How do clinical social workers stay enthusiastic about their work?

Kimberly Stasny

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Kimberly Stasny
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ABSTRACT

This study was an inquiry into how clinical social workers remain enthusiastic about their work. A mixed-methods approach was used to survey 63 clinical social workers in the United States; the majority living in eastern Massachusetts. The sample was 75% female and 25% male, 90% Caucasian and 10% minority or undisclosed racial identity. Participants self reported their current enthusiasm level, what in particular fosters and interferes with that level, and what activities were frequent in their life. Additionally, the abridged form of the Job Descriptive Index and the Job In General survey was added to also assess job satisfaction.

The majority of all the clinical social workers self reported to be high or moderately high in enthusiasm in their current work setting, but male and minority social workers reported a higher level of enthusiasm than female or Caucasian social workers. Those with the highest enthusiasm reported that an interest in their clients, professional development, and autonomy at work, in that order, contributed the most to their enthusiasm. This group regularly spent time with family, friends, and supportive colleagues. More than half of this group also read social work literature, which was not an activity found in any of the participants who were low or moderately low in enthusiasm. Exercise was the one commonality in those highly enthusiastic who were not enthusiastic people in general. Lastly, and not surprisingly, enthusiasm was positively correlated with job satisfaction.
HOW DO CLINICAL SOCIAL WORKERS
STAY ENTHUSIASTIC ABOUT THEIR WORK?

A project based upon an independent investigation,
submitted in partial fulfillment of the requirements
for the degree of Master of Social Work.

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CHAPTER I
INTRODUCTION

Clinical social workers provide mental health services to clients in order to enhance their client’s emotional functioning. They practice their work in a variety of settings: Private practice, medical facilities, mental health clinics, child welfare agencies, schools, and community organizations (Mentalhealthchannel, 2002, Jan. 22). In all settings, the emotional well-being of a client is a clinical social worker’s primary focus, and they need to keep a positive attitude towards their work in order to be effective clinicians.

The term “Enthusiasm” for one’s work is used to represent a high level of joy for work, which encompasses a positive attitude. Enthusiasm is defined as having a lot of excitement in a subject (Dictionary.com, n.d.) and since monetary gains are not often ample in social work professions, social workers may need some level of enthusiasm to continue a positive attitude amidst the multiple stressors that come with the work.

Keeping spirits high with emotionally depleting work and inconsistent funding can be a challenge; yet some do continue to thrive. It is those social workers in particular that can educate the greater population of social workers about how they keep their enthusiasm. For those social workers who struggle with enthusiasm, information is also gleaned by being aware of the commonalities of this population, which may contribute to low levels of enthusiasm. This study will explore how social workers stay enthusiastic about their work and what they find that interferes when they are low on enthusiasm.

In order to grasp how clinical social workers maintain enthusiasm in their work, it is helpful to be cognizant of what creates job satisfaction and what interferes with it,
which can lead to burnout. Burnout is defined as emotional exhaustion, cynicism, and reduced feelings of personal accomplishment (Maslach, Schaufeli, & Leiter, 2001). Social workers are at risk for burnout due to above average stress levels for their occupational group (Lloyd, King, & Chenoweth, 2002) and thus are challenged to sustain enthusiasm for their work. Information on their job satisfaction, on the other hand, which is defined as a positive emotional state resulting from the appraisal of one’s job situation…” (p.3, Acker, 2007) can aid in the discovery of how social workers create and maintain enthusiasm for their work.

The bulk of the research on job satisfaction in social workers focused on burnout or what interferes with high levels of satisfaction. Minimal research examined social workers who are vital and excited to do their work. If the field of social work is interested in remaining strong and vibrant, it needs to learn from those who are enthusiastic about their work and less on those who are burned out from their work. There is much to learn from those who are doing it “right” and this study is created to begin to fill that gap.

This research study will aid social workers newly entering the field in keeping their enthusiasm and drive, but the information gained will also be of use to all those in the helping professions, regardless of how long they have been in the field. This information can be used to revitalize social workers that have lost their sizzle, as well as those wanting to continue to fan the flames of their enthusiasm.

This researcher conducted a survey of clinical social workers in the United States, predominantly eastern Massachusetts, via email. The surveys addressed what type of social work they presently do, how long they have been doing social work, and how
enthusiastic they feel about their work presently. The survey contained a checklist of possible life activities - tools they may or may not use to keep their enthusiasm in their work. There were also open-ended questions to allow the participant to add specifics about what they find contributes to, or interferes with, enthusiasm in their work. Lastly, the survey incorporated a well-known modified job satisfaction survey in order to discover what specifically the participant prefers about their job and how they feel about their work over all.

It is crucial to cultivate enthusiasm in social workers because burnout is especially damaging when the sufferer needs a strong interest in order to do their work effectively. When a social worker’s enthusiasm goes flat, it affects the very nature of his or her work as well as the many people whose lives are touched in the process of the social worker carrying out his or her job. It is important for new social workers to keep vitality alive in their work if they plan to remain in the field and make positive contributions as well as seasoned clinicians, who may need a jump-start to revitalize their work.
CHAPTER II
LITERATURE REVIEW

In order to discover how clinical social workers stay enthusiastic about their work, it is necessary to define what is already known about this area of investigation.

The tools needed to be enthusiastic about one’s profession are a mystery, but by exploring enthusiasm in general, job satisfaction, burnout, social work stressors and rewards it may be possible to make strides towards a better understanding of what helps and hinders enthusiasm. This review of the literature will address these areas and conclude with how some social workers overcome stressors and continue to feel enthusiastic about their work, even after years in this profession.

*Enthusiasm*

It may be surprising to learn that the term *enthusiasm* was once viewed as offensive, describing religious extremism or people delusional about being inspired by God (Dictionary.com, n.d.). American Heritage Dictionary Online gives a history of the word enthusiasm as originating from the Greek word *enthousiasmos*; ultimately coming from the adjective *entheos*, which means *having the god within*. It goes on to state that in 1603, the English word *enthusiasm* is first cited as meaning *possession by a god*. Eventually the term referred to being crazed or excited about anything. This same dictionary defines enthusiasm today as “a great excitement for or interest in a subject or cause” (Dictionary.com, n.d.) and is now generally viewed as a positive attribute to have in one’s life. No longer referring exclusively to religion or God, enthusiasm can be a great excitement for anything from sports to social work.
Today the word enthusiasm may conjure up images of cheerleaders or young people eager to change the world. Do not be fooled by the perky and at times naïve representations of enthusiastic people. A Vanderbilt University professor once wrote, “Whatever psychological wisdom I have acquired has come from interaction with people who are enthusiastic about what they are doing” (Snyder, 1971, p. 215). Charles Schwab stated, “A man can succeed at almost anything for which he has unlimited enthusiasm” (Khurana, 2007, p. 2). And possibly the most relevant quote to social work is from Norman Vincent Peale who said, “Life’s blows cannot break a person whose spirit is warmed at the fire of enthusiasm” (Khurana, 2007, p. 1). Since life’s “blows” are inevitable, it is reasonable to assume the attribute of enthusiasm, which is seen to create success and resilience, is a favored quality in oneself, friends, and especially in those who work with life’s hardships.

Although enthusiasm inspires people to succeed, probably the strongest reason that enthusiasm is desired is the feeling it elicits in people. This feeling is described most accurately as “A happy and joyous state of mind. It is a condition of high spirits – a special form of elation” (Greenson, 1962, p. 3). It has the buoyancy of euphoria and the activity of mania, only the activities are more realistic and adaptive (Greenson, 1962). This state of mind cannot help but to affect other areas of one’s life. When enthusiasm was studied in people considered to be workaholics -- who were found to have low life satisfaction compared to their nonworkaholic peers -- enthusiastic workaholics were found to have a much higher life satisfaction than nonenthusiastic workaholics (Bonebright, Clay, & Ankermann, 2000).
Enthusiasm may be desired, but it is not a light switch that can be turned on and off, and if attempted to do so it may create havoc. In an occupational health study, it was suggested that enthusiasm expressed in accordance with job demands but not congruent with personality (such as an introverted person attempting to be a customer service representative) may actually create illness and suffering over time (Bono & Vey, 2007). This brings to light the idea that enthusiasm needs to begin from the inside out not forced from the outside in, in order to reap the feel-good-benefits.

Job Satisfaction

Job satisfaction differs from enthusiasm since one can be enthused with work and still not feel satisfied or they can be satisfied with their work with out being enthused about it. This is largely due to enthusiasm being more euphoric in nature (Greenson, 1969) and satisfaction being a fulfilled, content mood (Mish, 1987). Yet, the two terms are closely related as if enthusiasm is a step higher in emotional energy than satisfaction. Thus job satisfaction is an informative aspect since job dissatisfaction would naturally decrease job enthusiasm.

Job satisfaction has been widely studied since the 1920’s and is an interest for many fields from management training to economics (Stanton & Crossley, 2000). Job satisfaction is described as a “Positive emotional state resulting from the appraisal of one’s job situation and is linked with the characteristics and demands of one’s work” (Acker, 2007, p.3). Included right in this definition are clues to what helps or hinders job satisfaction – the characteristics and demands of the work.

A study conducted on child welfare workers that were emotionally exhausted yet satisfied with their job found the ability to stay satisfied related to ones ability to:
(1) Find reward in helping others; (2) Believe that one can make a difference: (3) Access social supports; (4) Strive to increase skill mastery, rather than superiority over others; (5) Use active coping skills; and (6) Have some control over decisions at work (Stalker, Mandell, Frensch, Harvey, & Wright, 2007). This is a great starting point in the search for tools to increase satisfaction and ultimately enthusiasm.

Perceived prestigious status of one’s job appeared to be a contributing factor in job satisfaction from a survey done on American workers (Smith, 2007). According to this survey, the helping professions take the lead for the most satisfying occupations—up to 87% are very satisfied -- followed close behind by creative pursuits. The least satisfying work appears to be manual and service occupations with low social standing; roofers ranked at the bottom with only 25% very satisfied (Smith, 2007).

The Job Descriptive Index (JDI) is an organizational survey designed to assess workers’ perceptions on how characteristics affect their overall job satisfaction. The JDI focuses on what they believe are the five most influential characteristics to job satisfaction: the work itself, pay, promotions, supervision, and coworkers (Stanton & Crossley, 2000). Since importance of individual characteristics can fluctuate from person to person (one person may value good pay over all other aspects while someone else may value the work they do) the JDI supplemented their survey with a Job In General (JIG) survey to discover an employee’s overall satisfaction with their work (Stanton & Crossley, 2000). Since the JDI was developed in 1969 (Bowling Green State University, 1997), it has played an important role in job satisfaction research on everything from military personnel to women in sport journalism (Smucker, Whisenant, & Pedersen, 2003; Schumm, Gade, & Bell, 2003).
**Burnout**

An antonym of both enthusiasm and job satisfaction is the term *burnout*, which is defined as emotional exhaustion, cynicism, and reduced feelings of personal accomplishment (Maslach, Schaufeli, & Leiter, 2001). When one is emotionally exhausted and cynical there is no room for “a strong excitement of feeling” (Enthusiasm, 1987, p.415), which defines enthusiasm. *Job* burnout is a “Psychological syndrome in response to chronic interpersonal stressors on the job” (Maslach et al., 2001, p.399), which depletes emotional and physical resources, creating a negative, callous, or excessively detached feeling, and a sense of incompetence and loss of productivity (Maslach et al., 2001). Burnout is a serious problem since those afflicted by it not only feel miserable but they have negative impact on their coworkers by creating personal conflicts and disrupting the work productivity (Maslach et al., 2001). The earliest research on job burnout was based on the experiences of human service and health care workers who provide aid to people in need, which is work that is characterized by emotional and interpersonal stressors (Maslach et al., 2001). Initial articles on burnout appeared in the 1970s in an effort to reveal the phenomena as a common response. In 1976 a social psychologist, Christina Maslach, was studying emotions in the workplace and found that the coping strategies a worker used had a direct effect on the worker’s professional identity and job behavior (as cited in Maslach, Schaufeli, & Leiter, 2001), which led to further research to discover details of individual coping strategies.

Coping skills were mentioned numerous times in the literature as an indicator of whether a person would be satisfied or burned out. People who use *control-oriented* coping strategies otherwise known as *active* coping skills (i.e. confront, seek support,
think positive) are found to have higher satisfaction and lower rates of burnout (Koeske, Kirk, & Koeske, 1993; Stalker et al., 2007). The benefits found when human service providers cope effectively with work stress is healthier employees (mentally and physically), longer retention rates, and higher quality service to clients; in response clients show “greater stability or improvement” (Koeske, Kirk, & Koeske, 1993, p.321).

Daley (1979) dispels the fallacy that agencies can have an all-preventative plan to avoid burnout. He stated that each staff member has an individual tolerance to stress and particular triggers that will generate burnout. Therefore, burnout treatment and prevention needs to be handled on an individual level, between supervisor and staff. This finding strengthens the view of focusing on the individual’s tolerance, coping skills and suitability for the particulars of the field in which they work.

Demographical aspects affect job burnout, as well. The age of the worker seems to be the most related to burnout levels; the younger the worker the more reports of burnout – over 30 or 40 years of age, the less burnout is reported (Maslach, 2001). There has been no strong predictor of gender related to burnout, though men tend to score higher on the cynicism scale and women on the exhaustion scale (Maslach, 2001). When looking at marital status, singles, in particular men, seem to burnout quicker than divorced or married individuals (Maslach, 2001). Formal education appears to increase burnout rates compared to less educated individuals, yet this aspect is complicated by other variables so this finding is not so clear cut (Maslach, 2001). It should be noted that all demographical factors have a very minimal impact on burnout rates when compared to situational factors (Maslach et al., 2001).
Studies have been plentiful because burnout is a real risk for workers in the United States (U.S.). More than 30% of workers report feeling always or often stressed at work. 25% of workers in general, surveyed in 2002 felt they were short staffed (As cited in Schwartz, 2004). Another survey conducted on American workers by CareerBuilder.com found one-half of all workers felt a great deal of stress on the job (Lorenz, 2006). On top of these high stress levels, workers in the U.S. have the least vacation time of any modern, developed culture, which does not bode well for the health of the American workforce (Lorenz, 2006).

**Social Work & Burnout**

Interestingly, human service providers began burnout research, but the helping professions are also at the top of the list for the most satisfied at their work. Clergy, physical therapists and firefighters were the top three, respectively, and psychologists were in the top 10, but social workers were not noted in this research as significantly satisfied, or dissatisfied (Smith, 2007). Yet during the early research into burnout, it was clear that the need to provide service to others is highly demanding on emotional resources and emotional exhaustion is a common response (Maslach et al., 2001). Exhaustion is the primary quality and most obvious of the burnout syndrome (Maslach et al., 2001). Yet the satisfaction of helping others appears to be substantial enough, if fostered, to combat the risk of burnout in the helping professions.

When looking at burnout specifically towards social workers, there were not high burnout rates found in a literature search conducted by Soderfeldt, Soderfeldt, and Warg (1995). It could be argued that most burned out social workers might have left the field of social work or opted out of participating in studies on burnout. Soderfeldt, Soderfeldt,
and Warg (1995) found very few research studies conducted specifically on social work burnout. Nevertheless, they stated that social workers have an above average risk for burnout and gave suggestions to prevent burnout.

In a more current review of the literature, Lloyd, King, and Chenoweth (2002) found empirical evidence that social workers are not only burned out, they experience higher stress levels than similar occupational groups. According to their article social workers are more anxious and depressed than normative groups, so the authors questioned whether social work attracts over stressed people to the job and hence scored higher on the stress scales. Although the authors made a comprehensive case that social workers are stressed, they added a twist by questioning what came first: The mental illness or the inability to handle the stress levels of the job. These findings bring to light the necessity to have revitalized, enthusiastic social workers to combat the level of anxiety and depression possible for social workers.

Job related stress was found to be a main factor contributing to burnout in social workers (Lloyd et al., 2002; Soderfeldt et. al., 1995). An article by Patricia Ewalt (1991) looked at the challenge of recruitment and retention of social work staff. She warned that some human service agencies will continue to have this problem if the salary, influence on their environment, and sensitivity to the workers values are not satisfactory. She noted that fewer than 2% of social workers are in private practice and working for others may create more stressful conditions, as the typical social worker has to navigate between personal values and the values of the agency for which they work.
Social work stress levels

A typical day in the life of a hospital clinical social worker may include a discussion regarding withdrawing life support from a client, a child abuse assessment, crisis intervention with an angry patient or facilitating a family support group (Gregorian, 2005). Stress is inevitable and coping tools are essential in this line of work. Although social workers in hospital settings may be witness to clients in their most heightened states, stress is involved in all clinical social work settings.

As would be expected, high stress levels can decrease the enjoyment of a job. In a study examining sources of job stress in a group of intensive family preservation workers it was noted that “seeing sadness daily” (Tracy, Bean, Gwatkin & Hill, 1992, p. 473) was a serious drain on the worker’s emotions.

Newer social workers are the most vulnerable to working in agencies that do not match with their focus. The novice has less of a choice around work environment and clientele when they are employed by an agency. Acker (1999) found that these younger, less experienced and often single social workers were also more likely to be working with chronically mentally ill clients. This study found a positive correlation between burnout and working with the chronically mentally ill and thus newer social workers were the least satisfied with their work and salary.

Social Work as a chosen profession

It is not a revelation to discover that those inclined to do social work find helping others rewarding and satisfying. In an article designed to assist readers in finding a career of choice, Austin (2001) directs those interested in helping others towards social work as “the obvious choice” (p.28). This same article writes of a teenager who started a
non-profit business to collect suitcases for foster care children who carry their belongings around in a plastic bag. She works for free to give these children “a sense of dignity and self-respect” (p.28). There are invisible rewards in helping others and these invisible rewards are necessary in making a career out of social work.

Rompf and Royse (1994) found, as did others, that social work students were more likely to report a history of psychosocial trauma than a comparison group of non-social work students. They also state that the social work students were three times more likely than the comparison group to view their past struggles as influencing their choice of career. They warn that one should not assume social work students are drawn to this profession due to their own mental health problems; in fact, these students may be better able to recognize psychosocial trauma from their courses and find the disclosure of this less stigmatizing than the comparison group.

The benefits of personal experience with struggles to fuel a career choice in social work are plentiful and outlined by Rompf and Royse (1994) as: Having firsthand experience with the social service system, the ability to relate to clients, a personal experience with the coping tools they may be teaching, and a level of empathy and sensitivity for their clients that they might not otherwise have.

Not every social worker has chosen this field for altruistic purposes. There is a warning to educators in Rompf and Royse’s study (1994) that some students enter the field to be admired, seen as benevolent, to vicariously help themselves by helping others, or for the power differential over others. These particular students would be better suited with other careers due to the negative effects they may have on their clients, and it is hoped that educators will assist these students in discovering that piece.
There are, of course, other contributing factors for why people choose to become social workers. Many people want to be personally involved in creating a better society, work with diverse populations, work independently, and have a steady stream of available employment opportunities (Rompf & Royse, 1994).

The invisible rewards, the push from their pasts, or the desire to create social justice in the world would be enough for any good citizen to volunteer their time. To actually up the ante and make helping others a career takes more than just interest. To enjoy a profession where one will hear hardships of people suffering day in and day out requires an enthusiasm for one’s work. Without enthusiasm, students would be considerably challenged to complete social work training.

**Social Work Enthusiasm**

Enthusiasm would benefit any social worker -- encouraging resilience and a positive attitude towards their work and their clients. St. George’s University of London has it in writing that enthusiasm is a necessary aspect to have before entering the field of social work (St. George, 2007). It is often used as a descriptive term when honoring people for social work. Dale Brantley, an Alabama Social Work Hall of Famer, is described as demonstrating “enthusiasm, pride and commitment for his work” (The University of Alabama School of Social Work, 2007). Donielle Robinson was also described as enthusiastic for her job when receiving an Outstanding New Social Worker award (University of Illinois at Urbana-Champaign School of Social Work, 2007). It is not a question about whether enthusiasm is helpful in the field, but a question of how enthusiasm is fostered in oneself.
There are no studies known on what impedes or encourages enthusiasm in social workers, but since there are enthused social workers, it is important to learn from them about how to foster enthusiasm. One such social worker is Camille Gregorian (2005) who wrote an article on what sustains her excitement for social work.

After twenty years of working in an intensive hospital setting Camille Gregorian (2005) claims to love her work. She describes those who stay in intensive work as having strong personal and professional boundaries to deal with the intensity of emotions that social workers see daily. She states that a social worker needs to have awareness of any unresolved personal issues, a thick skin to not personalize other worker’s issues, and a good sense of professional self-worth. She encourages social workers to utilize clinical supervision to assist with the intensity of the work, challenge themselves by moving to new clinical areas or recharge by supervising students, conducting research, writing an article, or joining a committee. Lastly, she emphasizes the need for humor. Gregorian states, “While I think it is important to take the job very seriously it is helpful not to take yourself too seriously” (p.13). She is a role model for all social workers who want to remain excited by the important work they do.

It is obvious that a satisfied worker would have a better chance of having and fostering enthusiasm then a burned out worker, so it may be helpful to note what has been helpful and hindering regarding job satisfaction and burning out. These reminders will arm social workers with the information they need to avoid losing enthusiasm or perhaps increasing enthusiasm.

It has already been mentioned that active coping skills create more satisfaction and less burnout rates in work environments (Koeske, Kirk, & Koeske, 1993; Stalker et
There were also a number of suggestions regarding life activities, professionally and personally, that the literature found to be helpful in combating different forms of burnout at work: Laughter (Gregorian, 2005; Rupert & Kent, 2007), balancing professional and personal time (Cunningham, 2004; Rupert & Kent, 2007), training others (Gregorian, 2005; Pearlman & Saakvitne, 2007), social work research/writing articles, changing jobs (Gregorian, 2005), journaling (Pearlman & Saakvitne, 2007), self awareness/personal therapy (Gregorian, 2005; Pearlman & Saakvitne, 2007), hobbies (Rupert & Kent, 2007), socializing with friends and family (Cunningham, 2004; Maslach et al., 2001; Pearlman & Saakvitne, 2007; Rupert & Kent, 2007), conferring with supportive colleagues (Cunningham, 2004; Pearlman & Saakvitne, 2007), practicing any form of spirituality (Cunningham, 2004; Pearlman & Saakvitne, 2007), attending trainings (Azar, 2000; Cunningham, 2004; Pearlman & Saakvitne, 2007), receiving supervision (Azar, 2000; Cunningham, 2004; Maslach et al., 2001; Pearlman & Saakvitne, 2007), and meditating (Cunningham, 2004; Pearlman & Saakvitne, 2007).

In regards to hindering job satisfaction, having a low income appears to be a barrier (Azar, 2000; Cunningham, 2004) along with working in agencies instead of private practice – this is especially true for females who report a significant increase in emotional exhaustion while working at agencies (Rupert & Kent, 2007). Numerous professionals also found that a varied workload, that one has control over, increases job satisfaction (Azar, 2000; Cunningham, 2004; Pearlman & Saakvitne, 2007).

In a study conducted on enthusiasm, satisfaction, and commitment in relationships, stress and strain in relationships was found to diminish enthusiasm and
satisfaction levels but not necessarily commitment levels which are more affected by the meaning and investment in the relationship (Lydon, Pierce, & Regan, 1997). When viewing dissatisfied social workers through a commitment-to-work lens, it is possible to see why some people choose to continue working in an environment where they may not feel enthused or satisfied if they find meaning and are invested in the work. Daley (1979) made an important point that burnout in social work is hastened for those not meant for the field. Thus, if one lacks enthusiasm for their occupation they are more vulnerable to burning out and thus, less likely to be enthusiastic about their work.

Conclusion

Social workers are not only becoming more burned out with time, they seem to be leading the way in high stress levels with in the helping professions (Lloyd et al., 2002). Newer social workers appear to be most susceptible to losing their excitement for their work (Acker, 1999). They are attracted to the field due to an internal drive to help others and may become depleted and burned out without tools to keep their enthusiasm alive. There are people who sustain their enthusiasm for social work and research is needed to discover what tools they use to make that happen. It is vital that we educate social workers on the tools to keep their enthusiasm alive or these workers, their clients and the whole field of social work will suffer.
CHAPTER III

METHODOLOGY

Research Design

How do clinical social workers stay enthusiastic about their work? This question was explored by dispensing an on-line survey to clinical social workers regarding how and if they are enthusiastic about their work as a social worker. Due to the emotional intensity of clinical social work, burn out is a serious threat to quality social work. Numerous studies on how to avoid burnout and who is burned out were found, but no studies were found investigating enthusiasm in social workers. This study examined enthusiasm levels in social workers, how social workers foster enthusiasm for their job, and what those social workers with high (as well as low) levels of enthusiasm have in common.

This research was designed in a mixed methods approach. A fixed method survey was used to gather data. Since there are no previous studies completed on this topic, there was no instrument available for use, thus one was created. Internal validity was established by carefully creating specific questions addressing the question of enthusiasm in social work. The abridged versions of the published surveys the Job Descriptive Index (JDI) and the Job In General (JIG) were added to the overall survey in order to assess job satisfaction and how that relates with self-reported enthusiasm levels. The Smith School for Social Work human subjects review committee approved the study's design and sample population (see Appendix A).
Sample

The population studied was licensed clinical social workers in the United States, currently working in the field. A random sample method was initially used in order to gain a variety of social workers; the one exception to random sampling was the intention to include as many male social workers as possible in an attempt to balance the gender inequality of the social work field.

This random sampling was attempted by forming a list from the National Association of Social Workers’ (NASW) website (http://www.socialworkers.org/). From there an outside database was accessed from the NASW website by clicking on "Find a social worker". This database, called HelpPro (http://www.helppro.com/aspdocs/naswbsearch1.asp), contained social workers' email addresses along with their gender. The zip code used to find a social worker in this case was 01904 and the social workers available for sampling were with in a 25-mile radius of this Massachusetts zip code. The list was initially created from the first 36 male and 36 female social workers that had an email address posted on the database. The list was expanded upon when these initial 72 emails only generated 20 participants, all in private practice.

Snowball sampling was then utilized, which opened the respondent pool to clinical social workers outside of Massachusetts and in other fields of social work. An additional 30 emails were sent out to colleagues and friends requesting their assistance in forwarding the survey out to known licensed social workers, especially encouraging male social workers. This generated 50 more respondents, bringing the participant total to 70. Unfortunately, seven of the participants did not answer a mandatory question that asked
what level of enthusiasm they had in their current work setting. These participants did not complete the survey—some only opened the survey and some got as far as the demographic questions but no further—and without the vital question on enthusiasm answered, their surveys were not useful in data analysis and thus not entered in as participants.

The initial email and informed consent clearly outlined the cost and benefits of participating in the research (see Appendix B and C). Confidentiality was ensured to participants by the minimal identifying data on the survey forms. Using Survey Monkey, an online survey service, to collect the surveys created anonymity. Survey Monkey did not save the respondents email or IP addresses; there was no way to trace the identities of the participants. This anonymity is expected to increase validity since the participants are safe to answer the questions honestly.

Once data collection was complete, the sample consistent of 63 participants: 47 female and 16 male; the majority of them living and working in Eastern Massachusetts. There was very little racial diversity in the sample: 57 self identified as Caucasian, one African American, one Asian, one Jewish, one Euro American, and one Biracial. Their ages ranged from 24 to 77, coming with a variety of years in the social work field: from 1 year to 41 years.

Data Collection Methods

The instrument used was created specifically for this study due to the absence of instruments measuring enthusiasm (see appendix D). It was also necessary for the validity of the study that a survey was designed specifically in order to accurately retrieve data on what supports and interferes with enthusiasm in social work. The instrument
was created to be as time-efficient as possible, in order to increase interest in participation in the study.

The survey defined enthusiasm and asked participants to self assess their level of enthusiasm in social work. The majority of the questions were quantitative, using multiple choice or likert scales. A qualitative aspect to the study was included with open ended questions used for clarity, to avoid researcher bias in assuming what social workers use to keep enthusiasm in their work. Three open-ended questions asked about the fostering and interference the participant had in regards to enthusiasm in social work. Two more questions asked about the participant's general level of enthusiasm (not just for work), which is important to decipher if enthusiasm comes naturally and thus is easier for the individual to cultivate. The survey also had a list of life activities that have been found to support job satisfaction, and it asked the participant to mark one if they participate in that particular life activity (socialize with friends, exercise, etc…) regularly. The abridged version of the Job Descriptive Index and Job In General was added to the survey to assess job satisfaction as well.

Three social work colleagues assessed each question for face validity. A threat to the external validity of the study is the inability to control for follow-through in participating in the survey. This restraint limits the study’s ability to generalize to social workers that do not respond to emailed surveys.

Data Analysis

Frequencies were ran on all variables and descriptive statistics were ran on the ratio level variables. The quantitative data was analyzed using crosstabulations, Spearman rho, and T-tests to determine if the level of enthusiasm was in relation with any
other data gained from the survey, such as level of education, salary, location, client population or life activity list. The qualitative data was analyzed for themes and presented in descriptive form including quotes from the participants. The qualitative data was coded manually, while the quantitative data was sent to a statistician at Smith College to be electronically coded.

Also utilized was Survey Monkey's data analysis, where filters were arranged to view only the responses of certain subgroups. Subgroupings such as those respondents who report being *highly enthusiastic* in their current setting or *low in enthusiasm*, or *not enthusiastic in general*, were assessed individually to find commonalities. These groupings were mixed at times to view groups such as those who find themselves *high* in enthusiasm but *not enthusiastic in general* and *not viewed by others as enthusiastic* as well. These integrated subgroups included only those participants who fit into specific criteria, in order to analyze their particular views on enthusiasm in social work. These subgroup findings are clarified in Chapter IV under each appropriate subtitle.
CHAPTER IV
FINDINGS

The findings from this research project addressed the question of how clinical social workers stay enthusiastic about their work. Using self-reporting techniques, clinical social workers were surveyed and more than half of them felt moderately high enthusiasm, as well as a significantly high level of satisfaction in their work. Some major findings in this study were that males and minorities reported higher in current enthusiasm levels than females and Caucasian social workers. The majority of participants who considered themselves highly enthusiastic about their clinical social work were over 50, worked in a private practice with a high level of autonomy and choice over clients they saw. Also found to be of significance was that participants self-reporting with low or moderately low enthusiasm were found to be more often working in a medical facility, having low ability to choose clients, and yet all considered themselves to be enthusiastic people in general. Lastly, this research found that social workers who did not consider themselves enthusiastic in general and had not been told by others that they were enthusiastic, but nevertheless considered themselves highly enthusiastic about their work were all satisfied with their work, exercised on a regular basis, and did not conduct research.

Total Sample Studied

Demographic Information

The research allowed for 70 total participants to be surveyed. Survey Monkey received 70 interested participants, but as noted earlier, seven of the respondents did not answer questions beyond the demographic information, thus their surveys were not used
in the data analysis. Out of the 63 remaining participants, there were 47 females (75%) and 16 males (25%) – a breakdown that is similar to the gender distributions for social workers in the United States (Center for Health Workforce Studies & NASW, 2006). Their ages ranged from 24 to 77 years old, the largest age grouping (29%) being those participants in their 50's. The ages 58 and 59 in particular, were the most common in the sample, both having 8 participants (16 total) completing the survey. A majority of the participants were from Massachusetts, but there were some participants from other states: Maryland (4), Texas (3), Georgia (2), New York (1) and one living in Massachusetts but working in New Hampshire. Racial diversity was poor, only 10% of the sample identified as other than White or Caucasian, but this too is similar to racial disparities in social workers nationwide. One person self identified as African American, one as Asian, one as Biracial, one as White/Jewish, one as Euro American, and one who did not define. The remainder -57 participants (90% of the sample)- reported their race as White or Caucasian.

The majority (61 individuals) had a master's degree in social work (M.S.W.). Out of the remaining two participants, one had an M.S.S. and the other did not report. Five individuals had a doctorate degree along with their M.S.W. and four of the participants, who had an M.S.W. but not a doctorate degree, had a second master's degree in another field.

The participants reported a variety of years in social work, from 1 to 41 years. Out of the multiple social work occupations, 27 individuals (43%) reported working in private practice, 22 in a medical facility (35%), eight in a school (13%), seven in a mental health clinic (11%), another seven in an agency (11%), four in child welfare (6%), and
one in a community organization (2%). It should be noted that some individuals worked in more than one setting and reported each setting. Other work settings some participants added were prison, probate court, and the Department of Mental Health. Lastly, the participants widely ranged in social work income from $12,000 to $120,000 a year. Not all participants worked full time.

*Enthusiasm Levels*

On average the sample was highly enthusiastic. The participants ranked themselves in one of four categories for their current level of enthusiasm: low, moderately low, moderately high, or high in enthusiasm. Those self-described as *moderately high* or *high* in enthusiasm for their current clinical social work made up 87% of the sample. The participants self-described as *low* or *moderately low* in enthusiasm made up 13% of the sample. Only one person in all 63 participants ranked their current enthusiasm as *low*, the majority of the low/moderately low group was in the *moderately low* category. The largest group of current enthusiasm was the *moderately high* level, taking up 51% of the whole sample, leaving 36% of the sample ranking as *high* in enthusiasm (See figure 1 below).
There were gender differences found in the levels of current enthusiasm. It was found that 100% of the males were *high* or *moderately high* in enthusiasm – the majority of them being *high* (63%), leaving 37% as *moderately high* (see figure 3). Eighty three percent of the females were *high* or *moderately high* in enthusiasm, with the majority being *moderately high* (56%), leaving 37% of them as *high* in enthusiasm (see figure 2). A chi square analysis, to test whether or not this difference was significant, could not be run since more than 20 percent of cells had an expected count of less than five, which violates an assumption necessary for running the test.
Figure 3  Male Clinical Social Workers' Current Enthusiasm Levels

There was also a racial difference in enthusiasm levels for participants. The participants identifying as a racial minority were found to have a higher percentage of being highly enthusiastic than Caucasian participants. Sixty percent of the minority participants reported a high level of current enthusiasm compared to 35% of the Caucasian group. As with the gender disparity, too few participants in the racial minority category created an obstacle in running a statistically significant test to assure this finding was not due to chance.

T-tests were run to determine if there was a difference between high or low enthusiasm on a multiple of variables: Job In General (JIG) satisfaction, age, income, and length of time the participant had been in their current setting. The only statistical significance found was between enthusiasm and job in general satisfaction ($t(6.043)=-6.127, p=.001$, two tailed). Those with high enthusiasm had a higher mean JIG score ($m=53.21$) than those with low enthusiasm ($m=28.29$). None of the other variables were found to correlate with current high or low enthusiasm levels.
One person chose not to answer the question "Do you feel enthusiasm in other areas of your life?" but most of the sample agreed they do (97%) feel enthusiasm in other areas. The most common answers to this were family, friends, significant others, and hobbies, in that order. There were a variety of answers that did not make the consensus of the group, such as one male participant interestingly wrote that his other enthusiasms were, "feminism, food, and sex". Only one person in the 62 who answered felt no enthusiasm in other areas of their life.

A large majority of the sample also believed they were enthusiastic people in general; 51 out of the 61 participants (81%) who chose to answer this question. Interestingly, the same number of participants, 51 (81%), agreed that more than one person had told them that they were an enthusiastic person in general – yet these groups are composed of different participants.

A crosstabulation was run on the enthusiasm-in-general groups with current enthusiasm levels. It was found that the one person who reported feeling low in enthusiasm for their current work, reported that while they are low currently, they are enthusiastic-in-general. Also found, was 49% of the enthusiastic-in-general group had moderately high enthusiasm, 37% had high enthusiasm, while 12% had moderately low enthusiasm for their current work. Those who viewed themselves as not enthusiastic-in-general actually scored higher, percentage wise, on current enthusiasm levels: Out of the ten people who reported that they are not enthusiastic-in-general, 60% reported moderately high enthusiasm and 40% reported high enthusiasm currently. Not one participant who reported to be not enthusiastic-in-general believed they were low or even moderately low in enthusiasm for work currently (See figure 4 below).
Another crosstabulation was run on the enthusiasm-in-general question with this survey question: What is the lowest point of enthusiasm you have reached doing this work? Out of the 51 participants who are enthusiastic-in-general, 22% reported as being depleted of all enthusiasm at some point in their social work career, 35% reported to have been low in enthusiasm, 39% had a bottom of moderate enthusiasm, and 4% continued with high enthusiasm throughout their career; moderate enthusiasm being the most common in this group for a career low point.

Out of the 10 participants who did not consider themselves enthusiastic-in-general, 30% reported as being depleted of all enthusiasm at some point in their career, 40% reached low enthusiasm, 20% reached moderate enthusiasm and only 1 person (10%) continued with high enthusiasm throughout their career; low enthusiasm being this group's most common career low point. This may illustrate that those not enthusiastic-in-general can have a current high enthusiasm and may even maintain that level, but overall those not enthusiastic-in-general struggle more when it comes to maintaining that enthusiasm level throughout their career.
The total sample's reports on the lowest point of enthusiasm as a clinical social worker is as follows: 22% felt depleted of all enthusiasm at some point, 38% felt low enthusiasm, 35% felt moderate enthusiasm, and 5% felt highly enthusiastic throughout their social work careers. The majority of the total sample had reached a low point in enthusiasm at some point in their career, followed closely behind by moderate enthusiasm.

A Spearman's rho test was run to determine any correlation between current enthusiasm levels with the lowest point of enthusiasm and/or job satisfaction levels. There was a significant and moderately positive correlation found between current enthusiasm levels and how low enthusiasm levels have dropped in the past (rho=.438, p=.000, two-tailed), suggesting that the lower the enthusiasm one has had in their career, the lower their enthusiasm level will be in their current setting. Satisfaction levels also appear to have a significant positive correlation with how low enthusiasm levels have dropped (rho=.363, p=.006, two-tailed), but the relationship is weak. Lastly, satisfaction levels were found to be significant and strongly correlated with current enthusiasm levels in this sample (rho=.677, p=.000, two-tailed). This strong positive correlation indicates, as the earlier T-test had, that the more enthusiastic a social worker is currently, the more satisfied they are in their current work setting.

Job Satisfaction

According to frequencies run on the total sample of social workers, they were satisfied overall with their work, their supervisors, the people they work with, and their job in general. They did not feel satisfied, however, with their pay level or opportunities for promotion.
After a crosstabulation of Job In General (JIG) satisfaction with gender, it was found that 71% of the participants satisfied with their job were female, 29% were male. Yet since the females made up 75% of those participants who answered the JIG questions completely, this does not show the complete story. The males completing the JIG scored 100% satisfaction, where just 83% of the females that completed the JIG scored as satisfied. Two males and six females did not complete the JIG thoroughly enough for scoring.

*Fostering Enthusiasm*

A content and theme analysis was completed on the open-ended question regarding what fosters enthusiasm. The largest consensus was 20 out of the 60 participants (33%) who answered that "an interest in the clients" fostered their enthusiasm in social work. The next largest consensus was a total of 15 participants (25%) who reported that "feeling helpful to their clients" fostered enthusiasm. Two groups of 12 people each shared that professional development or autonomy at work fostered their enthusiasm. Another 11 people reported that likeable/helpful coworkers and supervisors were to be credited with fostering enthusiasm. Ten other participants reported that positive outcomes for their clients encouraged enthusiasm, while 6 more found that a positive view of themselves and others fostered enthusiasm. Two groups of five people reported that having a solid belief in the work they do and/or working with children and families fostered enthusiasm. Only four people shared that feeling valued at work encouraged enthusiasm and 3 people reported that new challenges at work fostered enthusiasm. Lastly, one person said that supports outside of work were helpful and
another single person added that they fostered enthusiasm by their "ability to not carry things home at the end of the day" (See figure 5 below).

**Figure 5** Total Sample's Response for Fostering Enthusiasm

![Bar chart showing what fosters enthusiasm and the number of respondents out of 63 total](image.png)

*Interfering with Enthusiasm*

Another theme analysis was completed on the question concerning what interferes with sustaining or increasing enthusiasm in social work. Twenty-two out of the 60 participants (36%) who answered responded with a systems issue answer - from managed care to agency politics. This was the largest group of respondents.

There was a tie for the next highest consensus, which was two groups of 11 participants. The first of the two groups reported that feeling overworked and
overwhelmed was the problem, while the other group reported that not feeling valued at work strongly interferes with enthusiasm.

Two groups of 8 people (16 in total), felt interference came from either being underpaid or having difficult clients. Three more groups of 7 people felt their enthusiasm interference was due to the lack of managerial or supervisory support, their negative co-workers, or mundane work. Six other people reported it was due to a feeling of not-knowing how to help their clients, and two groups of five people reported it was due to personal demands on them or the lack of resources they had to do their job. The fewest numbers fell with two people who felt their enthusiasm interference was due to not enough "play" time in their lives (see figure 6).

It's important to note that each respondent often gave more than one answer to what interferes with enthusiasm; so one individual may have felt a combination of reasons interfere, thus making the percentages only meaningful when using them separately to see how many other respondents also wrote that answer.
**Life Activities**

From the checklist of life activities, the total sample population of clinical social workers reported this data: 86% of the sample socialize with friends, 84% socialize with family, 81% read non-social work material, 76% laugh often, 75% receive colleague support, 68% attend trainings, 67% exercise, 57% receive supervision, 52% attend social work conferences, 51% supervise others, 49% teach others, 48% read social work books/journals, 37% have a spiritual practice, 33% join committees, 32% use personal therapy, 27% meditate, 27% train others, 22% facilitate trainings, 11% journal/diary, 8% write professional social work articles, 3% conduct research, and 2% change employment regularly. See figure 7 below for those activities that are most common in the sample.
**Figure 7**

**Total Sample of Clinical Social Workers’ Life Activity List**

![Bar chart showing life activities for the total sample.](chart.png)

### Life Activities for total sample

- Socialize with friends: 80% participation
- Read non-social work material: 90% participation
- Receive colleague support: 70% participation
- Exercise: 40% participation
- Attend social work conferences: 60% participation
- Teach others: 50% participation
- Spiritual practice: 40% participation
- Utilize personal therapy: 30% participation

% of sample participating in activities

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**Highly Enthusiastic Clinical Social Workers**

**Demographic Information**

This group of participants rated their current social work enthusiasm level as *high* and consisted of 23 clinical social workers, making up 36.5% of the whole sample. These participants were 43% male (10) and 57% female (13), ranging in age from 25 to 77; only two of the 23 were in their twenties and a majority of these participants were over 50 years old (65%). Like the greater sample, this group was almost entirely from Massachusetts, with a few exceptions: 1 from Maryland and 2 from Texas. Most of the racial minority participants fell into this highly enthusiastic group: 1 African American, 1 Asian, 1 Jewish, 19 Caucasian/White, and 1 participant did not list his or her race.
Other demographics of this group were income, which ranged from $25,000 to $120,000 for those with high enthusiasm. Only two participants in this group made under $40,000 a year. The majority (56%) made between $40,000 and $60,000 and the remaining 34% made more than $60,000 a year. Thirty nine percent lived in towns and 26% worked in towns where the median income was at least $70,000. Thirteen percent lived in towns and 17% worked in towns where the median income was $39,000 or less. Hence, most of these participants lived and worked in moderate-income city/towns, but more than half as many lived and worked in wealthier city/towns than poorer city/towns.

Almost all of this group (91%) -21 out of the 23 – report having a Master's in Social Work (M.S.W.). Four of those with an M.S.W. had an additional Master's degree and three of the participants had a Ph.D. along with their M.S.W. One participant did not disclose their educational level and another responded as having an M.S.S.

Although some individuals in this group worked in more than one setting, the majority of those highly enthusiastic about their current job (14 of them to be exact) were in private practice (61%); eight worked in a medical facility (34.8%) and four worked in schools (17%). The remaining seven responses were marked as working in a community organization (1 person), child welfare organization (2), mental health clinic (1), and an agency (2).

The majority of this group also considered their job as having a high level of choice over the type of client they see – 13 participants of the 23 in this sample or 56.5%. The remaining 10 participants were split and reported having moderate ability (22%) or low ability (22%) over choice of clients. The largest group of clients with whom these
respondents worked with was adults. Sixty percent of the respondents had adult clients, followed by 30% who worked with couples, and 26% who worked with adolescents. It is important to note that some respondents worked with a variety of clients and thus marked more than one type of client.

**Enthusiasm Levels**

All of the highly enthusiastic respondents (100%) said "yes" when asked if they felt enthusiasm in other areas of their life. Eighty two percent of this group considered themselves an enthusiastic person in general. Another 82% agreed that other people have commented that they are enthusiastic people in general; yet, it is not the exact same group of participants in each 82%.

**Fostering Enthusiasm**

Fostering enthusiasm by this high enthusiasm group is described as having "interest in their clients" by 26% of them, which is the largest category. One respondent wrote, "I enjoy my patients, I enjoy seeing them grow and change", while another respondent wrote, "making connections with and helping clients" is what fosters enthusiasm in their work. 13% wrote that connecting with people fostered enthusiasm and another 13% wrote the feeling that they are actually helping others fostered enthusiasm. Other important thoughts about fostering enthusiasm were the autonomy over the work, which came in at 17% and professional development, which was agreed on by another 17%. Other feedback from this group on fostering enthusiasm was watching clients grow (13%), having a good salary (9%), supervising others (9%), and having a supportive environment (9%). Helpful responses written by only one person each were: letting go of the work, having strength based approaches, having work that
agrees with one's values, focusing on the client-work, helping underserved populations, having an excellent supervisor and just loving the work all contribute to enthusiasm as well.

*Interfering with Enthusiasm*

Interference with enthusiasm also came in a variety of responses. One respondent describes the interference as "working in a dysfunctional system" speaking for the majority of the highly enthusiastic group, 22%, that blame the greater system of managed care, insurance companies, or agency politics for hindering enthusiasm at work. Other highly ranked problems were unhelpful supervisors (13%), lack of connection with clients (13%), and lack of respect/feeling valued by superiors (13%). Also written as issues, were unhealthy coworkers, lack of autonomy, poor pay, conflicting demands, long hours, and personal health concerns - each issue agreed on by 9% of those in reporting to have high enthusiasm at work. Those responses only written by one person were: Not enough play time, working in a medical model, low morale at work, and having clients relapse.

*Job Satisfaction*

Frequency statistics ran on this group determined that the highly enthusiastic group found their job satisfactory, liked their supervisor and the people at work. They found their job in general satisfactory, but were dissatisfied with their level of pay and their promotions opportunities. These findings are similar to the total sample with the exception that this group is more satisfied with their job, and they value supervisors and opportunities for promotion less than the general sample.
**Life Activities**

This group of highly enthusiastic social workers reported their most common activity from the list is socializing with family (78%), followed by socializing with friends (74%), receiving colleague support (74%), and reading non-social work material (74%). Other activities marked by 10 or more participants are as follows: laugh often (70%), attend trainings (70%), exercise (65%), read social work books/journals (57%), teach others (52%), and supervise others (46%). The rest of the activities marked by 5 or more participants are as follows: receive supervision (39%), attend social work conferences (39%), have a spiritual practice (35%), meditate (30%), and utilize personal therapy (26%). See figure 8 below for activities with at least 50% of the group's participation.

**Figure 8**  
*Life Activities for the High Enthusiasm Group*
Low and Moderately Low enthusiasm

Demographical Information

This group of participants rated their current social work enthusiasm level as low or moderately low. This group is comprised of eight participants making up 13% of the whole sample. Only one out of the eight clinical social workers rated their level as low (seven rated it as moderately low), so the two groups were combined in order to have a sample large enough for conclusions to be drawn from the group. These participants were 100% female, ranging in age from 29 to 59 years old. The majority, again, being in their 50's. Most of the participants were Caucasian/White with 1 participant who listed her race as "Biracial".

The social work income for those with lower enthusiasm ranged from $31,000 to $78,000 a year, the average being $55,000 for this group. This range does not include the lowest of incomes from the total sample, thus creating question as to whether low income itself is an important obstacle to enthusiasm. A T-Test was run to determine if there was a difference between mean income and low or high enthusiasm, no significant difference was found.

All of the participants in this group had a Master's in Social Work (M.S.W.). They have been in the field for as little as four years and as many as 31 years; the majority having more than 10 years as a social worker behind them. Not one participant in this group worked in private practice, the majority worked in medical facilities (63%). The remaining work environments for this group were mental health clinics (25%), and agencies (25%). A reminder: some participants worked in more than one setting. A high majority of this group -7 out of 8 - also considered their job as having a low level of
choice over the type of client they see. A high percentage (88%) worked with children and families and half of these participants also worked with adults.

*Enthusiasm Levels*

Most of the lower enthusiastic respondents (88%) reported "yes" when asked if they felt enthusiasm in other areas of their life. The one person who did not feel enthusiasm in other areas is the only respondent who reported being *low*, rather than *moderately low*, in enthusiasm currently. Interestingly, 100% of this group considered themselves an enthusiastic person in general, but only 71% of them have been told by more than one person that they are enthusiastic in general.

In regards to enthusiasm over the length of their careers, half of the respondents had reached depletion of all enthusiasm at some point and the other half reached a low level of enthusiasm.

*Fostering Enthusiasm*

Enthusiasm is primarily fostered in this group by feeling important in life. More than half of this group wrote similarly that they wanted to feel "as though I am making a difference in people's lives". Another respondent wrote that they feel most enthusiastic when "valued and rewarded". Other comments shared were: having interest in their client population, autonomy, creativity at work, and enthusiastic colleagues.

*Interfering with Enthusiasm*

According to this group, interference was due to the lack of value given to social workers. Almost all, 6 of the 7 seven who answered this question, agreed that social workers are undervalued by commenting on the lack of resources, low pay, and systemic
limits. Other things mentioned that drain enthusiasm were repetitive client problems, work politics, staff turnover, lack of time for actual therapy, and working with difficult people.

*Job Satisfaction*

Out of the 7 social workers in this group that answered the Job In General (JIG) satisfaction questions all were found to be low in job satisfaction. This is supported by the earlier ran T-test that found those with lower enthusiasm had a lower JIG score (m=28.29).

*Life Activities*

This group of lower enthusiastic social workers reported they all (100%) socialize with family, socialize with friends and laugh often. Other common activities marked by these participants are as follows: receive colleague support (86%), read non-social work material (86%), attend social work conferences (71%), join committees (71%), attend trainings (57%), and receive supervision (57%). Less than half of this group exercises, trains others, has a spiritual practice, journals/diary, or uses personal therapy. Not one participant in this group reads social work books/journals, meditates, writes professional social work articles, facilitates trainings, or conducts research (See figure 9 below).
When looking at what the lower enthusiasm group is not doing that the high enthusiasm group is doing, it was found that meditation, reading social work books/journals, conducting research, facilitating trainings, and writing professional social work articles all were being done by those highly enthusiastic and not being done by anyone in the lower enthusiasm group. Reading social work books/journals was being done by the highest percentage of highly enthused social workers, out of all activities these two groups did not have in common.

_Moderately High in Enthusiasm_

_Demographical Information_

This group of participants rated their current social work enthusiasm level as moderately high. They are worthy of discussion since their 32 participants make up more
than half of the total research sample (51%), ranging in age from 24 to 67 years old. These participants were mostly young social workers in their twenties and thirties; making up 53% of the moderately high enthusiasm group. The majority was female (81%) and 19% were males. Similar to the lower enthusiasm group, all but one of the participants was Caucasian/White; 1 participant listed their race as "Eoro American", assumed to mean European American.

The social work income for those with moderately high enthusiasm ranged from $12,000 to $84,000 a year. The average being $53,000, which is less than the lower enthusiasm group, but the $12,000 is an outlier, which can skew the average to be lower than it would be typically.

All of the participants in this group had a Master's in Social Work (M.S.W.) and one participant also had a Ph.D. in addition to their Masters. They ranged in experience in social work from one to 38 years – 53% of them having more than ten years experience. Although they had a lot of time in the field, the majority had less than five years in their current job setting (59%) - 75% of this group had less than ten years in their current job. They worked in all settings with the exception of a community organization (See figure 10 below). Half of this group (50%) considered their job to have a low level of choice over the type of client they see, 31% reported to have a high level of choice and 19% reported a moderate level.
Enthusiasm Levels

The entire moderately high enthusiasm group reported "yes" when asked if they felt enthusiasm in other areas of their life. Eighty one percent reported being an enthusiastic person in general, yet, 87% reported other people view them as enthusiastic in general. The majority of them, 41%, had low enthusiasm at some point in their career, 34% continued with moderately high enthusiasm and 25% have been depleted of all enthusiasm at some point.

Fostering Enthusiasm

Enthusiasm is reportedly fostered in this group by feeling helpful to clients, according to 33% of the participants. This was the largest percentage of the group's ideas regarding how to foster enthusiasm. Other comments about what encourages enthusiasm were: professional development (26%), having helpful/likeable coworkers (23%), and positive outcomes for clients (20%). The rest came in with 13% or less of the group
consensus as: interest in clients, new challenges, working with children and families, humor, outside supports, variety in the work, feeling valued, and believing in the work.

*Interfering with Enthusiasm*

According to this group, interference was due mostly to systemic issues - 32% of the group reported this. Also found responsible for interfering with enthusiasm was feeling overworked and overwhelmed (26% reported), difficult clients (23%), lack of training (16%), and mundane work (16%). The rest of the comments came in with only 13% or less of the group reporting: underpaid, lack of support from superiors, lack of resources, not enough play time, personal demands and not feeling valued at work.

*Life Activities*

These social workers with moderately high enthusiasm prefer socializing with friends above all other life activities listed. 97% socialize with friends, 90% read non-social work material, and 90% socialize with family (See figure 11 below). Life activities that are not represented on the chart all fell below 75% of the group's report.
Using descriptive statistics, Survey Monkey filtered out all participants except this group of six participants who did not view themselves as enthusiastic-in-general and have not been told by more than one person that they are enthusiastic-in-general, yet they have a high current enthusiasm level for their clinical social work. Since enthusiasm does not apparently come naturally to this group, it would be informative to see their commonalities.

Half of this group was male and half were female with commonalities being that they were all Caucasian with an M.S.W., and no other degree. The only life activity that 100% of them had in common was exercise. The only life activity that not one in this group participated in was conducting research. One hundred percent had enthusiasm in other areas of their life, and all of them found their current job to be satisfying.
The majority of them agreed that their interest in the clients, positive outcomes for clients, and training opportunities fostered enthusiasm. The majority also agreed that the larger system and not feeling valued interfered with enthusiasm at work. They worked in a variety of settings, not one more than another, but surprisingly this group more often worked where they felt they had low ability to choose their clients.

Conclusion

Overall, the majority of social workers who participated in this research were satisfied and enthusiastic about their work. Having interest in clients, regular trainings or professional development, autonomy at work—which is more apt to happen in private practice, and exercising regularly all appear to contribute to enthusiasm. Although these social workers agreed they were dissatisfied with their income and opportunities for promotion in this field, these factors did not appear to affect enthusiasm levels. Lastly, those low in enthusiasm for social work all lacked the activity of reading social work books/journals, which was done by more than half of those high in enthusiasm; thus, highlighting the need to stay current with social work literature in order to keep enthusiasm alive.
CHAPTER V

DISCUSSION

The objective of this mixed methods study was to explore how clinical social workers stay enthusiastic in their work. The level of enthusiasm, what fosters and interferes with that level, and job satisfaction were all examined by using on-line surveys completed by clinical social workers in the United States. This chapter discusses the key findings, implications toward the field of social work, and the limitations of the study.

General Findings

Demographics

The study examined 63 clinical social workers' perspectives on enthusiasm. The sample had a smaller proportion of males and minorities, which is reflective of licensed social workers in the U.S. (Center for Health Workforce Studies & NASW, 2006); only 25% were males and 10% identified their race as something other than white/Caucasian. The sample was comprised of individuals working in a variety of social work settings, earning a variable income ($12,000 – $120,000) and having a wide range of experience in the field (1 – 41 years). Variety increases the ability to generalize findings, thus this study is useful to the greater population of clinical social workers since there is sufficient variety and the limitations of the variety reflect the limitations of the greater population.

Enthusiasm Levels

This study found that 87% of the clinical social workers surveyed reported high or moderately high enthusiasm about their current social work. Out of all 63 participants, only one person reported feeling low in enthusiasm in their current setting. Also of note was that the enthusiasm level had a strong positive correlation to job satisfaction,
indicating that enthusiasm directly affected these social workers' satisfaction level or vice versa. Consequently, the majority of clinical social workers are enthusiastic about their work and this assists in their job satisfaction.

Variation in income was important for this study since other studies discussed in the literature review chapter found low income as a barrier to job satisfaction (Azar, 2000; Cunningham, 2004). Yet social workers in this study – although commenting that it interferes with enthusiasm – did not allow the lack of financial rewards to dampen their enthusiasm. Those earning the lowest income in this study reported having moderately high enthusiasm currently. Those in the low or moderately low enthusiasm level earned between $31,000 and $78,000 a year, the average being $55,000 for this group – similar to the total sample's average income. This data discredits low income as a predictor of enthusiasm level or job satisfaction, at least for clinical social workers, since the total sample was found to be mostly high in enthusiasm and job satisfaction.

When examining income's effect on enthusiasm levels further, it is seen that high income is a predictor of enthusiasm level. The highly enthusiastic participants earn between $25,000 and $120,000 a year. Although the majority earned between 40 and 60 thousand, only two highly enthusiastic participants earned under $40,000 a year. Twelve participants (43% of those highly enthusiastic) earned 60 thousand or more. Furthermore, though most of the highly enthusiastic participants lived and worked in moderate-income city/towns, more than half as many lived and worked in wealthier city/towns than poorer city/towns. Although low social work income may not subdue enthusiasm, these findings indicate higher income as contributing to greater enthusiasm.
Many participants also reported being enthusiastic people in general, which reflects their general high enthusiasm towards all aspects of their life, not just in their current work setting. Eighty four percent of the total sample reported being enthusiastic in general (EIG). Since being EIG may make enthusiasm easier to cultivate in one's current work, there was a concern that this may account for the high percentage of participants enthusiastic in their current social work setting. But further exploration found that 100% of the participants who reported to be not enthusiastic in general (nEIG) reported high or moderately high current enthusiasm at work. This indicates that even those who do not have enthusiasm come easily, still have high levels of enthusiasm for clinical social work. Those who were low or moderately low in enthusiasm currently all came from the EIG group, which means all participants low in enthusiasm for their current work setting had enthusiasm come easily and yet whatever interfered with their enthusiasm for this aspect of their life was greater than their natural tendency to be enthusiastic in general. Thus, the majority of clinical social workers are genuinely enthusiastic about their current work setting.

Another important finding is that the majority of the nEIG group had at some time in the span of their career reached a low point of enthusiasm. When comparing this to the EIG group, who only reached a career low point of moderate enthusiasm, it is evident that being an EIG person is protective to some degree in how low enthusiasm levels will dip through out one's career as a social worker. In fact, enthusiasm can be currently high, but if it does not come naturally to the person, it may be short-lived or possibly detrimental if it is a job requirement. To clarify this, an occupational health study found that if a job demands enthusiasm when it is not congruent with personality (such as an
introverted person attempting to be a customer service representative), illness and suffering may result over time (Bono & Vey, 2007). Thus, enthusiasm needs to be authentic and cannot be forced in order to reap the rewards.

When looking at the total sample's lowest career point of enthusiasm, it was more often reported to be low enthusiasm (38%), followed closely behind by moderate enthusiasm (35%), 22% had reached depletion of all enthusiasm at some point, while 5% remained high in enthusiasm throughout their career. These findings are important since there was a strong positive correlation found in this study between lowest enthusiasm in career and current enthusiasm. This implies that the lower enthusiasm had dropped in the past, the lower the level of current enthusiasm. Thus, making it impressive that the general sample's enthusiasm levels were mostly high or moderately high for their current setting since most of them have been low at some point.

Another positive correlation was found, although weak, between lowest enthusiasm in career and job satisfaction. This implies that the lower enthusiasm had dropped in one's career, the lower one's current satisfaction at work. Again, impressively, the majority of clinical social workers in this sample were currently highly satisfied with their job. The Job Descriptive Index in the survey measured five characteristics to job satisfaction: the work itself, pay, promotions, people they work with, and supervision (Stanton & Crossley, 2000). The results for this study found these clinical social workers to be satisfied with the work they do, the people they work with, and their supervision. They did not value their opportunities for promotion or their level of pay. Considering that 43% of the sample worked in private practice, opportunities for promotion were not available and not necessarily a problem for those participants.
Curiously, dissatisfaction with pay and promotion did not affect the majority of the participant's enthusiasm and overall job satisfaction. A prior study found enthusiastic workaholics were more satisfied with their life than their nonenthusiastic workaholic counterparts - yet both were less satisfied than their non-workaholic peers (Bonebright, Clay, & Ankernmann, 2000). This demonstrates that enthusiasm for work can increase one's satisfaction, which would compensate for social worker's dissatisfaction with pay and promotion, and maintain their job satisfaction.

In the literature review, there was no strong relationship between gender and job burnout (Maslach, 2001), but this study found that males were particularly satisfied and enthused about their social work. Although there were too few male participants for statistical significance, 100% of the males were found to be satisfied and high or moderately high in enthusiasm, with the majority of them being high in enthusiasm. Where only 83% of females were satisfied at work and were high or moderately high in enthusiasm, with the majority of them being moderately high in enthusiasm. These findings may be reflective of a comment made by one of the male social work participants who stated that as a male, he is aware of his propensity towards higher income and greater respect in the field.

The participants identifying as racial minorities were found to have a higher percentage of being highly enthusiastic than Caucasian participants. Sixty percent of the minority participants reported a high level of current enthusiasm compared to 35% of the Caucasian group. This finding needs to take into account that there were only 5, out of the 62 people reporting their race, who identified as a minority. This limits the ability to generalize this data to all clinical social workers identifying as a minority.
As for what fosters enthusiasm, the general sample's highest consensus was having interest in the clients with whom they worked. This was followed by 'feeling helpful to clients', professional development, and autonomy at work, in that order. Those participants who were all high in enthusiasm also agreed that interest in their clients fostered the most enthusiasm in their work. Almost as important was autonomy and professional development. Those low or moderately low in enthusiasm reported, "feeling helpful to clients" as the number one contributor to enthusiasm for them, followed by "feeling valued and rewarded at work."

No previous studies were found regarding what increases enthusiasm, but one study outlined how emotionally exhausted child welfare workers stayed satisfied with their job by referencing autonomy, professional development, and feeling rewarded by being helpful to clients (Stalker, Mandell, Frensch, Harvey, & Wright, 2007). This previous literature focused on satisfaction, but compares with this study's findings on all topics except the number one item reported to increase enthusiasm – having interest in clients. This detail may separate enthusiasm from satisfaction. It may boost the level of being content with the work into having “a great excitement… in a subject or cause” (Dictionary.com, n.d.). This may also clarify why those with lower enthusiasm, who did not report an interest in clients, have lower levels of enthusiasm – it may not have occurred to them the importance this factor would have on their enthusiasm.

Interfering with Enthusiasm

Interference with enthusiasm was found to be most often due to 'system issues' by both the sample as a whole and those particularly high in enthusiasm. System issues
referred to managed care, politics, and/or administration. There were numerous responses regarding the difficulty with insurance reimbursement and lack of support from the greater system in general. Those lower in enthusiasm found system issues to be a problem as well, but they described it as part of an overall feeling of not being valued, which also included low pay and limited resources.

The total sample of clinical social workers also reported that too much work, feeling overwhelmed, and not feeling valued in the work setting interfered with enthusiasm. A smaller percentage of the sample reported that being underpaid, difficult clients, lack of supervisory support, mundane work and/or negative coworkers were also obstacles to enthusiasm. A special note about "negative coworkers" – this can be a sign of something much more serious than simply a "bad mood". Job burnout is often signified by a negative attitude and creates serious problems at work; the affliction will impact others by causing personal conflict and disrupting job tasks (Maslach et al., 2001).

Burning out was not specifically addressed in this study, but much like interference with enthusiasm, job related stress was found to be a main factor contributing to burnout in social workers (Lloyd et al., 2002; Soderfeldt et. al., 1995). This is not surprising since a 2002 survey found 25% of U.S. workers felt they were short staffed and more than 30% reported feeling always or often stressed at work (As cited in Schwartz, 2004).

Patricia Ewalt (1991) warned that some human service agencies will continue to have problems with recruitment and retention of social work staff if the salary, influence on their environment, and sensitivity to the workers values do not become satisfactory. In this study, clinical social workers clearly express the need for more respect and value
from the greater system, which can come by increases in pay, promotions, or resources. This is necessary for a healthy future of recruitment and retention of clinical social workers.

**Participant Commonalities**

In a 2005 article, Camille Gregorian states she loves her career as a social worker. In the article, she encourages social workers to utilize clinical supervision to assist with the intensity of the work, challenge themselves by moving to new clinical areas or recharge by supervising students, doing research, laughing often, writing an article, or joining a committee. As a result, this study took an inventory on what 'life activities' were used by clinical social workers. The collective sample's most common activities were socializing with friends and family, reading non-social work material, laughing often and receiving colleague support.

The list of life activities along with demographics were analyzed for those with higher and lower enthusiasm to discover what each group had in common.

**Highly Enthusiastic Clinical Social Workers**

When examining the population of clinical social workers who are currently high in enthusiasm for their current setting, it was found that the majority of them are older (50+ years old), working in private practice with a high level of autonomy and choice of clientele. This group's most common life activities were socializing with family, friends, and receiving colleague support.

The setting of private practice appears to be a significant contributor to high enthusiasm. Perhaps the social prestige of being a therapist in private practice compared to a social worker in other settings raises the level of enthusiasm and satisfaction of the
job. According to a survey on American workers (Smith, 2007), 87% of those in the helping professions were found to be very satisfied and perceived prestigious status of one’s job contributed to job satisfaction. Patricia Ewalt (1991) noted that fewer than 2% of social workers were in private practice and working for others may create more stressful conditions, as the typical social worker has to navigate between personal values and the values of the agency for which they work. Rupert and Kent (2007) also support these findings stating that an agency setting, compared to private practice, appears to be an obstacle to job satisfaction, especially for females.

The age of the worker is related to burnout susceptibility according to previous literature; the younger the worker the more reports of burnout – over 30 or 40 years of age, the less burnout is reported (Maslach, 2001) which aligns with this study's findings that the majority of participants highly enthused are over 50 years of age. Yet, the youngest participants (in their twenties) were not found to be the lowest in enthusiasm. A T-test was run and this study found that there was no relationship between age and enthusiasm levels.

Low/Moderately Low Enthusiastic Clinical Social Workers

The lower enthusiasm group was comprised of clinical social workers who reported to be low or moderately low in current enthusiasm. The commonalities for this group were that the majority of them worked in a medical facility, had a low level of choice over clientele and all of them considered themselves to be enthusiastic people in general. Their most common life activities were socializing with family, friends and laughing often.
They have a higher percentage of laughter than both the highly enthused group and the total sample. More laughter may be necessary to continue working with such heavy content when their enthusiasm was lower, especially when the majority of this group worked in a hospital setting where it is fast paced and high intensity. A typical day can include a child abuse assessment, crisis intervention with an angry patient, and/or a discussion regarding withdrawing life support from a client (Gregorian, 2005).

When comparing the life activities of the lower enthusiasm group to the high enthusiasm group, it was found that highly enthusiastic individuals were participating in activities that those in the lower enthusiasm group were not: meditation, reading social work books/journals, conducting research, facilitating trainings, and writing professional social work articles. Out of all these activities, reading social work books/journals was the most often used activity by those highly enthused. Not one of the lower enthusiasm group participated in this particular activity, while more than half of the high enthusiasm group engaged in reading social work books/journals. This finding indicates the need for clinical social workers low in enthusiasm to be more informed with up-to-date social work literature to promote their enthusiasm.

*Not Enthusiastic-in-General, yet High in Current Enthusiasm Group*

The clinical social workers who reported to not be enthusiastic-in-general (nEIG) were filtered through, to include only those who had not been told by one or more person that they were enthusiastic people-in-general, in order to form as solid as possible a group where enthusiasm did not come easily. Once formed, those in the *not* enthusiastic-in-general group who reported to have a *high* level of enthusiasm for their work were examined. All of them were found to be highly satisfied with their work, exercise on a
regular basis and not conduct research. Since 100% of them exercise and do not conduct research, it would be beneficial to increase physical activity and discontinue research if it has been a burden, in anyone looking to foster enthusiasm. This group's results are highly relevant to fostering enthusiasm since enthusiasm does not come naturally, yet they have all found a high level of enthusiasm and satisfaction in their current social work setting.

**Implications on the Field of Social Work**

Clinical social work is an emotionally challenging field. It is known that the need to provide service to others is highly demanding on emotional resources and emotional exhaustion is a common response (Maslach et al., 2001). According to Tracy, Bean, Gwatkin & Hill (1992) “seeing sadness daily” (p. 473) is a serious drain on a worker’s emotions. Social workers are more anxious and depressed than comparative groups (Lloyd, King and Chenoweth, 2002) and social work students are more likely to report a history of psychosocial trauma (Rompf and Royse, 1994). As a result, social workers have an above average risk for burnout (Soderfeldt, Soderfeldt, and Warg, 1995).

With all these challenges, it is vital that clinical social workers are in strong emotional shape in order to provide support and guidance to those seeking their help. This study's inquiry into how clinical social workers stay enthusiastic about their work has begun the needed research into keeping our practitioners excited to work in an emotionally depleting field. Clinical social workers' client’s need and desire practitioners that are interested and eager to provide them with support.

This research has found possible suggestions for maintaining or raising enthusiasm levels in the field of clinical social work. Characteristics that create the best
opportunity to be enthusiastic are being a minority male, over 50, with high income, in private practice, and an interest in clients. Since those characteristics are not often a choice, it would be important to choose a setting that has perceived prestige with available practitioner autonomy. The higher the salary, the more likely one's enthusiasm will be high, but low salary will not necessarily affect one's enthusiasm level. The curiosity and care brought to the work by the practitioner will significantly impact enthusiasm, since it appears vital to have an interest in the clients. Lastly, those who are not enthusiastic people in general, could greatly increase their enthusiasm at work by exercising regularly. These same practitioners should not push themselves to conduct research if it is not of interest.

As for obstacles to enthusiasm, it is time to let go of what is beyond one's control – systemic issues are difficult to change and hinder enthusiasm for the work. If there is a possibility of organizing with other social workers to make a difference in the agency, organization or community, then the opportunity should be acted upon to remove or decrease the systemic problems. Social workers are in significant need for visible signs of respect and value from society with increased income and available resources. If there are no means, or desire to change these obstacles to enthusiasm, then acceptance of the interference and creative coping are necessary if one is to remain in the setting with enthusiasm.

According to this research, most clinical social workers have reached a low point at some time in their career, thus it is important to maintain and encourage enthusiasm at work. Especially since it was also found that the lower one's enthusiasm level drops during a career, the lower one's current enthusiasm and satisfaction will be at work.
Regardless of the obstacles, social work is a satisfying profession to be in; according to this study, most clinical social workers are enthusiastic and satisfied. Yet, clinical social workers, as all those in the helping professions, need to be aware that the more enthusiastic, the more satisfied one will be, which affects the quality of care one gives to clients. This study will aid clinical social workers of all ages in keeping their enthusiasm and drive for the work, regardless of how long they have been practicing in the field.

Limitations to the Study

The choice to use surveys inherently limits the study to those participants who self select into the survey. Furthermore, by informing the possible participants of the study's topic (enthusiasm) prior to their choice to participate may have attracted more enthusiastic than less enthusiastic participants into the study. Additionally, having the surveys distributed on line via email increased the exclusion of possible participants who do not use email.

Using the HelpPro database initially created bias in social work settings since all the participants from this database were in private practice. Such a high percentage of private practice clinicians may have skewed the data to view clinical social workers as more enthusiastic than, perhaps, a more general social work population. Careful measures to have a broader range of clinical settings that are more representative of the clinical social work field would be valuable in future research. Snowball sampling was initiated to compensate for the dilemma of similarity in settings, but altered the geographic homogeneity of the sample, which initially was only eastern Massachusetts.
Too few male or minority participants were involved in this study to run statistically significant tests, thus the data that 100% of the male and 60% of minority participants were enthusiastic is not conclusively applicable to the greater population of clinical social workers. This would be important to further explore, possibly in a study exclusive to minority or male clinical social workers.

The Job Descriptive Index (JDI) and Job In General (JIG) addition to the self-created survey appeared to be a distraction and even a frustration for some of the participants. A number of comments made at the end of survey were in regards to the JDI/JIG not feeling applicable enough to clinical social work.

**Conclusion**

It is important to cultivate enthusiasm in clinical social workers since burnout is such a threat and is particularly damaging when the sufferer needs a positive attitude to work effectively. People can work as clinical social workers with little or no enthusiasm, but are these individuals doing a disservice to their clients, their community, and their own life? Harry F. Banks is quoted as saying, “A salesman minus enthusiasm is just a clerk” (Khurana, 2007, p. 2). When a clinician’s enthusiasm goes flat, it affects the very nature of their work as well as the many people whose lives are touched in the process of carrying out their job. It is imperative for clinical social workers to explore what brings enthusiasm into their own lives in order to stay enthusiastic about their work if they want to remain vital and make positive contributions to this field.
References:


Appendix A

Kimberly Stasny
Human Subjects Review Application
October 25, 2007

Project Purpose and Design

The research question in this study is “How do clinical social workers stay enthusiastic about their work?” This question will be explored by dispensing an on-line survey to approximately 50 clinical social workers about how and if they are enthusiastic about their work as a social worker. Due to the emotional intensity of clinical social work, burn out is a serious threat to quality social work. There have been numerous studies on how to avoid burnout and who is burned out, but no studies specifically examine social workers who are not burned out and learn what keeps them enthusiastic about their work. Enthusiasm, defined as a strong excitement of feeling, is a motivating force for people to attend work regularly, have positive attitudes towards work, and be interested in growing professionally. Social workers in particular benefit from enthusiasm due to the emotionally strenuous environments in which they work. This study will examine how social workers, who are satisfied with their work, foster their enthusiasm for their job.

The findings will be critical in educating social workers from all levels of experience as to how to rejuvenate their work enjoyment. With increased enthusiasm, social workers are in a position to be more effective at their job, which can foster positive
outcomes for their clients and communities at large. In addition, raising low levels of enthusiasm for some can create an emotionally brighter work place for all involved in a social worker’s job setting.

Any useful information gathered from the study will be distributed to all clinical social workers on the study’s email mailing list as well as shared verbally in presentation form the summer of 2008, in partial fulfillment of the requirements for the degree of Master of Social Work.

**The Characteristics of the Participants**

The sample size will be approximately 50 to 100 participants. All participants will be licensed clinical social workers, varying in degrees and years of service. There will be an attempt to have an equal number of people identifying as male and female social workers represented in the population in order for the results to be applicable to males as well as the typically over represented population of females in social work.

**The Recruitment Process**

Recruitment will begin with a list of clinical social worker email addresses. This list can be found on the National Association of Social Workers’ website under “Help Starts Here” where they connect you to an outside database of social workers.

After finding a list of 100 licensed social workers with email addresses, I will send them an email requesting their participation in this study. Attached will be link to Survey Monkey where they can take the survey immediately, rather than responding to the email, which would take away from their anonymity.
The database does not include information on race, sexual orientation, or economic status of potential participants, so the level of diversity I am able to gather will be limited to gender, years in social work and towns of employment.

**The Nature of Participation**

The potential participants will receive a brief email inviting them to complete a survey online in confidence. Although their exact identity will not be known due to the anonymous nature of Survey Monkey, they will be asked a few demographic questions in order to compare this information to the level of enthusiasm one has for social work. After the demographic questions, the participants will be answering 8 questions regarding their level of enthusiasm before completing a well-recognized job satisfaction survey: The *Job In General* combined with the *Job Description Index*. Together, in the abridged form, these two published satisfaction surveys only take five minutes to complete. The entire process of participating in this research project should take a participant about 15 minutes. Once they complete the survey, there will be a “Thank you!” note at the end with a reminder that they will receive any important information learned from the study, as will everyone who was asked to participate.

**Risks of Participation**

The participants will be informed in the initial email that their participation is completely anonymous by use of an outside survey agency, Survey Monkey. By partaking in this study, a participant risks discovering that they are not as satisfied with their career as they may have hoped, which could be emotionally deflating to some people.
Benefits of Participation

The benefits of participating will be a feeling of pleasure from: contributing to the betterment of social work as a profession, assisting a student in need of participants, possibly discovering their level of enthusiasm for work is at a satisfactory level, and receiving the data once the study is complete knowing that they contributed to that information. Participants may also benefit by assessing their life and work enthusiasm to discover their own personal shortcomings and assets, as well as learn from the data they will receive as to how to increase their enthusiasm as a social worker, if they so wish.

Informed Consent Procedures

I am requesting that the Informed Consent will be waived since the participants will be consenting to participate by virtue of completing the survey. They will be notified in the initial email as to the risks and benefits of participating in this study.

Precautions Taken to Safeguard Confidentiality and Identifiable Information

Survey Monkey is an online tool that assists in creating a confidential survey for researchers. Survey Monkey assures consumers that they can have completely anonymous surveys returned by configuring my survey’s collector settings on Survey Monkey to not save the IP addresses in the analyze section. The link to my specific survey will be on each email sent to potential participants, but I will be not be given the names of those emails who actually completed the survey, therefore keeping the survey completely confidential.

Although the email names of participants will never be known to this researcher, the list of potential participants will be, therefore this information will be kept with the
research data for three years as required by Federal regulations and then destroyed if it is no longer needed.

*Survey and informed consent enclosed.

December 31, 2007

Kimberly Stasny

Dear Kim,

Your second set of revisions have been reviewed and all is now clear and in order. We are happy to give final approval to your study.

Please note the following requirements:

Consent Forms: All subjects should be given a copy of the consent form.

Maintaining Data: You must retain signed consent documents for at least three (3) years past completion of the research activity.

In addition, these requirements may also be applicable:

Amendments: If you wish to change any aspect of the study (such as design, procedures, consent forms or subject population), please submit these changes to the Committee.

Renewal: You are required to apply for renewal of approval every year for as long as the study is active.

Completion: You are required to notify the Chair of the Human Subjects Review Committee when your study is completed (data collection finished). This requirement is met by completion of the thesis project during the Third Summer.

Good luck with your interesting project. Having maintained my enthusiasm for the profession and my various jobs in it for well over fifty years, you got me to thinking how it was that I stayed enthusiastic. I think it was because I enjoyed and usually liked my clients and my students so much and found them so interesting and also that I continued to be invested in the social purpose of the profession. Finally, I think it was because all the different things I did over the years were so different and challenging, from placing kids in foster care to being the Dean at the Smith College School for Social Work, to reviewing HSRe. I'll be most interested in your findings.

Sincerely,

Ann Hartman, D.S.W
Chair, Human Subjects Review Committee

CC: Alexandra Graham, Research Advisor
Appendix B

Email Sent to Potential Participants

Dear Social Worker,

My name is Kimberly Stasny. I am a Smith College School for Social Work student collecting data for my MSW thesis which asks the question: How do clinical social workers stay enthusiastic about their work?

I request 15 minutes of your time to fill out a survey for my research on this topic.

I invite you to use the survey link below to participate in my study if you meet the following criteria:
You are a clinical social worker and you are currently working in the field of social work.

Survey Link:
https://www.surveymonkey.com/s.aspx?sm=gyDqbgp6WmG4Lu3zwMrm_2bA_3d_3d

The confidentiality of the participants will be secured by not having any names or email addresses attached to the surveys. A third party - Survey Monkey - will collect the completed surveys in an anonymous method for which no records will be kept regarding who responds to this survey.

Your time, honesty, and thoughtfulness are deeply appreciated. If you have any concerns about this study, please contact me via email (kstasny@email.smith.edu) or the Smith College School for Social Work Human Subjects Review Committee at 413-585-7974.

Sincerely,
Kimberly Stasny
Appendix C

INFORMED CONSENT

This information will inform you of the risks and benefits of participating in this survey.

Participation in this research will cause you to reflect on your present level of enthusiasm in social work, which may have pleasant and/or disappointing features upon reflection; you may have great enthusiasm about coming into work everyday in which you will be benefiting many by sharing your tools or you may discover your level of passion is not where you want it to be and feel frustration. A benefit of this research is that you will receive a brief copy of the results of this study in hopes of increasing your level of enthusiasm for your own work. All those on the potential participation list will receive a copy of the findings, since the survey is anonymous, and I will be unaware of who actually participated and who did not. No financial compensation will be provided for participation in this study.

Participation in this study is voluntary. If you choose to answer the survey questions you are agreeing to participate. You can choose to abstain from answering any questions without penalty and/or withdraw from the survey at any time during the process. Once the survey is sent to Survey Monkey it cannot be returned since there is no way to identify your particular questionnaire.

I will be collecting data until February 28, 2008, at which time my data collection will be complete and an opportunity to participate in this study will not be available. I will be keeping the data in a secure location for a period of three years, as required by
Federal guidelines. The data at that time will be destroyed unless they are needed, in which case they will be kept securely until they are no longer needed.

Sincerely,

Kimberly Stasny

By completing this survey you are indicating that you have read and understand the information above and that you have had an opportunity to ask questions about the study, your participation, and your rights and that you agree to participate in the study.
Appendix D

Social Work Enthusiasm Study

REMINDER: This survey is completely confidential. Please answer as truthfully and as authentically as you are able. You are doing a great service to the social work field.

IMPORTANT: If you work more than one social work job, please fill out this survey with only one job in mind. Thank you.

Demographic Information

Age: _______ Gender: ____________ Race: ________________

Primary home zip code: ____________ Work zip code: __________

Years in the field of social work: _____ Graduate Degrees: ______________________

Current work setting (check all that apply):

private practice____ medical facility____ mental health clinic____ child welfare____
agency____ school____ community organization____ other ________________

Time length in current work setting: ______________ (months/years)

Client Population (i.e. adults, children, chronically mentally ill, traumatized, addicted, etc…): ______________________

Ability to choose what type of clients you see: low___ moderate____ high____

Estimated social work income (yearly): __________________
Social Work Enthusiasm Study

*Enthusiasm Information:*

Enthusiasm is defined as a strong excitement of feeling. Please use this definition when answering the next eight questions.

1. In your current work situation, how much enthusiasm do you feel overall in your work as a social worker?
   - Low enthusiasm
   - Moderately Low enthusiasm
   - Moderately High enthusiasm
   - High enthusiasm

2. In your entire career as a social worker, what is the lowest point of enthusiasm you have reached doing this work?
   - Depletion of Enthusiasm
   - Low enthusiasm
   - Moderate enthusiasm
   - Continued high enthusiasm

3. What in particular do you think fosters your enthusiasm in your social work?
   ____________________________________________________________
   ____________________________________________________________

4. What interferes with sustaining or increasing enthusiasm in your social work?
   ____________________________________________________________
   ____________________________________________________________

5. If you have ever felt a lower level of enthusiasm than you have today, what has changed (if anything)?
   ____________________________________________________________
   ____________________________________________________________

6. Do you feel enthusiasm in other areas of your life?  Yes ____  No ____
   If yes, what areas
   ____________________________________________________________

7. Do you view yourself as an enthusiastic person in general?  Yes ____  No ____

8. Have you been told by more than one person that you are (in general) an enthusiastic person?
   Yes ____  No ____
Social Work Enthusiasm Study

*Life Activity List*

Which, if any, of the listed activities do you do on a regular basis *currently* in your life? (Check all that apply)

- Exercise
- Socialize with family
- Socialize with friends
- Meditate
- Teach others
- Receive Supervision
- Attend Social Work conferences
- Spiritual Practice
- Read social work books/journals
- Read non-social work material
- Receive colleague support
- Utilize personal therapy
- laugh often
- Supervise others
- Conduct research
- Train others
- Facilitate trainings
- Journal/Diary
- Join committees
- Write professional social work articles
- Attend trainings
- Change employment regularly
- Other self-care:
  -
  -
  -

*Job Satisfaction in general:*

**WORK ON PRESENT JOB**

Think of the work you do at present. How well does each of the following words or phrases describe your work? choose:

1 for "Yes" if it describes your work
2 for "No" if it does not describe it
3 for "?" if you cannot decide

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<th></th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>Gives sense of accomplishment</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<tr>
<td>Challenging</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Dull</td>
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<tr>
<td>Uninteresting</td>
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Social Work Enthusiasm Study

## PRESENT PAY

Think of the pay you get now. How well does each of the following words or phrases describe your present pay?

<table>
<thead>
<tr>
<th>Description</th>
<th>Yes</th>
<th>No</th>
<th>?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income adequate for normal expenses</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Fair</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Insecure</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Well paid</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Underpaid</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

## OPPORTUNITIES FOR PROMOTION

Think of the opportunities for promotion that you have now. How well does each of the following words or phrases describe your opportunities for promotion?

<table>
<thead>
<tr>
<th>Description</th>
<th>Yes</th>
<th>No</th>
<th>?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good opportunities for promotion</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Promotion on ability</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Dead-end job</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Good chance for promotion</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Unfair promotion policy</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

## SUPERVISION

Think of your supervisor and the kind of supervision that you get on your job. How well does each of the following words or phrases describe your supervision?

<table>
<thead>
<tr>
<th>Description</th>
<th>Yes</th>
<th>No</th>
<th>?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Praises good work</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Tactful</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Up-to-date</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Annoying</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Bad</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

## PEOPLE AT WORK

Think of the majority of people that you work with now or the people you meet in connection with your work (clients or coworkers). How well does each of the following words or phrases describe these people?

<table>
<thead>
<tr>
<th>Description</th>
<th>Yes</th>
<th>No</th>
<th>?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boring</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Helpful</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Responsible</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Intelligent</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Lazy</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>
JOB IN GENERAL

Think of your job in general. All in all, what is it like most of the time? For each of the following words or phrases, choose:

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Undesirable</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Better than most</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Disagreeable</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Makes me content</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Excellent</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Enjoyable</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Poor</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

If you have any other thoughts regarding this study or topic please feel free to comment:

Thank you for your time!

Results from this study will be distributed via email by July 2008 at the latest.