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## **A Study to Investigate the Relationship between Job Satisfaction and Stress for Social Care Workers in Ireland**

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## Table of Contents

	Page Number
Title Page	
Table of Contents.....	2
Acknowledgements.....	3
Abstract.....	4
<b>Chapter 1 – Introduction</b>	
1.1 Overview.....	5
1.2 The Social Care Sector.....	6
1.3 Stress and Burnout In the Social Care Profession.....	8
1.4 Job satisfaction.....	16
1.5 Coping in a high stress job.....	18
1.6 The Current Study.....	19
<b>Chapter 2 – Method</b>	
2.1 Materials.....	21
2.2 Apparatus.....	24
2.3 Participants.....	25
2.4 Design.....	25
2.5 Procedure.....	26
2.6 Statistical Procedure.....	26
2.7 Ethical Considerations.....	27
<b>Chapter 3 – Results</b>	
3.1 Overview of Results.....	28
3.2 Descriptive Statistics.....	28
3.3 Inferential Statistics.....	31
<b>Chapter 4 – Discussion</b>	
4.1 Aims.....	35
4.2 Summary of Results.....	35
4.3 Limitations.....	39
4.4 Implications for Future Research.....	40
4.5 Recommendations.....	41
4.6 Conclusion.....	41
<b>References.....</b>	<b>42</b>
<b>Appendices</b>	
Appendix A.....	52
Appendix B.....	53
Appendix C.....	54
Appendix D.....	56
Appendix E.....	57
Appendix F.....	58

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### **Abstract**

Based on research carried out by Hawk (2006) that stress in correctional facilities can directly affect job dissatisfaction the aims of the current study was to investigate the relationship between job satisfaction and stress for social care workers in Ireland. A Correlational Questionnaire research design was used with items of stress, burnout, job satisfaction, coping and demographics including, age, gender, marital status and length of service as variables. The sample chosen to participate in the study was 70 Social Care Workers who work in [REDACTED]. There were a total of 61 respondents.

The results indicated that job dissatisfaction for social care workers was strongly linked to emotional exhaustion as a result of continued occupational stress. Furthermore it was found that the more dissatisfied social care workers were with their jobs, the more likely they were to experience depersonalization.

## **1. Introduction**

### **1.1 Overview**

During the past few decades there has been continued investigation into how employees react to their jobs, specifically in terms of work-related stress and job satisfaction for correctional workers. Correctional facilities are unique and dangerous work settings (Hawk, 1997) and it is not surprising that given the potentially challenging environment, stress and burnout are closely linked to this type of employment. The majority of this research has been directed at correctional workers who work with adults (Britton, 1997; Cullen, Link, Wolfe, & Frank, 1985; Harris & Associates, 1968; Jacobs, 1978; Jacobs & Kraft, 1978; Jurik, 1985b; Poole & Regoli, 1980; Toch & Klofas, 1982). Specific research has been carried out to identify the variables of stressors upon correctional workers who have contact with juvenile delinquents. (Blevins, K. R., Cullen, F. T., Frank, J., Sundt, J. L., & Holmes, S. T, 2006). These investigations have been confined to correctional workers who are employed to work with adults and juvenile delinquents. There has been little research conducted to investigate the impact of stress and job satisfaction for social care workers working with young people at risk who are not delinquents. (Messer & Jones, 2001).

Messer et al (2001) describe the huge challenges and stressors for social care workers that are incurred whilst working with young people at risk, explaining that the social care profession is a job that is highly stressful. It comes with stressors and psychosocial hazards; anxieties about assaults and fears of allegations which are

regular topics of discussion between colleagues and commonplace in supervision sessions. The difficulties in developing a cohesive staff team along with a high staff turnover rate affects and impacts upon job satisfaction. Furthermore social care workers have been reported to be moderately satisfied with their jobs despite having high burnout levels (Brown & Leary, 1995; Collins et al., 2000; Prosser 1996)

Therefore this study aims to investigate, thus far, the relatively understudied correlation between job satisfaction and organizational stress for social care workers working with young people at risk in Ireland. It will also address whether burnout is a result of the continuous exposure to stress experienced within this high stress occupation in the social care sector. The social care sector will be discussed identifying the services provided and what is expected from the people who work within this area. Coping mechanisms are a vital component when dealing with stress and this study will investigate the skills required by social care workers to enable them to better manage the continued organizational stress that is experienced on a daily basis. Demographics such as age, gender, marital status and duration of service as variables are significant factors in affecting job satisfaction; and if and stressors are significantly affected by these variables.

## **1.2 The Social Care Sector**

Christy (2005) describes the evolution of the social care field and the emerging role of the social care worker, stating that their job is relatively new in Ireland. This role continues to evolve along with the social care sector during the last 30 years. Presently there are approximately 8,000 people working in the field of social care. The care system evolved from the Reformatory and Industrial Schools system,

the inception of the Child Care Act, 1908 and Mental Health Acts and a series of important government reports. Reports in the 1970's and 1980's such as the Kennedy Report, 1970 and the Task Force on Child Care, led to a major overhaul of the provision of services and brought about significant legislative changes. (Raftery & O'Sullivan, 1999). The implementation of the Child Care Act, 1991 and subsequent revision in 2000 had a lasting impact for the profession of social care workers and clients, providing clear and strict guidelines for the development of services. Many sections of this act have yet to be implemented leading in time, to major changes. (Christy, 2005).

The new legislation has laid a context in which accountability; client rights and protection are to the fore. Further emphasis has been placed on these factors by the publication of three reports on major investigations of malpractice. (Report of the Kilkenny Incest Investigation, 1993; Report of the Enquiry into the Operation of Madonna House, 1996; and the Interim Report of the Joint Committee on the Family, 1996). The findings from these investigations have helped the social care sector to evolve and these recommendations have lead to more positive implications for the development of services and in monitoring staff to ensure professionalism is maintained. For example, inspectorates such as the Health Information and Quality Authority (HIQA) have been set up to monitor both the statutory and voluntary sectors (Christy, 2005).

Social care services provide care for a range of client groups and are run by a combination of statutory and voluntary bodies. One major area is the provision of residential care for children and teenagers who can no longer live in their current family environment or who are homeless. Care is usually provided in small group homes and hostels with typically eight to twelve clients being cared for by twelve to

fifteen staff. Some children and adolescents are looked after in secure or partially secure units and special schools. These clients usually have been referred through the juvenile justice system or are placed in centers by court orders. In all of these cases, the staff who look after their needs are described as social care workers and their role is primarily concerned with the physical, social and emotional welfare of the client. They interact with parents, teachers, multidisciplinary teams made up of psychologists, psychiatrists, social workers, speech and language therapists and counselors with their duties often reaching beyond their basic job description. (Christy, 2005).

The focus of this study is centered around the social care workers who work in the secure care sector. They work with teenagers from the ages of 12-17 who are both male and female. These young people are placed in a secure facility by order of the high court as they are at significant risk to themselves or to others. Ward (1997) points to the range of different functions which a care setting may be expected to carry out, from assessment to rehabilitation and from looking after a client during a brief crisis through to the specialized work of the therapeutic communities, where work is geared towards promoting an ethos of psychotherapeutic treatment for emotionally damaged clients. Thus, the social care worker's job is immensely complex, placing demands on workers to draw upon the resources of their personalities, engaging in close teamwork in order to cope with what may be described as sometimes volatile and vulnerable clients (Christy, 2005).



### **1.3 Stress and burnout in the Social care profession.**

Although it may be obvious that stress and burnout are genuine problems for Social Care Workers in Ireland when considering the nature of the job, little research seems to have been conducted on these issues. However, there has been a huge amount of research conducted in similar professions such as teaching, nursing and social work on an international scale.

Stress is experienced daily and is a part of human existence. It cannot be totally removed from anybody's life and can be seen as useful in enhancing peoples job performance, however stress in large amounts over a long period can be debilitating. Selye (1976) described stress as bodily processes created by circumstances that place physical or psychological demands on an individual.

In a study carried out by Nako (2010) it describes work related stress as a major cause of mental illness and reports it has become a worldwide phenomenon. For example 28% of Canadian workers report work to be either "quite a bit" or "extremely" stressful on a daily basis (Bergman, Corabian & Harstall., 2009). Furthermore health care workers can experience higher levels of work related stress compared to the general working population on a daily basis due to the nature of the job. (Mimura & Griffiths, 2003)

Burke (1993) classifies stressors that can occur during the course of a person's career and groups these into two categories; job-related and individual related stressors. Job related stressors are the physical working environment, organizational structure, job duties, relationship with colleagues and managers. Individual related stressors are; career development and work-family conflict. (Burke, 1993). Working in the social care sector can incur the above stressors but social care workers can also

experience many other forms of stress. Maslach and Jenkins (1994) describe working in human service organizations as interpersonally and emotionally demanding.

Hasenfeld (1983) has argued that working with people is generically different to working with “data” or “things” and has outlined a number of features that characterize working with people within human service organizations; these include ambiguous goals, a weak link between methods, outcomes and difficulty observing results.

In a study carried out by Fontana & Abouserie (1993) stress levels in teachers and gender were examined. The results showed that 72% of teachers were moderately stressed and 23% had dangerously high levels of stress. It also showed that age and gender had no significant effect on these levels, whereas personality factors were more of a predictor of stress. This conflicts with research carried out by Antoniou & Polychroni & Vlachakis (2006) who studied stress in teachers, finding that female teachers experienced higher levels of occupational stress than their male counterparts. Younger teachers were also more likely to experience this stress.

A study carried out by Kerr et al (2011) examined stress in Irish teachers, finding that maintaining boundaries with students who had significant personal problems, tackling students with behavioral problems and workload were all factors that triggered stress. Christy (2005), found that stressors for teachers are similar to those for social care workers and that working in the social care sector the onus was placed on building relationships with service users. This entails working closely with clients, often in difficult and demanding circumstances. Griffin (1999) reports that feeling the job is dangerous is a significant stressor experienced by correctional staff working with service users who can be potentially violent. This is a constant reminder for Social care workers who work in secure care. (Christy 2005).

In Ireland, it is reported that the top most stressful jobs are traffic wardens and voluntary workers, followed by teachers and health service professionals such as social workers, ambulance drivers, nurses and doctors. (Irishjobs.ie, 2012) This research, conducted by IrishJobs.ie, reports that the most stressful jobs involve direct contact with the public in emotionally intense situations, where the working environment is governed by strict rules. Organizational attitudes and policies and procedures can also contribute to the stress experienced by social care workers. Working in human services such as teaching, social work and nursing has been described as a vocation (Durka, 2002; Huebner, 1992), with their working roles being significantly more complex than others. Christy (2005) describes the social care vocation as one that has a multitude of demands made upon the practitioner to do their utmost for young people in care, a pressure is often met with worry and second-guessing if the decision being made is the right one.

Christy (2005) describes what motivates people to become childcare workers believing there is an inescapable stress-producing conflict between the worker's commitment to giving, and the reality that frequently they cannot give enough. Each person's emotional resources are limited and the support offered by family, friends and colleagues is often insufficient. This research evidence on stress in human services organizations has implications for the social care worker, causing long-term effects and the exposure to occupational stress can produce burnout. (Cherniss, 1980; Lindquist & Whitehead, 1986; Maslach, 1982; Maslach & Jackson, 1984).

Matheny, Gfroerer & Harris (2000) described burnout as a loss of idealism and enthusiasm for work. Freudenberger (1974), a psychiatrist, was the first to coin the term "burnout". Maslach and Jackson (1981), who are viewed as pioneers in the study of job burnout, defined burnout as "a syndrome of emotional exhaustion and

cynicism that occurs frequently among individuals who do ‘people work’ of some kind” (p. 99). They argued that job burnout is the extensive strain and psychological exhaustion faced by employees. The Maslach Burnout Inventory has been developed to operationalize and assess the three dimensions of burnout (Maslach et al., 1996). Maslach & Jackson, (1981) and Maslach & Schaufeli, (1993) described the three sub-domains: (1) depersonalization, in which one distances oneself from others and views others impersonally, somewhat callously. Employees become detached and cynical. (2) reduced sense of personal accomplishment, is a feeling of being ineffective in dealing with others at work, including a feeling of not making a positive impact and not being effective at dealing with others. (3) Emotional exhaustion, in which one feels emotionally drained, fatigued, overextended and emptied of personal emotional resources and becomes highly vulnerable to stressors. Early research on burnout focused on those working in the human services and health care fields (Freudenberger, 1975; Maslach, 1976). Freudenberger (1977) describes human service professionals as employees who are particularly vulnerable to burnout. This type of work by nature is intense, with direct interactions with clients or patients and can be emotional and stressful (Pines & Aronson, 1988). Schaufeli and Enzmann (1998) reported that the most studied occupations are teachers, nurses and social workers. In these studies it was noted that employees had patterns of emotional depletion and loss of motivation and commitment that could be as a result of continued stress due to the demands that are part of their profession. Depersonalization for example may be expressed through poor attitudes towards young people in care and compromising their relationships with colleagues (Christy, 1996) While evidence has been accumulated on all three, emotional exhaustion is the most common symptom of burnout and is most likely to develop first (Maslach 2001).

The majority of the professional human service workers tend to be women, however men are found in areas of social work, teaching and health care. (Schaufeli & Greenglass 2001). It is not surprising that researchers such as Maslach and Jackson were interested in finding out who experiences more burnout, given that women were reported to suffer more from burnout given that they have the primary responsibility of their children along with their careers. Maslach and Jackson (1981) examined gender in the human service occupations. They found that women scored higher on emotional exhaustion and lower on personal accomplishment than men. This research was based on different occupations such as police officers and psychiatrists who were mainly men, and nurses, social workers and counselors who were mainly women. These differences in occupations may impact more on burnout rather than gender differences (Schaufeli & Greenglass 2001). In a study carried out by Hannigan et al (2000) mental health staff was examined, it was found that male workers reported more depersonalization than women. Interestingly Kumar et al. (2007) who examined psychiatrists found that marital status was significantly linked to emotional exhaustion; similarly single parents were more likely to have higher levels of mental exhaustion. Length of service in an occupation within human services can contribute to burnout as reported by Yiu et al (2001) who reported that volunteers experienced a lack of personal accomplishment when length of service was six to twelve months and emotional exhaustion and depersonalization was experienced when the duration of service was five to ten years.

This research would suggest that women feel more emotionally drained from their work than men, men reported more depersonalization than women and marital status can affect some elements of burnout along with being single and having dependents. Length of service also contributes to the development of burnout in

human services. Similarly it was found by Antoniou & Polychroni & Vlachakis (2006) in a study into teacher stress they found that younger teachers experienced higher levels of burnout, especially emotional exhaustion and disengagement while older teachers experienced higher levels of stress due to lack of support they get from the government.

Onyett et al (1997) reports that employees who work in mental health care teams experience more emotional exhaustion than the scale norms. It was also found in this study that workers did not experience the burnout element of personal accomplishment or depersonalization. Hurst & Hurst, (1997) believe that working as a correctional worker; job burnout and the feeling of frustration and fatigue is very real. Armstrong and Griffin (2004), "few other organizations are charged with the central task of supervising and securing an unwilling and potentially violent population" (p.577). In one representative study of nursing staff, it was found that, for those suffering burnout, their scores on exhaustion were much higher than average, whereas their scores were only moderately higher on the other dimensions (Pick & Leiter, 1991).

Maslach (1981) argues that the notion of person-environment fit is relevant to a theory of burnout. It is proposed that the greater the mismatch between the person and the job, the greater the likelihood of burnout. The theory specifies six areas in which misfit can occur: workload, control, reward, community, fairness and values. It is also suggested that values referring to a mismatch between the job requirements and a person's principles may be an important mediator of the other mismatches. Leiter (1991) has suggested that burnout may happen to all employees in the human services, this can be due to the conflict between the idealistic "professional mystique" with which aspiring human service providers are endowed during their training and

the harsh realities of working in the human service profession. People who enter the human service according to Christy (2005) believes that many social care workers begin their careers motivated and energetic, believing they can make a change to a young persons life. Their idealistic view can be trampled on however when they encounter the magnitude of problems people have and creating that change can be somewhat harder than they thought. He believes the role of social care worker is valued within the community and they are seen as caring and patient, but in reality when the social care worker is met with a difficult and aggressive child, communities perceptions of that person being caring and patient are difficult to maintain. This reality can impact on the workers self esteem and affect their own perceptions of their ability to help vulnerable children (Christy 2005).

Whitehead (1984) believes that "The 'burn-out syndrome'" is an extreme response to occupational pressure. It has been described as primarily an experience of exhaustion resulting from excessive demands on the worker's energy and resources accompanied by a dehumanization of the caring process.

Christy (2005) reports that the rate of burnout amongst social care workers is high. The social care worker is frequently forgotten and put last in the field of social care. Low salaries, long hours and unsociable working hours, no lunch breaks and working through holidays can be wearing. Social care workers often feel like their work is scrutinized due to daily practice open to the view of colleagues, supervisors, children and a wide team of multi disciplinary workers. Mistakes can be made and bad days are hard to hide, with a lack breaks and under constant supervision it can be a pressured situation to be in. This along with the pressure of being a good role model can be exhausting (Christy 2005).

As social care workers face difficult teenagers with behavioral problems everyday, de-escalating potentially dangerous situations and interacting with challenging families. The keeping up with the demands of supervisors along with an intense environment, it is no wonder many social care workers experience some form of burnout at some point in their careers (Christy 2005).

It is also important to keep in mind that although some studies have described job stress as the same as burnout, this is incorrect. Burnout is conceptually different from stress (Carlson et al., 2003; Carlson & Thomas, 2006; Keinan & Malach-Pines, 2007; Pines & Keinan, 2005). Burnout is generally seen as the end result of prolonged exposure to job stress. It takes much longer to occur than job stress and is the consequence of long-term exposure to negative work experiences (Schaufeli & Peeters, 2000; Whitehead & Lindquist, 1986). Not surprisingly, has it long been theorized that job stress is one of the major causes of burnout ( Maslach, 1982)

#### **1.4 Job satisfaction**

Job satisfaction is a desirable goal for all. It has been an area of interest to researchers in discovering what makes a person satisfied in their jobs for a long time (Hulin, 1992; Smith, 1992). Cook et al (1981) looked at job satisfaction and in particular values or interests in the work itself, connections with peers, the organization as a whole, appraisals of supervisors and rewards. Interest in job satisfaction continues to be a topic of interest for employers. They can recognize the factors that affect job satisfaction to benefit their organization and employees. When employees are satisfied, they tend to care more about the quality of their work, they



are more committed to the organization, they have higher retention rates, and they are generally more productive. (Riketta, 2008).

In a study carried out by Onyett (1997), job satisfaction and burnout was investigated in community mental health teams. It was found that job satisfaction was high despite social workers having high burnout. Similarly, research carried out by Billings et al (2003) reported that community care teams were moderately satisfied with their jobs, with similar sources of satisfaction and stress across occupations in the human services. Cherniss (1995) reports that high levels of work commitment can lead to burnout, but still have high levels of job satisfaction. This research suggests that working in human services comes with high levels of stress and burnout, however employees seem to be satisfied with their jobs. Kumar et al (2007) believed that psychiatrists who are very committed to their jobs and display passion for what they do; the mental and emotional exhaustion does not affect their job satisfaction. He further suggests that psychiatrists believe that the high stress and mental and emotional exhaustion is part of their profession. Maslach and Jackson (1981) did not see job dissatisfaction as a cause of burnout, however Cherniss (1980) argued that it was a major cause.

Levine (1995) has stated that there is an ongoing need for research in the area of job satisfaction. Butler (1990) believed the importance of job satisfaction in social workers was paramount because of its turnover rates, absenteeism, client outcomes and the recruitment of competent individuals in the field. In recent decades there has been a substantial rise in the number of women entering the work force, researchers such as Oshagbemi (2000) were interested in the gender differences of university teachers. It was found that gender did not affect job satisfaction directly, however women were found to enjoy their jobs more at a higher-ranking level than their

female colleges. Interestingly in a study carried out by Reininghaus and Priebe (2007) who examined mental health staff in a large European study, extrinsic job satisfaction was higher for men than women. In the same study it was found that age was associated with higher morale levels in the team.

According to Driscoll & Randall (1999) Intrinsic and extrinsic factors have been strongly linked to job satisfaction. Intrinsic factors are based on personal perceptions and internal feelings, and include factors such as recognition, advancement, and responsibility. Extrinsic factors are external job related variables that would include salary, supervision, and working conditions. Jayaratne & chess, (1986) report that burnout in the social work profession has shown to be high, believing that job dissatisfaction can lead to burnout. Therefore the study of job satisfaction is clearly important for occupations in the human services and in particular in the field of social care. Christy (2005) reports that in the past ten years, educational and health care reforms, and budget cuts have all contributed to the restructuring of policies, which can cause uncertainty for employees changing the roles and functions for social care workers. These extrinsic factors can affect job satisfaction.

### **1.5 Coping in a high stress job**

Demers et al (2009) believe that different demographics including gender, age, education and job can affect the way a person copes with stress. In 1984, Lazarus and Folkman reported that coping was a way of mediating the effects of stressors on the psychological and physical level. In a study carried out by Roohafza et al (2009) the association between life-style and socioeconomic factors and coping strategies were

investigated. The results showed that marital status was not significantly related to using either adaptive or maladaptive coping skills. Marital status will be further explored in this study in relation to coping.

Much research has been carried out to identify how teachers cope in the sometimes high stress environment they work in. (Dunham, 1992; Rogers, 1996). It has been suggested by Dunham and Varma (1998) that developing ways of coping can reduce stress, which in turn can affect your job satisfaction in a positive way. Dunham and Varma (1998) believe that physical activity, using humor and developing skills can help with reducing stress. Being able to cope in difficult situations requires personal and organizational support (Kerr et al 2011), these supports can come in the form of training in problem solving and behavior management. Stress can be reduced when one is helped to understand how stress occurs, what the consequences of stress are and how it can be coped with (Gibbons & Gibbons, 2007).

In a study carried out by Shin et al (1984) to investigate the effects of coping on psychological strain and burnout produced by job stress in the human services, they reported that previous research had suggested that individual coping did not alleviate strain produced by job stress. They believe that group coping and social support are much more effective coping strategies in alleviating stress.

## **1.6 The current study**

This research aims to investigate stress and job satisfaction for social care workers in Ireland. The criterion variables of stress and burnout along with the predictive

variables of age, gender, marital status, length of service and coping will be all be accounted for to investigate whether they have an impact on Job Satisfaction. The participants are social care workers working with young people in a secure residential facility who have severe emotional and behavioral difficulties. The current study would like to develop on limited research for social care workers in Ireland in relation to job satisfaction and stress and develop a deeper understanding into stress and dissatisfaction experienced in this challenging area of employment. The hypotheses of the current study are as follows;

1. It is hypothesized that stress and burnout will have a significant negative relationship with job satisfaction for social care workers.
2. It is hypothesized that coping will have a significant positive relationship with job satisfaction
3. It is hypothesized that coping will have a significant positive relationship with stress and burnout.
4. It is hypothesized that the length of service will have a significant negative affect with burnout.
5. It is hypothesized that job satisfaction will have a significant relationship with burnout.
6. Age and gender differences will be explored to find if there any effects on stress and job satisfaction.
7. Marital status will be examined to determine if it has a positive effect on coping.

## **2: Method**

### **2.1 Materials**

The questionnaire in the present study contained five sections: (1) A measure of Job Satisfaction (MSQ-SF; Weiss, Davis, England & Lofquist, 1967) (2) A measure of Coping using the Brief COPE (Carver 1997) (3) A measure of Burnout, Malachi's Burnout Inventory (MBI; Maslach & Jackson, 1981) (4) A measure of stress Perceived Stress Scale (Cohen, Kamarck & Mermelstein., 1983) (5) Demographics consisting of four items, Age, Gender, Marital Status and Length of service.

#### ***Job satisfaction:***

To measure Job satisfaction the Minnesota Satisfaction Questionnaire – short form (MSQ-SF; Weiss, Davis, England & Lofquist, 1967) was utilized. Moderately strong psychometric measures have been established for the MSQ (Weiss et al., 1967). In a study carried out by Rentsch and Steel (1992) it was found that the MSQ-SF has a strong validity when compared to other measures of job satisfaction.

The questionnaire consists of 20 questions, it is a self administered instrument and consists of three scales; Intrinsic satisfaction, Extrinsic satisfaction and general satisfaction (Weiss et al., 1967) The Intrinsic Satisfaction scale evaluates job satisfaction that comes from inherent aspects of the job. The Extrinsic Satisfaction scale assesses the fulfillment one can get from external aspects of the job. The General Satisfaction scale measures overall job satisfaction, which is combined with the Intrinsic and Extrinsic Satisfaction scales.

The MSQ-SF requires the respondents to rate their answers on a 5-point Likert-type scale from 1 (very dissatisfied) to 5 (very satisfied). The MSQ-SF manual does not provide normative data for social care workers; therefore nurses were chosen as the most similar occupational group and were used as the normative sample for comparison. Job satisfaction is calculated by comparing an individual's score with the percentiles from the normative sample. High job satisfaction is characterized by percentile scores of 75 or higher. Scores ranging from 26-74 indicate moderate job satisfaction and low job satisfaction is anything lower than 25.

***Coping:***

To measure coping the Brief COPE (Carver 1997) questionnaire was used. This is a 28-item scale measuring a broad range of coping responses. Respondents were asked to rate their answer on a 4-point Likert-type scale from 1 (I haven't don't do this at all) to 4 (I usually do this a lot). There are 14 coping responses, five of these are negative coping responses; Self-distraction, denial, substance abuse, behavioral disengagement, and self-blame. Nine are positive coping responses; active coping, emotional, venting, instrumental, positive reframing, acceptance, planning, humor and religion.

The test-retest reliability suggests that the self-reports of coping tendencies that are measured by COPE are relatively stable (Carver 1997). The internal consistency of the COPE scales comes from Cronbach's alpha reliability coefficients, which were computed for each scale. The results show that the values are high, with only one falling below 6 (mental disengagement). (Carver 1997).

***Burnout:***

To measure burnout Maslach's Burnout Inventory- Human Services Survey (MBI; Maslach & Jackson, 1996) was used. This is a 22-item scale measuring three burnout components. All three burnout components were used in this study, namely the burnout areas of depersonalization, emotional exhaustion and personal accomplishment. The emotional exhaustion scale assesses work related exhaustion and emotional overextension. The depersonalization scale measures interpersonal detachment from clients of the service. The personal Accomplishment scale assesses a sense of competence and productivity at work.

On the MBI-HSS, respondents were asked to rate how often they felt recently in the job through a 7-point Likert-type scale ranging from 0 (Never) to 6 (Everyday). Scoring of the MBI-HSS is categorized into High, Average and Low levels of burnout. High burnout is characterized by elevated scores on Emotional Exhaustion (>21) and Depersonalization (>8) scales and low scoring in Personal Accomplishment (>28) scale. Average burnout is reflected with emotional exhaustion scores between 14 and 20, depersonalization scores between 5 and 7, and personal Accomplishment scores between 29 and 33. Low levels of burnout are shown to have low scores on emotional exhaustion (>13) and Depersonalization (>4) scales and high scoring on Personal accomplishment (>34) scale. The MBI has been used in other studies to assess correctional staff burnout (Carlson & Thomas, 2006). The MBI has moderately to strong psychometric properties. (Maslach at al., 1996). Other research has found that the MBI-HSS is an accurate measure of burnout (Vanheule, Rosseel, & Vlerick, 2007).

***Stress:***

To measure stress the Perceived Stress Scale (Cohen, Kamarck & Mermelstein., 1983) was used. This 10-item PSS-10 is a popular scale developed to quantify the psychological construct of “perceived stress”. Cohen at al., (1983) state that the PSS is a valid construct based upon research and statistically significant correlations between PSS and depressive symptoms and social anxiety. The scale measures the extent to which the individual appraises situations occurring in their own lives to be stressful to them. The PSS requires respondents to rate on a Likert-type scale ranging from 0 (Never) to 4 (Very often) how often they have felt and thought during the last month. The scale requires seven items to be reverse coded. When all seven items are recoded an overall score can be obtained and this is an indicator of the respondents perceived stress. This is carried out for each respondent, the high scores indicate higher perceived stress and low scores suggest lower perceived stress levels.

***Demographics:***

Questions on demographics included; Gender, Age, Marital status and length of service. Participants were asked to “tick one of the following boxes” for this section. For gender, male and female were the options. For age there were categories of 18-25, 26-40, 41-55 and 56-65 years. Marital status consisted of single, married and cohabitating. Length of service was 1yr, 2-5 yrs., 5-10 yrs., and 10+yrs.

**2.2 Apparatus**

The data were analysed using SPSS version 20.0 (SPSS Inc., Chicago, IL, USA)



### 2.3 Participants

Eighty (N=80) practicing social care workers who are employed full time at the Health Service Executive at [REDACTED] were selected for this study. Due to sick leave, annual leave and other factors seventy (N=70) staff members were provided with the questionnaire and a cover letter explaining the purpose of the study. A total of sixty-one (N=61) questionnaires were returned.

The sample was chosen specifically due to the unique nature of the job. The social care workers in [REDACTED] deal with individuals directly who have been through traumas in their lives. The consequence of being exposed to traumatic issues from the client group causes significant stress. The participating social care workers in the present study consisted of thirty-four (N=34) females (55.7%) and twenty-seven (N=26) males (44.3%). The majority of participant's marital status reported to be single (N=29), (47.5%). (52.5%) of participant's were between the ages of 26-40 years (N=32) and most (52.5%), (N=28) had been working in the social care sector for 2-5 years.

### 2.4 Design

This study employed a questionnaire-based correlational research design; it was carried out as quantitative research. The predictive variables are demographics such as; age, gender, marital status and length of service and coping both positive and negative. The criterion variables are; stress, job satisfaction and the three components of burnout, personal achievement, emotional exhaustion and depersonalization.

## **2.5 Procedure**

Firstly permission was sought from the Special Care unit manager to collect data from the employees of unit 2 and unit 3 on campus in [REDACTED]. Participants were in attendance for work at the time of collection. Social care workers were briefed at staff meetings and asked to fill out questionnaires on a voluntary basis. A total of seventy questionnaires were left in an envelope between units 2 and 3. Due to shift changes, sick leave and annual leave it took a total of three weeks for 61 questionnaires to be completed.

## **2.6 Statistical Procedure**

To analyze the data inputted into SPSS (SPSS Inc., Chicago, IL, USA) a variety of inferential tests were used to test the hypothesis for this study;

1. Spearman's rho correlations were used to test relationships between age and stress.
2. An Independent t-test was run to find differences between males and females in relation to stress.
3. A series of One way Analysis of Variance were run to see if marital status affected any positive or negative coping strategies.
4. A multiple regression was run between 18 predictor variables to see if there was any effect on job dissatisfaction.
5. Pearson's r Correlation Coefficient was used to test the hypothesis of the current study that job satisfaction would have a significant relationship with burnout.

## **2.7 Ethical Considerations**

Seventy (N= 70) staff members were provided the questionnaire and cover letter explaining the purpose of the study; that participation was voluntary, and that all responses would remain anonymous. All respondents were assured that confidentiality would be adhered to regarding their results. It was explained to the participants that they had the right to withdraw from answering the questionnaire at anytime and they also had a right to know the results of the study. All participants were given an email address where they could feel free to mail the author of the study at any time with questions or for the results of the present study. It was also mentioned that there would be no discrimination on the basis of age, gender, race, religion, sexuality or health condition. Participants were reminded that if they had been affected by any questions that were presented in the questionnaire, line managers were available for supervision and debriefing. Also an on-site psychologist was available if respondents felt they needed to discuss any concerns that arose from participating in the study.

### 3. Results

#### 3.1 Overview of Results

The results of the present study consisted of an analysis of the relationships between the measured variables of stress, job dissatisfaction, burnout, coping, age, gender, marital status and length of service by means of a series of tests using descriptive and inferential statistics to determine the outcomes of the hypothesis discussed earlier.

#### 3.2 Descriptive Statistics

The number and percentage for the demographics used in this study are displayed in table 1. The majority of participants were female (N=34). Participants were mainly single (N=29) and between the ages of 26-40 (N=32) and length of service for most was 2-5 yrs. (N= 28).

Table 1 shows a result of the demographics used in this study.

**Table 1:** *Demographics.*

Variables	N	%
<b>Gender</b>		
<i>Male</i>	27	44.3
<i>Female</i>	34	55.7
<b>Marital Status</b>		
<i>Single</i>	29	47.5
<i>Married</i>	24	39.3
<i>Cohabiting</i>	8	13.1
<b>Age</b>		
<i>18-25 yrs.</i>	9	14.8
<i>26-40 yrs.</i>	32	52.5
<i>41-55 yrs.</i>	18	29.5
<i>56-65 yrs.</i>	2	3.3
<b>Length of service</b>		
<i>1 year</i>	6	9.8
<i>2-5 yrs.</i>	28	45.9
<i>5-10yrs</i>	21	34.4
<i>10+yrs</i>	6	9.8

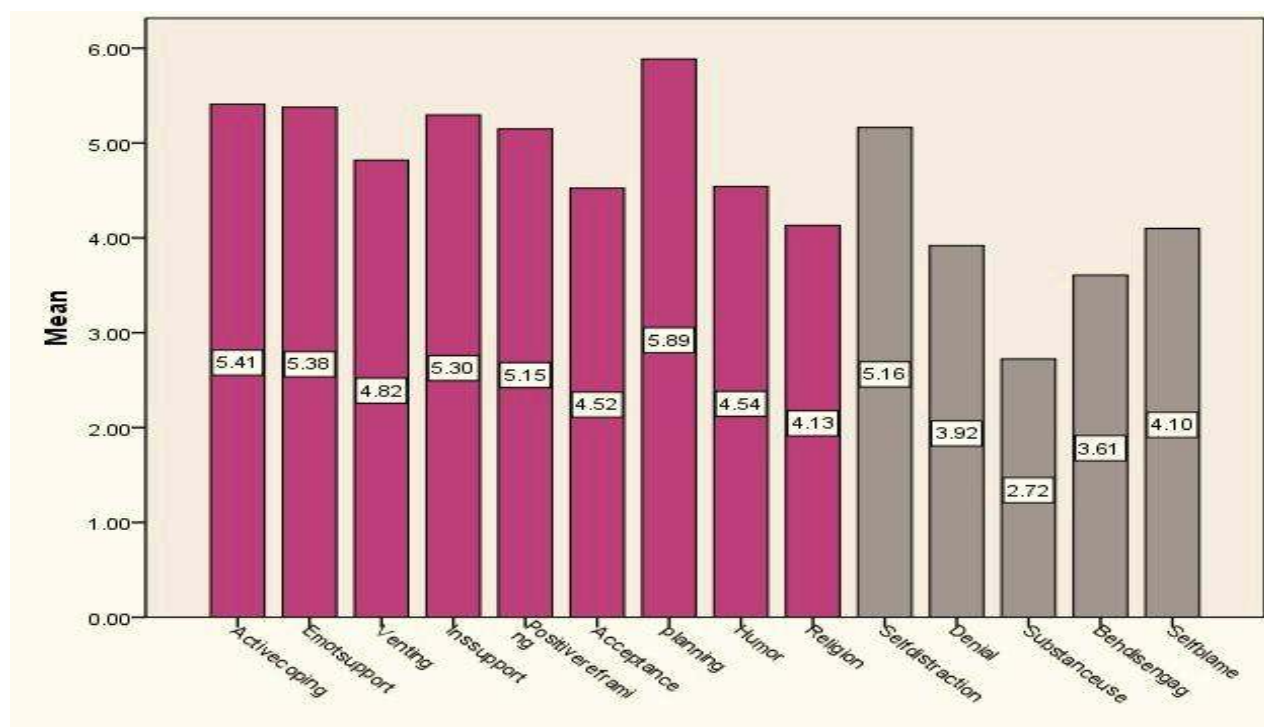
The mean scores, standard deviations and minimum and maximum scores were calculated for the variables of stress, job dissatisfaction, and the three elements of burnout; emotional exhaustion, depersonalization and personal accomplishment are displayed in table 2. It was found that the standard deviation for emotional exhaustion was 11.6 and the mean 33.16. The maximum score for emotional exhaustion was 49.00 and the minimum 12.00. Depersonalization showed a maximum score of 30.00 and minimum of 5.00, the mean for this was 18.01 and SD, 6.13. Personal Accomplishment's maximum score was 42.00 and minimum 6.00 the mean showed to be 25.95 and the SD, 8.33. Stress maximum score was 30.00 and minimum was 13.00. The mean was 22.00 and SD, 4.38. For job dissatisfaction the minimum score was 51.00 and the maximum was 84.00 the mean was 68.19 and the SD, 9.67.

**Table 2.** *Breakdown of Descriptive statistics for Stress, Job Dissatisfaction and Burnout.*

	N	Maximum	Minimum	Mean	Std.Deviation
Emotional Exhaustion	<b>61</b>	<b>49.00</b>	<b>12.00</b>	<b>35.16</b>	<b>11.6</b>
Depersonalization	<b>61</b>	<b>30.00</b>	<b>5.00</b>	<b>18.01</b>	<b>6.13</b>
PersonalAccomplishment	<b>61</b>	<b>42.00</b>	<b>6.00</b>	<b>25.95</b>	<b>8.33</b>
Stress	<b>61</b>	<b>30.00</b>	<b>13.00</b>	<b>22.00</b>	<b>4.38</b>
Job Dissatisfaction	<b>61</b>	<b>84.00</b>	<b>51.00</b>	<b>68.19</b>	<b>9.67</b>

A bar chart was compiled for both positive and negative coping strategies used by social care workers. Planning is shown to be the most used positive coping strategy scoring high at (Mean =5.89/SD=1.45) The maximum score for this was 8.00 and minimum 3.00. Social care workers were also shown to score high on active coping, emotional support, positive reframing and instrumental support. Religion was shown to score lowest at (Mean =4.13/SD=1.56) for positive coping strategies the maximum was 7.00 and minimum was 2.00 for religion. Self distraction was shown to be the most used negative coping strategy scoring (Mean =5.16/SD=1.63) with a maximum score of 8.00 and minimum of 2.00. Substance abuse was shown to be scoring the lowest for negative coping strategies (Mean =2.72/SD=0.82) the maximum 4.00 and minimum was 2.00. The results are displayed in table 3.

**Table 3:** Bar chart showing positive coping and negative coping strategies in social care workers.



Pink denotes positive, grey denotes negative

### 3.3 Inferential Statistics

#### *Multiple Regression*

A multiple regression was ran between 18 predictor variables to establish if there was any effect on job dissatisfaction. Stress, coping, age and gender were of particular interest. The results indicated that the amount of variance explained by the combined interaction of the 18 predictor variables, of job dissatisfaction, was 30.3% (Adjusted R Square = 0.303,  $F(18, 42) = 2.448$ ,  $p = .009$ ). Therefore the combination of all predictors does have significant predictive value in relation to job dissatisfaction levels in the sample social care workers.

Behavioral disengagement had a significant positive strong effect (Standardized Beta = .514,  $p = .005$ ) on job dissatisfaction. The more the individuals used disengagement as a coping strategy, the more dissatisfied with the job they were. Humor also had a weak positive effect (Standardized Beta = .469,  $p = .005$ ). These results would suggest that the social care workers who used behavioral disengagement as a coping strategy had greater job dissatisfaction; similarly humor used by social care workers would suggest that they were dissatisfied in their jobs. Total stress had a non-significant effect on job satisfaction (Standardized Beta = .014,  $p = .005$ ), suggesting that stress did not affect job dissatisfaction for social care workers. Gender was shown to have a non-significant effect on job satisfaction also (Standardized Beta =  $-.166$ ,  $p = .005$ ). Similarly age had a non-significant effect on job satisfaction (Standardized Beta = .149,  $p = .005$ ).

### *Pearson's r Correlation Coefficient*

In regards to testing job satisfaction and its relationship with burnout, a Pearson's r Correlation Coefficient was carried out. The results indicated that there was a significant moderately strong positive relationship between job dissatisfaction and emotional exhaustion. ( $r = .461, p < 0.01, 2\text{-tailed}$ ) These results suggest that job dissatisfaction for social care workers was strongly linked to emotional exhaustion. Furthermore it was found that there was a strong positive relationship between job dissatisfaction and depersonalization ( $r = .600, p < 0.01, 2\text{-tailed}$ ) suggesting that the more dissatisfied social care workers were with their jobs, the more likely they were to experience depersonalization. It was found that there was a non-significant weak positive relationship between Personal Accomplishment and Job dissatisfaction ( $r = -.281, p > 0.05, 2\text{-tailed}$ ). These results meet the expected hypothesis that there would be a significant negative relationship between job satisfaction and burnout. These results are displayed in Table 3.

**Table 4:** *Correlations between Job Dissatisfaction and Burnout*

<b>Variables</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
<b>1. Job Dissatisfaction</b>	--			
<b>2. Emotional Exhaustion</b>	.461**	--		
<b>3. Depersonalization</b>	.600**	.684**	--	
<b>4. Personal Accomplishment</b>	-.281*	-.321*	-.556**	--

Note: \*  $p < 0.05$  level \*\*  $p < 0.01$  level



### ***Spearman's rho correlation***

The result of the Spearman's rho correlation test highlighted there was a non-significant weak positive correlation between age and stress levels ( $\rho = .184$ ,  $p = .155$ , 2-tailed). These results suggest that age does not affect stress levels for social care workers.

### ***Independent Samples t-test***

An independent samples t-test was used to test if there was any difference between males and females in relation to stress levels for social care workers. It showed females (mean = 21.8, SD = 4.2) were found to have similar levels of stress as males (mean = 22.3, SD = 4.7). The 95% confidence limit demonstrates that the population means difference of the variables lies somewhere between -1.74 and 2.80. The results illustrate there was no significant difference between males and females in relation to stress levels ( $t(59) = 0.468$ ,  $p = .642$ , 2-tailed). These outcomes suggest that the age of social care workers do not appear to affect stress levels which also applies to gender, presenting no difference in stress levels between males and females or age for those employed in social care.

### ***One-Way Analysis of Variance***

A series of One-Way Analysis of Variance tests was performed to examine the effect of marital status on coping. It showed there was no distinct effect for marital status in relation to both positive and negative coping strategies. The range for all coping

strategies between groups as determined by one-way ANOVA is as follows. Active coping  $f(2,58) = .023, p=.977$ . Denial  $f(2,58) = 2.55, p = .087$ . These results would suggest that marital status does not bear any consequence, either positive or negative upon social care practitioners. These results are displayed in table 5.

Table 5. A One-Way Analysis of variance of between groups/within groups for coping strategies.

Source	Df	F	Sig.
Self Distraction	2,58	.782	.462
Active Coping	2,58	.023	.977
Denial	2,58	2.546	.087
Substance Abuse	2,58	.161	.852
Emotional Support	2,58	1.631	.205
Instrumental Support	2,58	.198	.821
BehaviouralDisengagement	2,58	.676	.513
Venting	2,58	.166	.847
Positive Reframing	2,58	.838	.438
Planning	2,58	.074	.929
Humor	2,58	.221	.803
Acceptance	2,58	1.70	.191
Religion	2,58	1.529	.225
Self Blame	2,58	.678	.511

## **4. Discussion**

### **4.1 Aims**

The aim of this study was to investigate the relationship between Job Satisfaction and Stress for Social care Workers in Ireland. It was first of all expected that there would be a significant difference between the levels of stress and burnout and Job dissatisfaction for those who work in the social care sector. Next, it was expected that there would be a difference in job satisfaction when positive coping strategies were used. Thirdly it was expected that coping would have a positive relationship with stress and burnout. Furthermore the length of service was explored to examine if this had a negative effect with burnout. Marital status was also investigated to determine if this had a positive affect on coping. Lastly Age and Gender were explored and differences were sought in burnout, stress and Job satisfaction. Several of the hypothesized relationships between burnout and job dissatisfaction were supported whereas others were not.

### **4.2 Summary of Results**

A strong significant positive relationship between burnout and Job dissatisfaction was found in Social care workers. Specifically two of the three dimensions of burnout were displayed when job dissatisfaction and burnout were examined. Depersonalization and emotional exhaustion scored high in relation to job dissatisfaction. Maslach and Jackson (1981) did not see job dissatisfaction as a cause of burnout, however Cherniss (1980) argued that it was a major cause. The results of the current study support Cherniss's views on job satisfaction, that it is a relevant predictor of burnout. Similarly the results on emotional exhaustion having a strong

significant positive relationship with Job satisfaction support the findings in the research discussed in the literature review by Hurst & Hurst (1997) finding that working as a correctional worker, job burnout and the feeling of frustration and fatigue is very real. It also supports the research carried out by Pick and Leiter (1991) who examined nursing staff, finding that those suffering burnout their scores in exhaustion were much higher than average, whereas their scores were only moderately higher on the other dimensions. Depersonalization scored high also supporting research that jobs in human services are susceptible to depersonalization due to the nature of the job. There was a non-significant relationship between personal accomplishment and job satisfaction. This may be due to the majority of participants length of service was 1-5 yrs. These findings would support the research by Yiu et al (2001) who reported that volunteers experienced a lack of personal accomplishment when length of service was six to twelve months and emotional exhaustion and depersonalization was experienced when the duration of service was five to ten years. While evidence has been accumulated on all three, emotional exhaustion is the most common symptom of burnout and is most likely to develop first (Maslach 2001). Although stress did not have a significant relationship with job dissatisfaction, burnout is seen as result of continued stress. Maslach, (1982) believed that it was not surprising, it is long been theorized that job stress is one of the major causes of burnout

The effect of marital status on coping showed no main effect, these results would suggest that being married did not affect any positive or negative coping skills that may be used to alleviate stress. These findings support the research discussed in the literature review by Roohafza et al (2009) where marital status was not

significantly related to using either adaptive or maladaptive coping skills. Although marital status may not affect positive and negative coping skills it was found by Kumar et al. (2007) that marital status was significantly linked to emotional exhaustion; similarly single parents were more likely to have higher levels of mental exhaustion.

In exploring age and gender differences in burnout, stress and job dissatisfaction the following was discovered.

The results illustrate there was no significant difference between males and females in relation to stress levels. Therefore the null hypothesis can be accepted. These outcomes suggest that the age of social care workers do not appear to affect stress levels which also applies to gender, presenting no difference in stress levels between males and females for those employed in social care. These results support the research discussed previously in a study carried out by Fontana & Abouserie (1993) who examined stress levels and gender in teachers.

In relation to burnout age and gender no significant difference was found, this does not support the research carried out by Maslach and Jackson (1981) who examined gender in the human service occupations. It was found that women scored higher on emotional exhaustion and lower on personal accomplishment than men. This research would suggest that women feel more emotionally drained from their work than men. Other research discussed earlier also contradicts these results such as Antoniou & Polychroni & Vlachakis (2006) who studied teacher stress; finding that younger teachers experienced higher levels of burnout, especially emotional exhaustion and disengagement while older teachers experienced higher levels of stress due to lack of support they get from the government.

In terms of age and gender affecting job dissatisfaction for social care workers it was found that there was no significant difference for males and females in their experience of job dissatisfaction, this mainly supports the findings in the literature review in a study carried out by Oshagbemi (2000) reporting that gender did not affect job satisfaction directly in teachers however women were found to enjoy their jobs more at a higher ranking level than their female colleagues. However these results and research conflict findings from Reininghaus and Priebe (2007) who examined mental health staff in a large European study, finding extrinsic job satisfaction was higher for men than women. In the same study it was found that age was associated with higher morale levels in the team, which in turn can affect job satisfaction.

In relation to length of service affecting burnout, a multiple regression was used. It was expected that the longer length of service would have an effect on burnout. The results indicated there was no significant effect as previously expected. This is surprising considering previous research claims by Yiu et al (2001) reported that volunteers experienced a lack of personal accomplishment when length of service was six to twelve months and emotional exhaustion and depersonalization was experienced when the duration of service was five to ten years.

In relation to coping, it was expected that the social care workers that used coping strategies would experience less job dissatisfaction, burnout and stress. It was found with the use of a multiple regression and 18 predictor variables that there was a significant predictive value in relation to job dissatisfaction levels in the sample social care workers. In particular Behavioral disengagement had a significant positive

strong effect on Job dissatisfaction. The more the individuals used disengagement as a coping strategy, the more dissatisfied with the job they were. Humor also had a weak positive effect humor used by social care workers would suggest that they were dissatisfied in their jobs. These two negative coping strategies used by social care workers would suggest that job dissatisfaction was high. In research carried out by Dunham and Varma (1998) they believe that physical activity, using humor and developing skills can help with reducing stress. This would contradict the findings of the current study, which suggested that the more humor social care workers used the more dissatisfied they were with their jobs. Coping skills have reported to alleviate stress, and burnout, in turn creating better job satisfaction as discussed earlier Dunham and Varma (1998) believed that developing ways of coping could reduce stress, which in turn can affect your job satisfaction in a positive way. This research conflicts the findings of the present study, however Shin et al (1984) would support the findings. They investigated the effects of coping on psychological strain and burnout produced by job stress in the human services, and reported that previous research had suggested that individual coping did not alleviate strain produced by job stress. They believe that group coping and social support are much more affective coping strategies in alleviating stress than individual coping strategies which in turn can have an effect on job satisfaction.

### **4.3 Limitations**

The major limitation of this study is that the participants knew the researcher and thus may not have fully admitted that they were as stressed/Burned out or satisfied with their jobs as they actually felt. It is a possibility that the respondents did not want the

researcher to know how they were actually feeling. Respondents may have answered the questionnaires in a certain way that would make them appear less stressed, burned out and more satisfied with their jobs at present.

The tests used possibly do not have significant statistical power due to the sample size. The participants were from only one HSE state run facility that housed young people at risk; this raises a concern as the study is at risk of generalizability. Thus, further research should be carried out in the area of social care. Other facilities such as Crannog Nua high support unit and Craig Arainn secure residential facility could be accessed to create a larger sample size and study job dissatisfaction, burnout and stress before any conclusions can be made. Further such research is needed before the study can be replicated for validity. Another limitation of the current study would be that the methodology for the research was quantitative only. By using a mixed methodology, or hybrid approach the results may have differed, however a quantitative approach best reflects the hypothesis that burnout would have a significant affect on job dissatisfaction.

#### **4.4 Implications for Future Research**

A larger sample size of Social care workers could be used as the current study only had a total of 61 respondents. Additional demographic questions could have been added to gage the circumstances of the respondent such as educational status and if they were employed full time or part time or if they had children, these elements could have been interesting when looking at stress levels. In addition future research should also explore if other measures of stress, job satisfaction, coping and burnout



would result in similar findings. A longitudinal study may be interesting in exploring further the length of service of employees and their levels of burnout.

#### **4.5 Recommendations**

As stress and burnout is common for employees working in the social care sector and it has shown to have negative and extensive effects on peoples physical and psychological well being. It is advisory to state run and private facilities to implement stress management workshops for their employees. This would ensure better practice overall, less staff turnover and better attendance. Policies and procedures could be reviewed to identify particular policies that are stress producing or cause job dissatisfaction. By improving policies to promote positive change and outcomes this may be able to impact on better job satisfaction and less burnout. Supervisory support should occur on a more regular basis, with consistent supervisors. This would be proactive for management in dealing effectively with stress and looking for signs of burnout.

#### **4.6 Conclusion**

To conclude, the hypotheses were partially accepted. These findings have shown that burnout as a result of continued stress does have an impact on Job satisfaction for Social care workers, namely emotional exhaustion and depersonalization. As few of the hypotheses proposed in this study were only partially supported, a larger sample size may show different results. This study has provided a baseline for prospective research to be conducted on the topics discussed.

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## Appendix

### Appendix A – Cover Sheet for Questionnaire

**Dear Participant,**

I am conducting research on stress and job satisfaction for social care workers in Ireland as part of my final year project. Please take the time to answer the questions. There is no right or wrong answer and complete anonymity is guaranteed. Your questionnaire answers will be merged with those from other people and we will not be able to trace your answers back to you, and we will not ask you to give your name or identification details. *You have the right to withdraw at any stage during the completion of this survey.*

All you have to do is complete the questionnaire, which will take about 10-15mins and just work through the questions, in each case indicating to the extent to which you feel about each of the statements.

**Thank you for your interest and time.**

Hannah Moore

## Appendix B – The Brief COPE

These items deal with ways you've been coping with the stress in your life. There are many ways to try to deal with problems. These items ask what you've been doing in general to cope with stressful events. Obviously, different people deal with things in different ways, but think about what you usually do when you are under a lot of stress. Each item says something about a particular way of coping. I want to know to what extent you've been doing what the item says. How much or how frequently. Don't answer on the basis of whether it seems to be working or not—just whether or not you're doing it. Use these response choices. Try to rate each item separately in your mind from the others. Make your answers as true FOR YOU as you can.

- 1 = I haven't been doing this at all
- 2 = I've been doing this a little bit
- 3 = I've been doing this a medium amount
- 4 = I've been doing this a lot

1. I've been turning to work or other activities to take my mind off things. \_\_\_\_\_
2. I've been concentrating my efforts on doing something about the situation I'm in. \_\_\_\_\_
3. I've been saying to myself "this isn't real.". \_\_\_\_\_
4. I've been using alcohol or other drugs to make myself feel better. \_\_\_\_\_
5. I've been getting emotional support from others. \_\_\_\_\_
6. I've been giving up trying to deal with it. \_\_\_\_\_
7. I've been taking action to try to make the situation better. \_\_\_\_\_
8. I've been refusing to believe that it has happened. \_\_\_\_\_
9. I've been saying things to let my unpleasant feelings escape. \_\_\_\_\_
10. I've been getting help and advice from other people. \_\_\_\_\_
11. I've been using alcohol or other drugs to help me get through it. \_\_\_\_\_
12. I've been trying to see it in a different light, to make it seem more positive. \_\_\_\_\_
13. I've been criticizing myself. \_\_\_\_\_
14. I've been trying to come up with a strategy about what to do. \_\_\_\_\_
15. I've been getting comfort and understanding from someone. \_\_\_\_\_
16. I've been giving up the attempt to cope. \_\_\_\_\_
17. I've been looking for something good in what is happening. \_\_\_\_\_
18. I've been making jokes about it. \_\_\_\_\_
19. I've been doing something to think about it less, such as going to movies, watching TV, reading, daydreaming, sleeping, or shopping. \_\_\_\_\_
20. I've been accepting the reality of the fact that it has happened. \_\_\_\_\_
21. I've been expressing my negative feelings. \_\_\_\_\_
22. I've been trying to find comfort in my religion or spiritual beliefs. \_\_\_\_\_
23. I've been trying to get advice or help from other people about what to do. \_\_\_\_\_
24. I've been learning to live with it. \_\_\_\_\_
25. I've been thinking hard about what steps to take. \_\_\_\_\_
26. I've been blaming myself for things that happened. \_\_\_\_\_
27. I've been praying or meditating. \_\_\_\_\_
28. I've been making fun of the situation. \_\_\_\_\_

## Appendix C – Minnesota Satisfaction Questionnaire

The questions here ask you about how satisfied you are about your job at present. In each case, you will be asked to indicate by circling how satisfied you feel.

1= **Very Satisfied**, meaning I am very satisfied with this aspect of my job.

2= **Satisfied**, meaning I am satisfied with this aspect of my job.

3= **Neither**, meaning I can't decide whether I am satisfied or not with this aspect of my job.

4= **Dissatisfied**, meaning I am dissatisfied with this aspect of my job.

5= **Very Dissatisfied**, meaning I am very dissatisfied with this aspect of my job.

- |                                                                 |           |
|-----------------------------------------------------------------|-----------|
| 1. Being able to keep busy all the time.                        | 1 2 3 4 5 |
| 2. The chance to work alone on the job.                         | 1 2 3 4 5 |
| 3. The chance to be somebody in the community.                  | 1 2 3 4 5 |
| 4. The chance to do different things from time to time.         | 1 2 3 4 5 |
| 5. The way my boss handles his/her workers                      | 1 2 3 4 5 |
| 6. The competence of my supervisor in making decisions.         | 1 2 3 4 5 |
| 7. Being able to do things that don't go against my conscience. | 1 2 3 4 5 |
| 8. The way my job provides a steady employment.                 | 1 2 3 4 5 |
| 9. The chance to do things for other people.                    | 1 2 3 4 5 |
| 10. The chance to tell people what to do.                       | 1 2 3 4 5 |
| 11. The chance to do something that makes use of my abilities.  | 1 2 3 4 5 |
| 12. The way company policies are put into practice.             | 1 2 3 4 5 |
| 13. My pay and the amount of work I do.                         | 1 2 3 4 5 |

- |                                                        |           |
|--------------------------------------------------------|-----------|
| 14. The chances for advancement on this job.           | 1 2 3 4 5 |
| 15. The freedom to use my own judgment.                | 1 2 3 4 5 |
| 16. The chance to try my own methods of doing the job. | 1 2 3 4 5 |
| 17. The working conditions.                            | 1 2 3 4 5 |
| 18. The way my co-workers get along with each other.   | 1 2 3 4 5 |
| 19. The praise I get for doing a good job.             | 1 2 3 4 5 |
| 20. The feeling of accomplishment I get from the job.  | 1 2 3 4 5 |

#### Appendix D – Perceived Stress Scale

The questions in this scale ask you about your feelings and thoughts during the last month. In each case, you will be asked to indicate by circling how often you felt or thought a certain way.

0 = **Never**    1 = **Almost Never**    2 = **Sometimes**    3 = **Fairly Often**    4 = **Very**

#### **Often**

- |                                                                                                                       |           |
|-----------------------------------------------------------------------------------------------------------------------|-----------|
| 1. In the last month, how often have you been upset because of something that happened unexpectedly?.....             | 0 1 2 3 4 |
| 2. In the last month, how often have you felt that you were unable to control the important things in your life?..... | 0 1 2 3 4 |
| 3. In the last month, how often have you felt nervous and “stressed”? ....                                            | 0 1 2 3 4 |
| 4. In the last month, how often have you felt confident about your ability to handle your personal problems?.....     | 0 1 2 3 4 |
| 5. In the last month, how often have you felt that things were going your way?.....                                   | 0 1 2 3 4 |

6. In the last month, how often have you found that you could not cope?  
with all the things that you had to do? ..... 0 1 2 3 4
7. In the last month, how often have you been able to control irritations in your  
life?..... 0 1 2 3 4
8. In the last month how often have you felt that you were on top of things? 0 1 2 3 4
9. In the last month, how often have you been angered because of things that were  
outside of your control? ..... 0 1 2 3 4
10. In the last month, how often have you felt difficulties were piling up so high that  
you could not overcome them?..... 0 1 2 3 4

#### Appendix E – Maslach’s Burnout Inventory

The questions here ask you about how satisfied you are about your job at present. In each case, you will be asked to indicate by circling how satisfied you feel.

1= **Very Satisfied**, meaning I am very satisfied with this aspect of my job.

2= **Satisfied**, meaning I am satisfied with this aspect of my job.

3= **Neither**, meaning I cant decided whether I am satisfied or not with this aspect of my job.

4= **Dissatisfied**, meaning I am dissatisfied with this aspect of my job

5= **Very Dissatisfied**, meaning I am very dissatisfied with this aspect of my job.

1. Being able to keep busy all the time. 1 2 3 4 5
2. The chance to work alone on the job. 1 2 3 4 5
- 3.The chance to be somebody in the community. 1 2 3 4 5



- |                                                                 |           |
|-----------------------------------------------------------------|-----------|
| 4. The chance to do different things from time to time.         | 1 2 3 4 5 |
| 5. The way my boss handles his/her workers                      | 1 2 3 4 5 |
| 6. The competence of my supervisor in making decisions.         | 1 2 3 4 5 |
| 7. Being able to do things that don't go against my conscience. | 1 2 3 4 5 |
| 8. The way my job provides a steady employment.                 | 1 2 3 4 5 |
| 9. The chance to do things for other people.                    | 1 2 3 4 5 |
| 10. The chance to tell people what to do.                       | 1 2 3 4 5 |
| 11. The chance to do something that makes use of my abilities.  | 1 2 3 4 5 |
| 12. The way company policies are put into practice.             | 1 2 3 4 5 |
| 13. My pay and the amount of work I do.                         | 1 2 3 4 5 |
| 14. The chances for advancement on this job.                    | 1 2 3 4 5 |
| 15. The freedom to use my own judgment.                         | 1 2 3 4 5 |
| 16. The chance to try my own methods of doing the job.          | 1 2 3 4 5 |
| 17. The working conditions.                                     | 1 2 3 4 5 |
| 18. The way my co-workers get along with each other.            | 1 2 3 4 5 |
| 19. The praise I get for doing a good job.                      | 1 2 3 4 5 |
| 20. The feeling of accomplishment I get from the job.           | 1 2 3 4 5 |

#### Appendix F – Demographic Questionnaire

**Please tick one of the following boxes;**

Gender:                    Male \_\_\_\_      Female \_\_\_\_

Age:                        18-25 \_\_\_\_    26-40 \_\_\_\_    41-55 \_\_\_\_    56-65 \_\_\_\_

Marital Status:        Single \_\_\_\_    Married \_\_\_\_    Cohabiting \_\_\_\_

Length of service:    1yr \_\_\_\_      2-5yrs \_\_\_\_    5-10yrs      10+yrs \_\_\_\_

