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SWORD workbook:

KFP 5 Wellbeing

Dartington

www.researchinpractice.org.uk

Introduction

A resilient organisation prioritises the wellbeing of its workforce and takes a systemic approach to reducing stress and enhancing job satisfaction. The KFP Wellbeing is defined as where:

Practitioners perceive a deep commitment to their wellbeing – wherever possible, stress is reduced at source and working conditions improved.

Practitioners feel able to thrive in a job that is rewarding and manageable, and feel able to make a difference to the lives of the children, families and adults they work with.

For these reasons, people are committed to the organisation and their role within it.

The term 'wellbeing' covers a range of factors, such as how satisfied people are with their lives, whether they feel what they do is worthwhile, their everyday emotional experiences, and the state of their general mental health. A sense of wellbeing depends also on the extent to which people feel in control of important areas in their life, and whether they feel supported by others. Work is a major source of wellbeing and satisfaction for many people; but it can also be highly stressful and a serious threat to health.

Under the law, all employers have a duty of care to their employees; this means employers should take all reasonable steps to ensure their employees' health, safety and wellbeing. This is particularly important in a profession such as social work where the risk of stress and burnout is high. This workbook highlights the need for evidence-informed, multi-level, systemic interventions in order to support the wellbeing of workers. Interventions are needed at organisation, team and individual level. This final section describes a range of initiatives to tackle stress in your organisation and make it a happier and healthier one.

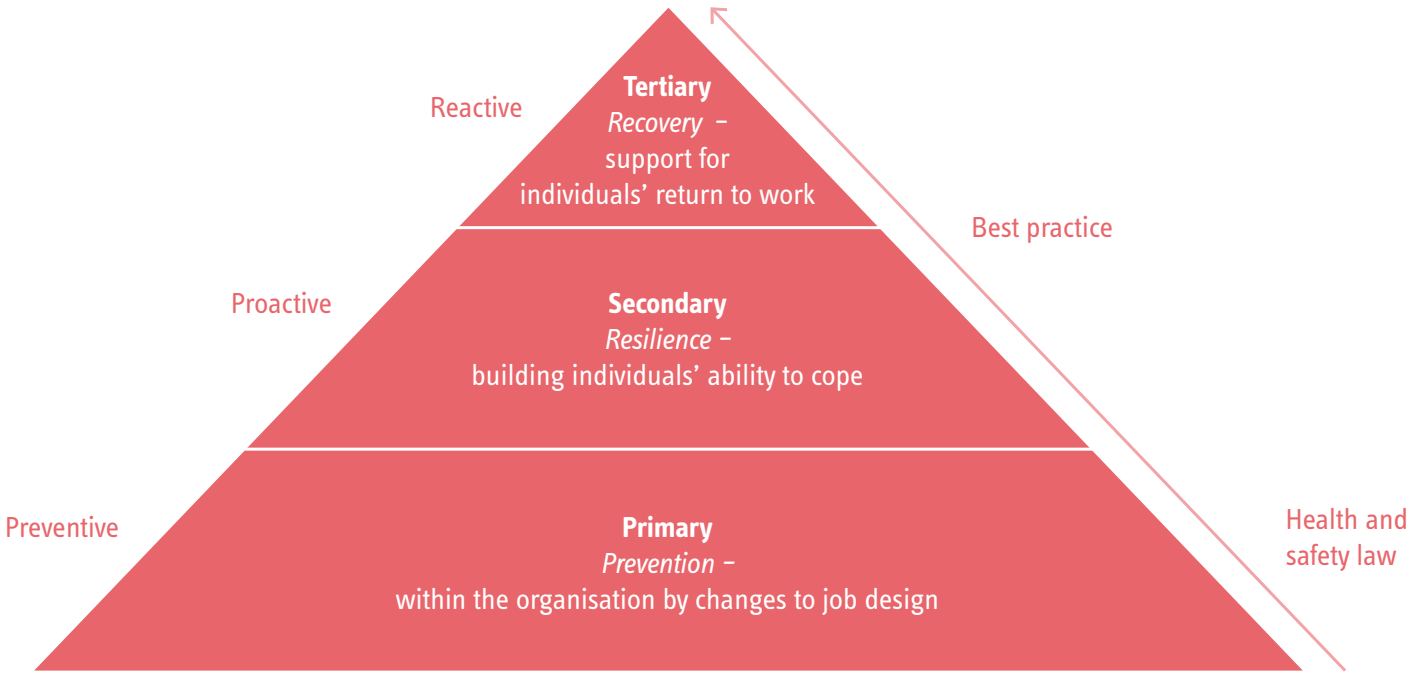
Stress/wellbeing policies

Making sure you have a safety policy that directly addresses stress or wellbeing in the workplace is the first step. The policy should be clear and accessible, and developed after consultation between practitioners, management and trade unions, preferably through a process of co-production. It should begin with a statement of intent and responsibility, setting out the organisation's commitment to developing a working environment that supports the health and wellbeing of staff. Guidance from the Health and Safety Executive (HSE) on formulating a stress policy (or checking an existing policy is fit for purpose) can be found **here**; and an example policy **here**.

An effective stress policy should emphasise commitment to managing stress at three levels (Figure 5.1):

1. Removing or minimising stress at source (primary management – i.e. preventative)	2. Improving employees' responses to stress (secondary management – i.e. proactive)	3. Addressing the symptoms and consequences of stress (tertiary management – i.e. reactive).

Figure 5.1: Examples of completed trees using the Tree of Life exercise



A three tier approach to managing work related stress

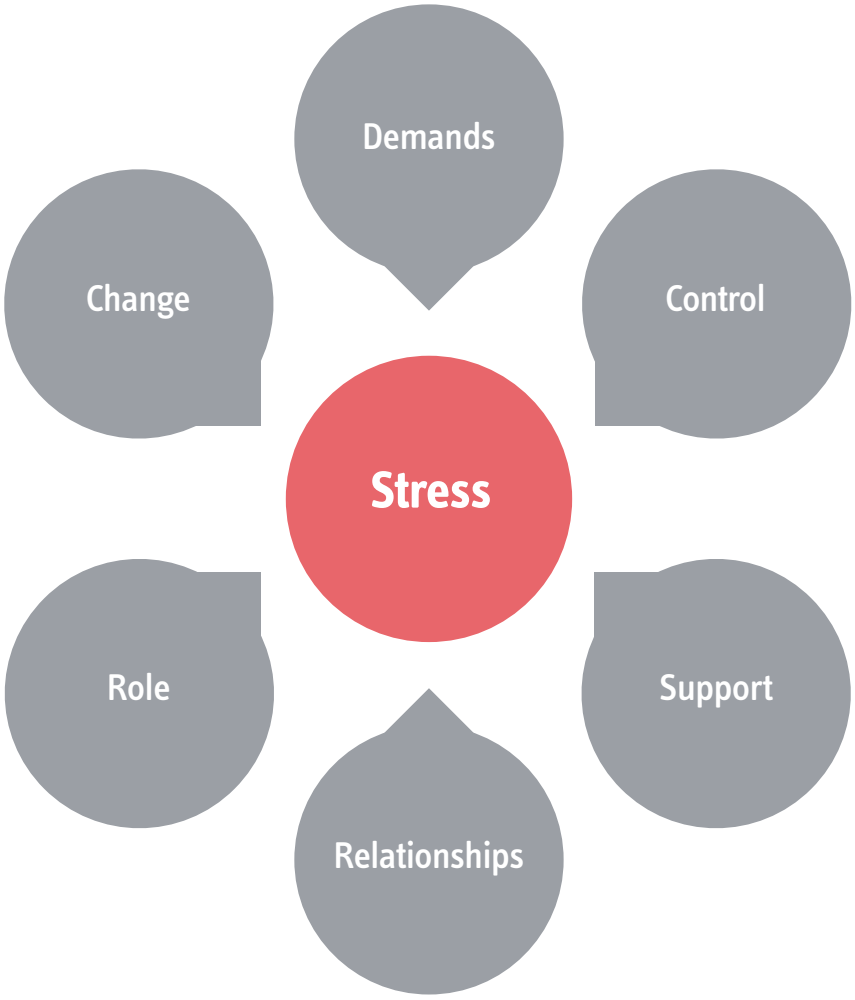
A stress policy will not be effective unless it contains a clear action plan setting out the strategies that have been (or will be) implemented. The framework in Figure 5.1 will help leaders plan multi-level interventions, and KFP5 provides examples of initiatives that are likely to be helpful. It highlights the need to manage the psychosocial risks in your organisation and offers guidance on conducting risk assessments to diagnose and manage the sources of stress.

Using the Health and Safety Executive (HSE) resources to manage psychosocial risks

The HSE has developed a risk-assessment process (with a set of accompanying resources) that helps employers to manage work-related wellbeing among their workforce. The HSE's approach is centred around a set of benchmarks – the HSE Management Standards – for measuring good management practice across six key areas of work, which, if not properly managed, are associated with poor health, lower productivity and higher rates of sickness absence.

The six key areas (see Figure 5.2 and Box 5.1) – demands, control, social support (from managers and peers), interpersonal relationships, clarity of role, and involvement in organisational change – represent potential psychosocial hazards for the workforce.

Figure 5.2: The six areas covered by the HSE Management Standards



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The HSE approach is an effective and widely used way to identify the most stressful aspects of work for any particular workforce. For social work organisations in particular, the approach has strong potential to help manage workforce stress and build a culture that supports resilience. It helps employers assess how well they are managing each potential 'hazard' and to target interventions more effectively. The process, which is illustrated in Figure 5.3, involves:

1. Identifying risk factors

Identify the risk factors using the **HSE's Management Standards Indicator Tool** (i.e. the questionnaire – see Box 5.1); this is usually administered via an online survey. Care must be taken to assure people of anonymity and confidentiality.

2. Who can be harmed and how?

Analyse the data using the HSE's **Analysis Tool** and **Indicator Tool User Manual**. A 'traffic light' system is used to identify priority areas for attention (e.g. demands, control or support, or change management).

3. Evaluate the risks

Identify whether any groups of employees (e.g. job type, sex or mode of employment) are at greater or lesser risk than others.

4. Develop and implement interventions

A comprehensive **workbook** developed by the HSE provides guidance on how to shape interventions to address each of the hazards.

5. Monitor and review

Re-administer the survey to assess the effectiveness of the interventions.

The full range of resources and tools developed by the HSE as part of its Management Standards approach can be found **here**.

Figure 5.3: The HSE risk assessment process

Every type of professional workforce has its own stressors, so the HSE approach can be supplemented with questions that are particularly relevant to specific working contexts. Research findings suggest that the emotional demands of social work are a particular source of stress, as is working within a 'blame culture' (Ravalier, 2018; Travis et al., 2016). These findings are likely applicable to other professional groups working in demanding health and social care contexts. Setting up a steering group can highlight the more job-specific sources of stress that practitioners experience and which might otherwise be overlooked when using a generic approach. Steering groups and/or focus groups that are chaired by an independent facilitator in an informal environment, are particularly effective in encouraging people to contribute. The HSE resources include advice on setting up a wellbeing **focus group** or **steering group**.

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Box 5.1: Identifying psychosocial risk factors using the HSE Indicator Tool (staff questionnaire)

HSE has developed a self-report questionnaire – the HSE Indicator Tool – to help employers measure levels of risk across each of the six key work areas or potential hazards.

The questionnaire comprises 35 statements (e.g. 'I have unachievable deadlines'); practitioners are asked to tick one of five options to indicate the extent to which each statement applies to them. The work areas, or hazards, are:

1. Demands

Workload, pace of work and working hours

2. Control

Levels of autonomy over working methods, pacing and timing

3. Support

Peer support: assistance and respect received from colleagues

Managerial support: supportive behaviours from line managers and the organisation itself, including encouragement and the availability of feedback

4. Relationships

Interpersonal conflict at work, including bullying and harassment

5. Role

Role clarity and the extent to which employees believe that their work fits into the overall aims of the organisation

6. Change

How well organisational changes are managed and communicated.

The HSE's guidance on administering and scoring the questionnaire can be found **here**.

Box 5.2: Co-producing interventions with the workforce

Interventions developed with input from members of staff can be especially effective in improving wellbeing. The HSE resources include a serious of case studies, which highlight a range of benefits that co-produced solutions can offer. For example:

Earlier reporting of stress, due to increased awareness of the signs and symptoms	Reduced sickness absence
Greater ownership of change	Improved communication, particularly between managers and workers
Increased recognition of the need to encourage peer support	Better understanding among managers of the importance of listening without judgment.

Box 5.3 provides guidance on using an Appreciative Inquiry (AI) approach in focus groups, drawing on key frameworks of work-related stress. As AI is an iterative process, several meetings will be required to generate options for interventions and evaluate their success.

Box 5.3: Using AI approaches to develop stress management interventions

KFP2 Sense of Appreciation describes the features of Appreciative Inquiry (AI) and highlights its potential to generate options for self-determined change. The four stages of AI can be used in focus groups to identify simple but effective strategies to reduce stress and improve wellbeing. That process might involve:

Finding examples of current activities that work well (Discovering)	Using them as a basis for envisioning possibilities for change (Dreaming)
Identifying potential interventions (Designing), and	Implementing those interventions (Delivering).

Work-related stress is often perceived as an 'imbalance' between key aspects of the working environment and individual capacities and needs. The three models of stress described below offer potentially useful frameworks to help practitioners generate options for change.

1. The Job Demands-Resources model

(Demerouti et al., 2001) recognises the importance of resources in helping employees meet the demands of their work and remain healthy. *Demands* are aspects of the job – such as workload pressure, interpersonal conflict and insecurity – that require physical or mental effort, and so have the potential to drain energy. *Resources* are factors that: a) help people meet their work goals; b) reduce demands and the associated costs to wellbeing; c) facilitate personal growth. Key resources include the availability of support, control and feedback at work, as well as personal resilience-building attributes, such as self-efficacy and optimism. This simple model could be used via AI to identify resources that may help social workers meet the demands of their work more effectively and enhance their personal development.

2. The Conservation of Resources model

(Hobfoll & Shirom, 2000) also recognises the value of resources in protecting workers against the negative effects of job demands. It is based on the premise that people are motivated to gain and protect things they value; stress occurs when they are threatened with resource loss or fail to gain resources despite considerable effort. The model specifies four types of resource:

a) objects (physical entities such as work equipment)

b) conditions (social circumstances such as status and respect)

c) personal (skills and attributes such as self-efficacy)

d) energies (such as knowledge).

People use their existing resources to help them manage stress and to generate further resources to sustain them in future. Those with more resources are less vulnerable to resource loss and more capable of resource gain. This model could be used in focus groups to identify resources that might help buffer the effects of stress and create individual and collective 'resource reservoirs' (such as resilience) to offset the risks of future resource loss and build collective strength.

3. The Effort-Reward Imbalance model

(Siegrist, 2002) maintains that strain (such as mental and physical health problems) stems from an imbalance between the amount of effort people believe they put into their work and the rewards they gain. Efforts are things that make work more demanding, such as heavy workload and frequent interruptions; rewards are gained from three potential sources: a) money (salary); b) esteem (respect and support) and c) security/career opportunities (promotion prospects and job security). This framework could be useful in helping practitioners generate options for change by identifying the wider features of social work (e.g. meaningfulness and a sense of belonging) that help them feel rewarded, and therefore could restore their feelings of equity.

Enhancing management competencies

Not only must managers be *aware* of their duty of care to protect the wellbeing of staff, they must also have the *capacity* to offer support. Several frameworks can help managers develop the knowledge and skills they need. First of all, managers must be able to recognise that an employee needs help. Managers can use the checklist in Box 5.4 to help them discern any changes in behaviour that suggest an employee may be struggling and in need of support.

Reassuringly, research suggests that the 'signs of struggle' managers identify tend to correlate well with employees' self-reported wellbeing (Dimoff & Kelloway, 2019). Social workers who are experiencing chronic and severe stress should inform their employer, but they are often reluctant to do so because of the stigma around mental health difficulties. The checklist can help managers to spot signs at an early stage and use supervision to explore problems, identify potential solutions, agree an action plan and review progress. However, if any practitioner is exhibiting extreme signs of stress they should be referred for professional support.

Box 5.4: Five signs of struggle

Expressions of distress

e.g. reports feeling stressed; emotional outbursts, such as irritability or tearfulness.

Social withdrawal

e.g. not participating in social activities; failing to engage in prosocial behaviours.

Extreme behaviours

e.g. being impaired by alcohol or drugs; expressing desire to self-harm.

Attendance

e.g. lateness or increased absenteeism

Performance

e.g. a noticeable decrease in the employee's quality/quantity of work; failure to meet goals or deadlines.

Employees often identify management behaviour as a major factor in any work-related stress. So managers need to think about their own behaviour, and whether it is adding to or helping to alleviate any stress that practitioners may be experiencing. The HSE (in collaboration with the Chartered Institute of Personnel and Development and Investors in People) has developed a set of competencies (see Box 5.5) to help managers assess whether they have the behaviours known to be effective for preventing and reducing stress at work (Donaldson-Feilder et al., 2011).

The HSE process enables managers to reflect on their behaviour and management style and to identify areas for development. There are three related tools (see **here**):

1. A self-assessment tool for managers	2. A tool that also requires input from the manager's staff (180 degree)	3. And a tool that requires input from staff, senior managers and colleagues (360 degree).

Many organisations use this framework to help them manage stress proactively by guiding management recruitment, selection and training. It will help leaders identify the behaviours that are likely to support wellbeing and build a culture of resilience. (There is more information on the use of 360 Degree Feedback in KFP4 Mission and Vision.)

Box 5.5: Management competencies for preventing or reducing work-related stress

The framework comprises four broad managerial behavioural areas (and 12 specific behaviours) that have been identified as important for preventing and reducing stress.

1. Managing emotions and having integrity

- Managing emotions (e.g. approaches deadlines or crises calmly; doesn't pass their own stress on to the team)
- Integrity (e.g. is a good role model; is honest and consistent)
- Considerate approach (e.g. shows respect; prioritises people's work-life balance).

2. Managing and communicating workload

- Proactive work management (e.g. communicates objectives clearly; manages current and future workloads to minimise stress)
- Problem-solving (e.g. deals rationally with difficulties; is decisive)
- Participative/empowering (e.g. delegates work fairly; involves team members in decision-making).

3. Managing the individual within the team

- Personally accessible (e.g. communicates in person rather than by email; responds to requests promptly)
- Sociable (e.g. is friendly and has a sense of humour)
- Empathic engagement (e.g. a good listener; shows an interest in others and concern for their problems).

4. Reasoning/managing difficult situations

- Managing conflict (e.g. remains objective; deals with conflict promptly)
- Use of organisational resources (e.g. seeks advice and support from others to resolve difficulties)
- Taking responsibility for resolving issues (e.g. tackles bullying; follows up conflicts after resolution).

For more information and to download the tools, see **here**.

Stress, depression and anxiety related to work are common reasons for sickness absence among social workers. Some may struggle to return after a long-term absence; others may not return at all. Managers' behaviours are crucial in supporting employees back to work. Munir and colleagues (2012) have identified the specific line management behaviours that are associated with successful returns after long-term sick leave:

Communication and support during sick leave:

e.g. communicates regularly, in a supportive (not intrusive) way; expresses concern for wellbeing; emphasises continued support.

Inclusive behaviour on initial return to work:

e.g. offers a phased return; explains any changes to role and responsibilities; makes themselves available on first day back.

General proactive support:

managing the team (e.g. asks employee's permission to keep colleagues informed about progress); has an open and sensitive approach (e.g. listens to concerns and takes responsibility for rehabilitation); has strong legal and procedural knowledge (e.g. is aware of legal responsibilities and the need for reasonable adjustments).emphasises continued support.

'Presenteeism'

Sickness absence can be high in social work organisations, frequently caused or exacerbated by work-related stress and pressure. While it is crucial to reduce unnecessary absence, leaders must also be aware of the risks to health and performance posed by 'presenteeism'. Presenteeism is when people continue to work despite feeling sufficiently unwell to take sick leave or return to work too soon after a period of sickness. Admasachew and Dawson (2011) highlighted the negative implications of presenteeism among NHS staff, whereby pressure to be present at work when unwell reduced engagement and had a consequent negative effect on outcomes for people being supported by health services. There is also evidence that presenteeism is common among social workers. A survey by Ravalier and Boichat (2018) found 43% of child and family social workers had worked while unwell between two and five times in the previous year; a further 26% had done so more than five times. The incidence of presenteeism in this group had increased by 5% a year. High demands and low support are key causes of presenteeism among social workers, but more insight is needed into the organisational, team and individual factors that encourage this behaviour in order to inform interventions.

Managing conflict

It has been estimated that managers spend up to 60% of their time trying to resolve workplace conflict. While some degree of conflict is unavoidable, and can even enhance individual and group effectiveness, it can have a major impact on wellbeing and job performance. Interpersonal conflict at work is more negative, enduring and pervasive than other types of stress, so it must be carefully managed. Quick Win 5.1 offers some useful ways to help manage conflict. More information (from ACAS) on resolving conflict at work for managers can be found **here**.

Quick Win 5.1: Six steps to managing conflict

Step 1. Consider how to achieve a mutually desirable outcome

Be aware that one party 'losing' to the other is likely to escalate conflict rather than resolve it. Perceived loss encourages people to try to re-establish fairness through competition, criticism or disengagement.

Step 2: Encourage people to communicate human-to-human

Recognise that conflict compromises people's fundamental need for respect, competence, autonomy and social status. Encouraging one party to see that the other party is 'just like them' tends to encourage trust and the use of positive language and behaviour.

Step 3: Anticipate people's potential reactions and rehearse your responses to them

Before having a difficult conversation, thinking through how the other party might react to what you say can expose weaknesses in your argument. It can also help ensure your message will be received in the way intended, and stop the other person becoming defensive.

Step 4: Substitute blame and criticism with curiosity

Blame will escalate conflict, encourage defensiveness and lead to disengagement, whereas adopting a learning mindset will encourage people to explore potential solutions where both parties can win.

Step 5: Ask for feedback on how you managed the conflict situation

Showing fallibility can disarm opponents, as this is a quality that inspires trust in leaders. Ask people how you could have handled the situation more effectively.

Step 6: Assess psychological safety in your organisation

Conflict is much less likely if people feel able to make mistakes without fear of criticism or retribution. A psychologically safe environment (see KFP1 Secure Base and 'Using HSE resources to manage psychosocial risks' above) that encourages moderate risk-taking and curiosity will make conflict resolution easier for all.

Adapted from Delizonna (2017)

Promoting a healthy working environment: Mental Health First Aid, and Wellbeing Champions

A recent survey found that among the general workforce, fewer than one in six (16%) employees felt able to disclose a mental health issue to their manager (Business in the Community, 2018).
Training people in Mental Health First Aid (MHFA) (see Box 5.6) and appointing Wellbeing Champions (see Box 5.7) are popular and effective way to help reduce stigma and support a culture of wellbeing at work.

If you are considering introducing MHFA or a Wellbeing Champion programme, you must make sure that people taking on those roles have the time and resources to fulfil them effectively. It's also crucial to provide volunteers with support for their own wellbeing and to make sure appropriate boundaries are in place (Narayanasamy et al., 2018). And it's important to remember that these initiatives cannot in themselves provide solutions to mental health difficulties in the workplace; they should be implemented alongside the other structural interventions described in KFP5.

Box 5.6: Mental Health First Aid

MHFA England provides volunteers with training in critical areas of mental health first aid, such as the signs and symptoms of common mental health difficulties, and providing 'crisis' first aid for depression, panic attacks and acute stress reactions. Mental health first aiders can provide support by engaging in an initial conversation with someone in distress and, if needed, helping them access appropriate support.

Evaluations of MHFA training suggest it can increase participants' knowledge of mental health, reduce negative attitudes among the workforce, and enhance supportive behaviours towards people with mental health difficulties (Brandling & McKenna, 2010; MHFA, 2019).

Information on MHFA training and resources can be found **here**.

Box 5.7: Wellbeing Champions

Appointing Wellbeing Champions or Ambassadors can play a valuable role in helping to build a culture of wellbeing in your organisation. Champions can drive the wellbeing agenda (e.g. by being part of a wellbeing steering group), raise awareness of new initiatives and encourage colleagues to participate. Champions are often better placed than managers to encourage reluctant colleagues to engage.

Time To Change provides a range of resources for the workplace, including support for running a Champions programme, and practical tips on starting conversations about wellbeing and signposting support. For more information see **here**.

Work-life balance

Resilient organisations encourage a healthy work-life balance among their workforce. There is growing awareness that working long hours can damage health and family relationships and reduce satisfaction with work and life in general. Worrying about work can make it hard to 'switch off' and can stop people replenishing their mental and physical energy. Practitioners in the helping professions may find it especially hard to balance the demands of their work and personal lives. A study of social workers by Kalliath and colleagues (2012) found a high level of work-life conflict, which was linked to depression, anxiety and social dysfunction. Negative emotional reactions to work were particularly damaging to mental health. Work-life conflict has serious implications for workforce retention; the number of NHS-based professionals who cited poor work-life balance as their main reason for leaving the service tripled between 2010 and 2018 (Buchan et al., 2019). Similarly, a recent survey of 1,118 social workers also identified poor work-life balance as one of five main reasons for wanting to leave the profession (Cooper, 2019).

It is crucial, therefore, to make a clear and strong commitment to supporting work-life balance among your workforce, and to provide practical strategies at both organisational and individual level. Leaders might consider developing a policy for helping practitioners to achieve an effective work-life balance. Box 5.8 lists some issues that could be covered in such a policy. Some practical tips for achieving work-life balance are in Quick Win 5.2.

Box 5.8: Making a commitment to work-life balance

An organisation that is committed to maintaining a healthy work-life balance places this high on its list of priorities. Such an organisation:

Acknowledges that individuals are healthier, happier and more productive when they have a 'healthy' balance between their work and their personal life	Recognises that supporting work-life balance will benefit the organisation as well as its employees	Asks employees for their views on how best to support work-life balance
Adopts a flexible approach (people's work-life balance needs change over time), and offers a range of flexible working strategies and encourages their uptake	Ensures that work-life balance initiatives are equitable and don't support only working parents	Acknowledges that work-life balance is not just about ensuring people go home on time; strategies are also needed to help practitioners 'switch off' emotionally from work
Encourages practitioners to work efficiently and productively, and measures performance by output (not hours worked)	Encourages joint responsibility between individuals and their line managers to implement effective work-life balance solutions	Regularly reviews workloads to ensure duties are achievable in 'normal' working hours
Is vigilant for signs of over-commitment and over-involvement among employees	Encourages managers to lead by example by prioritising their own work-life balance	Ensures that employees who take up flexible working options are not disadvantaged in terms of promotion or progression
Makes sure employees take their full annual leave entitlement	Is aware of up-to-date innovations in promoting work-life balance	Evaluates the success of any strategies implemented to support work-life balance.

Quick Win 5.2: Tips to improve your work-life balance

Have regular breaks away from your desk

This will help reduce the intensity of work and get you in the habit of switching off.

Identify a corridor between work and home

People who do emotionally demanding work often need to 'decompress' before moving into their personal life. Consider how you can transition between work and home, physically and mentally: change your clothes, have a shower, cook a meal, or go for a run. Mindful walking can be a good way to switch off. It helps you become more aware of your bodily sensations and encourages you to tune into your environment as you walk. (See here for some guidance from Headspace.)

Use your diary to schedule activities that you enjoy

Planning your leisure time well in advance will help make sure you do get opportunities to switch off.

Establish an unwinding ritual

For the last 30 minutes of your working day, only start jobs that you can complete easily. Alternatively, spend time clearing your desk.

Find a restorative place

Spend 15 to 20 minutes somewhere you feel happy and relaxed. This could be a favourite chair or a place in the garden.

When you think about work after the working day, are you are problem-solving or ruminating?

Problem-solving can provide solutions and insights; ruminating will drain your mental and physical energy. So, try to make sure any thoughts about work are restricted to the former.

Disconnect

Disconnecting yourself from the outside world for a while will help you switch off and recoup your energies.

Write a daily exit list

Jotting down what you need to do the next day will help clear you mind and provide a sense of control and resolution. Mentally prepare yourself as you review your activities for the following day.

Switch off when you commute home

Try not to see commuting as extra work time; read a book or talk to a fellow passenger if you're on public transport, or listen to music in the car.

Do something different:

It is particularly replenishing to use a totally different skillset during leisure time. So, for example, join a choir, or learn a foreign language.

Get another perspective

Regular input and advice from a mentor or a coach can be liberating. Anticipating opportunities to talk about concerns with a trusted person can help people contain difficult emotions and to switch off.

As discussed in KFP1 Secure Base, many social workers now work remotely for at least part of the time. And while there may be benefits, people who work offsite can feel isolated from their colleagues and may struggle with work-life balance. So it's important to give people information on how to manage their wellbeing when working remotely (see ACAS's guidance **here**).

Managing email

Engaging with email has become one of the most stressful activities in the workplace. People spend a high proportion of their working time on email (Hearn, 2019). As email use increases, productivity worsens, and the risk of burnout and disengagement rises. There is also growing awareness that failing to switch off from email during evenings, weekends and holidays can be a major threat to employees' work-life balance and wellbeing. Many organisations now offer guidelines on managing emails in a healthy way. Quick Win 5.3 has examples of strategies that can be implemented at the organisational and personal level.

Quick Win 5.3: How to be 'e-resilient'		
Develop an organisational policy on email use and etiquette, with input from staff.	Remember that email is a key part of the job, so should be included in job descriptions and when estimating workload.	Lead by example: managers are powerful role models for email behaviour. Unless it's an emergency, don't send emails out of hours (or else use the delay function).
Consider limiting (or even banning) the use of the 'reply all' function.	Limit the use of 'OK' and 'thank you' emails – instead use 'thank you in advance'.	Encourage people to review their email strategies – are they purposeful and efficient, or reactive and habitual?
Process and clear an email whenever you check it.	Switch off email notifications – they can cause stress and anxiety.	Be aware that 'switching' between email and other types of work can add up to two hours to your working day.
Use blocks, filters and folders and keep up with digital housekeeping (e.g. maintaining folders, deleting files, etc.).	Manage other people's expectations: an 'out of office' notification means just that.	Consider picking up the phone if emails are more than 3 paragraphs, or if messages fill the screen.
Remove email from your phone and other personal devices.	Develop 'rules of engagement': set boundaries and decide when you will read emails and when you will switch off.	Take email vacations – disconnect for half a day a week, or even longer.

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An individual toolbox of wellbeing skills

As well as tackling stress at source, organisations should ensure that practitioners are provided with guidance to develop their personal skills in managing stress and building resilience. It is crucial to offer a range of strategies and to encourage people to try something new – this will encourage flexibility and broaden their skill set (see KFP3 Learning Organisation). Our research found that multi-modal training (including mindfulness, cognitive behavioural skills, peer coaching, reflective supervision and goal setting) can enhance the personal characteristics that underpin resilience and improve wellbeing in early-career social workers (Grant & Kinman, 2014). When planning interventions, however, it is important to recognise that people are often attracted to training that strengthens (or validates) the skills they already possess; for example, more action-oriented people may seek out training in time management and goal-setting, rather than the relaxation techniques that would help them switch off from work. Similarly, the findings of our recent evaluation of a mindfulness intervention (Kinman et al., 2019) suggest that it tends to attract social workers who are more 'naturally' reflective.

Strategies that could be included in your toolbox have been outlined throughout this workbook. Some of these are likely to be particularly helpful in managing stress and enhancing wellbeing. Peer coaching techniques (see KFP3 Learning Organisation) can provide social workers with opportunities to give and receive support and identify solutions to stressful problems. Reflective supervision will help practitioners to manage challenging practice situations and explore and resolve uncomfortable emotions. It is important to note that while many managers contend that they provide supervision that is reflective, this is not necessarily the case; they may need support and reminding that their supervisory practice needs proper attention to ensure it is sufficiently reflective. In the next section, we highlight the importance of self-compassion and self-care in underpinning a resilient organisational culture. Particular focus is placed on developing cognitive behaviour skills, as they can be an effective way to protect wellbeing and may be used individually, in teams and/or during supervision. We also provide some quick wins to help you fill your toolbox. More information on these strategies can be found in our book (Grant & Kinman, 2014).

Building a culture of self-compassion

For practitioners whose work is emotionally demanding, self-compassion and self-care are essential. Workers gain considerable satisfaction from supporting others, but the emotional demands of the job can lead to compassion fatigue and burnout. Research by Kinman and Grant (in press) has found that maintaining compassion towards the self can protect practitioners against these negative effects.

Compassion towards the self can improve coping abilities and protect us from stress and burnout. Self-compassion is also one of the most powerful sources of resilience, helping us not only to survive adversity but to flourish. And because self-compassion can enhance empathy and improve interpersonal relationships, there are likely to be benefits for people who use services also.

Neff (2016) identifies three elements of self-compassion:

Self-kindness:

being warm, patient and understanding towards ourselves when we suffer, fail or feel inadequate, rather than being self-critical and hostile.

Common humanity:

recognising that personal suffering and inadequacy are part of the human condition, and not something that differentiates us from others.

Mindfulness:

taking a balanced and accepting approach to our negative emotions, so feelings are neither avoided nor exaggerated.

It is therefore vital to develop interventions to encourage compassionate feelings towards the self and healthy self-care strategies among workers early in their career, as this can be more challenging for those who have spent longer in the job. Kinman and Grant have found that social care practitioners often see themselves as self-compassionate, but may be reluctant to prioritise their own wellbeing.

Leaders can build a culture that supports self-compassion by role modelling self-kindness, common humanity and mindfulness, and encouraging practitioners to accept that, like everyone, they are imperfect. But in seeking to develop such a culture, leaders must pay attention to working conditions; a heavy workload, understaffing and lack of appropriate supervision will thwart any attempts to improve self-compassion and self-care.

At an individual level, compassion-focused expressive writing can help people overcome self-criticism and develop the self-reflection that underpins self-compassion (see Quick Win 5.4). Other strategies, some of which are outlined in this workbook, can also help:

Reflective supervision can foster self-compassion and encourage practitioners to prioritise self-care – see Research in Practice's Reflective Supervision Resource Pack (Earle et al., 2017), available here.

Peer coaching (see KFP3 Learning Organisation), and group approaches such as World Café (see KFP4 Mission and Vision) and Appreciative Inquiry (see KFP2 Sense of Appreciation), will help identify and share best practice among co-workers to improve self-care.

Mindfulness techniques (see Quick Win 5.5) can help us maintain personal boundaries and enhance awareness of the self and the need to care for it.

Cognitive behavioural strategies (outlined below) can also help us relate to ourselves in a more compassionate, friendly and forgiving way.

More information about self-compassion and some resources can be found **here**.

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Quick Win 5.4: Expressive writing

Research suggests people who regularly engage in expressive writing tend to feel happier and more satisfied. Writing about negative feelings and life experiences can help us reduce stress, depression and anxiety, and discourage unhealthy rumination; it can even improve immune system functioning and physical health. There is also evidence that writing about positive experiences can be beneficial for wellbeing.

Research with social work students (Grant et al., 2014) has found that writing in diary form about their emotional reactions to practice significantly improves students' reflective ability and empathy, and reduces feelings of distress. Several mechanisms are thought to underlie the benefits of expressive writing. Because it involves thinking about experiences as well as expressing emotions, writing helps people process their thoughts and give meaning to their experiences. There is also evidence that expressive writing can improve emotional regulation skills, which is a key aspect of resilience for practitioners.

In order to get maximum benefit, people should write every day, but this doesn't need to take up much time. Studies suggest that expressing emotions in writing for only two minutes a day can improve wellbeing (Burton & King, 2008). There is no one 'correct' way to do this, but these tips may help:

Try writing in the third person to give you some distance, and even a new perspective.

Write about your emotional responses to specific situations: i.e. those that evoked negative feelings (e.g. fear, confusion, embarrassment or frustration) and those that were positive (e.g. satisfaction, pride or a sense of meaning).

Make a note of what you were doing and who you were with; this can help you identify patterns to your emotional reactions to different situations and individuals, and can encourage a more in-depth understanding of your emotions.

Writing about emotions can be helpful, but it may not be effective for people who are experiencing ongoing or serious mental health challenges. Any personal reflections on emotional reactions to work experiences should always be kept in a secure location.

Mindfulness

> 'Mindfulness is the basic ability to be fully present, aware of where we are and what we are doing, and not overly reactive or overwhelmed by what is going on around us.'
> (Mindful.org, 2014)

Many studies have demonstrated the positive effects of mindfulness. Research by Kinman et al. (2019) found wide-ranging benefits for the wellbeing and resilience of social workers. An eight-week mindfulness training course increased emotional self-efficacy and reduced compassion fatigue and distress. Interviews with participants revealed that mindfulness can benefit many aspects of wellbeing. In particular, it enhances work-life balance by helping people 'switch off' from work concerns and enabling them to replenish their energy and motivation.

Kinman et al. (2019) found mindfulness can help improve job performance:

- When experiencing pressure, we are more aware of the options we have available to manage it
- We are able to sharpen our focus and prioritising skills
- We become more adept at identifying what we can and cannot control in high-stakes situations
- We carry more energy, by reducing wasted effort and enhancing recovery processes
- We are less judgmental towards others and ourselves, more patient, and trust in our intuition and authority.

Quick Win 5.5: Learning to be mindful

Several apps are available that introduce people to mindfulness principles and offer guided meditations; these can be customised to individual needs and contexts. For example, 'one-minute mindfulness' exercises can help people recover after difficult meetings and switch off from work when they get home. Grant and Kinman recommend:

Buddhify	Headspace

Both require subscriptions, but others are available free of charge.

Cognitive behavioural therapy (CBT): challenging thinking errors

Thinking errors are cognitive distortions based on erroneous beliefs about ourselves or about the world. Everyone experiences thinking errors; but when those errors are extreme, they can impair personal functioning, relationships and wellbeing. An understanding of the principles of cognitive behavioural therapy (CBT) provides insight into how cognitive distortions can be replaced by more helpful thoughts, feelings and actions. Examples of different types of thinking errors are outlined in Box 5.9. Techniques are also included to help managers track the thinking patterns and understanding of practitioners, helping them identify and challenge unhelpful thinking errors when they occur. How CBT can be used to manage stress and support emotional resilience is also considered.

Box 5.9: Thinking errors

Magnification and minimisation:

recognising only the negative aspects of a situation and ignoring or downplaying the positive. 'My personal achievements are insignificant, but my mistakes are very important.'

Catastrophising:

ruminating about irrational worst-case scenarios and impending disaster. 'I couldn't get in touch with this family before the weekend – I just know something awful will happen to them.'

Over-generalising:

making broad interpretations from a single incident or a single piece of evidence. 'I made a mistake with this family, so I am an incompetent social worker and a bad person.'

All or nothing thinking:

over-generalising and seeing things in extremes. 'I never do a good enough job – I am always going to fail.'

Dogmatic demands:

believing that things should be a certain way can cause guilt and expectations of punishment if our rules are violated. 'I should do this/I shouldn't do that.'

Emotional reasoning:

the assumption that our unhealthy emotions reflect reality. 'I feel guilty, so I must have done something bad.'

Magical thinking:

a belief that one's acts will influence unrelated situations. 'I am a good person so bad things shouldn't happen to me.' (Or vice versa.)

Personalisation:

the belief that one is responsible for events outside of one's control. 'This person I'm supporting is upset. It's my fault; I haven't done enough to help her.'

Jumping to conclusions:

interpreting the meaning of a situation despite having little or no evidence. This has two strands: a) mind-reading: interpreting the thoughts and beliefs of others without evidence ('I wouldn't get promotion, as I am stupid'), and b) fortune-telling: believing that future events are pre-ordained ('Things will turn out badly, so why bother?').

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Box 5.9: Thinking errors (continued)

Control fallacy:

beliefs about being in control of every situation in one's life. If we feel externally controlled, we are helpless and a victim of fate or chance: 'I did a bad job as I was given the wrong advice'); if we feel internally controlled, we assume responsibility for the wellbeing and distress of everybody: 'Why are you angry, what did I do to upset you?'

Global labelling:

generalising one or two personal characteristics into a negative global judgement about oneself or others. 'I'm such a loser'; 'He is such an idiot'; 'People always let you down.'

'Just world' fallacy:

the belief that the world is a fair place – good things happen to good people, and bad things happen to bad people. 'Nobody has that much bad luck. She must have done something to bring it on.'

Heaven's reward fallacy:

the belief that self-sacrifice and self-denial will eventually pay off. 'If I work hard enough, people will notice, and I will be rewarded.'

Thinking errors have implications for practitioners' wellbeing and professional functioning. 'Personalisation' and the 'heaven's reward fallacy' might encourage over-commitment to the job and a reluctance to prioritise self-care; 'global labelling', on the other hand, could compromise positive outcomes for children and families. We may fail to see the person behind the label and filter out any information that does not fit with our belief. So, the 'just world fallacy' may encourage us to blame 'victims' in the belief that people who are experiencing challenging circumstances must somehow have brought it on themselves. 'All or nothing thinking' is a distortion often found in those who are anxious, perfectionist or have low self-esteem. This can also be damaging for children, families and adults with care needs; a tendency to believe that 'everything is right, or it is wrong' may lead a practitioner to 'over-generalise' from one perceived 'failure' and so overlook improvements in other areas.

Box 5.10: Identifying thinking errors in meetings and supervision

Active listening – based on warmth, genuineness and unconditional positive regard – is necessary to enable formation of a trusting relationship.

Conversations should be collaborative and should involve feedback and reflection. Notice how people use words that might signify thinking errors. For example, most people exaggerate at times, but chronic 'all or nothing' thinking can make us see the world and other people in over-simplified terms and encourage pessimism and feelings of helplessness. Listen out for and challenge words such as 'always', 'never', 'everything', 'totally', 'everyone' or 'no one'.

A more structured approach can be used to examine specific incidents (i.e. activating events) where thinking errors have been used. By focusing on the following issues during supervision, managers can gain insight into how unhelpful behaviours and mood states are triggered – and maintained:

Situational: the environmental factors that were present	**Behavioural:** what the person did	**Cognitive:** the thoughts that were present at the time
Affective: the emotional reactions that occurred	**Interpersonal:** who else was present	**Physiological:** the bodily reaction that occurred.

Cognitive behavioural techniques for stress management and resilience

The cognitive behavioural techniques discussed in Box 5.10 can be incorporated into supervision or a peer coaching session in which options for change are explored. Identifying thinking errors that underpin self-criticism, poor self-care, inflexibility and feelings of isolation will be particularly helpful. Cognitive behavioural techniques are an effective stress management tool for individuals. They can provide a fresh perspective on a situation, and help people reduce the physical and emotional symptoms of stress and regain a sense of control.

There is evidence that stress management training based on the principles of cognitive behavioural therapy (CBT) is more effective than many other methods (Bhui et al., 2012). Grant and Kinman's (2016) research found that CBT also has the potential to enhance wellbeing and many of the qualities that underpin resilience. Computerised CBT programmes can be as beneficial as face-to-face training for reducing stress and improving mental health (Proudfoot et al., 2003), and are more cost effective. CBT principles can also be applied to teams and organisations. Spotting and challenging individual and collective thinking errors has clear potential for enhancing group problem-solving and guiding systemic change.

The importance of self-care for managers

Leaders play a key role in preventing and reducing work-related stress and are expected to be role models for 'healthy' behaviour. This is a major responsibility, especially if you are struggling to maintain your own work-life balance and protect your own wellbeing.

What you can realistically achieve may feel constrained by the need to manage teams with large caseloads or having day-to-day responsibility for the functioning of an entire service. And you might work within an organisational culture that stigmatises (albeit unconsciously) stress and help-seeking, encourages long working hours and presenteeism, and overlooks the adverse implications for the wellbeing and performance of its workforce.

Protecting your own wellbeing will be challenging under such conditions; but if you are not able to take care of yourself, then you will not be able to support your team. Remember, the strategies in this workbook apply to you as much as to members of your team or workforce. Self-care is not a luxury for leaders and managers; it is a core competency. So, it is crucial that you develop your own 'toolbox of strategies' to sustain your resilience and are as compassionate towards yourself as you are to others.