised via impaired performance at work and sickness absence (Wright & Cropanzano, 1998; Horder, 1999; Morris, 2005; Nissly, Mor Barak & Levin, 2005; Coffey, Dugdill & Tattersall, 2009). The high levels of stress and burnout experienced by social

workers have also been found to contribute to the growing retention problems within the profession. A recent study by the Local Government Association (LGA, 2009) reported that 60 percent of local authorities experience difficulty in retaining social workers, representing an increase of 20 percent in the previous 12 months. Moreover, a study conducted by Curtis, Moriarty and Netten (2009) found that the longevity of a newly qualified social worker was around eight years; considerably less than those working in similar professions such as doctors and nurses. One of the most common reasons cited by social workers for leaving the profession is the stressful nature of the job (LGA, 2009).

Perceptions of social work as an emotionally demanding and stressful career have also been found to contribute to the current recruitment problems in the UK (Eborall & Garmeston, 2001). In order to guide the development of interventions to enhance the wellbeing of social workers and maximise retention in the profession, it is important to identify the factors that may protect trainee and early career staff from the negative impact of the demands that they face. This study focuses on one such factor: stress resilience. More specifically, it examines the emotional and social competencies that predict resilience to stress amongst trainee social workers, relationships between resilience and psychological wellbeing, and the mechanisms by which resilience might reduce psychological distress and enhance wellbeing. It also examines the key motivators for entering social work and the sources of social support and coping strategies that students utilise to help them manage the demands they face. Findings have the potential to inform the curriculum and support structures for social workers pre- and post-qualification.

Motivation for entering social work

Insight into the reasons why social work students choose to enter the career is crucial. Such insight is likely to impact on students' learning experiences and their wellbeing. Intrinsic motivation encompasses self-determination, task involvement, interest and passion, whereas extrinsic involvement is more concerned with financial rewards, recognition and other tangible incentives (Amabile et al., 1994). Previous research suggests that social work students tend to rate intrinsic work values highly (Papadaki, 2001), but there is also evidence that they are also motivated by self interest (Hanson & McCullagh, 1995). This project examines the salience of a range of potential sources of motivation to undertake a social work degree and examines the extent to which intrinsic and extrinsic motivators are related to stress resilience and wellbeing.

Coping styles and social support

Coping strategies and social support are important predictors of wellbeing, and can help buffer the negative impact of work-related stressors on psychological and physical health (Jones & Bright, 2001). Consequently, it is important to assess the type of coping styles adopted by students. This study utilises a widely used measure of coping that assesses levels of adaptive as well as dysfunctional coping and problem-focused and emotion-focused coping (Carver, 1997). The extent to which social work trainees utilise support from different sources, such as peers, lecturers, practice assessors and family and friends is also examined. This project also examines coping strategies and sources of social support as predictors of resilience and wellbeing in trainee social work students.

Resilience

Resilience is a complex and multi-faceted construct, referring to a person's capacity to handle environmental difficulties, demands, and high pressure without experiencing negative effects. Within the psychological literature, resilience is defined as "the general capacity for flexible and resourceful adaptation to external and internal stressors" (Klohen, 1996, p. 1068). Resilience has most frequently been examined as a protective resource that might help children "bounce back" after experiencing major life changes, deprivation and stress (e.g. Haggerty, Sherrod, Garmezy & Rutter, 1996). Less frequently, studies have investigated the role played by stress resilience in protecting the psychological wellbeing of

adults who have experienced traumatic or life threatening events such as bereavement, war and terrorism (e.g. Bonanno, 2004). Some aspects of resilience, such as temperament, are believed to have a strong genetic component (Kagan, 1994). Nonetheless, research findings suggest that environmental factors such as the quality of family and peer relationships and attachment style in childhood are major predictors of resilience to stress in later life (Buckner, Mezzacappa & Beardslee, 2003).

Resilience may not only be a stress resistance resource for people who experience traumatic life circumstances. It has been suggested that resilience might buffer the negative impact of work stress: especially in intrinsically challenging working environments (Howard, 2008). The concept of resilience might explain why some employees who experience chronically high levels of stress at work not only fail to burn out, but may even thrive, resulting in a greater ability to manage future challenges. It has been recently suggested that resilience may be a particularly important quality for social workers, as it may help them adapt positively to stressful situations and enhance their professional growth (Collins, 2008; Morrison, 2007; Howe, 2008). The need for social workers to develop the emotional resilience required to manage the challenges they face was also emphasised by Lord Laming in a report commissioned to examine child protection in England (Laming, 2009). Despite its relevance as a potential resource for managing work-related stress in the context of social care, the extent to which resilience enhances wellbeing has not yet been examined. Moreover, little is known about the individual difference factors that promote stress resilience in social workers.

This project examines several emotional and social competencies as predictors of stress resilience in trainee social workers. Research findings have observed high levels of work-related stress amongst social work trainees - possibly higher than qualified staff (Maidment, 2003; Barlow & Hall, 2008; Collins, Coffey & Morris, 2008). It is clearly important to help trainees enhance their resistance to work-related stress at an early stage in their social work career. It is anticipated that the findings of this study will inform the development of interventions to enhance the stress resilience of trainee and early career social workers.

Resilience and emotional competencies

Based on interviews with members of different occupational groups, several factors have been highlighted as having the potential to foster stress resilience at work. Amongst other qualities, Klarreich (1998) emphasised an internal locus of control, optimism, social support, and the effective regulation of cognitions and beliefs as particularly important qualities in enhancing resilience to stress. Interviews conducted with family physicians by Jensen, Trollope-Kumar, Waters and Everson (2008) highlighted the importance of a range of factors, such as: valuing the work role, but setting clear boundaries between work and non-work demands; developing well structured work routines; effective communication skills and successful peer-support mechanisms; and enhancing self awareness and acceptance by reflecting upon personal strengths and limitations.

Howe (2008) has argued that the successful management of emotions is likely to underpin resilience in social care workers. As yet, however, little is known about the specific emotional competencies that predict resilience to stress in this occupational context. This project examines emotional intelligence and associated inter-personal and intra-personal resources, namely reflective ability, empathy and social competence, as predictors of stress resilience in trainee social workers. It is argued that trainees who are more emotionally intelligent, who are more socially competent and empathetic, and whose reflective abilities are more developed will be more resilient to stress. Whilst a negative relationship between resilience and psychological distress is anticipated, it is predicted that resilience will mediate the relationship between emotional intelligence and psychological distress. More specifically, that trainee social workers who are more emotionally intelligent will be more resilient to life stressors which, in turn, will protect their emotional wellbeing.

Emotional intelligence has been conceptualised in various ways. The concept is defined broadly by Goleman (1996, p.34) as “being able to motivate oneself and persist in the face of frustrations; to control impulse and delay gratification; to regulate one’s moods and keep distress from swamping the ability to think; to empathise and to hope”. A number of studies have highlighted emotional intelligence as a key predictor of adaptive coping and interpersonal success in the workplace and other life domains; it has also been related to enhanced life satisfaction and psychological and physical health (Salovey, Stroud, Wollery & Epel, 2002; Mikolajczak, Luminet & Menil, 2006; Carmeli & Josman, 2007). Poor emotion management skills are therefore likely to have a negative impact on colleagues and clients as well as the individual social worker. The capacity to manage the emotions of oneself and others effectively, frequently in complex care settings, is central to the role of a social worker. Emotional intelligence has important implications for job performance as it has been associated with enhanced judgement and decision-making abilities, greater flexibility in negotiation, and the generation and maintenance of enthusiasm, confidence, optimism, cooperation and trust in others (George, 2000).

This study utilises a model of emotional intelligence developed by Schutte, Malouf & Haggerty (1998). This encompasses four aspects of emotional intelligence believed to be of key importance: a) perception, appraisal and expression of emotion; b) emotional facilitation of thinking; c) the understanding, analysis and utilisation of emotional knowledge; and d) the regulation of emotions to promote emotional and intellectual growth. As this model does not embrace all the facets of the emotional intelligence rubric originally proposed by Goleman (1996), reflective ability, social competence and empathy were also assessed in the present study.

Reflective thinking ability is believed to be a key component of emotional intelligence (Schon, 1983). Personal reflection is fundamental to the acquisition, maintenance and enhancement of professional development in care settings; it has also been found to underlie successful coping in this context (Collins, 2005; Ruch, 2009). Based on research conducted with medical students, Aukes et al (2007) propose that personal reflection in care settings has three elements: self-reflection, empathetic reflection and reflective communication. This study examines the role played by all of these these components.

Feelings of competence in social situations are also considered to be important aspects of emotional intelligence. Clearly, social workers require well developed social skills if they are to communicate effectively with service users from different backgrounds, as well as forge and maintain effective social support networks amongst peers, family and friends. If social skills are under-developed, attempts to enhance supportive networks as stress management tools are likely to fail (Sarason, Sarason, Hacker & Basham, 1985). The present study therefore also considers the role of social competence as a potential predictor of stress resilience.

Finally, the role played by empathy will be examined. Empathy is a key component of all helping relationships; it has been found to have strong positive therapeutic effects on service users’ physical, mental, and social well-being (Morrison, 2007). Nonetheless, it remains under-explored in social work settings (Barlow & Hall, 2008). Early definitions of empathy considered it to be the ability to adopt the perspective of others in order to understand their feelings, thoughts or actions (Hogan, 1969). As with reflective ability, however, later conceptualisations consider empathy to be a multi-dimensional construct that encompasses perspective taking (spontaneous attempts to adopt the perspectives of other people), empathic concern (feelings of warmth, compassion and concern for others) and personal distress (feelings of anxiety and discomfort resulting from the negative experiences of others) (Davis, 1980). All three components of empathy will be examined in this study.

Aims and objectives

This project has several aims. It examined the key motivators to enter social work and the sources of social support and the coping strategies that students draw on to help them manage the demands of study and placement experiences. Several emotional and social competencies (i.e. emotional intelligence, reflective ability, empathy and social competence) are also investigated as potential predictors of resilience. Also examined was whether resilience predicted psychological distress, and the role played by resilience in the relationship between emotional intelligence and distress was assessed.

Methodology

The project utilised mixed methodologies to obtain quantitative and qualitative data. The quantitative data obtained from a cross-sectional correlational survey design is presented in this report. Interviews with social work students are ongoing and will be reported elsewhere.

Participants

A sample of 240 trainee social work students (82% female) with a mean age of 33.7 (SD = 9.04) completed a range of questionnaires. The sample as a whole was 82 percent female with a mean age of 33.7 (SD = 9.04). Sixty per cent of the sample was 30 years old or more. The majority of the sample identified as White British (51%), Black African (25%), Black Caribbean (8%) and White Other (5%). Sixty-nine percent of the sample were first year students and 31 percent second year students.

Measures

Sources of motivation were examined by a measure adapted from Binnie & Stewart (2005). The extent to which participants utilised twelve sources of intrinsic and extrinsic motivation were measured on a five-point scale where 1 – strongly disagree to 5 = strongly agree. For the purposes of this study, sources of motivation were individually examined and also collapsed into two sub-scales measuring intrinsic and extrinsic motivation = Cronbach's alpha = .70 and intrinsic motivation = Cronbach's alpha = .75

Coping strategies were measured by the Brief Cope scale (Carver et al, 1997). This comprises 14 different coping styles: active coping, planning, positive reframing, acceptance, humour, religion, emotional support, instructional support, distraction, denial, venting, substance use, behavioural disengagement, self blame. Responses were obtained on a four point scale where 1 = not at all and 4 = very much. Higher scores represented greater use of each coping strategy

Social support The extent to which students utilise social support from a range of different sources was examined. Sources encompassed university staff, fellow students, practice assessors, work supervisors as well as sources external to the professional setting such as family and friends. The extent to which each source of support was utilised was measured on a four point scale where 1 = not at all and 4 = very much. Higher scores represented greater use of each source of support.

Emotional intelligence was measured by a scale developed by Schutte et al (1997). This comprises 33 items that assess the perception, appraisal and expression of emotion, emotional facilitation of thinking, understanding, analysis and employment of emotional knowledge, and the regulation of emotion. An example of an item in this scale is "I am aware of my emotions as I experience them". Items are assessed on a five point scale ranging from "strongly disagree" to "strongly agree" High scores denote higher levels of emotional intelligence (Cronbach's alpha = .88)

Reflective ability was assessed by a 23-item scale developed by Aukes et al (2007) encompassing self reflection, empathetic reflection, reflective communication. An example item is "I can see an experience from different standpoints". A five point scale was utilised

ranging from “strongly disagree” to “strongly agree” with higher scores representing stronger reflective ability across all three domains (Cronbach’s alpha = .76)

Empathy was measured by a 21-item scale adapted from a measure developed by (Davis, 1983). This scale has three dimensions: perspective taking, empathetic concern and personal distress. Items include “I sometimes find it hard to see things from another person’s point of view”. Higher scores represent higher levels of perspective taking, empathetic concern and personal distress. Responses were obtained on a five-point scale ranging from “Does not describe me well” to “Describes me very well”. (Cronbach’s alpha: perspective taking = .72; empathetic concern = .74; personal distress = .75).

Social competence was assessed by a 10-item measure developed by Sarason, et al (1984). An example of an item is “I have trouble keeping a conversation going when getting to know someone”. Responses were obtained on a four-point scale ranging from “Not like me at all” to “A great deal like me”. Higher scores denote greater competency in social situations (Cronbach’s alpha = .79).

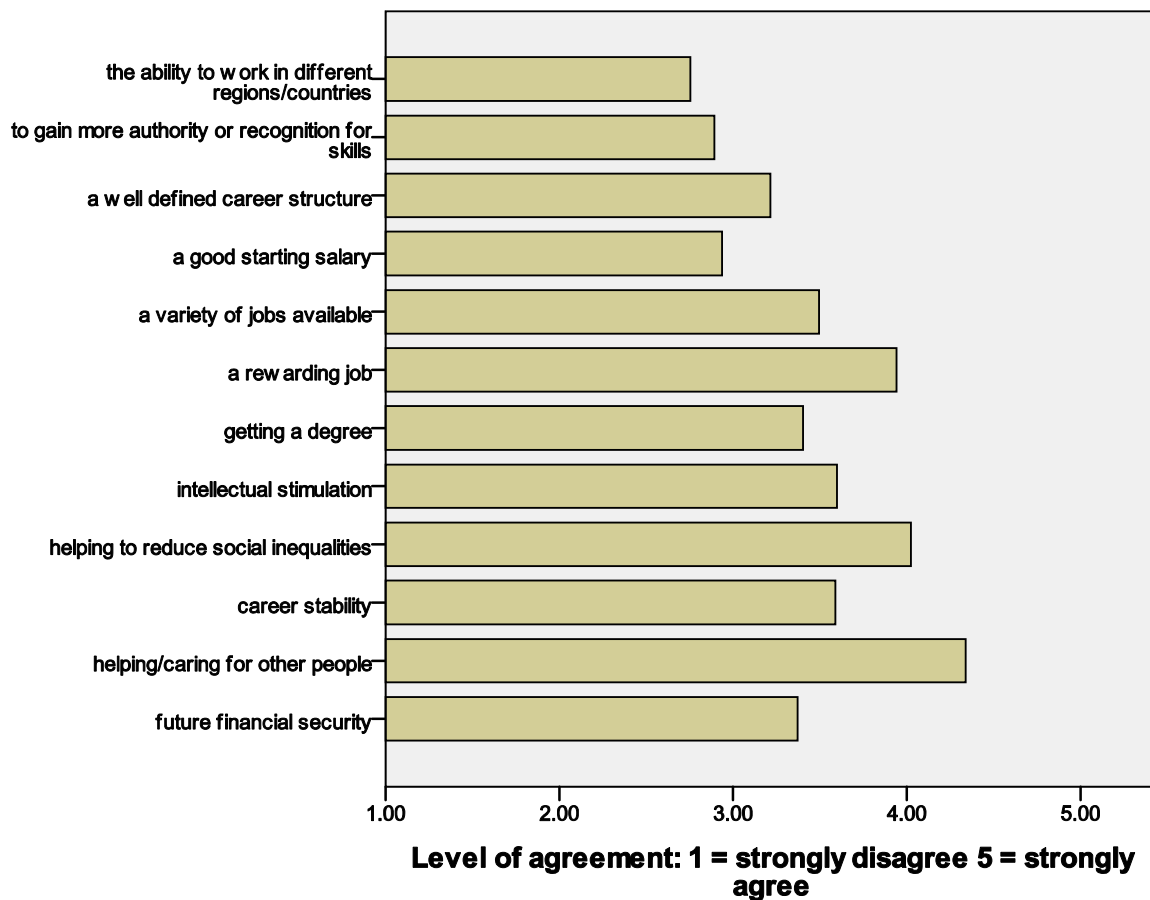
Resilience was measured by a 15-item scale developed by Wagnild and Young (1993). An example of an item in this scale is “In my life, injustice is the exception rather than the rule”. Items are assessed on a seven-point response scale ranging from 1 = strongly disagree” to 7 “strongly agree”, with higher scores representing greater resilience to stress. (Cronbach’s alpha = .87).

Psychological distress was measured by the 12-item General Health Questionnaire (GHQ-12: Goldberg & Williams, 1987). This measure is widely used in occupational settings as a measure of general distress and is considered to possess a high degree of discriminant validity for this purpose. Responses are made on a four-point semantically anchored scale. An example of an item in this scale is “Have you recently been feeling unhappy and depressed” with potential responses ranging from “not at all” to “much more than usual”. There are two methods of scoring this measure: a) the “Likert” method where responses are coded 0, 1, 2 and 3 and b) the “caseness” method where responses are coded as 0 or 1 depending on the presence or absence of a symptom. The latter method allows researchers to detect the percentage of a sample group that meets the threshold for “caseness” levels of psychological distress: i.e. where some degree of intervention is recommended. Both methods of scoring are utilised in the present study. Higher scores denoted higher levels of psychological distress and lower scores represent higher levels of psychological wellbeing (Cronbach’s alpha = .88).

Outputs and results

Sources of motivation

The sources of motivation by mean level of agreement are shown below. As can be seen, students tended to more strongly endorse intrinsic sources of motivation such as “a rewarding job”, “helping/caring for other people” and “helping to reduce social inequalities” more than extrinsic factors such as “future financial security” and “a good starting salary”. Nonetheless, other extrinsic factors such as “a variety of jobs available” and “getting a degree” were still fairly highly endorsed. When the types of motivation were divided into intrinsic and extrinsic, participants were significantly more likely to endorse intrinsic sources ($p < .001$).



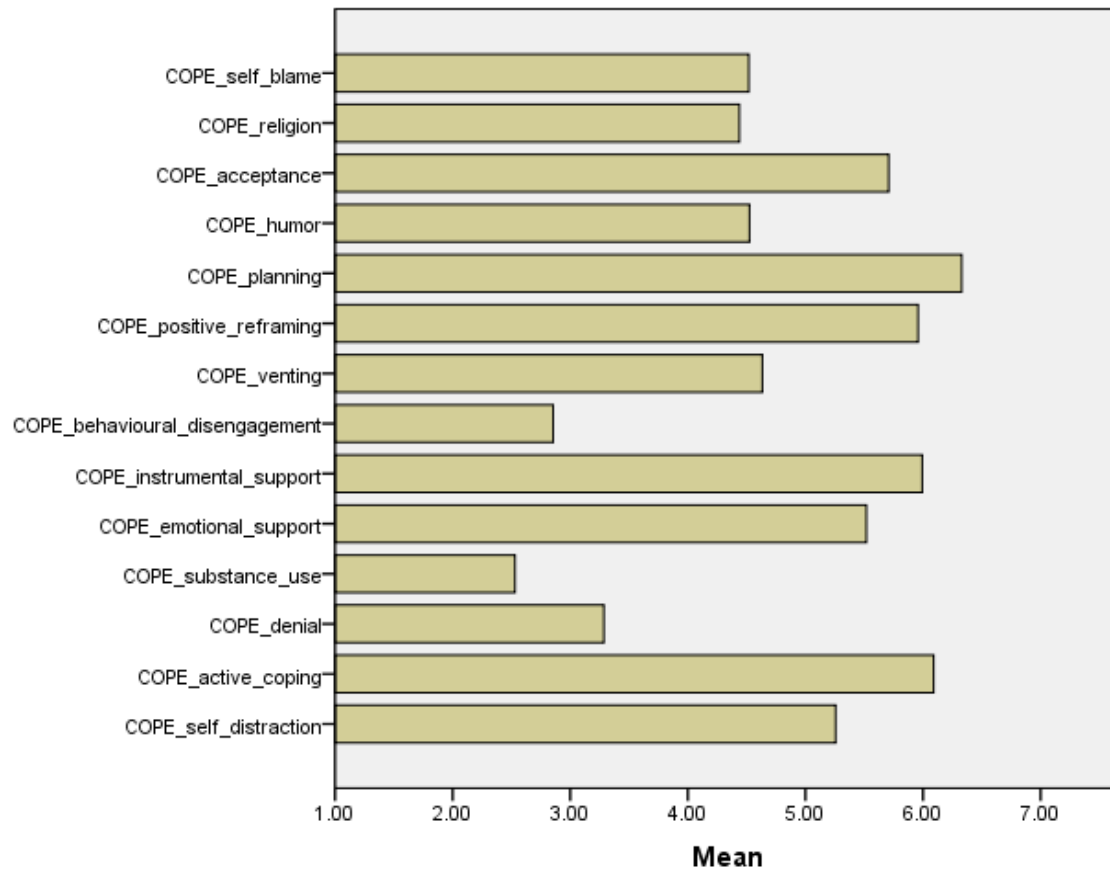
Footnote

Intrinsic motivation was significantly positively related to resilience and negatively related to psychological distress ($r = .41, p < .001$ and $r = -.29, p < .001$ accordingly). However, no significant association was found between extrinsic motivation and either outcome.

Coping styles

Details of the coping styles adopted by participants to manage stress are provided below. As can be seen, trainee social workers are more likely to adopt planning and active coping styles, acceptance and positive reframing. Utilising instrumental and social support is also commonplace. Participants indicated that they were least likely to use behavioural disengagement, substance abuse and denial.

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Multiple regression analysis was conducted to establish the coping styles that were the strongest predictors of resilience and psychological distress. Together, the coping styles accounted for 65% of the variance in resilience with positive reframing, acceptance and denial being the strongest predictors in a positive direction, and religion and substance use, self blame and humour in a negative direction. The coping styles also explained 47% of the variance in psychological distress. The most important predictors of distress were self blame and substance use (in a positive direction) and planning and positive reframing in a negative direction. These findings highlight very strong associations between the coping styles adopted by trainee social workers and their resilience and psychological wellbeing.

Social support

SOCSUPP_fellow

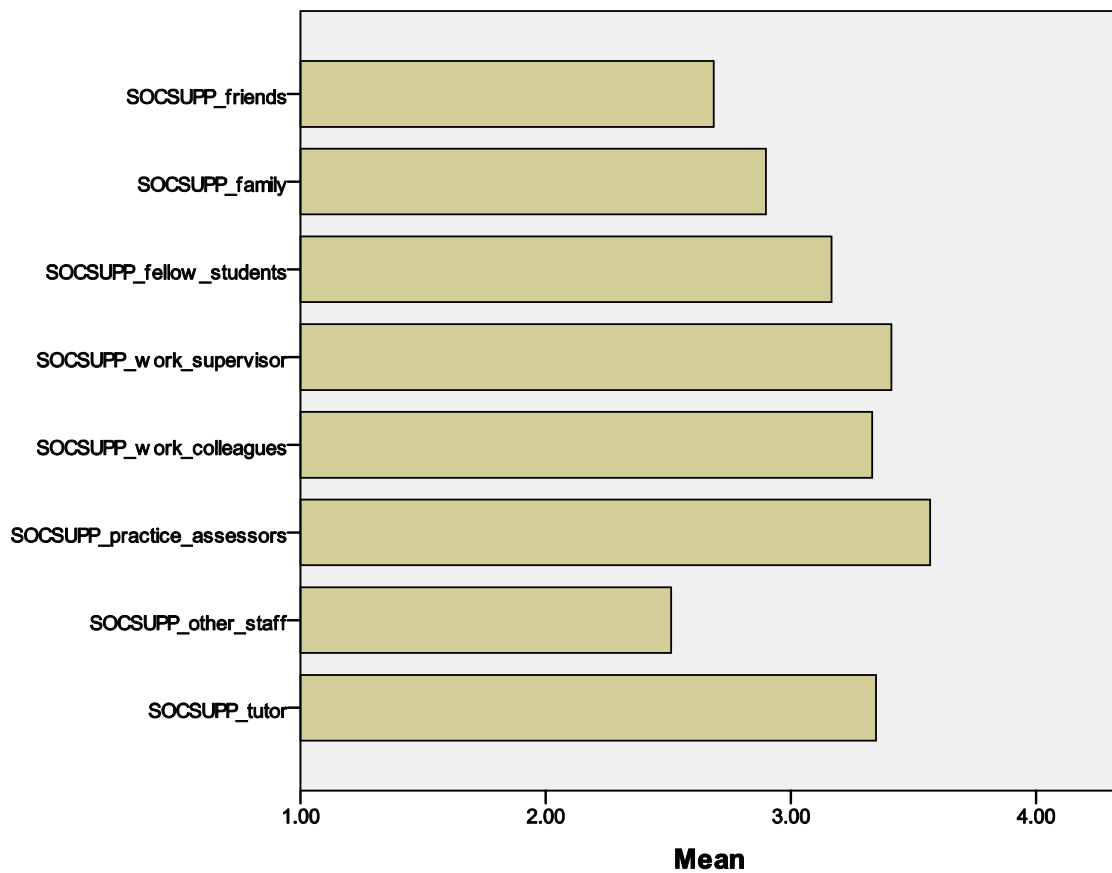
SOCSUPP_work_s

SOCSUPP_work_c

SOCSUPP_practice_a

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SOCS



Mean scores for each source of social support were calculated. As can be seen, social work trainees utilise a wide range of sources of support, with each source endorsed to at least a moderate extent. The most commonly utilised sources of support appear to be practice assessors, university tutors, supervisors and fellow students. Sources of support external to the university and work setting, although still salient, were endorsed less strongly. Interestingly, however, only support from family and friends was significantly related to psychological distress (in a negative direction). Social support from tutors, practice assessors, work colleagues and supervisors as well as support obtained from family and friends, was significantly related to resilience. Social work trainees who obtained support from a wider range of sources tended to be more resilient than those whose support network was narrower.

Relationships between social competencies, resilience and wellbeing

Significant positive relationships were found between resilience and emotional intelligence ($r = .61, p < .001$), social competence ($r = .46, p < .001$) and reflective ability ($r = .41, p < .001$). In terms of empathy, significant positive associations were found between resilience and empathetic concern ($r = .37, p < .001$) and perspective taking ($r = .46, p < .001$). Resilience and empathetic personal distress were, however, negatively related ($r = -.27, p < .001$).

The relationships between emotional competencies and psychological distress were also examined and some significant associations were observed: i.e. emotional intelligence ($r = -.29, p < .001$), social competence ($r = -.16, p < .05$) and reflective ability ($r = -.38, p < .001$).

Neither empathetic concern nor perspective taking were associated with psychological distress, but empathetic personal distress and psychological distress were positively related ($r = .20, p < .01$).

In order to identify the emotional competencies that were the strongest predictors of resilience, a multiple regression analysis was conducted. Age and gender were entered into the first step in order to control for their potentially confounding effects. The predictor variables, i.e. emotional intelligence, reflective ability, the three components of empathy (empathetic perspective taking, concern and personal distress) and social competence, were entered in the second step. Age and gender entered in the first step accounted for a total of 5% of the variance in resilience ($p < .05$). An examination of the betas showed that only age made a significant contribution (in a positive direction). A model comprising emotional intelligence, social competence, reflective ability, empathetic concern and empathetic distress (in a negative direction) accounted for a further 47% of the variance in resilience ($p < .001$).

| Predictor | Beta | F | R ² (change) |
|-----------------------------|---------|----------|-------------------------|
| Step 1 | | | |
| Age | .18* | | |
| Gender | -.11 | 3.42* | (.05) |
| Step 2 | | | |
| Emotional intelligence | .32*** | | |
| Reflective ability | .19* | | |
| Social competence | .23** | | |
| Empathy: perspective taking | -.01 | | |
| Empathy: concern | .29** | | |
| Empathy: personal distress | -.34*** | 16.42*** | (.47) |
| Total R ² = .49 | | | |

In order to examine the potential pathway through which emotional competencies might impact on psychological wellbeing, resilience was tested as a potential mediator of this relationship. When resilience was held constant, the previously significant relationship between emotional intelligence and psychological distress ($r = -.29, p < .001$) became non-significant ($r = .07, p = .36$), signifying a full mediation effect. Although not imputing causation, this suggests that emotional intelligence enhances resilience which, in turn, promotes psychological wellbeing.

Although not a specified aim of the study, levels of psychological distress were calculated for the sample using the GHQ “caseness” method. The level of caseness was established by examining the proportion of the sample that scored 3 or above on the GHQ-12. Forty-three percent of the sample achieved scores where some degree of intervention is deemed appropriate (Goldberg & Williams, 1998). Twenty-six percent achieved scores of five or above, and twelve percent scores of eight or above.

Outcomes

This project has been very successful in terms of meeting its key objectives, producing articles in peer reviewed journals, high profile professional periodicals and several conference presentations. These are listed below:

- Kinman, G. & Grant, L. (in press) Predicting stress resilience in trainee social workers: the role of emotional and social competencies, *British Journal of Social Work*
- Kinman, G & Grant, L. (2010). Emotional competencies, resilience and wellbeing in trainee social workers, *British Psychological Society Division of Occupational Psychology Conference, Brighton*
- Kinman, G & Grant, L. (2010). Emotional competencies, resilience and wellbeing in trainee social workers, *European Academy of Occupational Health Psychology Conference, Rome*
- Grant L & Kinman G (2010) *The Challenge of Equipping Social Work Students with Resilience to Ensure Employability in Atlay M Creating Bridges University of Bedfordshire.*
- Grant, L. & Kinman, G. (2010). Emotional intelligence, reflective abilities and wellbeing in social workers, *RIPEN Seminar, University of Bedfordshire*
- Grant, L. & Kinman, G. (2010). Developing a curriculum to facilitate and support social work students to become better reflective practitioners and enhance their resilience to stress. *Symposium in 16th International Reflective Practice Conference, Luton, UK*
- Grant, L. & Kinman, G. (2009) *Developing emotional resilience in social work: Supporting better reflective practitioners, MRC Seminar, University of Bedfordshire*
- Grant, L. & Kinman, G. (2009). *Developing emotional resilience in social work: supporting effective reflective practitioners, JSWEC Conference, Hertfordshire*

A series of articles has also been commissioned by Community Care and there is a paper in preparation for *Social Work Education*

This research has also directly informed the development of the curriculum. Historically social work education has not addressed the issue of how to develop a curriculum that will equip social workers with the skills required to cope with a complex and stressful, yet rewarding working environment. This research has, by identifying key competencies and coping mechanisms, informed the development of *Wellbeing Days* for social work students.

These *Wellbeing Days* are designed to highlight the importance of resilience and expose students to a wide range of techniques which aim to strengthen emotional intelligence, reflective abilities, social competencies and stress coping strategies.

Students are exposed to a range of carefully selected workshops specifically designed to build resilience. These workshops are facilitated by specialists in their respective fields and have been carefully selected to ensure that students are introduced to some of the key skills that our initial diagnostic research suggests aid resilience to stress. A holistic approach is adopted encompassing a wide range of psychological, physical, cognitive, social and more spiritual techniques. Table 1 outlines the content of the individual workshops, together with their focus and rationale.

| Workshop title | Focus | Rationale |
|--|--|---|
| Meditation and mindfulness | Mindfulness meditation is the ability to be able to focus on the present moment without distraction. | Mindfulness is a useful tool in regulating one's emotions (Kabat Zinn 2005). Research suggests it may enhance student social workers wellbeing (Ying 2009) and can reduce over identification (Bishop 2004) and empathetic distress |
| Cognitive Behavioural Therapy | CBT focuses on the way people think in order to help them develop strategies to manage emotional or behavioural problems. | By challenging unhelpful thinking and perceptions students can be enabled to better manage anxiety and problem solve more effectively- key skills in self-regulation (Goleman 2004). |
| Supervision for Reflective Practice | Supervision in social work often focuses merely on accountability and the importance of it as a protective mechanism is often underestimated. | Anxiety, confusion and fear of complexity are often experienced which can be reduced through reflection (Banks 2006). The role of reflective supervision in creating space for reflective and emotional thinking is also a crucial way of containing anxiety and creating conditions for workers to flourish (Ruch 2009). |
| Peer Coaching | Understanding the role of a buddy or coach in reducing stress can assist in stress management. | Peer coaching has been found to be particularly beneficial in sharing experiences and practices, managing personal problems and promoting wellbeing during stressful periods in students in other disciplines. (Short, Kinman, & Baker in press), and in assisting reflective practice in other professionals (Zwart et al 2007). |
| Time Management | This session focuses on how to create effective and realistic work-plans by prioritising workload and managing multiple priorities | Learning how to manage time effectively is a key factor in minimising stress, building resilience and improving quality of life. |
| Self Knowledge and Action Planning | Self-knowledge is a key factor in stress management. Gaining insight into what we do (or don't do) that make things better or worse during stressful times is often the first step in enhancing wellbeing. | By understanding and identifying the antecedents, behaviours and consequences relating to the stress experienced, action plans can be put in place to change beliefs and behaviours which cause stress. |

Table 1: Workshops on the *Wellbeing Day*

These *Wellbeing Days* have been very well received and feedback has been positive. At the revalidation of the social work programmes in 2009 *Wellbeing Days* were highlighted as being an area of good practice. Feedback from students has also been positive. One student stated:-

“Thank you. I left feeling much more confident about my ability to manage the stresses and strains of professional and home life. I certainly believe that this day would be well received by professionals as part of team building exercises or 'away from the office days'.....I honestly believe the effects of the day would save money in the longer term with regards to employee retention and sick days due to stress and depression.” MSc Social Work Student

This project has generated a great deal of interest amongst social work educators and professionals. We have been approached by a visiting scholar from America to collaborate on a European funded project looking at emotional literacy in the professions and have been asked to formally advise on the strand which will look at social work and emotional literacy.

A grant from the Higher Education Authority's subject Centre for Social Work and Social Policy (SWAP) for a teaching and learning event to discuss the research and train social workers in peer coaching techniques has recently been approved. Further research funding applications are anticipated.

Conclusions and implications

The findings of this research project indicate that trainee social workers whose emotional and social competencies are more highly developed are more resilient to stress. More specifically, evidence has been found that emotional intelligence, reflective ability, aspects of empathy, and social competence may be key protective qualities in the social care context. The key motivators to enter social work as a career, coping styles as well as the source and extent of social support are also important factors in enhancing wellbeing. Clearly, a more explicit focus on the management of emotions, the development of effective social and coping skills and the effective uptake of social support is required in social work training in order to enhance wellbeing and protect trainees against future professional burnout.

Social work trainees who are more adept at perceiving, appraising and expressing emotion, who are able to understand, analyse and utilise emotional knowledge, and who are able to regulate their emotions effectively appear to be more resilient to stress. Moreover, in accordance with previous research on the benefits of emotional intelligence (e.g. Mikolajczak et al., 2006), this study has also found strong negative relationships between emotional competence and psychological distress.

Other factors that fall within the emotional intelligence rubric were also strongly related to resilience and psychological wellbeing. Reflective ability appears to be an important predictor of resilience and psychological wellbeing, suggesting that trainee social workers who are better able to reflect on their thoughts, feelings and beliefs; who are able to consider the position of other people; and who can use these reflective abilities to communicate effectively with others are likely to be more resilient to stress and be less distressed. In accordance with Ruch (2009), these findings highlight the value of reflection as a self protective mechanism as well as a way of enhancing professional practice. Garret's (2007) discussion of Bourdieu's potential contribution to social work practice highlights the need to develop reflexive, as well as reflective, social workers. It is argued that training in reflexivity, or the ability to “reflect about reflection” (Fook & Askeland, 2006) will help students develop the intellectual as well as the emotional ability to reflect on their practice. This is likely to help them recognise their own influence on knowledge created in practice and as to cope more effectively with the strain engendered by their increasingly bureaucratic working context.

Perceptions of competence in social situations were also strongly associated with resilience to stress. The importance of social competence in social work trainees is further underlined by the finding that this quality was strongly related to psychological wellbeing. As well as facilitating effective relationships with clients, social competence is also a key factor in gaining and maintaining social networks with colleagues, friends and family. A vast body of research indicates that social support is one of the most effective buffers against stress (Sarason et al., 1985). Interventions to protect the wellbeing of social work trainees might aim to enhance social competence and foster feelings of confidence in social settings.

Three facets of empathy were tested as predictors of resilience: the ability to take the perspective of other people; empathetic concern for others; and empathetic distress (Davis, 1980). By adopting this approach, considerable insight has been gained into the complex role played by empathy in determining the resilience and wellbeing of trainee social workers. Whereas empathetic concern (feelings of warmth, compassion and sympathy) appears to enhance stress resilience, there is evidence that empathetic distress (the feelings of anxiety and discomfort that result from observing another's negative experience) may diminish it. The positive relationship that emerged between empathetic distress and more global psychological distress provides additional support to this argument. It is evident that "appropriate" empathy is vital in caring roles in order for social care workers to acknowledge and accept what their clients think and feel. Nonetheless, the findings of this study suggest that trainee social workers must develop clear emotional boundaries to ensure that healthy empathetic concern does not spill over into empathetic distress which is likely to have negative implications for their clients as well as themselves. Although the findings of this research indicate that intrinsic motivation to enter social work may be a protective factor, care should be taken to ensure that the desire to care and work towards social change does not result in a loss of essential objectivity or over-empathising with service users.

The high level of psychological distress found in this study indicates that interventions to enhance resilience are required at an early stage in the social work career. Interventions designed to enhance inter-personal and intra-personal emotional competencies are particularly likely to foster resilience which, in turn, has the potential to protect the future wellbeing of an occupational group that is highly vulnerable to work-related stress. However, interventions that focus on the development of social competence, the effective uptake of social support and the adoption of appropriate coping styles should also be fruitful.

The findings of this study will inform curriculum development, enhance support structures and help social work trainees develop key personal skills that will help them to enhance their resilience, their wellbeing, their personal effectiveness and their employability. Interventions that aim to increase insight into one's own feelings and the ability to understand other individuals' emotions and intentions are required. The importance of personal reflection, empathetic reflection and reflective communication highlighted in this study will also provide more specific guidance in how the taught elements of reflective practice and reflective writing might be reshaped. The curriculum should include training in reflexivity, as well as different facets of reflection. It is acknowledged, however, that the adoption of managerial approaches to social work supervision, as well as the need to manage excessive work demands, may mean that opportunities for reflection and reflexivity are constrained in the workplace context. Working under such conditions may, therefore, limit the opportunities for newly qualified social workers to further develop their intellectual and emotional development.

The Social Work Task Force report (DOH 2009) has recognised the need for social workers to have "a particular mix of analytical skills, insight, common sense, confidence, resilience, empathy and use of authority" (2009 p. 16). Social work educators have been tasked with strengthening the criteria governing entry requirements to courses. The competencies

highlighted in this study as being key predictors of resilience could inform the development of strategies for recruiting and selecting social workers. The need to select students who are resilient to stress has been recognised in the recent Children's Workforce Development Council (CWDC) "Step up to Social Work" programme (CWDC, 2010) which includes some basic questions regarding resilience in initial recruitment (CWDC 2010). Nonetheless, more research is required to examine how psychological screening might inform the selection of social work students (and, potentially qualified staff) and the extent to which their emotional and social competencies impact on their training experiences and subsequent professional career.

The risk of relying on interventions that focus attention on the nature of the individual social worker and their psychological characteristics, without managing the structural causes of stress is clear. A wide range of stressors has been highlighted in the profession including heavy caseloads; paperwork; role ambiguity; lack of recognition and reward; limited promotion opportunities; lack of supervision, support and other resources; poor relations between management and staff; and threats, violence and harassment (Jones, Fletcher & Ibbetson, 1991; Coffey et al., 2004; Coyle et al., 2005). Employers' legal and moral responsibilities in safeguarding the health and safety of their staff are clear, as are the risks of failing to address the structural sources of stress (Health and Safety Executive, 2010). Even the most resilient social workers will be unable to thrive under working conditions that are pathogenic. Attention to the nature, design and management of social workers' roles is, therefore, essential. The concept of resilience is useful, however, as it extends traditional self-care and stress management strategies by aiming to enhance the wellbeing of employees rather than merely focusing on reducing distress (Collins, 2007; Howard, 2008). As such, it can be incorporated into a more holistic approach that will inform the design and management of social work.

Although considerable insight has been gained into the emotional competencies that predict resilience and wellbeing in trainee social workers, this study has limitations as it is based on cross-sectional and correlational data. Longitudinal research that follows a cohort of trainee social workers through their training and their subsequent career is required, in order to establish the extent to which resilience protects against the negative impact of work-related stress and burnout. Future research might also examine gender, age and ethnic differences in social work students in relation to conceptualisations of resilience and wellbeing in the profession.

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