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Early Onset of Social Work Burnout

Dayse L.M. Koski
University of St. Thomas, Minnesota

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Early Onset of Social Work Burnout

by

Dayse, L.M. Koski, B.S.

MSW Clinical Research Paper

Presented to the Faculty of the
School of Social Work
St. Catherine University and the University of St. Thomas
St. Paul, Minnesota
in Partial fulfillment of the Requirements for the Degree of

Master of Social Work

Committee Members
Richa Dhanju, Ph.D., (Chair)
George Baboila, LICSW, MSW
Melissa Maaske, BSW

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

The issue of social worker burnout impacts the growth and sustainability of the social work industry. The purpose of this project was to determine if there is a connection between the amount of time as a social worker and level of burnout. Mailing addresses for 150 Minnesota social workers were randomly selected and mailed a survey. The survey included the Burnout Measurement Short (BMS) questionnaire, an established self-administered burnout assessment tool, and other pertinent burnout related questions. Data from 43 completed surveys were entered into a spreadsheet. The data was organized and analyzed using Minitab to perform ANOVA calculations. The project’s findings demonstrated that no correlation was found between the length of time as a social worker and amount of burnout. Other factors such as employer and client type appeared to have correlations. The project also introduced the topic of identifying the number of social workers who left the profession due to burnout. Initial results suggest that social workers who personally knew multiple former social workers who left the profession due to burnout are themselves more burned out. These findings suggest that all social workers, regardless of the number of years of experience, should receive anti-burnout support and resources. Additional research should be conducted to accurately determine the extreme cases of burnout among social workers that result in quitting the profession.
Acknowledgements

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## Introduction
As the social work profession has grown in both size and place in the care continuum, concerns have also grown regarding the health of the workforce. Maintaining a healthy workforce, that can keep pace with industry demands, is essential for the survival of any profession. For those whose industries are in demand, high attrition rates are of great importance. At a core level, social workers respond to human needs on an individual basis and are the connectors between consumers and service-providing organizations. The emotional, spiritual, and physical demands of social workers are well known and undisputed. The presence of burnout and its byproducts of reduced morale, negative health impacts and attrition have not gone unnoticed. Researchers have examined social work burnout from multiple vantage points, usually with the intent of reducing burnout through preventive strategies.

While the phenomenon of “burnout” is grounded in psychology, its modern day application and approach has expanded into broader social relevance. Viewed through an occupational health lens, burnout is associated with professions that require high contact and involvement with human consumers. Burnout research in the medical field initially focused on physician and nursing professions; the increased role of social workers has resulted in shift towards studying the causes and repercussions of burnout in the social work industry. The interest in the topic of social work burnout is supported by the depth and breadth of research, as well as the source of burnout measurement scales which are applied to other industries. Researchers have looked at social work job types, personality traits, and organizational types to better understand this paradox. Theoretical approaches have also been applied to the topic of burnout, often expanding on the theory of cognitive dissonance to include emotional stress which often stems from professional dissonance, created by competing ethical issues.
This research project was designed to identify if social workers who are in the first five years of their licensure experience professional burnout. The project was also designed to take steps towards identifying the number of social workers who might have left the profession as a result of burnout. While some research has looked at levels of burnout in social work students (Han, Lee & Lee, 2012) very little if any research has looked at the levels of burnout present based on where the professionals are in their career. Understanding when burnout appears in the lifespan of a social worker helps reframe this topic. Determining that social work burnout is present early in a career, as opposed to later on in a career, may require different preventive strategies. Secondly, burnout studies have focused primarily on active social work populations. One aspect of social work burnout that has not received the full attention of researchers is a reconfiguring of the pool of social workers who have been impacted by burnout to the extent that they leave the profession. To completely understand the entire population of professionals impacted by burnout may require the expansion of the impacted pool to include those who have left the industry primarily due to job burnout. While this recalculation of the impacted pool is easy to conceptualize, the steps and efforts required to identify and reach this subsection is challenging.

This research study looks at the following whether or not burnout is present in social workers who are in the beginning phase of their professional career, years 0-5. A related sub topic was to identify and quantify social workers who left the industry due to burnout regardless of years of experience. Since this specific subset does not exist on a mailing list or belong to an organization, the data collection tool used asked respondents to identify other social workers who have left the industry due to burnout. While the pursuit of this sub-question does not stand up to
scientific standards or review, information collected on this topic may serve as a spark for future research efforts.

A paper survey was mailed to a simple random sample of licensed Minnesota social workers; half of the invited respondents fall into the 0-5 year experience range, based on when they received their license. The other half are more experienced social workers. The Burnout Measurement Short form (BMS) was used to identify if the respondents had experienced burnout. The results were analyzed using their current professional career phase as a dependent variable. To begin identifying the historically excluded sub-sets of former social workers who experienced burnout, respondents were asked to identify former co-workers or colleagues who they determine have left the profession due to burnout.

**Literature Review**

Professional and job-related burnout is a significant issue across industries and is especially prevalent in the human service field. Professional burnout or simply, burnout is a widely accepted psychological term. While grounded or originating from the psychology field, the term "burnout" transcends clinical discussions and has found a permanent place in popular culture and vernacular. The interest in burnout exceeds most normal psychological phenomena; research studies are commissioned, self-help books spend chapters detailing burnout warning signs, and trade magazines use article titles like, “Job burnout can be infectious” (Aendt, 2007). It is interesting to note that despite its widespread acceptance and interest to medical researchers, the Association of Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders (DSM) does not recognize burnout as a disorder. While this paper does not propose
burnout becomes an official disorder, the lack of an official diagnosis for burnout is reflective of how dynamic, complicated and challenging this topic is for clinicians and researchers alike.

Research and popular opinion both confirm that professionals working in the human service industry experience a disproportionately high level of burnout. The effects of burnout are felt across all levels. At the macro-level, professions like social work are commonly associated with terms such as “low pay”, “stress” and “thankless”. Even social work professional organizations themselves admit these terms reflect the realities of the profession (NASW, 2004). Logically these professional self-truths can be viewed as reasons, causes, or connections to burnout. This negative association or reality to the social work industry results in fewer social work candidates, low employee retention, and professional stigma (Burns, 2011). The effects of burnout at the hospital, agency or organizational level (mezzo) include costs of rehiring and retraining more frequently and the spread of negative attitude or behavior among staff. On the micro level, burnout manifests itself in the form of depression, fatigue, stress, and overall poor health (Glass & McKnight, 1996). Furthermore, when job burnout results in social workers being suspended or changing careers, the individual loses resources, time and money they dedicated to training and education.

This clinical research project looked at when in a social worker’s career, the worker begins experiencing burnout or displaying burnout symptoms. Additional collected data provided burnout rates and time of burnout by sub-sets of social workers based on type of employer and type of consumer. The research also looked at causes or sources of burnout and if there are any strong correlations between these various sources and the identified sample subsets. Information found during the review of peer reviewed articles, scientific research, theoretical work and anecdotal data provided assumptions and theories on social work burnout. This
research exercise was designed with previous research in mind, while it also looked to contribute to the overall effort by identifying when in the career of a social worker burnout symptoms may appear.

Coinciding with the growing ranks and roles of social workers in care-giving and human service teams, more research is being done on the frequency and effects of burnout in social workers. The topic of burnout in the social work industry includes research studies of all sizes and scopes, including theoretical work. Researchers have studied the phenomena of burnout in social workers around the world, using research techniques such as longitudinal studies, comparative research, and anecdotal methods. Some of the more revealing research on this topic centers on what types of social work positions are more susceptible to burnout, linking the type of consumers to burnout, and the impact of budget cuts and how changes in the work environment have impacted burnout rates.

**Defining Burnout**

While the phrase “burnout” most likely was created by novelist Graham Greene in his book *A Burnt-Out Case*, the first figure to label or identify the phenomena was psychotherapist Herbert Freudenberger (Daley, 1979). Freudenberger took interest in psychodynamic changes he observed among field clinical workers in California facilities (Senior, 2006). Freudenberger’s concept and identification of burnout stages were introduced in his book, *Burnout: The High Cost of High Achievement* (1980). The title of the book reflects an outdated side of burnout, contending that burnout is a price or cost to be paid for giving extra effort. Columnist Jennifer Senior draws a connection to a cultural attitude of the time, “Back in the seventies, when people marched into the world with convictions about changing it, burnout was considered a noble affliction. It meant that you’d depleted yourself while helping others” (2006).
A decade later, the leading researcher on the issue of burnout, Christina Maslach, published her book *Burnout: The Cost of Caring*. In this book Maslach introduces a definition that is more familiar to current discussion and research on burnout. This change in definition is also reflected in the title whereby the individual is not left with burnout because they achieved too much, but because they cared. Maslach defines burnout as “a syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment that can occur among individuals who do ‘people-work’ of some kind (2003, p 3). Maslach advanced her theory and redefined burnout from her expansive field research, exploring the burnout syndrome among multiple professions: police officers, physicians, mental health staff, and public contact employees (Maslach, 1982, p 8). A review of *Burnout: The Cost of Caring*’s table of contents and index demonstrates how familiar and similar Maslach’s initial descriptions of burnout were twenty years ago (1982, pp. v, 186-191). While other researchers since have proposed slight variations or modifications on the “syndrome’s” definition (Pines and Aronson, 1988), and others have explored the actual process of becoming burned out (Boss, 2012), Maslach’s ground-breaking work has largely remained unchanged.

**Burnout Measurement Tools**

Evidence of Maslach’s status as the leading burnout researcher is the tool she developed for measuring burnout in individuals. The Maslach Burnout Inventory (MBI) was developed in advance of her landmark book, “As I continued to study burnout, my research began to involve more systematic tests of these initial ideas” (Maslach, 1982, p. 8). Along with fellow researcher Susan Jackson, a standardized scale measure was developed. The MBI “measures the three aspects of the burnout syndrome – emotional exhaustion, depersonalization, and reduced personal accomplishment” (Maslach, 1982, p 8). There are variations of MBI, all developed
wholly or in part by Maslach. The original MBI is currently known as the MBI-Human Services Study (HSS) and designed for the healthcare and humans service fields (Maslach, 2008). Following versions, the MBU-Educators Survey (ES) and MBI-General Survey (GS) tailored the survey to the education and general employment fields respectfully (Maslach, 2008).

While Maslach’s definition and explanation of burnout may have remained unchanged, there have been many measurement alternatives developed to MBI. Researchers Pines and Aronson developed a commonly used measurement tool in the late 1980s, the Burnout Measure (BM). The BM is a self-report measurement tool consisting of 21 items rated on a 7-point frequency scale. The BM “assess levels of physical, emotional, and mental exhaustion, with a score of 4 indicating ‘burnout’” (Pines & Aronson, 1988, p 65). Variations of the BM measurement tool include the BMS which is a shortened version (Pines, 2005). The BMS is a 10 item short version of the original and “was developed in response to the need of both researchers and practitioners for an easy-to-use scale that requires little space on a questionnaire and little time for administration and analysis” (Pines, 2005).

The 10 questions or items of the BMS tool were selected strategically from the original instrument; the items carried over from the BM represent the three original measurement levels (Pines, 2005). Researcher and co-developers of both the BM and BMS studied the reliability of the BMS tool. In his article The Burnout Measure, Short Version, Pines found that “the BMS is a valid and reliable measure of burnout” (2005). For the same reasons Pines developed the short version of his measurement tool, ease of administration and analysis, this research project used the BMS measurement tool.

**Burnout in the Social Work Profession**
While burnout is linked with “people work” and specifically the healthcare field, the core question of the actual rate or frequency of burnout in the field of social work exists. Just as burnout is considered to be a threat to individual health and wellbeing, yet is not officially considered a disorder or illness, the same paradox exists when trying to determine actual numbers of burnout victims. Logically it is difficult to identify many burnout “casualties” because they have already left the field. Anecdotal evidence leads us to associate the social work profession with low salaries, stressful jobs, and permanent places on lists like “most depressing careers” (Guiditto, 2012), but what are the real numbers?

A benchmark research study conducted by the National Association of Social Workers (NASW) studied social workers on a national level in 2004. A 10,000 stratified random sampling of frontline social workers produced data helpful in understanding burnout levels present in the industry. Somewhat surprisingly, full blown "burnout" which resulted in planning to quit or leave the profession was relatively low. However the study demonstrated that levels or indicators of burnout are rising across the social work profession at an alarming rate (NASW, 2006). In responding to the survey question about their “career plans in the next two years”, 4.7% of the respondents replied that they “will leave social work, but continue working” (NASW, 2006, p.30). Those responding that they plan to leave social work but continue working, were most likely to be between the ages of 35 and 44. While five percent is not an alarming number, one should remember that leaving the social work field completely may be the final manifestation of burnout. Further analysis of the research reveals interesting observations that point to indications of burnout. Approximately 10% replied they would decrease their work hours voluntarily. The group that had the highest rate of response to this question was the 26-34 age group (NASW, 2006, table 4). When surveyed if they plan on pursuing an additional social work degree or
pursue a non-social work degree, only the two youngest age groups, 25 years and younger and 26-34 years, reported that they would pursue an additional social work degree. All age groups 35 years and older expressed a greater interest in pursuing a non-social work degree. Casual analysis of the survey results suggest that many social workers still in the “prime” of their professional career make career plans which reflect less interest in the job.

**Burnout in Social Workers: Job type, employer type, personality**

Burnout is a significant issue in the social work field, demonstrated by the diversity of research studies and sub-topics. Researchers Koeske, Lichtenwalter and Koeske examined the professional involvement desires of 214 social workers. The researchers surveyed social workers current involvement and desired involvement. Their research found that social workers who had big differences between the job involvement they currently have and the job involvement they wanted were, “associated with lower job satisfaction and social work identify and higher burnout and intention to quit” (2005). Furthermore, Koeske et al, found that those with these high differences primarily worked with the poor but wanted less actual involvement.

The researchers linked this professional conflict with “a response pattern suggestive of demoralized agency workers aspiring to private practice with voluntary clients” (Koeske, 2005). The researchers found private practice and administrative social workers had significantly lower differences between job “have” and job “want”, signaling higher rates of professional satisfaction. Conversely, “intention to quit was higher for those who reported they were doing more direct practice and work with the disadvantaged than desired” (Koeske, 2005).

Along a similar vein, researcher Margaret Carpenter looked at different social work job types and varying levels of job satisfaction. Supportive of prior research, Carpenter found a difference in levels of job satisfaction among social work professions. “Private practitioners
reported a significantly higher level of reward than respondents in public and private agencies” (Carpenter, 1999). Interestingly, the study also found decision authority, flexibility, and impact the most rewarding elements of the profession. Supporting Carpenter’s findings, fellow researchers Dyer and Quine found direct care staff in community based practice reported higher levels of stress and burnout (1998).

Researcher Diane Zosky explored the correlation between burnout and the different personality types (2010). Zosky looked at the Myers-Briggs Type Indicators of Cognitive and Emotional to determine if burnout rates differed. The research concluded that “There was no statistical difference found on burnout scores based on personality types” (Zosky, 2010). The related yet tangential nature of these studies demonstrates the dynamic approaches researchers have taken in studying burnout.

**Impact of Changes in the Work Environment**

Economic insecurity has affected countries, communities, and people in the United States and across the globe for over a decade. This insecurity has resulted in difficult decisions made everywhere from individuals and families to the national level. Government funds and philanthropic funding are, as a norm, capped or reduced to counter-react to a changing economic environment. While means are limited during this period, the consumer demand for social service and assistance by definition grows. This paradoxical relationship results in increased case-loads, low staffing levels, and limited resources. These logical assumptions are supported by the 2004 NASW survey. This national survey found that in the previous two years, (2003 and 2004) social workers experienced “increases in paperwork, severity of client problems, caseload size, and waiting list for services” (NASW, 2005). And as expected, the survey found social workers experiencing decreased staffing levels and support (NASW, 2005).
A study in England, commissioned by the British Association of Social Workers (BASW), found high levels of concern among professionals regarding the size of caseloads. The report cites that “81% expressed concern at unmanageable caseloads - 56% said they are very concerned” (BASW, 2012). The large caseload sizes and reduction of resources contributed to a very public national tragedy, the death of Baby P. This death of an English toddler, who slipped through various social safety nets, momentarily captured the public’s attention on the issue of declining financial support and growing demand in the social work field (Guardian, 2008). In 2012 the BASW revised its Code of Ethics, “as evidence emerges that frontline workers are being put under pressure to turn a blind eye to unethical practice” (BASW, 2012). BASW’s chief executive Hilton Dawson commented on the updates stating, “We are concerned that government cuts and local authority implementation of this resource rationing is making it impossible for social workers to practice to the standards rightly expected of them by BASW’s Code of Ethics” (BASW, 2012).

The reaction to the reduction of support for social work and services is similar in the United States. In her 2005 article “The Largely Untold Story of Welfare Reform and Human Services”, researcher Mimi Abramovitz interviewed senior staff at 107 non-profit social service agencies in New York. The study set out to find how nonprofit agencies reacted to welfare reform, and how this impact translated to service delivery, their clients, and their jobs (Abramovitz, 2005). Abramovitz found that “Staff concerns about ethical issues increased at 49.5 percent of the agencies” (182, 2005). Additional findings include, “One-third of the agencies experience increased staff turnover” (Abramovitz, 179, 2005), and reflect the feared but accepted belief that the difficult job of a social worker is being made more difficult. These additional barriers to providing services often tax and challenge the social worker’s ethics, “A
senior social worker serving the homeless divulged: ‘Oh, man, my ethics have gone down trying to serve’” (Abramovitz, 177, 2005). These two studies demonstrate that reduced support and resources do not only result in diminished services but raise the likelihood of burnout.

**Theoretical Explanations to Burnout**

The “syndrome” or phenomena of burnout is frequently linked to Cognitive Dissonance Theory (Loewenberg, 2000, p 239). Considered the foremost leader of Cognitive Dissonance, Leon Festinger theorized three types of cognitive relationships: irrelevance, consonance, and dissonance. A dissonance, or conflict, between two cognitions (thoughts) creates confusion and anxiety in the individual. “Dissonant cognitions result in discomfort accompanied by a desire to make the cognitions more consonant, and thereby alleviate the discomfort” (Taylor, 2007). A pertinent example may be the two cognitions of, “I respect my co-worker professionally” and “My co-worker did not act in their clients’ best interest”. These two conflicting thoughts create stress in the individual and as a response, create a rationale to explain the conflicting thoughts, “She/he did it because she was forced to”. According to Professional Dissonance and Existential Theories, these rationalizations will eventually lead to a form of guilt, powerlessness, and poor professional self-identity (Taylor, 2007).

Advancing on Festinger’s work, researcher Howard Gerard’s studies demonstrated that when the individual believes they have the ability and power of choice, they will view the decision in a favorable light. Conversely, Gerard’s research showed that when an individual does not feel that they have the ability to choose, they will view the decision unfavorably (Gerard, 1964). Gerard’s research findings support the belief that social workers who lose an active voice in treatment or service decisions are susceptible to low professional identity concepts. Furthermore, social workers who do not have the perceived ability of choice and are pressured
by job tasks to make decisions against their professional ethics, will experience a higher rate of professional dissonance. In making these or being directed to make these “bad faith” choices, the social worker will experience the dissonance effect through justifying or blaming their actions on other factors. When the social worker “goes along” with a “bad faith” decision, the individual “will, in the short term, result in feeling safer, but in the long term lead to the more malignant state of ‘ontological guilt’” (Taylor, 2007).

Researcher Melissa Taylor noted that mental health social workers are continuously presented with intervention options and choices. The choices made often represent the social worker’s ethical values and personal beliefs (2007). Social workers look towards a professional code of ethics, supervisory guidance and experience for guidance on moral dilemmas and conflicting values. With the rise in caseloads, decreased or flat funding, and an increased emphasis on reimbursable services, outside influences and pressures are making these issues more ethically challenging for social workers. Based in cognitive dissonance and existential theory, Melissa Taylor’s theory of Professional Dissonance provides a compelling explanation for the theoretical source of social worker burnout. According to the theory’s author, Professional Dissonance is “defined as a feeling of discomfort arising from the conflict between professional values and job tasks” (2007). While one could assume that Professional Dissonance is a part of and has always been part of the job for social service professionals, trends in social work funding and administration point to an ever changing and challenging “job tasks”.

Borrowing the concept of “bad faith” actions from Existential theory, Taylor summarizes that bad faith actions are decisions made against one’s own beliefs or ethics. In contrast with bad faith actions are authentic responses which represent the individual’s true belief. “Individuals who continually choose bad faith actions over authentic responses stop progressing as
“becoming” human beings. They may also stop taking responsibility for their choices… they may blame their choices on society, on a difficult family, or even on the consumers themselves” (Taylor, 2007). Taylor theorizes that the discomfort a social worker experiences when they make “bad faith” decisions as opposed to “authentic” ones lead to unhealthy feelings of guilt and remorse. Taylor continues, “Series of bad faith actions result in heavy ontological guild which envelopes the individual in shame and regret” (2007). A recent study applied this theory by looking at the link between burnout and the development of professional values. The researchers determined that there was a relationship between burnout and the development of professional values (Edwards & Dirette, 2010).

Overall, a review of the burnout literature uncovers this as a recent “psychological syndrome” that has crossed over into popular culture and conversation. Anecdotal, historical, and theoretical viewpoints reveal a strong connection between the social work profession and burnout. As a social work research area, burnout is also significant because it is an occupational health topic. Burnout is a real threat to the growth and health of the social work profession. The reflective nature of this topic has resulted in a wide and deep collection of previous research. This research project was designed to build upon previous findings and contribute new perspectives and ideas.

This clinical research project sought to determine if social workers experience burnout during the initial years of their professional experience. Additional collected data provided burnout rates and time of burnout by sub-sets of social workers based on type of employer and type of consumer. This research exercise was designed with previous research work in mind while it also looked to contribute to the overall effort by identifying when in the career of a social worker do burnout symptoms appear.
The project addressed the topic of social work burnout casualties. Very little research, if any, was conducted with the intent of quantifying individuals who have left the social work industry due to burnout. One could make the case that understanding the size of this group, and their various elements, may be an extremely important sub-set that has not been fully explored. The data collected from this group provided valuable information to researchers and the study of professional burnout. While the logistics and resources required to properly identify this sub-set are beyond this research exercise, the survey asked to identify colleagues, co-workers, and former social worker classmates who would fall into this subset.

**Conceptual Framework**

Demonstrated by the breadth of previous research studies, the idea of burnout has been viewed through multiple lenses. General systems theory is the basis of most of the research efforts referenced in this project. The interdisciplinary work of systems theory was advanced in the 1970s by theorist von Bertalanffy (Payne, 1997, p 137). General systems theory advances the idea that “all organisms are systems, composed of subsystems, and are in turn part of super-systems” (Payne, 1997, p 137). Applied in the social work framework, systems theory draws multiple connections between individuals, groups of individuals, and organizations; these connections are structural and hierarchical in nature. Each small system: consumer, agency, and social worker are connected and designed to work together as if part of a larger machine. In the dynamic movements of a social work machine, one or multiple connectors experience a change. This change, governmental funding reform, unemployment rises, or reduction of staff, often result in stressing many of the smaller parts of the overall system. Impacts of these changes often most directly affect the social worker. A systems theory approach would link social worker
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burnout with the presence of multiple stressors like staff reduction, rise in number of consumers, and consumers with greater overall needs.

Researches have used the systems theory to better understand burnout. As previously referenced, Koeske et. al (2005) looked at how different social work positions and job duties connected with employee satisfaction and burnout. Abramovitz (2005), used systems theory to explain how changes in governmental support of social work programs resulted in higher burnout levels at agencies, while Carpenter (1999), viewed the issue of burnout by looking at how types of agency structures contributed to burnout. All of these studies approached the concept of burnout with the systems theory in mind. The interaction and interrelationship between these various systems are where researchers are looking for the phenomena of burnout to take place.

Systems theory fits well with social work research and analysis. Author Malcolm Payne points out that the popularity of systems theory in social work is tied to the increased role of social workers (1997, p 140). The practice of social work is often delivered through government or government “type” structures. The concept fits “well with a profession and agency structure which is part of the state and has authority and power” (Payne, 1997, p 140). The consumer enters the “system” and is passed along various smaller and connected systems. The social worker is a sub-system itself and a part of many other systems impacted by daily changes in the overall system.

Systems theory was the grounding basis for this clinical research project. The primary focus of this research was to identify patterns or reveal information about burnout when accounting for professional “age”. Secondary objectives of the research project looked at
frequency of burnout when accounting for employer type. This research project allows for analysis between system-heavy employers such as the government or nonprofit employers against minimal system employers such as independent practitioners.

A weakness in viewing the issue of burnout through the lens of systems theory, or any other popular conceptual framework, is that it doesn’t allow for researchers to examine the full range of professional burnout victims. When the topic of burnout is approached as an occupational or professional problem researchers are limiting their sample size. Very few if any research studies examine the topic of social work burnout outside of active social workers and social work systems. Researching the issue of burnout through the lens of active social worker systems limits the sample size of the subjects.

This research exercise looked at the issue of burnout through professional age, and the frequency of burned out social workers in the beginning their career. Data collected with professional age in mind contributed to previous research studies and theoretical approaches. A truly effective research study on the topic of professional burnout should go beyond the current social worker who is burned out and wants to leave the profession. The social workers who are at high risk of burnout either get the support they need to reduce their burnout, continue their employment in their burnout state, or they capitulate to the burnout and actually quit the industry. It is this final group, the group of former social workers who experience the full effect of burnout, that is missing in this research. It is difficult to discuss the strengths and weaknesses of competing theoretical or conceptual theories of burnout without fully understanding this subset of former social workers.
Research Design and Methods

To examine the question of when in the social worker’s career they begin experiencing burnout, a quantitative research method was selected. As this literature review has demonstrated, social work researchers studying the issue of burnout have used both qualitative and quantitative methods. While both methods were considered, the nature of the question lends itself to approaching this topic through quantitative data collection. Another factor was the availability and easy replication of the survey instrument the Burnout Measurement – Short version, or BMS. The BMS is a 10 question self-report measurement of burnout and has been proven to accurately identify the presence of burnout as well as the original long form version (Malach-Pines, 2005). The source of the BMS is the Burnout Measure (BM) form, self-report measure of burnout. The BM includes 21 items measures on a seven point frequency scale (Malach-Pines, 2005).

Sample

The complete sample frame of this study was limited to all social workers licensed in Minnesota. The Minnesota Board of Social Work (Board) allows individuals or organizations to purchase mailing addresses of every licensed social worker in the state. While the Board accepts requests of mailing by zip code or type of license, it also can randomly select from the entire pool.

This research paper used a simple random sample of Minnesota licensed social workers, meaning that the Board randomly selected 150 mailing addresses of Minnesota licensed social workers. The use of a simple random sample means that every Minnesota social worker had an equal chance of participating in this survey. Since use of the Board’s mailing addresses is limited
to one time use, it was important that the initial sample size was large. There were a wide range of response rates for mailed surveys, from 10% to as high as 70% (Dillman, 2007). Starting from 150 eligible respondents allowed for a final sample size between 30 and 40 social workers. While the size of this sample did not allow this research project to be statistically significant or to draw conclusions about Minnesota social workers, it allowed this research paper to identify trends and characteristics about those practicing social work in the state.

Data Collection Instrument and Process

The data collection instrument used for this research paper was a paper survey mailed to a simple random sample of Minnesota licensed social workers. The survey included the ten standard question BMS instrument tool and additional questions. As identified in the literature review, the BMS is a self-reporting tool that identifies the burnout level of individuals. This 7-point frequency scale questionnaire “assesses the level of an individual’s physical, emotional, and mental exhaustion” (Malach-Pines, 2005, p78).

The mailed survey included two parts, Part A and Part B. Part A requested the respondent to identify their gender, age, and if they received their license within the past five years or more than ten years ago. Additionally, the respondent identified their employer by type from nine options including “other”. The respondents also were asked to identify the types of clients they served, choosing from a list of nine options including “other”. Lastly, Part A of the survey asked the respondents three yes or no questions: if they have considered quitting their job within the last months, if they have considered quitting the profession the last six months, and if they have known anyone who quit their social work job or profession due to burnout.
Respondents who indicated in the affirmative for the final question were asked to provide a number of individuals.

Part B of the survey contained the ten standard question BMS instrument tool and additional questions. As identified in the literature review the BMS is a self-reporting tool that identifies the burnout level of individuals. This 7-point frequency scale questionnaire, “assess[es] the level of an individual’s physical, emotional, and mental exhaustion” (Malach-Pines, 2005, p78).

The process in distributing the survey and collecting the data was broken into two parts. After receiving the mailing list of 150 licensed social workers, the survey was mailed out to the first 75 social workers listed. The mailing included a cover letter, the survey, a stamped return envelope addressed to the researcher at the committee’s chair work address, and a $1 dollar bill. The reasoning for including a $1 dollar bill in each mailing was to increase the response rate of the survey. A nominal incentive offered to compensate the recipient of a survey request is a proven method for increasing response rates. (Dillman, 2007).

The survey response rate was determined by a number of factors and strategies employed by the researcher. An effective cover letter explaining the benefit of the survey, personalizing the survey and cover letter, and sending follow up correspondence are all examples of ways to improve the response rate of surveys (Dillman, 2007). Unfortunately, most of these strategies were not possible. One time use of addresses, limited resources, and not having actual names of the social workers made it impossible to personalize.

Modern day surveying has changed with the use of electronic tools like email and web based surveys. Internet based surveys allow researchers to structure quantitative surveys that are
interactive and dynamic (Dillman, 2007). While the Board does collect email addresses for Minnesota social workers, this information is not required and is only collected sporadically (BOSW). Additionally, the reliability of emails addresses is low. People, not just social workers, frequently change their email addresses and often set up filters which label unknown electronic messages as junk and are ignored. Finally, while creating an electronic version of the survey would allow for multiple survey instruments to be used to collect data, creating this instrument and working with two data collection systems (electronic and paper) proved to be difficult to administer. To safeguard personal information of the researcher and to increase academic credibility, the stamped envelope used to mail the completed survey was addressed to this committee’s chair, Richa Dhanju, MSW, PhD, Assistant Professor at St. Catherine University.

**Protection of Human Subjects**

The method and design of this research paper minimized risks of harmful handling of subjects. Use of the Board’s comprehensive Minnesota pool of social workers not only solved the issue of a biased sample size, but assured confidentiality as well. The Board’s method for individuals to contact licensed social workers eliminated questions of confidentiality. The utilization of the Board’s database did not require the support of multiple agencies or institutions. The survey instrument did not ask for any personal or identifiable information. Another step used in data collection to ensure confidentiality was the stamped return envelope used to send completed surveys. It did not have a space for a return address.

The cover letter included in the mailing was deemed an appropriate way to communicate the risks and harms of participating in the research exercise. The cover letter identified that this research exercise was approved by the IRB and was designed to minimize any potential harm to
subjects. Data collected from the completed surveys was kept in a safe and secure location. Individual responses were entered into an Excel database and after the individual responses were reviewed for accuracy, they were shredded.

**Data Analysis Plan**

Upon collection of the data, various tools were used to ensure the findings were accurate. To determine the dependence of the two variables, length of time being a licensed social worker and presence of burnout, the Pearson’s correlation was used. To determine if there was a connection between length of time in the social work field and burnout rates, the data analysis incorporated the null hypothesis that no connection exists between length of service and presence of burnout. Additional analysis was conducted including calculating means, standard deviations, and modes of responses.

Additional analysis was completed to examine the number of respondents who replied that they had considered quitting their job or social work career due to burnout issues. Subsequent data analysis examined how many respondents were personally aware of other social workers who have quit their profession due to burnout. This anecdotal information did not provide scientifically verified results, but it did provide information that may produce or spark further discussion and future research exercises.

**Strengths and Limitations**

The design and methods used for this research paper had both strengths and limitations. Design strengths included the use of an established and peer-reviewed burnout assessment tool, BMS, and allowed for reliable data that can be compared to previous research findings.
Additionally, the simple random sampling method allowed for a non-biased respondent sample group and was easy to replicate.

The weakness of the research design and sample included the limited means to access a large percentage of the total sample frame. In terms of the total sample frame, additional resources would have allowed for follow up correspondence and other incentives to be used to increase response rates and enlarge the sample size. The larger the sample group the more reliable and accurate the collected data and analysis would have been.

Findings

The findings from this research project mostly confirmed prior research of burnout among social workers. Using Malach’s Burnout Measurement Short (BMS) tool, the data suggests that burnout affects social workers independent of the number of years of experience, so that there is no connection between years in the social work profession and rates of burnout. Additionally, social workers who are employed in the non-profit sector in addition to working with underserved populations had the highest average burnout scores. Some findings that conflict with prior research or conventional wisdom were the low BMS averages for government employees and high averages for private pay client services. Data collected on respondent’s knowledge of former social workers who left the field due to burnout provides interesting initial information on the issue.

Completed surveys were collected in early February. The data collection period ended on March 1st when a total of 43 completed surveys were collected. For the research project the survey response rate was 29%, this rate is lower than actual because a number of additional surveys were received after the data was collected and analyzed. The actual surveys contained no
identifying information. A small number of mailed envelopes included return addresses and these envelopes were discarded.

Of the entire respondent sample group of 43 social workers, 39 were female (91%) and 5 male (9%). The sample pool’s mean average age was 37 years old and the median was 38. In the two category groups by years of licensure; 17 (40%) received their license 5 years or less ago (Group A) and 26 (60%) received their license ten or more years ago (Group B). Data collected from the returned surveys were entered into an Excel spreadsheet and analyzed according the project’s data analysis plan. Analysis of the collected data included using simple Excel spreadsheet calculations and advanced statistic calculations using Minitab.

Based on collected data, the mean BMS score for all survey respondents was 3.0. A score of 4 or above indicates burnout (Malach, 2005). The null hypothesis for the research project was that there is no difference between length of social work experience and high frequency of burnout. When looking at the BMS scores for Group A, 0-5 years experience as a social worker, the mean BMS score was 2.9. The mean BMS score for Group B, a social worker with 5 plus years of experience, was 3.1. Using the statistical tool Minitab, an analysis of variance (ANOVA) was performed on the relationship between the mean BMS scores of both groups. The ANOVA test results supports the null hypothesis ($p = .55$) that there was no connection between burnout scores and amount of time as a social worker.

While statistical analysis proved that no difference existed in burnout levels between the two groups of social workers, survey information regarding consideration of quitting their job showed difference among the two groups, Table 1. Of the 43 respondents, 17 (40%) responded that they considered quitting their job within the last six months, while 26 (60%) did not. When
looking at responses based on experience, the group with fewer years experience, (Group A) was less likely to consider quitting than more experienced group (Group B).

<table>
<thead>
<tr>
<th>Table 1</th>
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</thead>
<tbody>
<tr>
<td><strong>Considered quitting job within last 6 months</strong></td>
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<tr>
<td>Group</td>
</tr>
<tr>
<td>Total (N = 43)</td>
</tr>
<tr>
<td>Group A (0-5 years)</td>
</tr>
<tr>
<td>Group B (10 plus years)</td>
</tr>
</tbody>
</table>

When asked if they considered quitting the profession within the last 6 months the respondents, as a whole, produced a more imbalanced result. Only 16% (7) of the respondents reported considered quitting the social work profession. When comparing the percentage of total respondents who considered quitting their job (40%) with the percentage who considered quitting the profession (16%), one can see that social workers mostly are dissatisfied with jobs as compared to the social work profession as a whole.

Demographic and professional information collected from the survey provided additional insight into potential connections between burnout and professional characteristics. Table 2 shows the mean BMS score for survey respondents based on type of employer. The three employer categories that had higher than average BMS scores were non-profit, schools, and nursing homes. The lowest average BMS respondent scores according to employer type were government, private practice, and the category “other”.
These findings both conflict and support previous studies on social worker burnout. In prior research and discussion of burnout in social workers, non-profit jobs tend to offer the lowest salaries, poorest benefits, and often handle the most challenging client base. The results of the survey support this position. A surprise finding in the data, though, is the relatively low average BMS score for government social workers. Often linked with non-profit employees, government social workers are identified as front line workers who have the most challenging clientele and bear increased caseloads and demands (Dyer, 1998). This research found that government social workers had significantly lower burnout scores, scoring almost 1% lower than the average respondent. Consideration should be given to the fact that only five of the survey respondents identified themselves as government employed social workers. This small sample size reduces the accuracy of the score.

<table>
<thead>
<tr>
<th>Employer Type</th>
<th>% of respondents</th>
<th>Mean BMS score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Profit</td>
<td>35%</td>
<td>3.4</td>
</tr>
<tr>
<td>Nursing Home</td>
<td>19%</td>
<td>3.1</td>
</tr>
<tr>
<td>School</td>
<td>18%</td>
<td>3.1</td>
</tr>
<tr>
<td>Hospital</td>
<td>7%</td>
<td>2.9</td>
</tr>
<tr>
<td>Other</td>
<td>9%</td>
<td>2.8</td>
</tr>
<tr>
<td>Private Practice</td>
<td>2%</td>
<td>2.7</td>
</tr>
<tr>
<td>Government</td>
<td>12%</td>
<td>2.2</td>
</tr>
</tbody>
</table>

*Note: Average BMS score 3.0. A score of 4 and above signified burnout.*
Survey data also provided information about client types. Of the seven options available, including “other”, underserved was the most frequently identified client type (44%). Table 3 shows the average BMS score for respondents by client type. The underserved client type is not only the most frequent client type of the respondents, but also reports the highest average BMS score (3.7%). As a whole, survey respondents averaged 3.2 client types. Survey respondents who scored 4 or higher on the BMS test, averaged only 3 client types, slightly less than the average respondent. This finding suggests that for this project, the number of client types is not associated with a higher burnout level.

<table>
<thead>
<tr>
<th>Client Type</th>
<th>% of respondents</th>
<th>Mean BMS score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Underserved</td>
<td>44%</td>
<td>3.7</td>
</tr>
<tr>
<td>Aged</td>
<td>39%</td>
<td>3.5</td>
</tr>
<tr>
<td>Immigrant</td>
<td>35%</td>
<td>3.5</td>
</tr>
<tr>
<td>Private Payer</td>
<td>9%</td>
<td>3.5</td>
</tr>
<tr>
<td>Mentally Ill</td>
<td>35%</td>
<td>3</td>
</tr>
<tr>
<td>Other</td>
<td>16%</td>
<td>3</td>
</tr>
<tr>
<td>Student / Children</td>
<td>33%</td>
<td>2.9</td>
</tr>
</tbody>
</table>

*Note: Average BMS score 3.0. A score of 4 and above signified burnout.*
This project identified a lack of existing research that examined the frequency of social workers who voluntarily left the industry due to burnout. Over half of the respondents (53%) indicated they know someone who quit the social work profession due to burnout. The total number of former social workers identified by respondents was 62 individuals. This averages to 1.4 people identified per the entire pool of respondents. When looking at survey respondents who had a BMS score of 4 or higher, the average number of burnout victims (those who quit the profession) they knew was 4.2, or three times the average for all survey respondents. This finding suggests that social workers who are burned out also know a significantly higher number of former social workers who quit the profession due to burnout than those who were not burned out.

**Discussion**

The project’s findings may provide useful information on the issue of burnout in the social work profession. Retention is important for all professions because it is essential for growth, consistency for clients served, and overall the notion of a more experienced work force should result in improved care. The profession as a whole should be deeply invested in the betterment of individual social workers by developing appropriate training, resources, and effective policies. Research conducted on burnout issues in the social work profession can clarify problems, help determine best practices, and improve policy. This project also adds new viewpoints to the topic which hopefully will spark future research.

The project’s main findings demonstrate that burnout can affect social workers equally regardless of years of professional service. This finding supports the idea that burnout doesn’t necessarily affect professionals who have been in the field for many years, social workers can
become burned out at any time in their career. When looking at types of social work employers and clients served, the findings provide evidence that both supports and conflicts with prior research and conventional wisdom. The project’s findings resulted in social workers who worked for nonprofits and with underserved clients had the highest burnout scores. This finding was consistent with prior research and examination. The lowest burnout scores came from government employed social workers and those who worked with children. The low burnout scores for government social workers are not consistent with prior research.

The project’s findings could assist in supporting changes to social work professional development policies and plans. Working from this project’s findings that burnout occurs in social workers of all experience levels, the argument could be made to direct further research and resources to improve retention rates. This project could help create anti-burn out programs and policies that would assist individual social workers, organizations, and employers. For example, the project’s findings would not support focusing anti-burnout efforts solely on social workers who have many years of service. Preventative measures, education, and proper support activities should be introduced to social workers at the start of their careers. Introducing the concept of burnout in the industry during social work education and training phases would also be beneficial.

Additionally, the project’s findings that determined high burnout rates in non-profit employees who work with underserved populations should spark discussion. It is evident that front line workers who serve clients with multiple and challenging needs lead to higher rates of burnout. This disproportionate effect should be countered with anti-burnout measures designed for these specific qualifiers. Finally, the social work industry could support research that would approach the question of burnout casualties that exist in the field. This project’s study collected
information on the number of former social workers respondents knew who left the industry due to burnout. Continuing this approach with a more scientifically grounded approach may result in beneficial information.

There were multiple strengths and weaknesses to this research project. A mailed survey response rate allowed for a good sample size of 43 social workers. The use of a standardized measurement tool, the Burnout Measurement Short (BMS), allowed for statistical evaluations to be performed on data. The topic of professional burnout was also a project strength. The issue is topical, well recognized, and applicable to all human service workers. While it is impossible to gauge the sincerity or thoughtfulness respondents provided, the topic of professional burnout most likely triggered a moment of self-reflection for the respondent. A major limitation of the project was the limited sample size. In general, small sample sizes reduce the accuracy of findings, particularly when data is analyzed by multiple categories, such as in this instance where data was analyzed by type of employer and type of client. This could explain why some unexpected findings like government social workers having the lowest burnout levels were found.

**Conclusion**

The purpose of the research project was to determine if the length of years as a practicing social worker was connected to being burned out. Collected survey data demonstrated that there was no connection between the number of years practicing as a social worker and being burned out. It has been noted that social work burnout can affect individuals at any time in their career. The findings also suggested that other factors such as type of employer and population served impact burnout levels.
This project also took a unique approach of measuring victims of burnout by asking respondents if they personally knew burnout victims. Data from this question suggests that burnout is responsible for a large number of social workers leaving their job and the profession. It was also interesting to see that individuals who reported knowing multiple social workers who quit due to professional burnout had high burnout scores themselves.

This research project is helpful for the field due to its continued examination of issues that are pertinent to the longevity and turnover rate that human service agencies and clients being served have experienced. Due to the growing need for a variety of social service in communities across America, it is imperative that there are an abundance of well trained social workers to answer the call. Correctly understanding the causes and sources of burnout among social workers will both help agency’s retention rates and individual social workers improve self care.
References


Acker, G.M. (1999). The Impact of Clients Mental Illness on Social Workers Job Satisfaction and Burnout. Health & Social Work. 24(2)


Appendix A

Approval Letter/Email

From: Oberle, Connie (HLB)
Sent: Monday, November 26, 2012 2:37 PM
To: Koski, Dayse L.
Cc:
Subject: RE: Dayse Koski (MSW Student)

Ms. Koski

I hope this will suffice. If it does not, please let me know.

The State of Minnesota Board of Social Work (BOSW) permits the usage of purchased Minnesota social work professionals for conducting research. Using purchased mailing addresses to conduct research about the issue of social work burnout is appropriate.

Names and mailing address are considered public data according to the Minnesota Data Practices act, MS 13.03.

Connie Oberle, Office Manager
Minnesota Board of Social Work
2829 University Ave SE Ste 340
Minneapolis MN 55414-3239

General Office: 612-617-2100
Direct: 612/617-2111
Fax: 612/617-2103
E-mail: connie.oberle@state.mn.us
Board E-mail: social.work@state.mn.us
Board Website: www.socialwork.state.mn.us
Appendix B

INFORMATION SHEET

Early Onset of Social Worker Burnout

Introduction:

You are invited to participate in a research study investigating if professional burnout afflicts social workers in the beginning years of their career. This study is being conducted by Dayse Koski, a student at St. Catherine University and the University of St. Thomas under the supervision of Richa Dhanju, MSW, PhD, a faculty member in the School of Social Work. You were selected as a possible participant in this research randomly; some may have been selected because you have received licensure within the last five years. Please read this form and ask questions before you agree to be in the study.

Background Information:

The purpose of this study is to know if professional burnout afflicts social workers in the beginning years of their career. Approximately 100 people are expected to participate in this research.

Procedures:

If you decide to participate, you will be asked to complete the enclosed paper survey. This survey includes the Burnout Measurement Short form, an established self-administered exercise that identifies burnout indicators. The survey also asks personal and professional questions relating to your experience with burnout. This study will take approximately 5-10 minutes to complete.

Risks and Benefits of being in the study:

The study has minimal, if any, risks. Some questions may assume negative work experiences or request you to recall negative experiences.

The benefits to participation are to advance the understanding of burnout in social work, specifically if social workers who are in the early stages of their career experience burnout. Additional information will be asked that could lead further research about the number of former social workers who have quit the profession due to burnout.

Compensation:

Regardless of your participation in the study the enclosed dollar bill is yours to keep. If you participate in this study by completing the survey and mailing it, please keep the dollar as compensation for your time and effort.
Confidentiality:

Any information obtained in connection with this research study that can be identified with you will be disclosed only with your permission; your results will be kept confidential. In any written reports or publications, no one will be identified or identifiable and only group data will be presented.

I will keep the research results in a locked file cabinet in my home office and only I and my chair will have access to the records while I work on this project. I will finish analyzing the data by May 20th 2013. I will then destroy all original reports and identifying information that can be linked back to you on June 1st 2013.

Voluntary nature of the study:

Participation in this research study is voluntary. Your decision whether or not to participate will not affect your future relations with St. Catherine University in any way. If you decide to participate, you are free to stop at any time without affecting these relationships.

Contacts and questions:

If you have any questions, please feel free to contact me, Dayse Koski at kosk5301@stthomas.edu or 651-335-9377. You may ask questions now, or if you have any additional questions later, the faculty advisor, Richa Dhanju at (651) 690-6755, will be happy to answer them. If you have other questions or concerns regarding the study and would like to talk to someone other than the researcher, you may also contact Dr. John Schmitt, Chair of the St. Catherine University Institutional Review Board, at (651) 690-7739.

You may keep this information sheet for your records.

Statement of Consent:

You are making a decision whether or not to participate. Your willingness to move ahead with responding to the survey and mailing it back to the researcher indicates that you have read this information and that you are in agreement with this information. Please know that you may skip any question or entirely withdraw from responding to the survey at any time. Once you have completed the survey, please mail completed survey in the attached stamped and addressed envelope.

Thank you so much for your time and consideration. Your participation is very valuable for my research.
Appendix C  
Survey Questions

Part A:

- Your Gender (circle): Male Female
- Number of years as a licensed social worker (circle one): Less than 5 years More than 10 years
- Type of Employer (circle one):
  
  Government Agency  Non-profit Agency  Hospital / Health Care Provider
  School  Nursing Home  Private Practice
  Other
- Have you considered quitting your job within the last 6 months? Yes No
- Have you considered quitting the social work profession the last 6 months? Yes No
- Have you known/worked with anyone who quit their social work job or profession due to burnout? Yes No
- If yes, how many individuals? ______

Part B: (Malach-Pines, 2005, p 88)

Please use the following scale to answer the question: When you think about your work overall, how often do you feel the following?

<table>
<thead>
<tr>
<th>Scale</th>
<th>Never</th>
<th>Almost Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
<th>Very Often</th>
<th>Always</th>
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</tbody>
</table>

Tired ____  
Disappointed with people ____  
Hopeless ____  
Trapped ____  
Depressed ____  
Physically weak / Sickly ____  
Worthless / Like a failure ____  
Difficulties sleeping ____  
“I’ve had it” ____