

RESILIENCE
***AND* PERSONAL**
EFFECTIVENESS
***FOR* SOCIAL WORKERS**

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STRESS AND THE SOCIAL WORK ROLE

Key Concepts and Issues in this Chapter

- The importance of resilience for social workers
 - The centrality of emotional labour in social work
 - Impact of the political and economic climate and the media on social work
 - Physical and psychological effects of stress
 - Understanding the nature of burnout
 - How to understand when we are stressed or experiencing burnout
 - Internal and external loci of control and how they affect our response to stress
 - Practical steps to develop an internal locus of control
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Why resilience is important in social work

If you were lucky enough to have a foreign holiday this year you will have (or should have) listened to a cabin safety announcement. One of the things about the safety announcement which is memorable to me and which relates to my decision to write this book is the set of instructions for using oxygen masks. The announcement tells you to fit your own oxygen mask before you fit your child's mask or help anyone else with theirs. Our first instinct would of course be to help our child or someone else who appeared to be having problems and so the advice goes contrary to what our natural response might be in an emergency. There is, however, a good reason for putting our own mask on first. We can only help another person when we are able to breathe properly ourselves. Far from being selfish, the action of securing our own oxygen supply first is essential to us being able to help others. I first heard this analogy on a podcast by the business blogger James Altucher. It came back to me a year ago when I was interviewed as part of a research study on resilience and social work education. I was asked in the telephone interview why I thought it was important for social workers to be resilient and I used the oxygen mask example as a way of explaining why we cannot help others effectively without also caring for ourselves.

Resilience is the quality which all social workers need for the emotionally demanding tasks of the job. Soldiering on when we are burnt out and drained may sound noble, but to be an effective and safe practitioner we need to be able to think clearly and retain our capacity for empathy and warmth.

At its most extreme, the inability to cope with the emotional demands of social work can lead to **burnout** which means a complete inability to engage effectively with one's colleagues and service users. Pines and Maslach (1978) described burnout as involving a negative self-concept, negative job attitudes and a loss of concern and feeling for clients. In a profession where the relationship with service users is central, burnout involves a fundamental inability to practise effectively or safely.

Farber (1983) notes that burnout has individual, organisational and societal factors. Clearly it is individual factors which you as a social work student or first line practitioner have most control over so this book will focus on advice on how you can look after your own wellbeing. However, as social workers we also have responsibilities to our colleagues and there are some stressors which are due to organisational factors so the book will also look at mechanisms for collective responses to workplace stress.

Social work as emotional labour

Social work does not usually involve physical heavy lifting. We are unlikely to develop a bad back or physical strain from the job – other than perhaps the strain of leaning over a computer writing case notes. However, social work does involve psychological heavy lifting. Arlie Hochschild (1983), a sociologist, developed the

concept of emotional labour to describe the emotional demands involved in human services professions (an American term covering social work, occupational therapy, etc.). Emotional labour involves having to manage the outward expression of our emotions. As social workers we have to show empathy and concern even when we are exhausted and have little left to give. We have to be able to give our full attention and focus to the problems of others even when we are preoccupied with problems of our own. Elements of the problems of others may conjure up unsettling feelings about our own personal relationships (past or present), memories of previous losses or bereavements or even unhappy events from our childhood. When this happens we have to put these feelings aside and continue to focus on the service user. We also have to suppress anger we might feel about service users' behaviours towards others or irritation we might feel about their inability to change their situation. We have to project a professional persona in the face of demands, aggression, threats or even violence from service users, their relatives or others in the community. We must be non-judgemental when service users make life choices which we disagree with and yet express genuine joy when they achieve positive change. We must sometimes implement laws and policies, which on a personal level we feel are unfair, and yet we often cannot share our feelings about this with colleagues or service users. Having one's emotions on show constantly means having to suppress some feelings (when they are negative) and bring others to the fore when we have to show empathy or support. This involves a great deal of self-regulation. This is emotional labour and it is one of the most stressful elements of the social work task.

An added dimension is that emotional labour in social work involves dealing with problems which are chronic and entrenched (such as poverty) or which involve high likelihood of relapse (such as substance misuse). This can lead to disappointment and frustration for social workers who invest a great deal emotionally in their work. I have heard social workers tell me that they have taken two generations of children into care from the same family. Such experiences are dispiriting and can lead to workers questioning the validity of their work.

Exercise

Emotional Labour

Think of a work situation which had a significant negative emotional impact on you (though not something which was a major trauma or tragedy). What feelings did you have and how did they impact on how you felt for the rest of the day or week? Did the incident or event spill over into your time outside work? Did you get support from colleagues or your line manager? When you think about the event does it bring up powerful feelings again? Do you experience any physical feelings such as tension in your face

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or body or a change in posture? If you tensed up physically then try to relax the muscles which became tense. Breathe slowly and deeply until you feel some of the tension dissipate.

Now think of an incident or event which gave you positive feelings such as hope or happiness. Think about the impact of this event and again try to get in touch with changes in your mood and any physical changes in your body.

What does thinking about these experiences tell you about how you react emotionally and physically to the emotional labour of social work?

External sources of stress for social work

In addition to the stresses which are inherent in the social work task, there are a number of other sources of stress which have put additional psychological pressures on social workers over the past decade.

Austerity

The global financial crisis of 2008 led to austerity policies across the USA and Europe to reduce government deficits, which involved the cutting and scaling back of public services. In Greece and Portugal this was particularly severe as swingeing public spending cutbacks were a requirement for sovereign bailouts. In the UK austerity cuts were a prominent policy of the Conservative/Liberal Democrat Coalition Government which came to power in 2010 and have been continued by the Conservative Government following their 2015 general election victory; and they seem to be set to continue at least for the rest of the decade. Furthermore, the fact that certain categories of public expenditure such as the health service have been protected from cuts has meant that the unprotected areas such as social care spending have been disproportionately affected.

Squeezed social services budgets have led to less resources for dealing with social problems and fewer opportunities for preventative work. This creates pressures and professional dilemmas for social workers who cannot provide the sorts of interventions for their service users which they feel are needed.

A survey of social work professionals conducted by the British Association of Social Workers (2012) found that 88 per cent of respondents believed that lives could be put at risk by cuts to services and 77 per cent considered their caseloads to be unmanageable.

A report by the Local Government Association found that between 2010/11 and 2013/14 local authorities had achieved savings of £10 billion through finding efficiencies but that budgets will have fallen in real terms by 33 per cent in

the period to 2019/20. It is difficult to continue to cut budgets at those sorts of rates in the face of increasing demands on services without seriously affecting essential services.

The situation in local authorities is mirrored by uncertainty and instability in the voluntary sector. A report by the National Council for Voluntary Organisations (2013) found that while new sources of funding such as payment by results were emerging, voluntary sector organisations were struggling to secure the finance which they needed. The report predicted that in 2017/18, voluntary sector funding was likely to be £1.7 billion lower than it was in 2010/11 (at 2010/11 prices). Furthermore, the replacement of block grants to the voluntary sector with bidding for contracts has further reduced the stability of funding in that sector and instruments such as social impact bonds seem likely to cause further instability and uncertainty.

Austerity has also had an impact on the earnings of social workers through wage freezes and below inflation increases across the term of the Coalition Government and subsequent Conservative Governments. Social workers, in common with other public sector workers, face threats of the removal of automatic pay progression, traditionally a reward for experience and level of responsibility. These cuts add personal financial woes to the other forms of stress which austerity has brought to social workers. They also contribute to public sector workers feeling that what they do is not being valued.

Social workers also experience anger and frustration about the impact of austerity policies on the most vulnerable in society. In a later chapter there will be some suggestions about how these feelings can be positively channelled.

Outsourcing and other changes to how social services are organised

In business, outsourcing is a commonly used method of accessing specialised expertise in a flexible and efficient way. However, outsourcing in public services has in many cases been principally a way of reducing labour costs. Cutting the pay of existing employees would be politically sensitive but by transferring the employees to the private sector, the unpleasant task of cutting workers' pay and conditions is privatised along with the work. This weakens transparency and reduces the opportunities for trade unions to monitor and safeguard the conditions of employees. A report by The Adam Smith Institute (2014), commissioned by the public sector union Unison, found that 'huge public-sector cuts are determining the objectives, nature and outcomes of the latest outsourcing deals' and that reducing costs was the 'key objective' of outsourcing.

So far, it has been the jobs of lower paid care staff which have been outsourced but there has recently been a bill (Deregulation Bill) to allow the outsourcing of qualified social work jobs. This may lead to social workers setting themselves up in small practices and there are some potential benefits to this model in terms of professional independence. However, fears about social work being transferred to unpopular

private companies with poor reputations led a number of senior practitioners and academics to write a letter of concern to the *Guardian* on 16 May 2014.

Outsourcing, regardless of any potential benefits to social workers who form independent practices, contributes to a climate of uncertainty and disquiet amongst social workers.

Media scrutiny and criticism of social work

There is a widespread belief amongst social workers that there is a strong media bias against the profession. Some evidence for this view was provided by a study by *Community Care* (2009) of newspaper coverage of social work issues during a three-month period. This study found a disproportionate amount of negative media coverage of social work and social workers. Greer (2014) suggested that local authorities need to be more open and proactive in engaging with the media and should allow social workers to speak directly to the press. It is difficult to blame the media for one-sided coverage when our own side does not comment.

However, regardless of why media bias occurs, it is demoralising for the social worker to see their profession regularly being the focus of negative media attention.

New public management

Harris (2007) described the changes that have taken place in human services management in the UK and USA since the 1980s as a move away from traditional administrative management (with an underlying respect for professionalism) to a transformational approach, which borrows heavily from management in the commercial world. He identified this approach as underlying a number of trends: contracting (including purchaser/provider split); consumerism; performance indicators (working to targets); getting more for less; increased scrutiny (including use of standardised assessment tools, eligibility criteria, etc.); and gate keeping and rationing.

Harris (2007: 20) suggests that there has been a more nuanced approach in adopting new public management in the USA where 'social welfare management' is seen as requiring its own special set of knowledge and skills. By contrast, UK professionals are more likely to be faced with the imposition of a more generic model of management which assumes that the public sector constantly needs to look to the private sector for inspiration. This unobvious approach breeds resentment about deprofessionalisation and gets in the way of dialogue between the social work profession and politicians. Harris (2003) explained how a 'business discourse' within social work has arisen as part of a wider colonisation of the public services by the 'culture of capitalism'. Since then the trends which Harris identified have continued and seem certain to carry on.

Eileen Munro (2011), in her review of child protection services, said that a focus on rules and regulations reduced the time available for social workers to carry out

their assessments and that a target-driven culture has reduced the scope for professional judgement.

There are countless articles and books which express derogatory views about changes in public sector management with very vitriolic views on managerialism and neoliberalism. Frequently, this critique is applied as much to approaches which have the potential for reducing bureaucracy as it is to the procedures which increase it. Within the social work literature all forms of service improvement are often seen as undermining professionalism. For example, Ferguson (2008) in the introduction to his book *Reclaiming Social Work*, lampoons an advertisement for a course on the service improvement model known as Lean management.

Whether the commentary of Ferguson and others is fair or not, new public management presents a problem for social work because of the degree of resentment it provokes between the profession and politicians and the general negativity which it seems to generate in the social work academic press. This must inevitably contribute to a general feeling within the profession that it is under attack.

New technology and changes in approaches to working

Technology has changed the way people work a great deal. The traditional model of working 9 to 5 in an office has changed to a much more flexible set of options including working from home, hot desking, and answering emails in the evening or at weekends. While these changes have increased opportunities to work flexibly they have also had other less desirable effects. The ability to work from home has blurred the demarcation between work and home life causing people to work at times when they should be relaxing or spending time with their family. Even holidays are no longer sacred with some organisations expecting managers to answer their emails or even phone calls when they are on holiday with their families.

McGregor (2012a) reported a survey which found that 9 out of 10 social workers believed that hot desking on social services damaged worker morale and increased their stress.

Recording data and case notes on computer systems is another area of concern which is claimed to be a frequent source of stress. In another report McGregor (2012b) stated that social workers were 'drowning in admin'. Smith (2012) gave a first-hand report from a child protection social worker who claimed that the ICS recording system was the 'bane of his life'. Other social workers report a feeling of loss about the camaraderie of an office environment and the opportunities it gives for seeking advice from more experienced colleagues.

In theory, new technology should be making people's lives easier, in addition to making them more productive. Even hot desking can have significant benefits if implemented properly and adequately resourced. Clearly, the amount of dissatisfaction which social workers experience suggests that either the technology is not being used correctly or that it is inadequate to the needs of social workers. I will discuss

in a later chapter how you can use technology to your benefit and how managers can help their staff to use technology effectively. This is, however, one area which requires investment and forethought at an organisational level. Technology is not a panacea and changes in working practices should not be seen solely as ways to save money. Abolishing permanent offices with desks for individuals is a way of saving money, but there needs to be thought given to replacing the functions of an office including opportunities for exchanging knowledge with colleagues. At present, we can say that there is evidence that new technology is a source of stress for a significant number of social workers.

Physical and psychological effects of stress

With all the stressors discussed in the previous section it is no wonder that the sector as a whole is experiencing a great deal of strain and tension. Stress can adversely affect the culture and working environment of an organisation and we will look at the implications of this for managers in a later chapter. For now, however, we will focus on the effects of stress at an individual level.

Traditionally in Western medicine we have diagnosed and treated physical and mental ill health separately. However, as more is becoming understood about the relationship between psychological stress and physical wellbeing a more balanced model is developing which acknowledges that mind and body are very closely linked. This is one of the reasons that many people turn for help to alternative therapies. Despite the view of the established medical profession that most alternative therapies lack an evidence base, many people enjoy the holistic approach that they receive from a holistic therapist.

Any serious or chronic physical health will have a psychological impact, and serious or chronic psychological problems can impact on our physical health. If we are getting enough rest and sleep then we are less likely to contract infections. Conversely, if we are lacking sleep through stress or anxiety then our resistance to infections will be reduced. Good physical health will help us to deal with psychological stressors in the workplace and home life whereas an ongoing physical health problem leaves us with less capacity to deal with these stressors.

Classic studies in the relationship between stress and general health

Selye (1956) came up with a model of how the body responded to stress. He said that the stress response consisted of three phases: **alarm phase, resistance phase and exhaustion phase.**

The **alarm phase** is what is popularly known as the flight or fight response. It involves preparing the body for action to deal with an immediate threat. The hypothalamus sends messages to the pituitary gland which causes the release of hormones which

in turn cause the release of adrenaline and other hormones. One of the effects is to increase respiration and heart rate. This is to ensure that tissues are oxygenated to allow the body to respond to the demands of running away from danger or fighting an adversary or predator. There is also a release of cholesterol and fat into the blood to act as an energy source. Blood is also diverted from the skin to the brain and the muscles, where it is needed for dealing with the threat. Blood pressure increases and the blood becomes more coagulated to help deal with injuries in the event of the body being cut or otherwise injured.

As you can imagine this is a very useful set of physiological responses if you are having to run away from a bear or take part in a gladiatorial fight in the arena in ancient Rome. However, it is a poor response for most of the stressors which we face in today's society. If someone cuts in on us when we are in a queue for a petrol pump we may feel a strong sense of territorialism as a result of them stealing 'our pump'. However, the laws and conventions of our society prevent us from storming into action and assaulting our rival. Even if we say something to the other person or sound our horn we will not be indulging in the sort of physical activity which our body is primed for. If we have the sort of personality which has strong and frequent reactions to such incursions by other people then we may be getting very angry several times per day. If we have an unhappy work environment in which we feel that other people are not pulling their weight or are deliberately trying to outdo us or cause us mischief then we may have ongoing feelings of resentment which intermittently give rise to anger.

These feelings of anger and resentment can be very damaging to our physical health. The fats which are released into our bloodstream as part of the flight or flight response will, if not used through energetic activity, continue to linger in the bloodstream where they can block our arteries. These blockages can in turn raise our blood pressure (hypertension).

The second stage in Selye's model is the **resistance** phase. This is where the body returns to a normal state of arousal and any tissues which have been damaged are repaired.

However, if the body fails to go into the resistance phase because of chronic stress or over-work the result is **exhaustion**. The body has been unable to effectively repair itself and as a result we are more likely to fall victim to a stress-related illness.

Another negative effect of chronic stressors is learned helplessness. This phenomenon was discovered by Seligman (1975). Through a series of (somewhat cruel) animal experiments, Seligman found that if an animal comes to learn that it cannot avoid electric shocks through its own actions it will eventually stop trying and will become withdrawn and apathetic. The animal has learned that there is no contingency between its responses to an unpleasant situation and the outcome. This is called learned helplessness. Seligman proposed that a similar process might contribute to the development of depression in humans. If we are faced with a number of serious setbacks within a short space of time we may begin to give up trying to improve our situation. The result is a descent into despair and depression. It is easy to see how experiences of impossible caseloads, constant demands and bureaucratic management culture can wear some staff down to the extent that they believe that they can never get on top of their work. As a result they cease to get any enjoyment from working.

Burnout

When work-related stress becomes chronic and its effects become profound then it can manifest in a condition known as burnout. Farber (1983) noted that burnout consists of attitudinal, emotional and physical components. Pines and Aronson (1981) stated that burnout was 'characterised by physical depletion, by feelings of helplessness and hopelessness, by emotional drain, by the development of negative self-concept and negative attitudes towards work, life and other people'. They further stated that burnout is a 'sense of distress, discontent and failure in the quest for ideals'. It is easy to see how this state would lead to damage to one's home life and personal relationships. It will also lead to poor work performance, poor judgement and callousness. Maslach (1976) said that burned-out professionals 'lose all concern, all emotional feelings for the persons they work with and come to treat them in detached or even dehumanised ways'. This is in fact what appears to happen in cases where people who need care and support are ignored, neglected or mistreated by those who should be responsible for their care. Burnout therefore has very serious personal and professional implications and can result in very serious deviations from good practice. Burnout can also ruin careers and lead to skilled and experienced staff leaving the workforce. Identifying burnout is therefore an important task for individuals and organisations.

Farber (1983) notes that Cherniss (1980a and 1980b) identified that public sector professionals coming into service have unrealistic views about how much professional autonomy and job satisfaction they will have and that they therefore become very disillusioned and burned out when they experience the reality of working in large bureaucracies. This would seem to fit with the reports on sites such as *Community Care* which regularly report newly qualified workers quickly becoming disillusioned and wanting to leave the profession. In light of this it may be important for educators and employers to better manage staff expectations of what their experience of work will be. It is also essential that we help social workers to manage their stress, build up strategies to protect themselves and be aware of when they or any of their colleagues are showing the symptoms of stress or burnout.

How stress manifests itself

The way in which symptoms of stress are manifested varies between individuals and there are differences between different groups. Men, for example, are more likely than women to turn to drugs or alcohol as a result of mental distress. There are also differences between cultures and societies. For example, *susto* is a condition which involves anxiety, insomnia and panic symptoms and is only reported in certain Latin American cultures (Castillo, 1997). It shares some of the symptoms of mental disorders commonly described in European societies but the combination of symptoms and the beliefs about the causes are culturally bound. People from all cultures experience

mental distress but the way in which it is experienced appears to be culturally mediated. The cultural nature of mental illness needs to be borne in mind when listening to people from cultural groups other than our own. People may have different ways of describing mental distress and it is best not to make assumptions about what someone means when they are describing how they feel.

Racism is an additional factor which can add to the stresses facing people from ethnic minorities. Sadly, health and social care workplaces are not always free from racism and other forms of discrimination.

An individual's previous experience of mental distress can also affect how mental distress is expressed. For example, people with a previous history of obsessive compulsive behaviours, substance misuse problems or anxiety may suffer a relapse or a worsening of symptoms as a result of stress at work.

Recognising we are stressed

The following is a list of possible symptoms which could indicate that a person is stressed. Any amount of these can be present in any combination. It is important to note that a number of these symptoms could also be an indication of a serious health problem and that you should always consult your doctor about any health worries which you have.

Possible symptoms of stress:

- Insomnia
- Sleeping much more than normal
- Tearfulness
- Mood swings
- Inability to enjoy life or get pleasure from things we would normally enjoy
- Low libido or sexual dysfunction
- Problems concentrating or remembering things
- Impatience, anger or irritation
- Loss of appetite
- Compulsive eating or other excessive patterns of consumption or spending
- Bitterness or resentment towards others
- Feelings of failure
- Headaches, muscular aches and tension in body or face and muscular tics
- Inability to relax
- Lack of attention possibly leading to accidents or mistakes
- Feelings of helplessness or hopelessness
- Inability to be focused or productive at work
- Recklessness
- Inability to make decisions
- Worsening or relapse of skin problems such as psoriasis
- Excessive stress and conflict in relationships with family, friends or colleagues
- Lack of patience or empathy with service users

This is only a partial list and it might be just as valid to say any significant change in behaviour or temperament. It is not always possible for people who are suffering from stress to recognise that their mood or their ability to cope has changed. Sometimes it requires a friend, colleague or manager to point out that someone seems to be speaking or behaving out of character. This can be difficult as a person who is extremely stressed can become very fixed in their belief that they have to press on and accomplish the impossible goals which they have set themselves. The idea that they should rest and relax can itself be seen initially by them as an additional pressure.

An important skill for social workers to develop is an ability to be able to recognise when their own thoughts, behaviours or relationships with others are different from normal. What is fundamentally important, however, is to have a good baseline work/life balance. If we normally have a good approach to eating, sleeping, exercising and socialising then this will make it easier when we have to deal with periods of exceptional stress or demands from work or family.

Individual differences in how we personally deal with threats to our wellbeing

The earlier section in this chapter about the stresses on social workers may have given the impression that social work is always a highly stressful and emotionally draining job which is not valued by wider society and is under constant attack from media and politicians. One might wonder why then there are so many social workers who are still committed to their job and would not want to do any other kind of work. When I visit students on placement I am constantly impressed by just how much high quality work and innovative practice is being done in social work settings.

For many people, a certain amount of stress is a challenge and a source of motivation. One factor which affects how we deal with sources of threat is our own sense of volition. Do we feel we are in control of what happens to us or are we dependent on the actions of others?

Rotter (1966) introduced the concept of **locus of control**. Locus of control refers to the degree to which we think we are personally responsible for achieving positive change in our life. If we have an internal locus of control we think that the success or failure we experience in our life is down to our own efforts. An external locus of control means that we think that chance, fate and external forces are mainly responsible for what happens to us. An internal locus of control is thought to be more beneficial in a number of areas of life. For example, if we believe that we are responsible for our own health we are more likely to eat sensibly and exercise. If we believe that our health is mainly determined by our genes or is down to luck then we are less likely to engage in behaviours which will benefit our health. Thus, an internal locus of control is likely to be linked to

more positive health outcomes. This holds regardless of just how much control individuals have over their health as people who look after themselves will always have better health than if they had not done so. In terms of our more general well-being, an internal locus of control will lead to us taking more responsibility for all elements of our lives and make it more likely that we will perform behaviours which are beneficial to us.

Thinking about why we might have an internal or external locus of control

As we develop through life, our experiences influence how we understand the world. We develop a model of the world and how we interact with it. Beck et al. (1979) referred to these internal mental structures as schemata. Schemata help us to make predictions about what is going to happen in a given situation and how we are supposed to behave and what to do. For example, I have a schema about myself in relation to DIY. I think that I am impractical and poorly coordinated and so my efforts at DIY are likely to end in disaster. Thus if I had to have a major home improvement project to do then I would hire someone to do it for me. My schema about this is partly based on genuine experience of having tried to do DIY in the past and getting it horribly wrong. However, it is also based on a more general lack of confidence about practical things and a lack of positive experience from having given up too easily in the past. There are circumstances in which my schema about DIY might change. If a friend who was good at DIY mentored me through a small home improvement project I might discover that with help I was actually capable of doing a reasonable job. Having a small success in this area might change my beliefs about myself. My internal psychological model about myself might be changed and I might become motivated to try further home improvement projects, which, if successful, would further improve my confidence and further change my mental model about my abilities.

Our locus of control can be thought of as a generalised schema or mental model about ourselves in relation to the world. It will influence the response we make to a range of situations. It is something which can change as a result of our experiences. Through practice we can develop a more positive sense of our own abilities and the power we have to shape our own lives.

Cultivating an internal locus of control is an important step to feeling more in charge of your own life. Clearly, you have to be realistic. Thinking that you are going to become a world class tennis champion or guitarist is not realistic for most people. Neither will a positive attitude protect you from all of life's negative events. However, with some practice you can take more **control** of things that are important to you.

Exercise

Practising One New Behaviour

1. Think of something that you would like to change in your life. It need not be something work related. It could be something to do with getting more leisure time or fun out of life. It should be something that you feel difficult to get to grips with because the task feels overwhelming.
2. Think of some small action you can take this week which will be a change in behaviour for you and could make your overall task more achievable. Don't pick an action such as joining a gym. It needs to be something which actually involves you performing a new behaviour which you can repeat. For example, let's say that because you have been so busy you have lost touch with a lot of old friends. The task of catching up with them all feels overwhelming because there are so many people and so much news to catch up with. Set yourself a goal of phoning one old friend this week and having an unhurried conversation with them. I would recommend planning to do your action early in the week as there may be a reason you can't achieve it, e.g. in my example they could be out when you phone.
3. If you successfully performed the behaviour then repeat it the following week and then the week after that and so on.
4. Re-evaluate yourself in the light of having performed your behaviour regularly. In my case if I get back in contact with my friendship network I can re-assess my view of myself that I am not capable of maintaining my friendship networks while leading my busy life as an academic. Think about how **your** ability to **achieve a small change** in your behaviour and **maintain that change**. Think about how the change affects your overall view of yourself, what you are capable of and who you are.

Exercise

Do an 'I Did' List

Credit for this idea belongs to blogger James Altucher (2014) though I have adapted his idea into an exercise for social workers. Altucher stated that 'to-do' lists are dispiriting. We will always have more on our list than we can actually achieve in a day. As a result we will end the day feeling disappointment as we have not achieved what we set out to do. Instead, Altucher suggests that we should write out at the end of the day a list of things that we actually achieved. He states that this list will always be bigger than we expected it to be because most people don't realise just how much they do in a day. Many of the things we achieve will be things which were not on our to-do list because they are responses to contingencies or emergencies.

Your response to this suggestion is probably to say that you need your to-do list because it helps you to set priorities and helps you to remember to do important things. I will be suggesting alternatives to a to-do list in a later chapter. If in the meantime you feel you need to keep your to-do list then do so but try to do an 'I Did' list as well.

Create a table in Word like the one below.

Table 1

What I did	What was the action in response to	What the action achieved	How it contributed to larger or longer-term goals or how I feel about having achieved it
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1. End your working day 15 minutes early each day and take the time to fill out this table. In the first column write the actions you performed. Obviously you are not going to want to write absolutely every single phone call or email so pick up to 10 actions which you feel were particularly important or significant. They might be big tasks like writing a report or smaller tasks that were significant such as having a conversation with a colleague that you had been nervous about. Some could simply be things which took up a lot of time. In the second column write down what the action was a response to. Here, you can indicate whether it was an action which you planned or something which was done in response to something unexpected. In the third column write down what your action achieved immediately. In the final column write down how your action may have contributed to a longer-term or over-arching goal. For example, it might have improved your working relationship with a service user or put something in place which will prevent a problem developing in the future.
2. Spend a few minutes thinking about what you have achieved today and how you feel about your achievements.

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(Continued)

3. Repeat this process every day for at least a fortnight. You may or may not want to continue doing this beyond two weeks but hopefully doing it regularly for a couple of weeks will have helped you to see just how much you do.
4. At the end of two weeks reflect on how you have been using your time and think about which things that you have done are the most effective uses of your time. Also consider what your lists tell you about how much you are in control of your work. If lots of your entries in column 2 are unplanned then think about whether any of these unplanned events or interruptions could be pre-empted; for example, diarying in a regular meeting with someone rather than waiting for them to call you at a time which might turn out to be inconvenient. This is where your final column comes in to play as you can give yourself credit for achieving actions that reduce the need for work further down the line.

Chapter recap

In this chapter we have introduced the concept of emotional labour as an inherent source of stress in social work. This form of stress is inevitable because of the nature of the social work task and the types of problems which we work with. We have also looked at some of the stresses caused by socio-economic factors and changing social policy; although not inherent to the social work process these compound the stressful nature of the job. I explained the physical and psychological effects of stress and listed some symptoms of stress to look out for. I then asked you to do an exercise which would assess the degree to which you feel able to be in control of the direction of your life and gave a couple of exercises which can help you to build a sense of your own volition.

I hope you have learned from this chapter that by making small changes to your behaviour you can change how you begin to feel more in control of your life and grow in confidence about changing other behaviours.

Next up!

In the next chapter we are going to look at the concept of resilience and why it is important for social workers. We will look at vulnerability to stress, question whether some people are luckier than others and consider how we can build our own personal resilience. All the main psychological elements that make up resilience will be introduced and I will suggest some exercises which will help you to build up these different components of resilience.