# Wilder Research

# Early Intensive Developmental and Behavioral Intervention

A Summary of the Literature Concerning Burnout and Retention for Mental Health and Human Services Workers

## Provider turnover and retention strategies

### Implications of high turnover

High turnover of human services or mental health workers who work with individuals with autism spectrum disorders may have negative implications for therapy providers, their staff, patients, and patients' families. The cost of hiring and training new staff, as well as the loss of productivity as new staff become acclimated to their position, increases the financial burden on providers. This is especially true in the fields of human services and mental health therapy, as these jobs require extensive training, time commitment, and resources by both employees and employers (Waldman et al., 2004). High turnover also impacts other employees' workload and morale, because experienced staff are replaced by staff who are new to the organization and oftentimes newer in the profession, and who lack the depth of experience of previous employees who have left the organization or field (Sulek et al., 2017). Turnover disrupts the continuation of services to clients, which ultimately affects patients' progress. Changing therapy providers might introduce gaps in care and can also create a period of time in which the patient and provider must learn how to work with one another most effectively. Clearly, workforce turnover has serious implications that ultimately have a detrimental effect on progress and outcomes of children with autism. It is important for leadership within provider organizations to be aware of the causes of burnout and strategies they can use to decrease turnover in their own organizations. It is also important for state agencies to understand ways in which they can work with and support provider organizations in this realm to fulfill their charge of supporting children with autism, as well as their families.

#### Job burnout drives turnover

The World Health Organization defines burnout as "a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed," (World Health Organization, 2019). They characterize it as:

- Feelings of energy depletion and exhaustion
- Increased mental distance from one's jobs, or feelings of negativism or cynicism related to one's job; and
- Reduced professional efficacy

Burnout is a driving factor of turnover. Service providers should be aware of contributing factors for burnout to allow them to proactively address these issues and, subsequently, to reduce turnover. The emotionally demanding nature of mental health work increases the risk of employee burnout; it is also associated with reduced employee satisfaction and higher rates of turnover (Burrows, 2010). For direct support providers who work with people work with people with autism, some common factors that contribute to stress and burnout could be work overload and ambiguities of their work. Perceived inability to help patients is also associated with burnout. A study conducted in Australia showed that among mental health workers, the perception that clients are not improving was associated with burnout, which in turn is related to lower job satisfaction, decreased job engagement, poorer workplace well-being, and increased turnover intentions (von Hippel et al., 2019). Other factors associated with burnout include employees feeling that they are being trapped between the expectations and needs of parents and children, simultaneously negotiating the behavioral problems of children with ASD and complex relationships with their parents. Workers also cited other factors which they feel contribute to burnout, such as

the excessively structured and programmed character of the tasks they haveto perform, feelings of insecurity and powerlessness when facing difficult situations that caring for people with ASD involves, and generally feeling stressed and emotionally drained (Lovell et al., 2014).

## Sociodemographic factors

Other factors beyond the work itself are associated with higher rates of burnout. Sociodemographic factors such as age, gender, education level, and ethnicity have been linked to job burnout rate, though studies have found mixed and sometimes conflicting results.

It is unclear what the relationship is between age and burnout. In some studies, younger service workers reported higher rate of burnout compared to workers who were 40 and older (Maslach et al., 2001). The authors hypothesized that this could be due to reduced stress levels as workers become more familiar with job functions and expectations over time. On the other hand, some studies noted that workers who were older and were in their job for longer were more likely to identify feelings of burnout (Collings & Murray, 1996).

Similarly, studies have found differing results when exploring the impact of gender on job burnout. While some researchers have found that female social service workers were more prone to higher levels of job burnout, some found that male social service workers experienced greater burnout (Sprang et al., 2007 and Thomas et al., 2014). Relatedly, female social service providers report greater exhaustion associated with emotional labor compared to their male counterparts (Erickson & Ritter 2001). Women also report higher level of compassion fatigue and tend to experience higher rates of worker frustration (Sprang et al., 2007); all of these factors feed in to overall feelings of burnout.

Some studies have also shown that an individual's education level is linked to stress and burnout. Schwartz et al., (2007) noted that higher levels of education are often linked to greater responsibility in the work world. As a result, individuals with more years of education have reported experiencing higher levels of stress and burnout.

#### **Workplace environment**

The organizational structure of the workplace plays a role in job burnout and emotional exhaustion (Angerer 2003). Intensity of the job contributes to emotional exhaustion, especially when an individual does not use or does not have the time to use adequate coping strategies (Anderson, 2000). Ambiguity of an individual's role in the workplace has also been found to increase feelings of burnout (Kirk-Brown & Wallace, 2004).

Research also indicates that large caseloads can be detrimental to employee mental health and contribute to feelings of burnout (Koeske & Koeske, 1989). Researchers note, however, that support within the workplace either between co-workers or from supervisors to those they support can help to reduce the stress associated with a challenging workload. Team building communication has also been shown to foster support for social workers, decrease stress levels, and improve job satisfaction.

## **Provider retention strategies**

Workers' health is a goal in itself, and also a legitimate objective that organizations should consider including in their policies. Studies suggest that when direct support staff of autism services experience negative emotions, they are likely to draw on their internal positive psychological resources, specifically their own self-efficacy, optimism, hope, and resilience as a way to cope (Sweetman & Luthans, 2010). These authors emphasize the importance of organizational support as individuals strengthen this internal capital, in order to help them improve their professional effectiveness and reduce emotional exhaustion (Lizano & Mo, 2015).

Strategies that service providers should implement to better support their staff include increasing the amount of program training and support provided to employees. This could come in the forms of workshops, individual and group therapy, and support groups (James et al., 2016). These training sessions should be implemented throughout the year, and schedules should be based on the workers' availability. Focusing office culture to emphasize the importance of wellbeing is important; offices should aim to support employees and provide them with the resources and information they need to continue to be successful.

Another strategy that organizations can consider for improving staff retention is in their hiring practices, specifically in the process of identifying potential employees who are a good fit for a position. Generally, education and experience are given weight, but these variables are not found to be significant with respect to burnout (Griffith et al., 2014). Measurement of character traits of prospective employees may be more informative when considering retention and burnout (Hurt et al., 2013).

Organizations should also evaluate whether ongoing organizational practices play a role in staff retention. Employers should consider ongoing support of their staff, for example incorporating evidence-based interventions to improve coping strategies (Griffith et al., 2014). Staff training is worth exploring.

Burnout is associated with providers' perception that clients are not improving. This suggests that interventions which focus on understanding and alleviating feelings of inability to help clients might be especially useful. It is important that organizations or supervisors understand and recognize the impact of providers' feelings of being unable to help clients. Supervisors should discuss the importance of any positive changes among clients as a part of supervision in order to reinforce the valuable role of their workers. Recalibration of expectations and celebration of small improvements may also reduce feelings of client-related burnout. If mental health workers are attuned to those small improvements they may, as a result, also be better at helping their clients see positive changes, which in turn can promote further improvement.

The Minnesota Department of Human Services (DHS) and its partners are participating in a variety of efforts to increase provider recruitment and retention. These include:

- Increasing awareness of available jobs for those entering the job market through events like presentations and panel discussions at colleges in Minnesota
- Connecting college students in related majors, like psychology, social work, and education, with employers
- Amending state legislation to decrease barriers for providers to become EIDBI certified
- Providing funding and grants for individuals, including those from underserved communities, to receive training and become certified to become mental health professionals

DHS is interested in learning more about how other states across the country address this issue. To do so, they plan to survey work groups that provide comparable services to learn about their approaches to provider recruitment and retention. They anticipate this survey will be administered in fall 2020.

For more information about what DHS is doing to recruit and retain providers, visit:

https://mn.gov/dhs/partners-and-providers/news-initiatives-reports-workgroups/long-term-services-and-supports/eidbi/building-capacity.jsp

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