What an Individual OT can do to Aid Psychosocial Well-being

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Psychological Health and Safety in the Occupational Therapy Workplace

SAOT

Society of Alberta Occupational Therapists

It has been found that Occupational Therapists (OTs) experience high levels of emotional exhaustion and other signs of burnout, which is greater than in the general population (Balogun, Titiloye, Balogun, Oyeyemi and Katz, 2002). Various strategies have been outlined to aid workplace psychosocial well-being in an individual Occupational Therapist. These include having a supportive network, minimizing isolation, making stigma overt, self-reflecting and advocating.

Emotional exhaustion has been found to be reduced with co-worker support (Jonge, Janseen, and Van Breukelen, 1996) and feedback and support from supervisors (Russell, Altmaier and Van Velzen, 1987). Additionally, an OT may find it beneficial to use family for support (Gupta et al, 2012) and develop mentoring relationships (Brown, 2015).

Another area of interest is minimizing isolation for a worker to aid psychosocial well-being. Working with coworkers to discuss workplace issues, collaborate and mentor each other has been identified as being important (Cooley and Yovanoff, 1996; Gupta, 2012; Schlichte, Yssel and Merbler, 2005). Isolation could be minimized when an OT is provided encouragement, empathy and given role models (Schlichte, Yssel and Merbler, 2005).

Making stigma overt could help aid psychosocial well-being in a workplace. Schott (1999) suggests that managers should encourage an open discussion of mental wellness so that workers can express their concerns. Stigma may need to be addressed by the organization first to allow workers to feel more comfortable in discussing their mental wellbeing (Canadian Mental Health Association, 2010). In addition, stigma education programs have been found to be effective in changing supervisor's attitudes through more acceptance of workers with mental illness (Stuart et al., 2014)

Self-reflection and self-assessment have been suggested as ways to contribute to psychosocial well-being. Monitoring and self-awareness at work were identified by Occupational Therapists in one study as being an important factor in reducing burnout (Gupta et *al*., 2012). It is suggested that resiliency and coping with workplace stress can be supported if a professional can self-reflect and use reflective learning (Jackson, Firtko and Edenborough, 2007). Similarly, Arches (1999) suggested that a worker is better able to deal with negative work conditions when they reflect on various relationships within the organization, with themselves and others.

Providing the opportunity to advocate for a worker could help to aid mental well-being in the workplace. Being able to make decisions in a job position and having some control over work was found to have a moderating effect on stressful job demands (Fernet, Guay, Senécal, 2004). In addition, this could help to reduce feelings of exhaustion and increase feelings of accomplishment. Creating an environment where staff feel comfortable suggesting improvements to services may reduce worker frustration and consequently burnout (Lewandowski, 2003). For example, having a lack of time and resources has been shown to contribute to workplace stress (Wressle and Samuelsson, 2014). Role clarification has also been identified as important to reduce workplace burnout (Lewandowski, 1998).

RESOURCES

CAOT. (n.d.) CAOT position statement: Occupational Therapy and workplace health. Retrieved from:
http://www.caot.ca/default.asp?pageid=1137.

Help Guide. (n.d). Preventing burnout. Retrieved from: http://www.helpguide.org/articles/stress/preventing-burnout.htm .

Patient Trusted Medical Information and Support. (n.d.). Occupational burnout. Retrieved from:
http://patient.info/doctor/occupational-burnout

REFERENCES

Balogun, J. A., Titiloye, V., Balogun, A., Oyeyemi, A., & Katz, J. (2002). Prevalence and determinants of burnout among physical and occupational therapists. *Journal of allied health*, *31*, 131-139.

Brown, C. (2015). Findings from the SAOT member's workplace psychological health survey – July 2015.

Canadian Mental Health Association. (2010). Workplace mental health promotion: A how-to guide. Retrieved from:
http://wmhp.cmhaontario.ca/wordpress/wp-content/uploads/2010/03/WMHP-Guide-Final1.pdf.

Cooley, E., & Yovanoff, P. (1996). Supporting professionals-at-risk: Evaluating interventions to reduce burnout and improve retention of special educators. *Exceptional Children*, *62*, 336-355.

Fernet, C., Guay, F., & Senécal, C. (2004). Adjusting to job demands: The role of work self-determination and job control in predicting burnout. *Journal of Vocational Behavior*, *65*(1), 39-56.

Gupta, S., Paterson, M. L., Lysaght, R. M., & Von Zweck, C. M. (2012). Experiences of burnout and coping strategies utilized by occupational therapists. *Canadian Journal of Occupational Therapy*, *79*, 86-95.

Jackson, D., Firtko, A., & Edenborough, M. (2007). Personal resilience as a strategy for surviving and thriving in the face of workplace adversity: a literature review. *Journal of advanced nursing*, *60*, 1-9.

Jonge, J. D., Janseen, P. P., & Van Breukelen, G. J. (1996). Testing the demand-control-support model among health-care professionals: A structural equation model. *Work & Stress*, *10*, 209-224.

Lewandowski, C. A. (2003). Organizational Factors Contributing to Worker Frustration: The Precursor to Burnout. *Journal Of Sociology & Social Welfare*, *30*, 175-185

Lewandowski, C. A. (1998). Retention outcomes of a public child welfare long-term training program. Professional Development: The International Journal of Continuing Social Work Education, 1(2), 38-46.

Russell, D. W., Altmaier, E., & Van Velzen, D. (1987). Job-related stress, social support, and burnout among classroom teachers. *Journal of Applied Psychology*, *72*, 269.

Schlichte, J., Yssel, N., & Merbler, J. (2005). Pathways to burnout: Case studies in teacher isolation and alienation. *Preventing School Failure: Alternative Education for Children and Youth*, *50*, 35-40.

Schott, R.L. 1999. "Managers and Mental Health: Mental Illness and the Workplace." *Public Personnel Management* 28, 161-83.

Stuart, H. (2003). Stigma and work. *HealthcarePapers*, *5*, 100-111.

Stuart, H., Chen, S., Christie, R., Dobson, K., Kirsh, B., Knaak, S., & ... Whitley, R. (2014). Opening minds in Canada: targeting change. *Canadian Journal Of Psychiatry*, *59*, 13-18.

Wressle E, Samuelsson K (2014) High job demands and lack of time: A future challenge in occupational therapy. *Scandinavian Journal of Occupational Therapy*, 21, 421-428