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Self-Care Rates Among Undergraduate Human Services Students

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Abstract

For students enrolled in undergraduate human services programs, self-care can be a strategy for managing the stress and strains of academic life. However, few studies investigate the self-care practices of students enrolled in these educational programs. This study looks at the rate human services undergraduate students engage in self-care practices and considers how exploring these self-care practices can contribute to the knowledge base of future students related to this topic. Findings reveal the types of self-care behaviors most often engaged in and at what rate students practiced these behaviors. More studies are needed to examine the self-care practices of students enrolled in undergraduate human services programs.

Keywords: self-care, participation rates

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Self-Care Rates Among Undergraduate Human Services Students

Human services is a term that encompasses a wide range of assistance provided to individuals, families, and communities that, for various reasons, need to regain a sense of security and stability. From basic needs and case management (Mehr & Kanswischer, 2011; Neukrug, 2017; Woodside & McClam, 2013 & 2015) to epidemic and pandemic response (Dice et al., 2018), human service professionals assist and intervene with the intent to improve adverse circumstances and increase the quality of the lives of those impacted. Engaging in such work is challenging and trying and can lead to significant consequences if the human service professional is not taking care of themselves (Woodside et al., 2012). Although most human service professionals regard their work as rewarding, the emotional strain can come at a significant cost (Corey et al., 2015; Neukrug, 2017). Many experience compassion or empathy fatigue and vicarious trauma, leading to burnout (Morse et al., 2012; Schaufeli et al., 2009). Over time, burnout can lead to exhaustion, depersonalization, and inefficacy (Kile, 2014; Lunsky et al., 2014; Maslach et al., 2001). Such symptoms can cause some to leave the field, change their profession, or search for less emotionally demanding work (Oser et al., 2013). Human service students just starting this journey can be particularly vulnerable to the stress and emotional challenges encountered when working in this field. Coupled with the pressures of being a student, possibly raising a family, and working full-time, one can see how some might become overwhelmed, exhausted, and discouraged. Such experiences could lead some to drop out of school or, worse, continue with their studies and become impaired professionals.

As a practice, self-care shows promising results in reducing the risk of burnout (Dielbold et al., 2017; O'Neil et al., 2017). Good self-care practice is integral to caring for the community

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(Shapiro et al., 2007; Skovholt & Trotter-Mathison, 2011). Self-care can also assist with maintaining a sense of perspective, being aware of the stressors in private and professional lives, and noticing whether there is enough support outside of work (Rzeszutek & Schier, 2014; Shapiro et al., 2007). Human services programs emphasize the importance of engaging in self-care practices and incorporating this into specific curriculum offerings (Banks et al., 2016; Riley & Rouse, 2015). However, literature regarding self-care and human service programs needs more information about student self-care behavior.

Literature Review

Self-care and self-care practice can have prescriptive and preventive properties for managing mental and emotional distress (Salloum et al., 2015). As a practice, self-care encompasses intentional or specific attempts to improve health and wellness over the life span by addressing personal needs related to mental, physical, emotional, spiritual, and social states (Corey et al., 2018; Moore et al., 2011; Richards et al., 2010). Factors influencing the practice of self-care such as motivation, habits, functional abilities, access to support services, and cultural beliefs and values (Jaarsma et al., 2017) vary widely from individual to individual and might involve various settings or activities (Moore et al., 2011; Ogaswara et al., 2013; Richards et al., 2010).

Due to the strain caused by being in this profession, human service educators recognize the need to incorporate self-care into training programs. For example, the curriculum standards presented by the Council for Standards in Human Services Education (CSHSE) include self-care as a significant training component. Specifically, Standard 19.d. and Standard 20.d. state that programs shall provide experiences and support that encourage students to develop strategies for self-care. Furthermore, the National Organization for Human Services' Ethical Standards for Hu-

man Services Professionals (2015) incorporates self-care as a professional responsibility. Ethically, human service professionals are responsible for maintaining healthy personal growth to ensure they can give optimal services to clients.

In a recent study by Penn and Bartmans (2018), participants reported that "having a good self-care plan was essential for optimally working with challenging clients and families" (p. 41). Preparing human service workers for their careers requires education that places students in challenging and rigorous coursework. In particular, fieldwork courses offer students invaluable opportunities to experience "real world" situations under faculty supervision. However, fieldwork experiences can force students to uncover negative life experiences. Such experiences can come at an actual cost to student well-being. In a study by Butler et al. (2017), 195 MSW students reported being faced with or exposed to traumatic content during their training. According to the authors, the study's results indicated that those with lower levels of self-care reported higher levels of burnout and stress-related symptoms. In comparison, those with higher levels of self-care experienced higher levels of compassion satisfaction.

Recent studies with social work students show that despite positive outcomes associated with self-care and stress management, participation in university self-care programs has been chronically low (Diebold et al., 2017; O'Neil et al., 2017). Despite the low participation rates mentioned above, results from the O'Neill et al. (2017) study indicated that students who participated in daily self-care had lower rates of stress. With each year of progression through their programs, students experienced less stress.

Purpose of the Present Study

In the present study, this researcher examined the self-care participation rates among undergraduate human services students. Many agree that promoting self-care for human service

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professionals helps to decrease the risk of burnout, compassion fatigue, vicarious trauma, and other possible damaging psychological wounds (Choate & Smith, 2003; David & Richards, 1999; Gleason et al., 2019; Myers & Mobley, 2004; Newell & MacNeil, 2010; Riley & Rouse, 2015; Smith et al., 2002). Although there has been recent importance placed on self-care in human services education, as a topic, self-care still needs to be exhausted as an area of research in this field. If the desired outcome is to have students engage more fully in self-care, the rate at which human service students engage in self-care and what factors influence such practices is meaningful. Variables such as motivation, access to support, and cultural beliefs and values might significantly impact such practices. Furthermore, the individual variables gender, race, ethnicity, and educational or developmental levels could correlate with frequency, duration, or type of self-care practices. Understanding differences in self-care practices could enhance curriculum development, training opportunities during clinical coursework, and resources offered to students. This study aims to eliminate gaps in the existing literature to highlight how human service trainees engage in self-care practices.

Methods

Procedures

One-hundred and twelve undergraduate programs offering an associate's and or bachelor's degree in human services were eligible for this study. The researcher identified programs from the list of members and accredited programs found on the CSHSE webpage and via Google search. Participating program representatives distributed a link to the survey for this study. Data collection occurred via an online survey each representative shared with students currently enrolled in their undergraduate human services program. Clicking the link to the survey acknowledged informed consent, and responses remained anonymous. The protocol was submitted and

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approved by this researcher's college internal review board. Students' self-care behaviors and participation rates were assessed by completing the Self-Care Behavior Inventory (SCBI) (Santana & Fouad, 2017).

Measures

Participants completed a demographics questionnaire to identify gender, age, degree program, course work completed, and ethnicity. Then participants were asked to complete the SCBI (Santana & Fouad, 2017). The SCBI is a nineteen-item Likert scale inventory used to measure self-care behaviors. To explore the underlying factor structure, researchers conducted an EFA and reliability analysis (Santana & Fouad, 2017). Results indicated that a three-factor extraction with 19 items revealed the best model fit. According to the researchers, the three-factor structure identifies three critical aspects of self-care: Cognitive-Emotional-Relational, Physical, and Spiritual. The first factor (Cognitive-Emotional-Relational) had an eigenvalue of 5.17 and explained 25.87% of the variance. The second factor (Physical) had an eigenvalue of 1.99 and explained 9.97% of the variance. The third factor (Spiritual) had an eigenvalue of 1.68% and explained 8.38% of the variance. Nine items were loaded onto Factor 1, six were loaded onto Factor 2, and four were loaded onto Factor 3. The SCBI demonstrated high reliability ($r = .83, p$ $.001$). Validity analysis indicated that the SCBI demonstrated sound internal consistency of the 19 items, and discriminant and convergent validity were supported (Santana & Fouad, 2017). Chronbach's a for the instrument was adequate, suggesting that all items have relatively high internal consistency.

Design

Undergraduate students in human services programs were asked to rate their participation in 19 self-care practices. Seventy-eight students attempted to complete the SCBI. The following

results reflect the number of participants who completed the SCBI (N=53). Descriptive statistics produced with Statistical Package for the Social Science (SPSS) precedes was used to produce descriptive statistics and to explore the impact of the variables gender, ethnicity, and age on self-care practices. To compare the self-care scores for males and females, this researcher conducted an independent-sample t-test. A one-way between-groups analysis of variance explored the impact of age and ethnicity variables on levels of self-care participation, as measured by the Self-Care Behavior Inventor. See the results below.

Results

Participants were students seeking an associate's or a bachelor's degree in human services. Fifty-three (*N*=53) students participated in the study. Most students were female (*n*=42), with ten (*n=10)* male participants and one (*n=1)* indicating "other ."Over half were Caucasian (*n*=36), with (*n*=8) identifying as Latino or Latina, four (*n*=4) indicating Black or African American, and one (*n*=1) identifying as American Indian or Alaskan Native. Four (*n*=4) stated being multiethnic or other. Eighty percent (*n*=42) sought an associate's degree, with the remaining seeking a bachelor's degree. When asked to identify an emphasis area of study, over half (*n*=32, 54%) responded as addiction counseling students, thirty percent (*n*=15) picked general human services, and eight percent (*n*=6) chose therapeutic recreation. Thirty-two participants (*n*=32) were either 20-39 years of age, twenty-one (n=21) were between the ages 40-59), and one (*n*=1) participant identified as being 60 or above, with the youngest being 20 and the oldest being 60 or over.

The mean score for self-care behavior was 3.67 and a median of 4.00 (SD=.77) with a range of 3.00, indicating moderate participation in overall self-care behavior (see Figure 1).

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Figure 1

Medium Scores for Self-Care Behavior
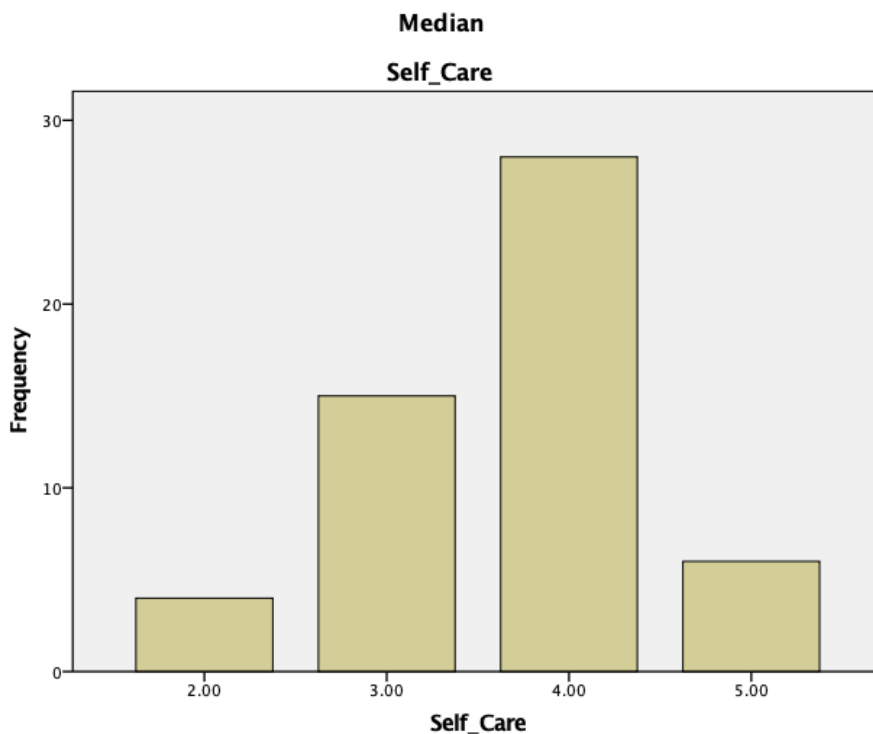
Reported self-care rates were the highest for the items "staying in contact with important people" (M=4.3, SD=.82) and "allowing yourself to laugh" (M=4.3, SD=.75). Lowest reported rates were for the items "taking vacations" (M=2.6, SD=1.11) and "taking time off" (M=2.9, SD 1.08) (See Appendix A).

Conducting an independent-sample t-test allowed for a comparison between the self-care rates for females and males. Results indicated no significant difference in scores for females (M=69.90, SD=11.34) and males (M=61.1, SD=9.76; $t(50)=2.25$, $p = .05$). Female participants had the highest participation rates for the items "staying in contact with important people ($n=42$, M=4.4, SD=76), "allowing yourself to laugh ($n= 42$, M=4.38, SD=.82), and "taking quiet time to

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complete tasks (n=42, M=4.04, SD=.85). The items with lowest participation rates for females

included "take vacations" (n=42, M=2.90, SD=1.12) and "take time off" (n=42, M=3.02,

SD=1.11. In comparison, male participation rates were highest for the items "allow yourself to

laugh" (n=10, M=4.2, SD=.42) and "seek-out comforting activities" (n=10, M=4.10, SD=.73).

Male participation rates were lowest for items "taking vacations" (n=10, M=1.90, SD=.73), "take

time off" (n=10, M=2.50, SD .97) and "contribute to causes" (n=10, M=2.50, SD 1.17). (See Ap-

pendix B for the entire table).

Conducting a one-way between-group analysis of variance explored the impact of ethnic-

ity on levels of self-care participation, as measured by the Self-Care Behavior Inventory (SCBI).

Participants reporting indicated five groups for ethnicity. (Group 1: multiple ethnicities; Group 2:

American Indian or Alaskan Native; Group 3: Black or African American; Group 4: Hispanic;

Group 5: White/Caucasian). There was a statistically significant difference at the $p < .05$ level in

SCBI scores for the five groups: $F (4, 48) = 2.23$, $p = .08$. Despite reaching statistical signifi-

cance, post hoc comparisons using the Tukey test could not be performed because at least one

group has the sum of case weights less than or equal to the value 1. See Table 1 for descriptive

statistics for each group.

Table 1
Group Descriptive Statistics

SelfCareSUM

	N	M	SD	Std. Error	95% Confidence Interval for Mean		Min	Max
					Lower Bound	Upper Bound		
Multiple ethnicities / Other (please specify)	4	67.0	10.09	5.04	50.92	83.07	56.00	77.00
American Indian or Alaskan Native	1	38.0	.	.	.	.	38.00	38.00
Black or African American	4	72.7	10.90	5.45	55.39	90.10	57.00	82.00
Hispanic	8	65.8	13.22	4.67	54.81	76.93	37.00	80.00
White / Caucasian	36	69.0	10.49	1.74	65.44	72.55	48.00	95.00
Total	53	68.0	11.44	1.57	64.92	71.22	37.00	95.00

Black or African American participants had the highest participation rates for items "take quiet time to complete tasks" (n=4, M=4.5, SD .5) and "stay in contact with important people" (n=4, M=4.2, SD=.9). The lowest participation rates for this group came with items "remaining open to not knowing" (n=4, M=3.0, SD=1.8) and "spend time with others you enjoy" (n=4, M=3.2, SD=.9). The highest participation rates for White or Caucasians occurred with items

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"stay in contact with important people" (*n*=36, M=4.3, SD=.7) and "allow yourself to laugh"

(*n*=36, M=4.3, SD=.7). Lowest participation rates for this group came with items "take vaca-

tions" (*n*=36, M=2.6, SD=1.0) and "take time off" (*n*=36, M=3.0, SD 1.0). Hispanic participation

rates were highest for items "allow yourself to laugh" (*n*=8, M=4.6, SD=.7) and "stay in contact

with important people" (*n*=8, M=4.5, SD=.7). The lowest rates for this group occurred with items

"take time off" (*n*=8, M=2.6, SD=.9) and "contribute to causes" (*n*=8, M=2.7, SD=1.4). The

highest and lowest participation rates for American Indians or Native Alaskans and Multiethnic

can be found in Appendix C.

Conducting a one-way between-group analysis of variance allowed for the exploration of

the impact of age on levels of self-care participation, as measured by the Self-Care Behavior In-

ventory (SCBI). Participants' reporting indicated six groups according to their age. (Group 1:

under twenty; Group 2: twenty to twenty-nine; Group 3:thirty to thirty-nine; Group 4: forty to

forty-nine; Group 5:fifty to fifty-nine; and Group 6: sixty or older. There was a statistically sig-

nificant difference at the *p* < .05 level in SCBI scores for the six groups: $F(5, 47) = 1.96$, $p = .1$.

Despite reaching statistical significance, post hoc comparisons using the Tukey test could not be

performed because at least one group has the sum of case weights less than or equal to the value

1. See Table 2 for descriptive statistics for each group.

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Table 2
Group Participation Statistics

SelfCareSUM

	N	M	SD	Std. Error	95% Confidence Interval for Mean		Min	Max
					Lower Bound	Upper Bound		
Under 20 years of age	3	56.6	17.03	9.83	14.33	98.99	37.00	67.00
20 years to 29 years	12	64.1	9.8	2.84	57.91	70.42	48.00	80.00
30 years to 39 years	17	73.1	9.54	2.31	68.27	78.08	57.00	95.00
40 years to 49 years	11	65.1	9.47	2.85	58.81	71.54	50.00	77.00
50 years to 59 years	9	70.6	14.28	4.76	59.68	81.64	38.00	82.00
60 years or older	1	71.0	.	.	.	.	71.00	71.00
Total	53	68.0	11.44	1.57	64.92	71.22	37.00	95.00

Group 3 (thirty to thirty-nine) had the highest participation rates (M=73.1, SD=9.5), and Group 1 (under twenty) had the lowest rate of participation (M=56.6, SD=17.0). For participants aged twenty to twenty-nine (*n=12)*, the highest rates came with items "allow yourself to laugh" (M=4.4, SD=.6) and "seek-out comforting activities" (M=4.2, SD=.6). This group reported the lowest rates for items "take time off" (M=2.0, SD=1.0) and "take vacations" (M=2.1, SD=.9). Highest participation rates for those aged thirty to thirty-nine (n=17) came with items "stay in contact with important people" (M=4.5, SD=.5) and "allow yourself to laugh" (M=4.5, SD=.6)

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this group reported the lowest rates for items "take vacations" (M=3.0, SD=1.1) and "take time off" (M=3.1, SD=1.2). For ages forty to forty-nine (*n*=11), the highest rates of participation occurred with items "stay in contact with important people" (M=4.3, SD .9) and "allow yourself to laugh" (M=4.0, SD=.7) and lowest with items "take vacations" (M=2.7, SD=1.1) and "take time off" (M=2.7, SD=1.1). The highest participation rates for those aged fifty to fifty-nine (*n*=9) occurred with items "take quit time to complete tasks" (M=4.3, SD=1.0) and "allow yourself to laugh" (M=4.2, SD=.9). The lowest scores for this age group occurred with items "take vacations" (M=2.8, SD=1.1) and "take time off" (M=3.0, SD=1.1). See Appendix D for all participation rates.

Discussion

The self-care practices of students are essential because today's students are tomorrow's professionals. Given the importance of self-care to human service education, this study highlights the need to look more closely at individual differences and the unique influences on the self-care practices of those students. Overall, participants in this study reported a moderate level of engagement in some self-care behavior, suggesting students find practicing self-care important. Findings also mean that some similarities and differences in the rate and type of self-care practice concerning gender, age, and ethnicity exist. More specifically, participation rates were the greatest for "allowing yourself to laugh" and "staying in contact with important people" (respectively). They were the lowest for "taking vacations" and "taking time off." (respectively). From this data set, participants were more likely to engage in self-care behaviors consistent with the emotional and relational factors and less likely to engage in more physical factors such as vacations and time off. One explanation for these differences could be that self-care behavior related to taking time off from busy schedules and life may not be as accessible for students with

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complicated lives. Given life circumstances, "taking time to laugh" and "staying in contact with important people" might be a more reasonable action. Differences among age and ethnicity regarding the rate of participation and type of self-care practices should also be of interest to human service programs. Regarding age and ethnicity, those under the age of twenty had the lowest participation rate, and Black or African Americans had the highest participation rates. Understanding these differences could help understand how best to integrate self-care into human services programs. There may be more effective strategies than a one-size-fits-all approach to integrating self-care into human services training.

Further research is needed to address the gaps in knowledge about the self-care practices of human service students. With more analysis, we will better understand how self-care practices are individualized. For example, comparing within-group differences between age and ethnicity could highlight more individualized practices. Human services programs could positively impact self-care practices with a deeper understanding of the variables influencing self-care practices. Such an impact would support the personal and professional development of those hoping to commit to the human services field.

Limitations

The small sample size was a limitation of this study. Because only 78 students completed the study, the results can not represent all undergraduate human services students. Further research should examine a much larger sample size to examine more self-care behaviors. Gathering more data and including more universities is suggested to increase generalizability. A more extensive data set would allow for exploration into the differences or associates between variables such as gender and self-care behaviors. Also, this would create an opportunity to investigate

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a potential positive or negative relationship between self-care behaviors and variables such as academic stress or students' problematic personal or professional behaviors.

Conclusion and Implication for Human Services

The findings of this study suggest that human services students consider self-care necessary, engage in self-care behaviors at a moderate rate, and value self-care for their physical, emotional, and mental health. These findings contribute to understanding and researching student self-care behaviors by highlighting similarities and differences between those students. Human services faculty could better encourage students to practice self-care through classroom discussion, incorporating self-care activities into assignments, and providing examples of outcomes related to self-care practices with more individualized knowledge.

Because this is one of the first studies investigating self-care behaviors of human services students, more meaningful, vital contributions are greatly needed. Future work should investigate how self-care behavior varies among demographic variables such as age, gender, race, ethnicity, and culture. Furthermore, studies could investigate the relationship between self-care and other variables such as persistence rates, stress levels, and problematic behaviors in the classroom.

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SELF-CARE RATES

Appendix A

Descriptive Statistics Self-Care

	N	Min	Max	M	SD
Spend time with others you enjoy	53	2.00	5.00	3.73	0.83
Maintain deep interpersonal relationships	53	1.00	5.00	3.88	0.97
Stay in contact with important people	53	2.00	5.00	4.30	0.82
Seek out comforting activities	53	1.00	5.00	3.94	0.94
Take time to chat with peers	53	1.00	5.00	3.52	0.97
Allow yourself to laugh	53	2.00	5.00	4.33	0.75
Take quiet time to complete tasks	53	2.00	5.00	3.98	0.84
Seek out projects that are exciting or rewarding	53	1.00	5.00	3.75	0.95
Remain open to not knowing	52	1.00	5.00	3.55	1.17
Eat healthy	53	1.00	5.00	3.56	0.99
Exercise	53	1.00	5.00	3.43	1.11
Receive medical care	53	1.00	5.00	3.30	0.99
Spend time in nature	53	1.00	5.00	3.39	1.00
Take vacations	53	1.00	5.00	2.69	1.11
Take time off	53	1.00	5.00	2.92	1.08
Pray/Meditate	53	1.00	5.00	3.62	1.19
Connect with spirituality	53	1.00	5.00	3.77	1.18
Contribute to causes	53	1.00	5.00	3.30	1.06
Engage in advocacy	52	1.00	5.00	3.15	1.21
Valid N (listwise)	52				

Appendix B

Gender and Self-Care Participation Rate

	F			M		
	M	N	SD	M	N	SD
Spend time with others you enjoy	3.85	42	0.78	3.20	10	0.91
Maintain deep interpersonal relationships	3.97	42	1.02	3.50	10	0.70
Stay in contact with important people	4.40	42	0.76	3.90	10	0.99
Seek out comforting activities	3.92	42	0.99	4.10	10	0.73
Take time to chat with peers	3.54	42	1.04	3.50	10	0.70
Allow yourself to laugh	4.38	42	0.82	4.20	10	0.42
Take quiet time to complete tasks	4.04	42	0.85	3.70	10	0.82
Seek out projects that are exciting or rewarding	3.83	42	0.90	3.40	10	1.17
Remain open to not knowing	3.73	41	1.07	2.90	10	1.44
Eat healthy	3.61	42	0.98	3.40	10	1.07
Exercise	3.57	42	1.08	2.90	10	1.19
Receive medical care	3.42	42	1.01	2.80	10	0.78
Spend time in nature	3.45	42	1.04	3.20	10	0.91
Take vacations	2.90	42	1.12	1.90	10	0.73
Take time off	3.02	42	1.11	2.50	10	0.97
Pray/Meditate	3.69	42	1.21	3.40	10	1.17
Connect with spirituality	3.92	42	1.13	3.20	10	1.31
Contribute to causes	3.50	42	0.96	2.50	10	1.17
Engage in advocacy	3.24	41	1.22	2.90	10	1.19

SELF-CARE RATES

Appendix C

Self-Care Rates and Ethnicity

		N	M	SD	Min	Max
Spend time with others you enjoy	Multiple ethnicity / Other (please specify)	4	3.25	0.9	2.00	4.00
	Am Indian Alask Native	1	2.0	.	2.00	2.00
	Black	4	3.2	0.9	2.00	4.00
	Hispanic	8	3.7	0.7	3.00	5.00
	Caucasian	36	3.8	0.7	2.00	5.00
	Total	53	3.7	0.8	2.00	5.00
Maintain deep interpersonal relationships	Multiple ethnicity / Other (please specify)	4	3.7	0.9	3.00	5.00
	Am Indian Alask Native	1	1.0	.	1.00	1.00
	Black	4	3.7	0.5	3.00	4.00
	Hispanic	8	3.8	1.1	2.00	5.00
	Caucasian	36	4.0	0.8	1.00	5.00
	Total	53	3.8	0.9	1.00	5.00
Stay in contact with important people	Multiple ethnicity / Other (please specify)	4	4.0	0.8	3.00	5.00
	Am Indian Alask Native	1	2.0	.	2.00	2.00
	Black	4	4.2	0.9	3.00	5.00
	Hispanic	8	4.5	0.7	3.00	5.00
	Caucasian	36	4.3	0.7	2.00	5.00

SELF-CARE RATES

	Total	53	4.3	0.8	2.00	5.00
Seek out comforting activities	Multiple ethnicity / Other (please specify)	4	4.2	0.9	3.00	5.00
	Am Indian Alask Native	1	1.0	.	1.00	1.00
	Black	4	4.2	0.9	3.00	5.00
	Hispanic	8	4.2	0.8	3.00	5.00
	Caucasian	36	3.8	0.8	1.00	5.00
	Total	53	3.9	0.9	1.00	5.00
Take time to chat with peers	Multiple ethnicity / Other (please specify)	4	3.2	0.5	3.00	4.00
	Am Indian Alask Native	1	1.0	.	1.00	1.00
	Black	4	3.7	0.9	3.00	5.00
	Hispanic	8	3.6	1.5	1.00	5.00
	Caucasian	36	3.5	0.7	2.00	5.00
	Total	53	3.5	0.9	1.00	5.00
Allow yourself to laugh	Multiple ethnicity / Other (please specify)	4	4.7	0.5	4.00	5.00
	Am Indian Alask Native	1	2.0	.	2.00	2.00
	Black	4	4.0	0.0	4.00	4.00
	Hispanic	8	4.6	0.7	3.00	5.00
	Caucasian	36	4.3	0.7	3.00	5.00
	Total	53	4.3	0.7	2.00	5.00
Take quiet time to complete tasks	Multiple ethnicity / Other (please specify)	4	4.5	0.5	4.00	5.00

SELF-CARE RATES

	Am Indian Alask Native	1	2.0	.	2.00	2.00
	Black	4	4.5	0.5	4.00	5.00
	Hispanic	8	3.8	0.8	3.00	5.00
	Caucasian	36	3.9	0.8	2.00	5.00
	Total	53	3.9	0.8	2.00	5.00
Seek out projects that are exciting or rewarding	Multiple ethnicity / Other (please specify)	4	3.7	0.9	3.00	5.00
	Am Indian Alask Native	1	1.0	.	1.00	1.00
	Black	4	4.0	1.4	2.00	5.00
	Hispanic	8	4.1	0.9	2.00	5.00
	Caucasian	36	3.7	0.8	2.00	5.00
	Total	53	3.7	0.9	1.00	5.00
Remain open to not knowing	Multiple ethnicity / Other (please specify)	4	3.7	0.9	3.00	5.00
	Am Indian Alask Native	1	2.0	.	2.00	2.00
	Black	4	3.0	1.8	1.00	5.00
	Hispanic	7	3.2	1.2	1.00	5.00
	Caucasian	36	3.6	1.1	1.00	5.00
	Total	52	3.5	1.1	1.00	5.00
Eat healthy	Multiple ethnicity / Other (please specify)	4	3.5	1.0	3.00	5.00
	Am Indian Alask Native	1	4.0	.	4.00	4.00
	Black	4	4.2	0.9	3.00	5.00

SELF-CARE RATES

	Hispanic	8	3.2	1.3	1.00	5.00
	Caucasian	36	3.5	0.9	2.00	5.00
	Total	53	3.5	0.9	1.00	5.00
Exercise	Multiple ethnicity / Other (please specify)	4	3.7	0.9	3.00	5.00
	Am Indian Alask Native	1	4.0	.	4.00	4.00
	Black	4	3.7	0.5	3.00	4.00
	Hispanic	8	2.8	1.2	1.00	5.00
	Caucasian	36	3.4	1.1	1.00	5.00
	Total	53	3.4	1.1	1.00	5.00
Receive medical care	Multiple ethnicity / Other (please specify)	4	2.7	0.5	2.00	3.00
	Am Indian Alask Native	1	3.0	.	3.00	3.00
	Black	4	3.7	0.5	3.00	4.00
	Hispanic	8	3.2	1.3	1.00	5.00
	Caucasian	36	3.3	0.9	1.00	5.00
	Total	53	3.3	0.9	1.00	5.00
Spend time in nature	Multiple ethnicity / Other (please specify)	4	3.7	0.9	3.00	5.00
	Am Indian Alask Native	1	1.0	.	1.00	1.00
	Black	4	4.0	0.8	3.00	5.00
	Hispanic	8	3.1	1.2	1.00	5.00
	Caucasian	36	3.4	0.9	2.00	5.00
	Total	53	3.3	1.0	1.00	5.00

SELF-CARE RATES

Take vacations	Multiple ethnicity / Other (please specify)	4	2.2	1.2	1.00	4.00
	Am Indian Alask Native	1	1.0	.	1.00	1.00
	Black	4	3.5	1.2	2.00	5.00
	Hispanic	8	2.7	1.0	1.00	4.00
	Caucasian	36	2.6	1.0	1.00	5.00
	Total	53	2.6	1.1	1.00	5.00
Take time off	Multiple ethnicity / Other (please specify)	4	2.7	0.9	2.00	4.00
	Am Indian Alask Native	1	1.0	.	1.00	1.00
	Black	4	3.5	1.2	2.00	5.00
	Hispanic	8	2.6	0.9	1.00	4.00
	Caucasian	36	3.0	1.0	1.00	5.00
	Total	53	2.9	1.0	1.00	5.00
Pray/Meditate	Multiple ethnicity / Other (please specify)	4	3.0	1.4	2.00	5.00
	Am Indian Alask Native	1	3.0000	.	3.00	3.00
	Black	4	3.7	1.5	2.00	5.00
	Hispanic	8	3.2	1.2	1.00	5.00
	Caucasian	36	3.7	1.1	1.00	5.00
	Total	53	3.6	1.1	1.00	5.00
Connect with spirituality	Multiple ethnicity / Other (please specify)	4	3.5	1.2	2.00	5.00

	Am Indian Alask Native	1	3.0	.	3.00	3.00
	Black	4	3.7	1.5	2.00	5.00
	Hispanic	8	4.0	1.0	2.00	5.00
	Caucasian	36	3.7	1.2	1.00	5.00
	Total	53	3.7	1.1	1.00	5.00
Contribute to causes	Multiple ethnicity / Other (please specify)	4	3.5	1.0	3.00	5.00
	Am Indian Alask Native	1	3.0	.	3.00	3.00
	Black	4	3.7	0.5	3.00	4.00
	Hispanic	8	2.7	1.4	1.00	5.00
	Caucasian	36	3.3	1.0	1.00	5.00
	Total	53	3.3	1.0	1.00	5.00
Engage in advocacy	Multiple ethnicity / Other (please specify)	4	3.0	1.4	2.00	5.00
	Am Indian Alask Native	1	1.0	.	1.00	1.00
	Black	4	4.0	0.0	4.00	4.00
	Hispanic	7	2.8	1.6	1.00	5.00
	Caucasian	36	3.1	1.1	1.00	5.00
	Total	52	3.1	1.2	1.00	5.00

SELF-CARE RATES

Appendix D

Age and Self-Care Participation Rates

		N	M	SD	Min	Max
Spend time with others you enjoy	Under 20 years of age	3	4.0	1.0	3.00	5.00
	20 years to 29 years	12	3.7	0.7	2.00	5.00
	30 years to 39 years	17	4.0	0.7	3.00	5.00
	40 years to 49 years	11	3.3	0.8	2.00	4.00
	50 years to 59 years	9	3.5	1.0	2.00	5.00
	60 years or older	1	3.0	.	3.00	3.00
	Total	53	3.7	0.8	2.00	5.00
Maintain deep interpersonal relationships	Under 20 years of age	3	3.6	0.5	3.00	4.00
	20 years to 29 years	12	3.7	1.0	2.00	5.00
	30 years to 39 years	17	4.4	0.6	3.00	5.00
	40 years to 49 years	11	3.5	0.5	3.00	4.00
	50 years to 59 years	9	3.7	1.2	1.00	5.00
	60 years or older	1	1.0	.	1.00	1.00
	Total	53	3.8	0.9	1.00	5.00

SELF-CARE RATES

Stay in contact with important people	Under 20 years of age	3	4.3	0.5	4.00	5.00
	20 years to 29 years	12	4.0	0.9	2.00	5.00
	30 years to 39 years	17	4.5882	0.50	4.00	5.00
	40 years to 49 years	11	4.3	0.9	3.00	5.00
	50 years to 59 years	9	4.1	1.0	2.00	5.00
	60 years or older	1	4.0	.	4.00	4.00
	Total	53	4.3	0.8	2.00	5.00
Seek out comforting activities	Under 20 years of age	3	4.3	1.1	3.00	5.00
	20 years to 29 years	12	4.2	0.6	3.00	5.00
	30 years to 39 years	17	4.1	0.6	3.00	5.00
	40 years to 49 years	11	3.6	0.9	2.00	5.00
	50 years to 59 years	9	3.7	1.2	1.00	5.00
	60 years or older	1	1.0	.	1.00	1.00
	Total	53	3.9	0.9	1.00	5.00
Take time to chat with peers	Under 20 years of age	3	3.6	2.3	1.00	5.00
	20 years to 29 years	12	3.5	0.9	2.00	5.00

SELF-CARE RATES

	30 years to 39 years	17	3.5	0.7	2.00	5.00
	40 years to 49 years	11	3.5	1.0	2.00	5.00
	50 years to 59 years	9	3.4	1.0	1.00	4.00
	60 years or older	1	3.0	.	3.00	3.00
	Total	53	3.5	0.9	1.00	5.00
Allow yourself to laugh	Under 20 years of age	3	4.3	1.1	3.00	5.00
	20 years to 29 years	12	4.4	0.6	3.00	5.00
	30 years to 39 years	17	4.5	0.6	3.00	5.00
	40 years to 49 years	11	4.0	0.7	3.00	5.00
	50 years to 59 years	9	4.2	0.9	2.00	5.00
	60 years or older	1	5.0	.	5.00	5.00
	Total	53	4.3	0.7	2.00	5.00
Take quiet time to complete tasks	Under 20 years of age	3	3.6	1.1	3.00	5.00
	20 years to 29 years	12	3.6	0.7	2.00	5.00
	30 years to 39 years	17	4.1	0.7	3.00	5.00
	40 years to 49 years	11	3.8	0.7	2.00	5.00

	50 years to 59 years	9	4.3	1.0	2.00	5.00
	60 years or older	1	5.0	.	5.00	5.00
	Total	53	3.9	0.8	2.00	5.00
Seek out projects that are exciting or rewarding	Under 20 years of age	3	3.3	1	2.00	4.00
	20 years to 29 years	12	3.7	1.0	2.00	5.00
	30 years to 39 years	17	3.9	0.8	3.00	5.00
	40 years to 49 years	11	3.5	0.5	3.00	4.00
	50 years to 59 years	9	3.6	1.4	1.00	5.00
	60 years or older	1	5.0	.	5.00	5.00
	Total	53	3.7	0.9	1.00	5.00
Remain open to not knowing	Under 20 years of age	2	3.5	0.7	3.00	4.00
	20 years to 29 years	12	2.9	1.2	1.00	4.00
	30 years to 39 years	17	4.0	1.0	2.00	5.00
	40 years to 49 years	11	3.7	0.9	2.00	5.00
	50 years to 59 years	9	3.4	1.5	1.00	5.00
	60 years or older	1	3.0	.	3.00	3.00

SELF-CARE RATES

	Total	52	3.5	1.1	1.00	5.00
Eat healthy	Under 20 years of age	3	3.0	2.0	1.00	5.00
	20 years to 29 years	12	3.2	0.9	2.00	5.00
	30 years to 39 years	17	3.7	0.9	2.00	5.00
	40 years to 49 years	11	3.1	0.7	2.00	4.00
	50 years to 59 years	9	4.1	0.7	3.00	5.00
	60 years or older	1	5.0	.	5.00	5.00
	Total	53	3.5	0.9	1.00	5.00
Exercise	Under 20 years of age	3	2.3	1.1	1.00	3.00
	20 years to 29 years	12	3.0	1.3	1.00	5.00
	30 years to 39 years	17	3.5	1.1	2.00	5.00
	40 years to 49 years	11	3.3	0.9	1.00	4.00
	50 years to 59 years	9	4.0	0.7	3.00	5.00
	60 years or older	1	5.0	.	5.00	5.00
	Total	53	3.4	1.1	1.00	5.00
Receive medical care	Under 20 years of age	3	3.0	2.0	1.00	5.00

SELF-CARE RATES

	20 years to 29 years	12	3.0	1.0	1.00	5.00
	30 years to 39 years	17	3.4	0.9	2.00	5.00
	40 years to 49 years	11	3.1	0.7	2.00	4.00
	50 years to 59 years	9	3.4	0.8	2.00	5.00
	60 years or older	1	5.0	.	5.00	5.00
	Total	53	3.3	0.9	1.00	5.00
Spend time in nature	Under 20 years of age	3	2.6	1.5	1.00	4.00
	20 years to 29 years	12	3.2	0.8	2.00	5.00
	30 years to 39 years	17	3.7	0.9	2.00	5.00
	40 years to 49 years	11	3.0	0.7	2.00	4.00
	50 years to 59 years	9	3.4	1.1	1.00	5.00
	60 years or older	1	5.0	.	5.00	5.00
	Total	53	3.3	1.0	1.00	5.00
Take vacations	Under 20 years of age	3	2.0	1.0	1.00	3.00
	20 years to 29 years	12	2.1	0.9	1.00	4.00
	30 years to 39 years	17	3.0	1.1	1.00	5.00

SELF-CARE RATES

	40 years to 49 years	11	2.7	1.1	1.00	5.00
	50 years to 59 years	9	2.8	1.1	1.00	5.00
	60 years or older	1	3.0	.	3.00	3.00
	Total	53	2.6	1.1	1.00	5.00
Take time off	Under 20 years of age	3	2.0	1.0	1.00	3.00
	20 years to 29 years	12	2.9	0.9	1.00	4.00
	30 years to 39 years	17	3.1	1.2	1.00	5.00
	40 years to 49 years	11	2.7	1.1	1.00	5.00
	50 years to 59 years	9	3.0	1.1	1.00	5.00
	60 years or older	1	4.0	.	4.00	4.00
	Total	53	2.9	1.0	1.00	5.00
Pray/Meditate	Under 20 years of age	3	2.3	1.5	1.00	4.00
	20 years to 29 years	12	3.3	0.8	2.00	5.00
	30 years to 39 years	17	3.8	1.3	1.00	5.00
	40 years to 49 years	11	3.4	1.2	2.00	5.00
	50 years to 59 years	9	4.1	0.9	3.00	5.00

SELF-CARE RATES

	60 years or older	1	5.0	.	5.00	5.00
	Total	53	3.6	1.1	1.00	5.00
Connect with spirituality	Under 20 years of age	3	3.0	1.0	2.00	4.00
	20 years to 29 years	12	3.5	1.3	1.00	5.00
	30 years to 39 years	17	4.0	1.1	1.00	5.00
	40 years to 49 years	11	3.4	1.2	2.00	5.00
	50 years to 59 years	9	4.1	0.9	3.00	5.00
	60 years or older	1	5.0	.	5.00	5.00
	Total	53	3.7	1.1	1.00	5.00
Contribute to causes	Under 20 years of age	3	1.6	0.5	1.00	2.00
	20 years to 29 years	12	2.8	1.3	1.00	5.00
	30 years to 39 years	17	3.6	1.1	1.00	5.00
	40 years to 49 years	11	3.3	0.5	3.00	4.00
	50 years to 59 years	9	3.7	0.4	3.00	4.00
	60 years or older	1	3.0	.	3.00	3.00
	Total	53	3.3	1.0	1.00	5.00

SELF-CARE RATES

Engage in advocacy	Under 20 years of age	2	1.5	0.7	1.00	2.00
	20 years to 29 years	12	2.7	1.2	1.00	5.00
	30 years to 39 years	17	3.5	1.1	2.00	5.00
	40 years to 49 years	11	3.1	0.9	2.00	5.00
	50 years to 59 years	9	3.4	1.0	1.00	4.00
	60 years or older	1	1.0	.	1.00	1.00
	Total	52	3.1	1.2	1.00	5.00