COPING SKILLS AMONGST SOCIAL WORKERS

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COPING SKILLS AMONGST SOCIAL WORKERS

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Sandra Quezada
May 2022
COPING SKILLS AMONGST SOCIAL WORKERS

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Approved by:

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ABSTRACT

This research study used a questionnaire to identify coping behaviors and feelings of social workers dealing with work related stress. The purpose of this research was to identify the most used coping behaviors of social workers. Data was collected from thirty-six participants who had access to southern California social worker blogs. Findings were that over half (63.9) of participants used emotion focused behaviors such as “growing as a person” and “discuss feelings with someone” as a coping behavior. The findings contribute to coping research, but this research also identifies social workers as not using enough coping behaviors. Recommendations for social work practice is that social workers become more active in their coping behaviors and should be required to learn about coping behaviors. It is also recommended that social work policy should include teaching of coping behaviors through social work agencies and through continued education. Coping behaviors and feelings should continue to be studied to better the social work profession.
# TABLE OF CONTENTS

ABSTRACT ........................................................................................................................................... iii

TABLE OF CONTENTS ...................................................................................................................... iv

LIST OF TABLES ............................................................................................................................. vi

CHAPTER ONE: INTRODUCTION

Problem Formulation...................................................................................................................... 1

Purpose of the Study ....................................................................................................................... 2

Significance of the Project for Social Work .................................................................................. 4

CHAPTER TWO: LITERATURE REVIEW

Introduction ........................................................................................................................................... 5

Coping Needs of Social Workers .................................................................................................... 5

  Stress ............................................................................................................................................. 5

  Supervision .................................................................................................................................... 6

Studies Focusing on Coping within Social Work ......................................................................... 6

Theoretical Guiding Conceptualization ......................................................................................... 8

Summary ........................................................................................................................................... 12

CHAPTER THREE: METHODS

Introduction ......................................................................................................................................... 13

Study Design ..................................................................................................................................... 13

Sampling .......................................................................................................................................... 15

Data Collection and Instruments ................................................................................................. 15

Procedures ....................................................................................................................................... 16

Protection of Human Subjects ....................................................................................................... 17
LIST OF TABLES

Table 1. Demographic Characteristics of Participants........................................... 20
Table 2. Coping Behaviors and Feelings................................................................. 24
CHAPTER ONE
INTRODUCTION

Problem Formulation

Social workers deal with many stressful situations, being able to cope with stress can benefit the social worker in many different aspects. Social workers work quickly and efficiently while having high caseloads that can be stressful. Stressors amongst social works include dealing with traumatic or scary events, clients that are emotional, needy, demanding, worrying, suicidal and homicidal. Client cases range from difficult to easy and ambiguous to very clear understanding of what the client needs. Social workers have a high emotional demand, leading to compassion fatigue, anxiety and feeling overwhelmed. A person’s mental state and behavior change in order to manage the coping demands of dealing with internal or external factors (Lazarus & Folkman, 1984).

Work related conflict, such as unsupportive colleagues or supervisors adds stress (Beer, Phillips, Quinn, 2020). Social workers put feelings of stress aside to give clients a sense of feeling safe and secure. Social workers are expected to be patient, attentive, caring, and empathetic. Coping skills is required for social workers to work efficiently and give the best care. Coping with stressors will help social workers on many levels, including social workers personal life, work life, mental and physical health.

Teaching social workers healthy coping mechanisms can positively affect the social work profession. Clients, colleagues, and organizations benefit from
having emotionally healthy and physically healthy social workers. Social workers will be better equipped to deal with stressful situations. Effective coping skills will help social workers develop and thrive. Lack of guidance from supervisors and agencies needs to improve. Improving guidance and supervision will benefit social workers, clients, and the agency. Agencies do not benefit from overworked and overstressed social workers. A result of overworked and stressed social workers is high turnover and low retention. Prioritizing coping skills such as self-care within the agency will help lower turnover, increase retention, reduce spending on both and will allow funds to be reallocated for other needs.

Social workers face difficult situations daily. Learning how to care for mental health, physical health, spiritual health, etc. is encouraged in the social work profession. Developing healthy coping skills has multiple components. Being able to develop healthy coping skills in social workers will greatly contribute to the profession. Through this research the hope is to find coping techniques that help develop healthy coping skills in social workers.

Purpose of the Study

The purpose of the research study is to investigate social workers’ coping behaviors in response to work-related stress. There is limited research in the association between coping and work-related stress. Social workers deal with complex clients and difficult work environments, creating challenges and frustrations. Clients need social workers to be mentally and physically healthy. Social workers teach clients about self-care, but social workers do not take care
of themselves. Social workers need to practice self-care similarly to clients. Within the practice, social workers are expected to be professional, responsible, efficient with limited resources. Many social workers have high caseloads, complex cases, high work pressure, time constraints and low wages. Ambiguous work in this field can make the social worker unhealthy because of the fear of dealing with negative consequences, being criticized, or condemned (Dwyer, 2007). Within the agency/organization there is little supervision, low resources, budget constraints, staff shortages, and organizational constraints. Social workers are given high amounts of cases with little to no supervision (McGarrigle & Walsh, 2011). These bad organizational factors can negatively affect the social work profession.

To assess coping skills in social workers, research needs to be done on the coping styles social workers use in response to stress. Coping techniques include adaptive behaviors and maladaptive behaviors. Pinpointing successful coping behaviors can educate future social workers on how to deal with stress, creating a healthier work environment. The research method used in this study is a quantitative design. The research method is a self-administered questionnaire asking participants to indicate what is done and what is felt during stressful events. It was selected because the study focuses on collecting data from a group of people at one point in time due to the study’s limited time frame. The answers are not “right” or “wrong,” but an indication of what the participants typically experience during a stressful moment in time.
Significance of the Project for Social Work

The findings in this study will contribute to the general social work profession, bringing light to the importance of coping and various coping techniques. This research is important for all social workers because it will help contribute to the importance of self-care, which is something that is strongly encouraged in this field. Through the findings in this study it will be recommended that all organizations create procedures for coping skills to be taught and practiced within the workplace.

It is hypothesized that different positive coping techniques are more likely to increase job satisfaction of social workers. Some positive coping techniques that can be used at work include self-care within the workplace, supportive colleagues, weekly supervision, timely communication, clear expectations, and group discussions. Some personal characteristics that can help manage stress are resiliency, spirituality, emotional regulation, and reflection. Mental and behavioral attempts to deal with stressful situations shows one’s ability to cope (Lazarus & Folkman, 1984). Managing is important when it relates to coping because the act of managing stress is a self-construct. With that said, the research question for this project is as follows: What coping strategies are used when experiencing work-related stress?
CHAPTER TWO
LITERATURE REVIEW

Introduction
This chapter consists of examining the research of coping strategies used amongst social workers. The subsections will include the coping needs for social workers and different studies focusing on coping. The final section will examine the theories guiding coping styles.

Coping Needs of Social Workers

A high number of social workers experience stress and health issues because of the work environment. Many social workers do not know how to cope with stressors. Work-related stress among social workers can be reduced with simple self-care techniques, group and supervision sessions, problem management, and emotion management. Stress, compassion fatigue, lack of supervision and self-care neglect are parts of the social work profession.

Stress

Stress is experienced by most, if not all, social workers. Social workers work under stressful conditions that are complex, multilayered, challenging, and frustrating (McGarrigle & Walsh, 2011). Social workers deal with a wide range of circumstances including, one-on-one cases with clients and crisis situations. During a crisis, social workers single handedly face the crisis because of time restraints. Social workers do not have time to ask for help or seek a colleague’s advice. On the other hand, the task itself might not be stressful but the emotion of
the task is stressful. Emotionally, some cases are felt heavier and have a greater mental impact (Dwyer, 2007). Stress has many forms, but all types of stress are important because stress impacts how a social worker works and how social worker copes.

**Supervision**

Research done at three different organizations (adult community mental health, child welfare, and Veteran Affairs) has shown that social workers express concern over the lack of supervision (Beer, Phillips, and Quinn, 2020). Beer, Phillips, and Quinn (2020) claim social workers experience lack of time and poor guidance from supervisors and fear colleagues will think they are weak. Research has been done that examines report of high secondary trauma due to low supervision (Gil & Weinberg, 2015). Available resources, especially supervisor support, is important for social workers to have. Support from supervisors means, making time for employees and listening without judgment. Dwyer (2007) asked participants in a study what they want most from a supervisor and the respondents want ‘someone who would be there for them and listen to them without criticism.’ Newer social workers need guidance from supervisors because they are new to the field and cases seem challenging (Kalliath & Kalliath, 2014). Social workers have also stated they are being supervised by managers that do not have experience in the field, not sharing the same values or knowledge (Dwyer, 2007).

**Studies Focusing on Coping within Social Work**
There is research on stress and coping but not enough research on stress and coping relating to social workers and social work environment. The studies below have identified stress to be perceived differently by different social workers.

Beer, Phillips, and Quinn (2020) focus on social workers perception of stress and coping short and long term. There is insufficient research that proves successful approaches to stress reduction. Environmental stressors, cognitive appraisals, emotional and behavioral responses, and subsequent health outcomes are factors that are studied when researching work-related stress among social workers (Beer, Phillips, & Quinn, 2020) Research has been done identifying that without coping, stress will eventually lead to a state of distress. Distress, if left untreated, can cause severe short- and long-term harm physiologically and/or psychologically (Beer et al., 2020).

Coping is categorized into two styles: engaging and disengaging. Engaging coping styles involve using management tools to change the stressor and emotion tools to change the emotional reaction of the stressor. Engaging coping styles are also known as problem-focused and emotion-focused (Kalliath & Kalliath, 2014). Problem-focused coping is externally directed, meaning changing the situation to lower stress or internally directed, changing our perspective, behavior, and thought process to lower stress. Problem-focused coping has been more useful than other coping strategies because problem-focused strategies inspire social workers to fix the problem and not focus on the
emotional reaction (Gil & Weinberg, 2015). Emotion-focused coping means altering emotional response to stressful events (Kalliath & Kalliath, 2014). Emotion-focused coping is useful to social workers if the social worker can readjust emotions or vent emotions. Social work practice is an emotionally demanding job (Dwyer, 2007). Readjusting emotions may not be easy to social workers and having somebody to vent to may not be an option. Dwyer (2007) claims social workers face emotional demands in all aspects of social work practice. Useful emotion-focused coping includes having emotional support and the ability to change negative emotions to positive ones.

Disengaging coping style means avoiding the stressor or blaming yourself for the stressor. Disengaging coping can also be avoidance and is the least useful form of coping. This type of coping promotes passivity and prevents the social workers from finding a solution to the problem (Kalliath & Kalliath, 2014). Some social workers also find it necessary to disengage from people outside of work (Beer, Phillips, Quinn, 2020). Disengaging can cause a social worker to give up trying to reach goals and can lead the social worker quitting.

Theoretical Guiding Conceptualization

The cognitive model of stress and coping (Lazarus & Folkman, 1984) was used throughout the different studies. Stress is a reaction due to the inability to cope. The two key types of coping used were problem-focused coping or emotion-focused. The studies described measuring stress individually, meaning people react differently to different types of stress. The type of stress an
individual experiences will dictate the coping mechanism. How a person manages mental distress depends on coping techniques, resources available, and personal characteristics (Lazarus and Folkman, 1984).

Research guided by the Transactional Model of Stress and Coping identifies stress as a reaction, therefore, every individual might have a different reaction to stress. This study aims to identify how individuals perceive stress and individual coping strategies. The research is a qualitative study, exploring social workers perceptions of stress, lived experiences, and coping behaviors. Semi-structured interviews were done on seven social workers. Six of the seven social workers were between the ages of 21-30 and had less than 4 years of experience. After analyzing the interviews, the researchers found three themes, 1) challenges in the environment, 2) the many impacts stress has on the social workers, and 3) responses of stress.

First, the challenges identified in this research include deficits, excesses, quality, and complexity. Social workers felt lack of time and lack of guidance from supervisors. Social workers believed they had too much work and felt like they could not express their needs because it could be found as a weakness. Social workers believe the challenges at work are due to management. The organization needs reworking to have a better environment and less stressed social workers. Second, the stress negatively impacts the social workers biopsychosocial. Social workers claimed to experience some of the following: sleeping problems, weight gain, thoughts of questioning self, mood swings,
anxiety, depression, becoming socially withdrawn, and unable to turn off social worker mode outside of work. Lastly noted was social workers response to stress. Social workers had an immediate coping strategy to emergency situations such as suicidal clients. Social workers become less emotional and highly focus on actions to better serve the client. While at work social workers turned to co-workers when feeling stressed, helping them cope. On the other hand some social workers also reported feeling judged by co-workers because they wanted to discuss their feelings. Social workers experienced guilt for taking time to cope during work hours. Outside of work social workers felt less social and developed unhealthy habits such as no physical activity, eating unhealthy, stress eating and substance use.

This study has limitations including sample size, representation (race, gender, and age), location, and limited participants from a community mental health clinic. This study does identify the need for systemic change. The organization is a key factor to this study. Most social workers recognize stress as work related. The organization should be responsible and make efforts to try and teach employees about healthy coping strategies.

McGarrigle and Walsh (2011) researched the effects of contemplative training on social workers. The researchers noted the stressors such as challenges, frustrations, high caseloads, and inability to cope with stress. The researchers believe coping skills like contemplative practices will contribute to effective coping strategies.
This research used mixed method design on an 8-week meditative group. The group met 2 hours a week at the place of work, during work hours. The groups practiced mindfulness, reflection, held group discussions, and wrote anonymous journal reflections. The study included 11 social workers and 1 youth counselor. McGarrigle and Walsh (2011) were able to categorize the information gathered into three themes, 1) accountability, 2) mindfulness, and 3) workplace. All participants noted feeling less stress when practicing mindfulness. Prior to the study, participants felt accountability with clients was low. Social workers were not mentally or physically able to attend to clients and provide the best care. Mindfulness impacted the participants approach to self-care. Mindfulness is a skill that must be taught and practiced, being interconnected to self-care and reflection (McGarrigle & Walsh, 2011). Being mindful of stress means there needs to be reflection. After reflecting on stress, the individual can come up with coping strategies. The last theme participants noted was workplace care. Participants felt like they needed permission from supervisors to practice self-care while working. Participants also thought they had lack of time and opportunity to practice self-care. Many participants new they would not practice self-care outside of work.

The common theme found in both articles is the organization needs to take responsibility and actively teach social workers effective coping techniques. The workplace should provide time, supervision, resources, and opportunities for
social workers to cope with stress. A healthy social worker will be better equipped to help clients and the organization will have better morale.

Summary

This study will distinguish effective coping mechanisms that social workers use. Based on the research mentioned above, teaching coping strategies should be the responsibility of the organization. There needs to be change in policy, change within the organization, and structural change to decrease stress. Social workers encourage clients to practice self-care and teach clients about coping, but social workers do not practice what they teach clients. The COPE Inventory scale will help identify coping strategies and shed some light on this subject.
CHAPTER THREE

METHODS

Introduction
This study will investigate the coping strategies used by social workers experiencing work related stress. This chapter will consist of the following: 1) Study design that includes an overview of the study and research method. 2) Sampling which includes information on sample selection. 3) Data collection and instruments explaining what data will be collected. 4) Procedures detailing how research information will be collected. 5) Protection of human subjects describing how participants will be protected. 6) Data analysis including procedures that will help answer the research question and lastly, 7) summary of detailed information.

Study Design
The purpose of this study is to describe how social workers cope with work related stress and explain effective coping strategies used by social workers. This study is a descriptive study because there is some knowledge on how social workers cope but aspire to gain more detailed information on specific coping mechanisms. This research study is also explanatory due to establishing a cause and effect relationship between stress and coping. The research method used in this study will consist of a thirty-question instrument. The questions used in this research derive from the COPE Inventory, making this study a quantitative study.
The quantity of information gathered will help generate knowledge of coping behaviors used by social workers.

A quantitative approach for this study will strengthen research for coping skills used by social workers. The information gathered will be provided by social workers, meaning the data gathered will be important because it is based on real social work experience. Information gathered by the participants has a greater meaning because this study directly impacts social workers. This study will provide data that will strengthen the coping skills needed in the field of social work. Social workers deal with various stressors, making coping a necessary skill to have a successful career. This research will create dialogue within the social work community. The gathering of data in this research will be by questionnaire, saving time for the participant. Participants will receive a link to the questionnaire where the participant will be allowed to fill out demographic information followed by the questions. All information gathered in this research will be anonymous, increasing the participants honesty and full participation.

Limitations in this study include first, the information gathered in this research may lack reliability due to participants not knowing coping techniques that are included in the questionnaire. Social workers are taught about self-care and participants might answer based on techniques previously learned. Second, another limitation in this research is the research instrument. This research requires participants to choose specific answers and does not provide participants the ability to answer open-ended questions. The answers in this research will be
without details. The last limitation to note is the sample size. The sample size in this research is small and does not account for all social workers.

Sampling

This research will use a stratified random sampling. The questionnaire for this research will be shared on internet forums used by social workers and emailed to known social workers. This type of distribution is being used due to the lack of known social workers and to reach many social workers for a greater sample size, but plan of having a minimum of 50 respondents. There is sufficient time for social workers to participate in this research study and make the sample size greater. Research participants will be currently working as social workers and may or may not be licensed social workers.

Data Collection and Instruments

Quantitative information will be gathered in this study using a questionnaire made up of demographic information followed by thirty questions. The questionnaire will begin with an introduction, stating the purpose of the study. Age, gender identification, ethnicity identification, education level, number of years in current practice/field, and whether the participant is a licensed social worker or not will be included in the demographics (see appendix A).

The questionnaire used in this study is an existing instrument, measuring coping called the COPE Inventory created by Carver (2013) (see appendix A). Social workers respond to stress differently. The COPE Inventory will help assess the ways social workers respond to stress based on the following scales.
The two following scales used are the most effective. First is problem-focused coping, which includes social support, active coping, restraint, suppression of competing activities, and planning. Second is emotion-focused coping and includes positive reinterpretation and growth, denial, religious coping, use of emotional social support, and acceptance. The remaining scales used to measure coping are least useful and include mental disengagement, focus on and venting emotions, humor, behavioral disengagement, and substance use (Carver, 2013).

The COPE Inventory has been used in other research confirming validity. Kato (2013) reported the frequency of coping scales used between 1998 to 2010 in two thousand journal articles and the COPE Inventory was used in 20% of the articles. The purpose for the COPE Inventory in this research is to identify social workers most common response to stress. The COPE Inventory is used to measure coping, making it a reliable instrument in this research. The researcher will gather the most used coping techniques among social workers. The level of measurement in this research is nominal, specifically categorical. The questionnaire has four response choices starting with most used to least used, with no right or wrong choice. Answers are based on respondents’ “typical” feelings and experiences with stressful events.

Procedures

The questionnaire for this survey will be produced and available on Qualtrics. Participants will be solicited by known social workers, said social
workers forwarding the questionnaire by email, and available on social worker blogs/web platforms. Participants will be able to answer the questionnaire between the available window and will have access to the questionnaire via internet. Participants can complete the questionnaire from any location if internet is available. The length of time for the questionnaire will be between 20-30 minutes. The data will be collected and saved on Google drive. Before starting the questionnaire, the purpose of the study will be available, followed by demographic information and last, thirty questions. Data gathered will be saved for up to one year of completion date. Participants will be volunteers that are willing to spend a small amount of time contributing to this study.

Protection of Human Subjects

The identity of the volunteer participants will be completely confidential. Participants will not be required to enter identifiable information. All social workers will be protected, and information will be anonymous. Participants will be given information on informed consent and debriefing statements on the results of the research and how the research will be used. The questionnaires will be saved on a Google drive available only to the researcher. One year after the questionnaires have been completed, the questionnaires will be deleted.

Data Analysis

The data collected for this study will be statistically analyzed. The independent variable is stress, and the dependent variable is coping. The COPE Inventory scale being used has 5 subscales. The subscales include emotion-
focused, problem-focused, mental disengagement, behavioral disengagement, and focus on and venting of emotions. The results of the study will indicate the effective coping techniques used by social workers. The study will account for variables such as age, education, licensed social workers, number of years working and employment status.

Summary

The purpose of this study is to investigate the coping strategies used by social workers experiencing work-related stress. This quantitative study will describe and explain the coping response social workers have towards work-related stress. The hope is to gather as much information as possible to prepare future social workers deal with stress. The instrument used to collect data is reliable and will help identify coping strategies. Participants will be individuals who wish to volunteer, and whose identity will remain anonymous. All information will be analyzed, reported, and deleted after one year of completion.
CHAPTER FOUR

RESULTS

The following section will include a written description of the analyzed data and the results. The information gathered in this research was done by using a thirty-question questionnaire, making this a quantitative study. The questions were part of the COPE Inventory which is an instrument used to gather information on how individuals respond to stress. The questionnaire was posted on a social worker blog and the participants were random participants. The sample size was not great in numbers but is still relevant to the social work field. This section will start with a demographic description followed by data analysis. The analyses include the subscales of the coping behaviors and feelings. The results of the analysis answer the following question: What coping strategies do social workers use when experiencing work-related stress?

Demographic Description

Quantitative information was gathered in this study using a questionnaire made up of demographic information followed by thirty questions related to coping with stress. The sample size for this research was 36 participants ($n=36$). Of the 36 participants over 90% were female as shown on Table 1. Participants were between the ages of 24-67 with the average age of 38 years old. Of the total participants half identified as Latino or Hispanic, less than half identified as white and a very small percent identified as Asian or other/unknown (Table 1). All the participants were college graduates, working within the social services field
and most of the participants reported an income of over $60,001 (Table 1). Over 60% of participants identified as being licensed social workers and the average number of years working in the field was seven.

**Table 1**

*Demographic Characteristics of Participants*

<table>
<thead>
<tr>
<th>Demographic characteristics</th>
<th>Guided self-help</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>33</td>
</tr>
<tr>
<td>Male</td>
<td>3</td>
</tr>
<tr>
<td>Ethnicity</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>15</td>
</tr>
<tr>
<td>Latino or Hispanic</td>
<td>18</td>
</tr>
<tr>
<td>Asian</td>
<td>1</td>
</tr>
<tr>
<td>Other/Unknown</td>
<td>2</td>
</tr>
<tr>
<td>Income Amount</td>
<td></td>
</tr>
<tr>
<td>$20,001-$40,000</td>
<td>3</td>
</tr>
<tr>
<td>$40,001-$60,000</td>
<td>3</td>
</tr>
<tr>
<td>$60,001-$80,000</td>
<td>11</td>
</tr>
<tr>
<td>$80,001-$100,000</td>
<td>5</td>
</tr>
<tr>
<td>$100,001-over</td>
<td>14</td>
</tr>
</tbody>
</table>

*Note. N = 36*

**Analyses**

The data collected was through a thirty-question questionnaire. The questionnaire asks social workers to indicate what they generally do and feel when they experience work-related stress. Again, the answers are to indicate
what is generally done and not specific to any one stressful event. There were no right or wrong answers. After the data collection the questions were categorized into subscales focused on different coping responses. The following subscales were used: emotion-focused, problem-focused, mental disengagement, behavioral disengagement, and focus on and venting of emotions (Table 2).

Reliability information was created using Cronbach’s alpha reliability coefficients and were computed for each subscale. The reliability score of emotion focused coping behaviors and feelings was .562. The reliability score of problem focused coping behaviors and feelings was .417. The reliability score of mental disengagement coping behavior was .214. The reliability score of focus on and venting of emotions coping behavior was .293. Lastly, the reliability score of behavioral disengagement coping behavior was .584. The values were all below .6 with the highest being .584.

**Emotion-Focused**

After analyzing the data collection, the most used coping style was emotion focused. The questionnaire included twelve questions that were focused on emotion and are listed in Table 2. The emotion focused questions include the following coping behaviors and feelings: positive reinterpretation and growth, denial, religious coping, humor, use of emotional social support, and acceptance. The most used emotion focused coping technique was “I try to grow as a person as a result of the experience” used by 63.9 percent of participants and is a coping behavior of positive reinterpretation and growth. Two emotion focused
techniques were reported never being used by participants and are the following, “I say to myself “this isn’t real” and “I refuse to believe that is has happened.” Those two questions were denial coping behaviors.

**Problem-Focused**

The questionnaire included twelve questions that were problem focused (Table 2). The problem focused questions include the following coping behaviors and feelings: use of instrumental social support, active coping, restraint, substance use, suppression of competing activities, and planning. The most used problem-focused coping technique was “I try to come up with a strategy about what to do” used by 47.2 percent of participants. This style of coping is a planning behavior. The least used coping was “I hold off doing anything about it until the situation permits” used by one participant and is a restraint style of coping behavior.

**Other Coping Styles**

The remaining six questions included in the questionnaire were equally divided into three other coping behaviors and feelings. The remaining three behaviors and feelings are 1, mental disengagement 2, focus on and venting of emotions and 3, behavioral disengagement, which are listed on Table 2. Of the three, coping behaviors and feelings only one was used by 30.6 percent of participants and was “I turn to work or other substitutes to take my mind off things.” This coping behavior is part of mental disengagement. The coping behavior identified as behavioral disengagement and was not used by
participants was “I admit to myself that I can’t deal with it, and quit trying.” The other coping behavior not used and identified as focus on and venting of emotions was “I get upset and let my emotions out.”

The results of the data analysis indicate that most participants use emotion focused and problem focused behavior to cope with work related stress. Most social workers participate in activities that help them grow as a person. The results indicate the participants do not deny their stressful reality. More than half of the participants discuss their feelings with someone and decide to create a strategy to overcome their stressful experiences. The results indicate that social workers cope with their stress by having social support and problem-solving skills.
<table>
<thead>
<tr>
<th>Coping Subscales</th>
<th>I usually do this a lot</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mental Disengagement</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I turn to work or other substitutes activities to take my mind off things</td>
<td>11</td>
<td>30.6</td>
<td></td>
</tr>
<tr>
<td>I daydream about things other than this</td>
<td>2</td>
<td>5.6</td>
<td></td>
</tr>
<tr>
<td><strong>Behavioral Disengagement</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I admit to myself that I can’t deal with it, and quit trying</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>I just give up trying to reach my goal</td>
<td>1</td>
<td>2.8</td>
<td></td>
</tr>
<tr>
<td><strong>Focus on and venting of emotions</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I get upset and let my emotions out</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>I get upset and am really aware of it</td>
<td>7</td>
<td>19.4</td>
<td></td>
</tr>
<tr>
<td><strong>Emotion-focused</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I try to grow as a person as a result of the experience</td>
<td>23</td>
<td>63.9</td>
<td></td>
</tr>
<tr>
<td>I discuss my feelings with someone</td>
<td>19</td>
<td>52.8</td>
<td></td>
</tr>
<tr>
<td>I try to get emotional support from friends or relatives</td>
<td>17</td>
<td>47.2</td>
<td></td>
</tr>
<tr>
<td>I make jokes about it</td>
<td>15</td>
<td>41.7</td>
<td></td>
</tr>
<tr>
<td>I get used to the idea that it happened</td>
<td>10</td>
<td>27.8</td>
<td></td>
</tr>
<tr>
<td>I laugh about the situation</td>
<td>9</td>
<td>25</td>
<td></td>
</tr>
<tr>
<td>I try to see it in a different light, to make it seem more positive</td>
<td>7</td>
<td>19.4</td>
<td></td>
</tr>
<tr>
<td>I accept that this has happened and that it can’t be changed</td>
<td>7</td>
<td>19.4</td>
<td></td>
</tr>
<tr>
<td>I put my trust in God</td>
<td>7</td>
<td>19.4</td>
<td></td>
</tr>
<tr>
<td>I seek God’s help</td>
<td>6</td>
<td>16.7</td>
<td></td>
</tr>
<tr>
<td>I say to myself “this isn’t real”</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>I refuse to believe that it has happened</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td><strong>Problem-focused</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I try to come up with a strategy about what to do</td>
<td>17</td>
<td>47.2</td>
<td></td>
</tr>
<tr>
<td>I make a plan of action</td>
<td>16</td>
<td>44.4</td>
<td></td>
</tr>
<tr>
<td>I talk to someone to find out more about the situation</td>
<td>16</td>
<td>44.4</td>
<td></td>
</tr>
<tr>
<td>I try to get advice from someone about what to do</td>
<td>15</td>
<td>41.7</td>
<td></td>
</tr>
<tr>
<td>I concentrate my efforts on doing something about it</td>
<td>13</td>
<td>36.1</td>
<td></td>
</tr>
<tr>
<td>I restrain myself from doing anything too quickly</td>
<td>10</td>
<td>27.8</td>
<td></td>
</tr>
<tr>
<td>I take additional action to try to get rid of the problem</td>
<td>7</td>
<td>19.4</td>
<td></td>
</tr>
<tr>
<td>I focus on dealing with this problem, and if necessary, let other things slide a little</td>
<td>6</td>
<td>16.7</td>
<td></td>
</tr>
<tr>
<td>I keep myself from getting distracted by other thoughts or activities</td>
<td>3</td>
<td>8.3</td>
<td></td>
</tr>
<tr>
<td>I try to lose myself for a while by drinking alcohol or taking drugs</td>
<td>2</td>
<td>5.6</td>
<td></td>
</tr>
<tr>
<td>I use alcohol or drugs to make myself feel better</td>
<td>2</td>
<td>5.6</td>
<td></td>
</tr>
<tr>
<td>I hold off doing anything about it until the situation permits</td>
<td>1</td>
<td>2.8</td>
<td></td>
</tr>
</tbody>
</table>

*Note. N = 36*
CHAPTER FIVE

DISCUSSION

Introduction

The following section will review the results of the research and answer the question, what coping strategies do social workers use when experiencing work-related stress? The COPE Inventory used in this research allowed the writer to gather information on how social workers generally respond to stressful events. The COPE Inventory has scales that focus on the different aspects of coping in relation to behavior and feelings. There are a variety of coping techniques and with this research the writer can identify the most and least used coping techniques.

Discussion

Starting with demographic information, we can note that most of the participants were female (91.7%). This information correlates with the statistic presented by the National Association of Social Workers (2020) that states 90% of social workers are female. This research should also note that all participants except for three identified themselves as either White and Latino or Hispanic. The questionnaire was posted on social worker blogs that can only be accessed by social workers living locally in the Inland Empire. The Inland Empire population is mostly white and Hispanic. The sample represents social workers that use the internet and are part of social worker blogs. Location also is
important to discuss because the income recorded was surprisingly higher than anticipated. 38.9 percent of participants reported making over $100,001 and the average income for a social worker in California is $72,550 (careerexplorer.com, 2022). Due to confidentiality of this questionnaire, the writer cannot associate the number of years working and if the participant is licensed with the participant income. The writer can assume that participants with higher income probably are licensed and have been working in the field for a long period of time.

The questionnaire collected information on how social workers respond to stressful events at work. The questionnaire was taken at one point in time. Participants were to respond being mindful of what they generally do and feel when experiencing a stressful work event. Different stressful events bring out different responses. In the social work field, an assumption can be made that social worker's cope differently to stressful situations. For the purpose of this study, not a single event was identified.

The coping style most used by participants was emotion focused (63.9%). Under this subscale, the behavior response was, "I try to grow as a person as a result of the experience." With that said, according to the questionnaire, participants do not give up on a task because of stress but try to learn from the experience. The other behaviors within the emotion focused subscale highly used are discussing feelings and getting emotional support. In the social work profession, social work professionals are aware of the importance of social support. Social support improves the ability to cope with stressful situations,
alleviate effects of emotional distress, and boost self-esteem. These are all contributing factors to a healthy and stable social worker. This research suggests that learning, growing, discussing feelings, and getting emotional support are important behaviors when dealing with stress. This information correlates to other studies that have used the COPE Inventory.

The coping behaviors mentioned above were helpful and highly used by participants, but also under the emotion focused subscale are less helpful behaviors. Two behaviors identified as not being used by participants were 1, “I say to myself ‘this isn’t real’” and 2, “I refuse to believe that it has happened.” These two behaviors are not helpful in stressful situations, and they promote denial to reality. The participants responded as not using these less helpful behaviors, making this research a good contribution to studies of negative coping behaviors.

In addition to emotion-focused coping, problem-focused coping is also highly used when responding to work related stress. Participants identified behaviors such as “I try to come up with a strategy about what to do” and “I make a plan of action.” Both behaviors involve strategizing, creating a plan, and identifying important information that can reduce stress. These behaviors are helpful compared to one problem focused behavior used by one participant, “I hold off doing anything about it until the situation permits.” Problem focus coping involves active efforts to manage stressful situations. “Holding off doing anything”
is not helping the situation and might be more damaging to the participant. This research identifies useful coping techniques that require active engagement.

A few coping techniques were mentioned above, and it should be noted that five other coping behaviors were identified as being used very little and/or not being used at all by participants. They involve mental and behavioral disengagement, meaning avoiding the stressful event. As social workers it is in our nature to find a solution, meaning it is a good sign that participants do not disengage when stressed. The two behaviors not used by participants were 1, “I admit to myself that I can’t deal with it, and quit trying” and 2, “I get upset and let my emotions out.” The participants did not give up due to stress or admit to not being able to deal with the stress. Participants are engaged and actively trying to cope with stress. This study identifies various coping behaviors and participants have identified the most useful techniques.

Limitations

The sample size was small and is recommended that a bigger sample size be used for better reliability. Due to the small sample size the reliability of the research was low (.584 and below). Other known research has been done with a much bigger sample size and higher reliability, leading to the assumption that if this research had a greater sample size, the reliability would also be greater. Another limitation is that this questionnaire was created for a general response to stress. Coping behaviors change, depending on the situation. It is also unknown if the participants have a good understanding of coping behaviors or have coping
tools available. The writer can assume that coping is natural when the social worker is comfortable strategizing and using the tool available.

**Recommendations For Social Work Practice**

Coping is important in the social work field because social workers deal with a variety of stressful events. General social workers are encouraged to cope and deal with stress in a healthy form. This research identifies healthy coping techniques and behaviors social workers use while dealing with stress. It is recommended that social workers become more active with their coping behaviors. In this research about 64% of participants admitted to “growing as a person as a result of the experience,” leaving over one third of participants not using this type of coping. The remaining coping behaviors were used by less than 53% of participants. Social workers should be taught the benefits of coping behaviors. This research implies that not enough social workers are coping with stressful work-related events. It is recommended that it should be a requirement to learn coping behaviors and how to manage stressful work events.

**Recommendations For Social Work Policy**

Social workers should be taught coping behaviors through their agencies and should be part of social workers continued learning. Agencies should provide education on healthy coping behaviors and provide social support. Educating social workers on healthy coping behaviors should be implemented by the agency and should correlate with the agency mission. Next, over half of participants identified “discussing my feelings with someone” as a coping
technique used while dealing with work related stress. Social workers having the availability of having someone to talk to at work could possibly reduce social work burnout. It is important for agencies to teach their employees how to deal with stress work related situations. There should be procedures in place that make it easy for social workers to get support if needed. Along with agency procedures, coping should be part of the continued education required by licensed social workers. Social workers are committed to developing and growing professionally, including coping education would add value to individuals and the profession.

Recommendations For Social Work Research

Given that this questionnaire was used for a general response to work related stress and people normally react differently to all life events, there should be further research done identifying how social workers respond to specific stressful events. Carver, Scheier, and Weintraub (1989) reported, the COPE Inventory should be used as situational and/or time-limited, meaning the actual stressful event versus the typical stressful response may cause the cope technique to differ. Coping behaviors may also be tied to personality differences. More elaborate research should be done identifying the event, personality and whether the response was typical or not.

Conclusion

The COPE Inventory is a good tool to identify coping techniques used by social workers responding to work related stress. Further research needs to be
done to truly measure coping. This research contributes to research done on
coping with stress, identifying healthy behaviors used by social workers and
identifying negative behaviors not used. Identifying healthy coping behaviors can
help organizations assist their employees in stressful situations. This research,
along with other research about coping with stress, will guide agencies to provide
their social worker employees coping tools and increase the use of healthy
coping behaviors. The information gathered in this research leads to the idea that
social workers deal with stress by focusing on the problem and finding a solution.
APPENDIX A

QUESTIONNAIRE
Questionnaire

What is your gender?
   Male
   Female
   Other (please specify)
What is your age? (write in, in years)

Which ethnicity do you primarily identify with?
   White
   African American
   Latino or Hispanic
   Asian
   Native American
   Native Hawaiian or Pacific Islander
   Two or more
   Other/Unknown
   Prefer not to answer
What is your household income?
   Under $20,000
   $20,001 - $40,000
   $40,001 - $60,000
   $60,001 - $80,000
   $80,001 - $100,000
   $100,001 or over
Highest Level of Education
   High School Diploma or GED
   Associates Degree (2-year degree)
   Some College
   Bachelor’s Degree (4-year degree) Please specify
   Graduate Degree (Masters, Ph D., JD, MD, etc.) Please specify
   Other (Please specify)
Licensed Social Worker
   Yes
   No
What is your current employment status?
   Full-time
   Part-time
   Not employed outside the home
What is your current job title?
Number of years practicing.
I am interested in how social workers respond when they confront difficult or stressful events at work. There are lots of ways to try to deal with stress. This questionnaire asks you to indicate what you generally do and feel, when you experience stressful events at work. Obviously, different events bring out somewhat different responses, but think about what you usually do when you are under a lot of stress.

Then respond to each of the following items by picking one number on your answer for each, using the response choices listed below. Please try to respond to each item separately in your mind from each other item. Choose your answers thoughtfully and make your answers as true FOR YOU as you can. Please answer every item. There are no “right” or “wrong” answers, so choose the most accurate answer for YOU—not what you think “most people” would say or do. Indicate what YOU usually do when YOU experience a stressful event as work.

1= I usually do not do this at all  
2= I usually do this a little bit 
3= I usually do this a medium amount 
4= I usually do this a lot

1. I try to grow as a person as a result of the experience.
2. I turn to work or other substitute activities to take my mind off things.
3. I get upset and let my emotions out.
4. I try to get advice from someone about what to do.
5. I concentrate my efforts on doing something about it.
6. I say to myself “this isn’t real.”
7. I put my trust on God.
8. I laugh about the situation.
9. I admit to myself that I can’t deal with it, and quit trying.
10. I restrain myself from doing anything too quickly.
11. I discuss my feelings with someone.
12. I use alcohol or drugs to make myself feel better.
13. I get used to the idea that it happened.
14. I talk to someone to find out more about the situation.
15. I keep myself from getting distracted by other thoughts or activities.
16. I daydream about things other than this.
17. I get upset and am really aware of it.
18. I seek God’s help.
19. I make a plan of action
20. I make jokes about it.
21. I accept that this has happened and that it can’t be changed.
22. I hold off doing anything about it until the situation permits.
23. I try to get emotional support from friends or relatives.
24. I just give up trying to reach my goal.
25. I take additional action to try to get rid of the problem.
26. I try to lose myself for a while by drinking alcohol or taking drugs.
27. I refuse to believe that it has happened.
28. I try to see it in a different light, to make it seem more positive.
29. I try to come up with a strategy about what to do.
30. I focus on dealing with this problem, and if necessary, let other things slide a little.

APPENDIX B

INFORMED CONSENT
INFORMED CONSENT

The study in which you are asked to participate is designed to investigate social workers’ coping behaviors in response to work-related stress. The study is being conducted by Sandra Quezada, a graduate student, under the supervision of Dr. Laurie Smith, Principal Investigator and Professor in the School of Social Work at California State University, San Bernardino (CSUSB). The study has been approved by the Institutional Review Board at CSUSB.

PURPOSE: The purpose of the study is to examine social workers’ coping behaviors in response to work-related stress.

DESCRIPTION: Participants will fill out a questionnaire to indicate what they generally do and feel, when they experience stress at work.

PARTICIPATION: Your participation in the study is totally voluntary. You can refuse to participate in the study or discontinue your participation at any time without any consequences.

CONFIDENTIALITY: Your responses will remain confidential and data will be reported in group form only.

DURATION: It will take 30 to 45 minutes to complete the survey.

RISKS: Although not anticipated, there may be some discomfort in answering some of the questions. You are not required to answer and can skip the question or end your participation.

BENEFITS: There will not be any direct benefits to the participants. However, findings from the study will contribute to our knowledge in this area of research.

CONTACT: If you have any questions about this study, please feel free to contact Dr. Smith at (909) 537-3837.

RESULTS: Results of the study can be obtained from the Pfau Library ScholarWorks database (http://scholarworks.lib.csusb.edu/) at California State University, San Bernardino after July 2022.

I understand that I must be 18 years of age or older to participate in your study, have read and understand the consent document and agree to participate in your study.

Place an X mark here _____________________ Date _____________________
APPENDIX C

DEBRIEFING STATEMENT
Study of Coping Skills Amongst Social Workers

Debriefing Statement

This study you have just completed was designed to investigate social workers’ coping behaviors in response to work-related stress. In this study you were asked to indicate what you generally do and feel, when you experience work-related stress. I am interested in finding the most used coping technique social workers use.

Thank you for your participation. If you have any questions about the study, please feel free to contact Sandra Quezada or Professor Laurie Smith at (909) 537-3837. Results of the study can be obtained from the Pfau Library ScholarWorks database (http://scholarworks.lib.csusb.edu/) at California State University, San Bernardino after July 2022.
APPENDIX D

IRB APPROVAL
April 1, 2021

CSUSB INSTITUTIONAL REVIEW BOARD
Administrative/Exempt Review Determination
Status: Determined Exempt
IRB-FY2021-135

Laurie Smith Sandra Quezada
CSBS - Social Work
California State University, San Bernardino
5500 University Parkway
San Bernardino, California 92407

Dear Laurie Smith Sandra Quezada:

Your application to use human subjects, titled “Coping Skills Amongst Social Workers” has been reviewed and determined exempt by the Chair of the Institutional Review Board (IRB) of CSU, San Bernardino. An exempt determination means your study had met the federal requirements for exempt status under 45 CFR 46.104. The CSUSB IRB has not evaluated your proposal for scientific merit, except to weigh the risk and benefits of the study to ensure the protection of human participants. Important Note: This approval notice does not replace any departmental or additional campus approvals which may be required including access to CSUSB campus facilities and affiliate campuses due to the COVID-19 pandemic. Visit the Office of Academic Research website for more information at https://www.csusb.edu/academic-research.

You are required to notify the IRB of the following as mandated by the Office of Human Research Protections (OHRP) federal regulations 45 CFR 46 and CSUSB IRB policy. The forms (modification, renewal, unanticipated/adverse event, study closure) are located in the Cayuse IRB System with instructions provided on the IRB Applications, Forms, and Submission webpage. Failure to notify the IRB of the following requirements may result in disciplinary action. The Cayuse IRB system will notify you when your protocol is due for renewal. Ensure you file your protocol renewal and continuing review form through the Cayuse IRB system to keep your protocol current and active unless you have completed your study.

Important Notice: For all in-person research following IRB approval all research activities must be approved through the Office of Academic Research by filling out the Project Restart and Continuity Plan.
• Ensure your CITI Human Subjects Training is kept up-to-date and current throughout the study.
• Submit a protocol modification (change) if any changes (no matter how minor) are proposed in your study for review and approval by the IRB before being implemented in your study.
• Notify the IRB within 5 days of any unanticipated or adverse events are experienced by subjects during your research.
• Submit a study closure through the Cayuse IRB submission system once your study has ended.

If you have any questions regarding the IRB decision, please contact Michael Gillespie, the Research Compliance Officer. Mr. Michael Gillespie can be reached by phone at (909) 537-7588, by fax at (909) 537-7028, or by email at mgillesp@csusb.edu. Please include your application approval number IRB-FY2021-135 in all correspondence. Any complaints you receive from participants and/or others related to your research may be directed to Mr. Gillespie.

Best of luck with your research.

Sincerely,

Nicole Dabbs

Nicole Dabbs, Ph.D., IRB Chair
CSUSB Institutional Review Board

ND/MG
REFERENCES


https://doi.org/10.1080/15426432.2011.587384
