Self-care in social work: An imperative or beyond reach?

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Abstract

In recent years, the self-care of social workers has become a focus for research and practice in recognition of the demands of the social work role. As part of a research project to explore ways to embed self-care into a social work degree programme at a Scottish university, a narrative literature review was undertaken to examine existing research on self-care for social work students and practitioners. This article reports on the findings from this review, including the multiplicity of ways in which self-care is defined and conceptualized, how it is practised by social work students and practitioners, and the evidence base for identified approaches to self-care. Broader conceptualizations of self-care are explored, which encompass philosophical constructions of the 'self' and the impact of social and cultural norms on self-identity. It is argued that a cultural shift is required in the conceptualization and practice of self-care in social work to include collective and political approaches alongside individual strategies thereby promoting the social justice and anti-oppressive aims of the social work profession. Connections between self-care and ethical practice are highlighted, and further reinforce the need for self-care to be an imperative in social work.

Introduction

The past decade has seen a developing interest in the subject of self-care in social work, with research exploring how it is conceptualized (Bressi and Vaden 2017; Collins 2021), connections with related ideas such as resilience (Rose and Palattiyil 2020) and approaches that facilitate self-care including mindfulness and arts-based activities (Critchley and Roesch-Marsh 2021; McCusker 2022). The context for these initiatives is growing concern and research evidence for the demands of the social work role and the impact that this is having on workers' wellbeing (Beer, Phillips, and Quinn 2021; Ravalier et al. 2021). In a recent study, Ravalier et al. (2021) highlight exposure to chronically poor working conditions, including heavy workloads, staff turnover, low job control, and lack of supervision as indicators of the challenges facing the profession. They issue a call to address social worker wellbeing as a matter of urgency.

The task of addressing these challenges necessitates developing both a better understanding of contributory factors together with knowledge and strategies on how to integrate self-care and improve wellbeing. In support of these goals, this article reviews national and international literature on self-care in social work and represents the first paper from a three-year research project at a Scottish university investigating how self-care might be embedded in the social work curriculum. It aims to provide an overview of self-care in social work education and practice, the ways in which it is conceptualized and the types of self-care activities employed, as well as the enablers and barriers to effecting the kind of culture change that is necessary if self-care is to become integral rather than peripheral to social work.

The review is also keen to engage in and extend debate on the different dimensions of self-care. The authors are conscious that the term 'self-care' has a multiplicity of meanings but is regularly reduced to vague or uni-dimensional constructs, for example, related solely to physical fitness (Miller and Grise-Owens 2020). Moreover, it is routinely categorised as an individual responsibility rather than being located in a structural framework shaped by factors including political ideology, funding, organizational culture, power, and discrimination. In this, the review also sets out to capture findings of an emerging strand of research that is concerned with exploring how self-care theory and practice may align

with the profession's values; addressing questions such as how self-care is shaped by neo-liberalism (Hendrix, Barusch, and Gringeri 2021), how it can support social justice in intersectional contexts (Wyatt and Ampadu 2022) and how specific approaches to self-care may facilitate reflexivity for social workers and support anti-oppressive practice (McCusker 2022). The authors believe that this aspect of the debate on self-care holds particular importance if it is to be integrated in social work education and practice in ways that sustain students and practitioners practically, ethically, and existentially. As such, this article synthesizes available studies of self-care in social work to address the issues outlined.

Methodology

A narrative literature review was undertaken to critically evaluate the existing body of knowledge regarding self-care for social work practitioners and students as part of a larger research project. The narrative review method enabled a comprehensive examination and analysis of literature, achievable within the project's funding parameters and timeframe, which provided a foundation for the subsequent phases of the project to build upon. A rapid review was considered less appropriate to the research aims as this method focuses on a more specific policy-based question (Grant and Booth 2009) rather than an understanding of a broader topic.

A university library search engine together with ASSIA, IBSS, Social Care Online, and Proquest was utilized, followed by reference list searches to identify relevant studies. The terms 'self-care' OR 'self care' AND 'social work*' were searched for within titles and abstracts. Inclusion criteria applied prior to screening of the abstracts specified that the literature should be peer reviewed, written in English and published within the last fifteen years. This time frame aimed to capture literature that reported on issues relevant to contemporary social work and in recognition of the fact that this is a relatively new area of research. While it is recognized that social work may be practised differently around the globe, no geographical parameters were set in order to enrich the exploration of the topic by including diverse forms of knowledge. After identifying articles that met the search criteria, abstracts were screened for relevance. Articles were included if they reported on the self-care of social work professionals and/or students and excluded if they related to the self-care of people receiving services or professional disciplines other than social work.

Braun and Clarke's six step process of thematic analysis (2006) was used. After familiarization with the articles that met the selection criteria, initial codes were identified followed by the generation of overall

themes. Themes were defined and reviewed by the research team before writing up. This process led to the identification of three broad themes and further subthemes, which are explored in the findings section of this article:

1. Concepts of self-care:
- Multi-dimensional self-care
- Personal and political self-care
- Self-care and identity

2. Self-care in the social work profession:
- Self-care for personal and professional wellbeing
- Self-care as an ethical dimension of practice
- Collective approaches to self-care

3. Self-care in social work education:
- Pressures facing social work students
- Engagement with self-care
- Self-care approaches in social work education

The authors recognize the potential limitations of this literature review. It is acknowledged that a narrative review is less rigorous than a systematic review as it does not synthesize all available evidence on the topic (Grant and Booth 2009). However, the narrative review did enable a thorough search of the literature to provide a broad overview and critical analysis of the topic. Additionally, including only peer-reviewed articles may introduce bias by excluding relevant material published elsewhere.

Ethical approval for the Self-Care in the Social Work Curriculum project was provided by the funding University.

Findings

Concepts of self-care

The review found that, although there may be a '*burgeoning self-care movement afoot*', the term is subject to multiple interpretations (Miller 2020: 256). It can '*take many shapes and forms*' (O'Neill, Yoder Slater, and Batt 2019: 149) with different approaches being adopted in different circumstances (Griffiths et al. 2019). While recognizing its subjectivity, a clear understanding of the ways in which self-care may be conceptualized is useful in order to practise it. This clarity also supports critical appraisal of the underlying paradigms each definition represents. Indeed, some conceptualizations of self-care can be harmful to its application as an important endeavour,

for example in its depiction as selfish, indulgent, simplistic, or comprising of costly activities (Martin, Myers, and Brickman 2019; Grise-Owens and Miller 2021; Wyatt and Ampadu 2022).

In the social work literature, self-care is usually associated with reducing stress, burnout and other mental health concerns, and promoting wellbeing (e.g. Lee and Miller 2013; Burkhart 2014; Bressi and Vaden 2017; Newcomb, Burton, and Edwards 2017; Butler et al. 2019). In emerging social work research, self-care is also linked to social justice (Pyles 2020; McCusker 2022; Wyatt and Ampadu 2022). This aligns with other, non-social work literature that positions self-care within a political context; for example, as a means of increasing awareness of how the self is conditioned by society and representing action to resist and address any negative consequences that arise. In this, a number of authors draw on Foucault's work on the 'technologies of self', including Ng (2016) who discusses 'care of the self' as resistance to neoliberalism.

Self-care as multi-dimensional

A predominant theme in the literature on self-care in social work is its multidimensional nature, recognizing that '*stresses or challenges can arise across the range of human experience, and self-care practice should be correspondingly encompassing*' (Butler et al. 2019: 108). Self-care strategies are varied, and include reading, exercising, taking vacations, praying or meditating, time with family and friends, humour and cultural activities (Burkhart 2014). Those identified by Newcomb, Burton, and Edwards (2017) include healthy eating, socializing, debriefing with colleagues, professional supervision, personal therapy, and regular holidays. Approaches such as reflection, developing professional skills, and journalling are also found to be well-established self-care techniques (Diebold, Kim, and Elze 2018). The self-care strategies that social work students in Lewis and King's study (2019) found useful were developing positive coping strategies, exercise, faith, maintaining relationships, solitude, music, emotional expression, gardening, yoga, and meditation.

Mindfulness is a practice widely advocated in the self-care literature (e.g. Coleman, Martensen, and Scott 2016; Newcomb, Burton, and Edwards 2017; Maddock et al. 2022; McCusker 2022) and, according to a systematic literature review of self-care in social work, is one of the most evidence-based strategies (Griffiths et al. 2019). Mindful attention to thoughts and feelings in the present moment is found to lead to increased self-awareness, empathy, reflection, emotional regulation (Newcomb, Burton, and Edwards 2017) and self-compassion (Coleman, Martensen, and Scott 2016). On a cautionary note, mindfulness practice is said to have been adopted by some organizations with a view to enabling employees to manage organizational stressors rather than address their causes (Walsh 2016). On the other hand, there is an emerging

strand of research that explores a more critical approach to mindfulness, incorporating awareness of social factors, inequality and oppression (McCusker 2022).

   Given that approaches to self-care are so diverse, in much of the literature they are categorized into different themes, usually defined as a combination of physical, psychological, emotional, social, relational, spiritual and recreational domains (Moore et al. 2011; Newell and Nelson-Gardell 2014; Butler et al. 2019).

Self-care—personal or political?

The purposeful and intentional nature of self-care is prevalent in many definitions (Burkhart 2014; Diebold, Kim, and Elze 2018; Butler et al. 2019). It is associated with a sense of personal agency and a belief that one has some control over circumstances (Diebold, Kim, and Elze 2018). Thus, it can be seen as an '*empowering tool*' that enables one to '*take ownership*' of personal wellbeing (Lee and Miller 2013: 96). While such notions of empowerment are useful, they can position stress and burnout as personal problems (Bressi and Vaden 2017) and neglect to draw attention to contextual circumstances (Collins 2021). This may obscure the reality of structural oppression, adversity and inequality (Stuart 2021) and place an expectation on individuals to adapt to '*destructive forms of change rather than examining and challenging their root causes*' (McCusker 2022: 336). For example, organizational demands including high workloads and value conflicts arising from agency policy can engender stress and burnout but practitioners may internalize this as self-blame (McCusker 2022). Indeed, Stuart (2021) suggests that the rhetoric of self-care in social work is generally portrayed in the neoliberal discourse of individual responsibility. Alternative views are offered by those who explicitly frame self-care as encapsulating political as well as individual pursuits that address oppression (Profitt 2008; Nayak 2020), advocate for social change (Lee and Miller 2013) and incorporate transformative justice (Pyles 2020). Audrey Lorde, a proponent of the black, feminist, civil rights movement in the USA in the 1960s and 1970s, framed self-care in explicitly political terms, stating that '*caring for myself is not self-indulgence, it is self-preservation, and that is an act of political warfare*' (Lorde 1988: 125).

Self-care and identity

Recognizing the impact of social context on self-care invites a corresponding acknowledgement of the ways in which social influences contribute to the sense of self that is to be cared for. Weinberg (2014) proposes that identity is socially constructed moment by moment in interaction with others, countering the view that the self is fixed and autonomous. Similarly,

White's analysis of Foucault's notion of 'self' (2014) suggests that '*the care of the self is a continual movement of self-appropriation and self-fashioning; but not the recovery of a fixed self that already exists*' (p.496). Without such acknowledgement of fluidity and diversity in self-identity, self-care can be subject to narrow interpretations and prescribed ideas based on cultural norms.

> *Taken-for-granted bodies of 'knowledge', discourses, and practices reveal their roots in particular notions of a normative self. What becomes intelligible and manageable within Western culture are those thoughts and behaviors that can be governed and incorporated into our ideas of what constitutes a healthy, able, productive, participatory self, filtered through gendered, racialized, normative discourses.*
> (Stuart 2021: 5)

If self-care entails an awareness and construction of the 'self', it follows that an inclusive space to explore this sense of self is important. Intersectionality, as a concept, is helpful in recognizing the interconnected influence of race, gender and other social identities on structural and societal oppression (Crenshaw 1989). While there appears little in the existing social work literature about the relevance of intersectionality to self-care, related work mirrors its concerns, for example, McCusker (2022) explores the concept and practice of 'critical mindfulness' as a 'reflexive' form of self-care, again drawing on Foucault's 'technologies of the self' to enhance self-awareness and an understanding of how the self may be constructed by conformity to social norms.

Self-care in the social work profession

Self-care for personal and professional wellbeing

In some of the literature, a distinct domain of professional self-care is advocated. Lee and Miller (2013) suggest that, while personal self-care consists of practices that promote '*holistic health and well-being of the self*', professional self-care is the '*effective and appropriate use of the self in the professional role within the context of sustaining holistic health and wellbeing*' (p.98). Similarly, Newell and Nelson-Gardell (2014) define professional self-care as the use of '*skills and strategies by social workers to maintain their own personal, familial, emotional, and spiritual needs while attending to the needs and demands of their clients*' (p.431). Martin, Myers, and Brickman (2019) suggest that the pursuit of personal self-care strategies can be superficial without attention to professional self-care, which may entail workload management, time management and professional development.

Much of the research on self-care highlights the demands of social work practice, including heavy workloads, role conflict, lack of resources, lack of supervision, emotional demands, and the complexity of the role (Lee and Miller 2013; Newell and Nelson-Gardell 2014; Griffiths et al.

2019; O'Neill, Yoder Slater, and Batt 2019). The lack of resources, in particular, has been found to engender feelings of moral distress and ethical conflict in social workers, which impacts negatively on their well-being (Maija Mänttäri-van der Kuip 2016).

In relationships with people receiving services, the use of empathy and compassion is highly valued but can entail an emotional cost to social workers (Lewis and King 2019). There is a risk of compassion fatigue, secondary traumatic stress and vicarious trauma through empathetic engagement with people's trauma narratives (Newell and Nelson-Gardell 2014). These emotional demands, in conjunction with organizational demands, can lead to exhaustion and burnout characterized by depersonalization, negativity and cynicism (Newell and Nelson-Gardell 2014). Self-care is considered to be important in reducing the impact of these challenges (Lee and Miller 2013; Bressi and Vaden 2017; Diebold, Kim, and Elze 2018; Miller, Lianekhammy, and Grise-Owens 2019; Collins 2021), and has been found to decrease the likelihood of burnout as well as increase levels of compassion and job satisfaction (Butler et al. 2019). Social work practice during the Covid-19 pandemic heightened the pressures on social workers as the needs of people receiving services increased at a time when social workers were required to adapt to radically different working practices (Rine 2021).

Despite the value of self-care, and while social workers may express a belief that it is important, a study in the USA using an online survey of 1011 social work employees found that they engaged in self-care only moderately (Miller, Lianekhammy, and Grise-Owens 2019). Social workers may be more likely to attend to the needs of people receiving services and neglect to address their own (Lee and Miller 2013; Grise-Owens and Miller 2021) influenced, perhaps, by the fact that many see their profession as a 'calling', which directs attention to caring for others (Collins 2021). Furthermore, not all social workers appear familiar with the concept and may adhere to a narrow definition of self-care as the nurturing of physical wellbeing attended to outside of work rather than integral to professional practice (Miller and Grise-Owens 2020). Bressi and Vaden (2017) suggest that such conceptualizations of self-care may create a false dichotomy between the personal and professional self and propose that self-care should not be seen as a diversion from the professional self but as a way of tolerating feelings of uncertainty and vulnerability, and the emotional impact that may arise from being in empathic relationships with others. Similarly, Drolet and McLennan (2016) promote a more holistic approach to self-care, as they maintain that home and work life do not tend to be defined separately by social workers.

Regardless of whether the personal and professional 'self' are perceived as holistic, certain boundaries between work and home life may be important for wellbeing. Concerningly, the increased use of technology can create expectations of the 'omnipresence' of the worker,

available anywhere and at any time (Harris and Stout 2022: 10). While one person's self-care strategy may be to send emails outside of working hours, this may impact negatively on the receiver's home and work life balance, a conflict that came to the fore in home working during the Covid-19 pandemic (Miller and Reddin Cassar 2021).

Self-care as an ethical dimension of practice

As well as the significance of self-care for wellbeing, the literature explores connections between self-care and the capacity for ethical social work practice that supports social justice aims (Moore et al. 2011; Lee and Miller 2013; Butler et al. 2019; Lewis and King 2019; Miller, Lianekhammy, and Grise-Owens 2019; Miller and Grise-Owens 2020; Scheyett 2021). This accords with Foucault's view of care of the self as an ethical practice that '*is 'self-regarding' but not necessarily selfish, since it is the necessary condition for remaining open and available to others*' (White 2014: 499). As Scheyett (2021: 281) argues, this is especially pertinent in a welfare profession such as social work.

> To be effective social work professionals, and effective humans, we need to heal, help each other heal, and intentionally create just and healing contexts. Self-care is an essential part of that healing.

Miller's view of self-care as an '*ethical imperative for adept professional practice*' (2020: 257) is mirrored in its incorporation into the National Association of Social Workers' Code of Ethics in the US (NASW 2021, para. 4). Similarly, Principle 9.6 of the International Federation of Social Workers' 'Statement of Ethical Principles' (IFSW 2018) asserts that social workers have '*a duty to take the necessary steps to care for themselves professionally and personally in the workplace, in their private lives and in society*.' In highlighting the connection between self-care and professional social work practice, it may be likened to fitting one's own oxygen mask before assisting others; a social worker is likely to be more effective in supporting others if their own wellbeing is not compromised (Grant, Kinman, and Baker 2015). This analogy is criticized by Harris and Stout (2022) for emphasizing reactive rather than proactive self-care, however, Miller and Grise-Owens (2020) adapt it by suggesting that self-care for social workers is considered, not as an oxygen mask for emergency use, but as '*the essential, routine breathing that keeps the practitioner alive and flourishing*' (p.8).

Linking self-care to effective practice may encourage social workers to engage in it more readily if, as Collins (2021) suggests, they tend to prioritize the welfare of others. On the other hand, Stuart (2021) warns of the pitfalls of this perspective, highlighting that when social workers are encouraged by their organizations to engage in self-care in response to stress and burnout, it may be well-meaning but renders the individual responsible for

alleviating stress that is endemic across the profession. According to Butler et al. (2019), as workplace factors contribute towards stress, these factors should be addressed rather than relying on the coping strategies of individuals. Scheyett (2021) similarly criticizes expectations on individuals to engage in self-care practice while neglecting to consider the '*injustice-laden contexts in which social work is practiced*' (p.281).

Findings from a small qualitative study using in-depth interviews with seven social workers in the USA highlighted how they tended to see self-care as a personal responsibility despite the fact that they viewed the 'neoliberal' character of the organizational context as inhibiting effective practice, prioritizing 'market processes' over people's wellbeing, emphasizing the accountability of social workers, and failing to adequately resource services (Hendrix, Barusch, and Gringeri 2021). Such concerns about organizational practices can lead to moral distress among social workers, and the corresponding acts of 'ethical resistance' required to maintain ethical social work practice may take an emotional toll (Weinberg and Banks 2019).

Collective approaches to self-care in social work

There are a few exceptions to the focus on individual self-care in the existing literature. Profitt's (2008) study with social workers in Costa Rica working with gender-based violence advocates a critical and collective framing of self-care, reflecting intersecting social and economic circumstances. She critiques individualized notions of self-care as being inadequate to represent the lived reality and complexity of social work as a practice aimed at social change. Instead, self-care must capture the breadth and intricacy of the experience of being a social worker.

> An expanded notion [of self-care] must recognize both the life-giving and wearing effects of our work, as well as the multiple and diverse processes of conscientization, growth, and struggle in which social workers engage during the course of their labours.
> (Profitt 2008: 149)

A survey involving forty-two social workers (Martin, Myers, and Brickman 2019) emphasized several collective strategies. Having the opportunity to debrief, process stress, and increase morale as a team was seen as important alongside the creation of a caring organizational culture. Additionally, on an organizational level, supervision from managers, manageable caseloads, flexible working, and adequate administrative support were deemed to support self-care. Nurturing a healthy workplace culture that promotes work/life boundaries may also be important (Newcomb, Burton, and Edwards 2017; Scheyett 2021) as well as setting realistic goals, promoting breaks from work and destigmatizing the

experience of secondary traumatic stress, compassion fatigue and burn-out (Newell and Nelson-Gardell 2014).

Self-care in social work education

The additional pressures facing social work students

The literature suggests that social work students may be particularly vulnerable to stress, burnout, secondary trauma, and compassion fatigue due to limited experience and preparedness to meet the emotional demands of practice placements (Newell and Nelson-Gardell 2014; Diebold, Kim, and Elze 2018; Grise-Owens and Miller 2021). Additionally, there may be pressures due to factors such as academic readiness and debt (Han, Lee, and Lee 2012) and the need to manage multiple roles including those related to caring responsibilities (Moore et al. 2011). Recognizing the impact of these factors is important considering that stress, burnout, and secondary trauma can impede learning, and that self-care can enable students to cope with academic pressures and thus enhance learning for practice (Moore et al. 2011; Diebold, Kim, and Elze 2018; Grise-Owens et al. 2018; Miller 2020).

Engagement with self-care among social work students

Self-care is defined by social work students in a variety of ways. In a survey of 144 social work students (Diebold, Kim, and Elze 2018), they generally related self-care to holistic health and the relief of stress and burnout. They appreciated activities that were enjoyable, undemanding and comforting, and encouraged feelings of connectedness. The importance of time to devote to personal needs was emphasized, however, a lack of time was identified as a barrier. Both protective and restorative activities were included, and students sought to find a balance in relation to the demands of their multiple roles. They connected self-care with professionalism and their capacity to carry out effective social work practice as well as to prevent work-related stress from impacting on their personal life. Similarly, in Lewis and King's study (2019), the student participants sought a balance between their personal and professional lives with time to pursue interests that brought joy and satisfaction, and to attend to their different roles such as student, partner, parent and friend. It is important to note that some social work students may arrive at university with little understanding of self-care (Newcomb, Burton, and Edwards 2017), therefore teaching the importance of self-care without explicitly defining it may disadvantage students who are less familiar with the concept.

The engagement of social work students in self-care appears to mirror that of qualified social workers; it is usually seen as important though

not practised frequently (O'Neill, Yoder Slater, and Batt 2019). Self-care programmes for social work students can be poorly attended particularly when they are voluntary although this may be due to external barriers rather than through choice (Diebold, Kim, and Elze 2018). Various barriers to self-care are identified such as competing demands on time (Newell and Nelson-Gardell 2014), studies taking precedence (Diebold, Kim, and Elze 2018) and opportunities for adequate sleep, healthy eating and exercise being limited (Lewis and King 2019). Moreover, the socio-economic circumstances of some students may mean that paid employment needs to be undertaken to financially support their studies, which further limits the amount of time available for self-care (Diebold, Kim, and Elze 2018). More positively, an evaluation of the inclusion of self-care activities into a social work curriculum highlighted that some students did not initially recognize the importance of self-care but made a transition towards it over time (Lewis and King 2019).

Approaches towards self-care in social work education

To reflect its significance, the review found that self-care should be introduced early in social work education (Burkhart 2014; Martin, Myers, and Brickman 2019; O'Neill, Yoder Slater, and Batt 2019). Input at later stages, for example during practice placements, could serve as a reinforcement (Lewis and King 2019). Self-care should be included both implicitly and explicitly (Grise-Owens and Miller 2021) and embedded across the social work curriculum rather than included superficially or tokenistically (Newcomb, Burton, and Edwards 2017; Miller and Grise-Owens 2020). Miller (2020) suggests that a module dedicated to self-care is required to fully explore self-care concepts and practices. According to Burkhart (2014), sufficient time needs to be provided for students to engage in self-care modules, to track their use of self-care and to see the results from this, as having a perceptible impact tends to motivate continued involvement. Nonetheless, there may be time constraints within a demanding academic programme, and students can experience a separate self-care module as an additional burden (Diebold, Kim, and Elze 2018).

There is much debate about whether the self-care components of social work curricula should be credit-bearing. Incorporating assessment can be an effective way to communicate the importance of self-care; without credit, self-care may seem like an '*add-on*' (Grise-Owens and Miller 2021). Indeed, a study conducted by Miller (2020) found that the self-care of students at a university in the US had increased after undertaking a credit-bearing course. Grise-Owens and Miller (2021) suggest that an early assignment could be the development of a self-care plan that is revisited throughout social work programmes. Additionally, a paper could examine how students implement and evaluate their self-care, and a sustainability exercise undertaken to reflect on how they intend to continue practising

self-care. However, if self-care is to be assessed, it is important not to judge students on their individual self-care practice but rather to encourage critical analysis and reflection (Grise-Owens et al. 2018; Grise-Owens and Miller 2021). Newcomb, Burton, and Edwards (2017) also advise caution in this respect since assessment may be an additional source of pressure for students and thus counterproductive to self-care.

More specific examples of self-care components of social work curricula are suggested in the literature. Miller (2020) advocates for the teaching of definitions and theories of self-care, development of self-care plans, consideration of barriers to self-care, accountability for self-care practice, and the identification of tools for evaluating and sustaining self-care. To fit with an overall framework of competency in knowledge, skills, and values, Grise-Owens et al. (2018) suggest a programme that involves increasing knowledge of self-care concepts and strategies, developing a range of self-care skills, and valuing self-care as part of professional practice.

A self-care module introduced during student placements focused on six areas of self-care: professional, psychological, physical, emotional, spiritual, and balance (Lewis and King 2019). The module used direct instruction, activities and critical reflection to promote self-care. Readings were provided on compassion fatigue, secondary traumatic stress, burnout and the associated signs, symptoms, and risk factors as well as suggestions of coping strategies. Activities, which encouraged critical reflection, included group discussions and journalling designed to identify feelings and develop strategies for stress reduction. Self-assessment conducted at the beginning and end of the course indicated that students increasingly viewed self-care as important both for their own wellbeing and to effectively carry out the social work role. Many had developed a repertoire of self-care strategies although barriers to self-care, such as lack of time, were also apparent.

There are several recommendations in the literature to implement a mindfulness component to self-care curricula (e.g. Bonifas and Napoli 2014; McCusker 2022). McCusker's (2022) research focuses on the potential of critical mindfulness to validate the importance of self-care, and increase awareness of self-identity, self-expectation and the impact of emotions on others. Mindfulness practice was found to lead to an increased understanding of personal needs, greater feelings of self-acceptance and authenticity, and a more positive and less oppressive self-identity. Furthermore, it mitigated distress and a sense of role conflict by helping to validate students' emotional responses to their work, manage these emotions and avoid personalizing challenges that were organizational in nature. It appeared to support reflexive engagement with people receiving services by means of students building awareness of their own emotions in order to be more present, less judgmental and more aware of the underlying social circumstances influencing people's experiences. The impact of a six week 'Mindfulness-Based Social Work

and Self-Care Programme' (MBSWSC), undertaken by twenty-seven students from two UK universities was explored by Maddock et al. (2022) in relation to experiences of stress, burnout, anxiety, depression, and wellbeing of social work students. Findings from online quantitative and qualitative questionnaires highlighted the importance of self-care personally as well as for competent, ethical and effective social work practice.

Discussion

The review has confirmed a growing recognition of the need for self-care in social work education and practice set against worrying trends in the profession related to stress levels, burnout, poor working conditions and issues with staff retention (Ravalier et al. 2021). It also signals that efforts to improve self-care face challenges of varying complexity, including defining how it is conceptualized, understanding the role it plays in promoting effective social work practice and addressing the factors that precipitate stress and other mental and physical health problems experienced in the social work role.

The range of ways in which self-care is conceptualized in the social work literature indicates that it is far reaching and encompasses a wide variety of strategies. Beyond this, it can be seen as pertaining to existential concerns, such as understanding what the 'self' is, how it is constructed and conditioned, and the role self-care plays in deriving meaning, both from doing social work and from being alive, which may also encapsulate spiritual or religious dimensions (Bolotnikova 2014; Weinberg 2014; White 2014; McCusker 2022). Diversity in self-identity reflects the ways in which care of the self might vary and the importance of an intersectional lens in considering how organizations and higher education institutes may, unwittingly, perpetuate disadvantage if notions of self-care are based on narrowly defined social norms. In this respect, the idea of self-care as relating solely to the individual 'self' is questioned, and alternative definitions are proposed that emphasize collectivism, including political action to challenge prevailing ideology and social inequality.

This review has found that motivation is key in whether social worker practitioners and students engage in self-care. Relatedly, research increasingly attests to a relationship between self-care and the attributes central to effective and ethical social work practice, such as empathy, emotional awareness, reflexivity, and anti-oppressive practice (Newcomb, Burton, and Edwards 2017; McCusker 2022). This relationship is premised on the need to be resourced as a social worker in order to sustain an openness to the experiences of people receiving services without becoming overwhelmed, burnt-out or judgmental, and is reflected in its appearance in national codes of practice in the US (NASW 2021) and, globally, in principles of ethical social work practice (IFSW 2018). On this basis, there is a suggestion that self-care should be categorized as a key competency of social work (Grise-Owens and Miller

2021). This may serve to relieve the sense of guilt that some social workers reportedly feel about practising self-care and help to counter claims that attention to it within social work education constitutes a 'soft' approach but, rather, reflects the complexity of the social work role and the importance of rigorous standards of competency (Grise-Owens and Miller 2021). However, while this may be a useful motivator, it is potentially counterproductive in inducing feelings of guilt about *not* practising self-care and, by extension, demonstrating less competence in the social work role.

This dilemma is reflected in Weinberg's (2014) reference to the 'commonsense' notion of professional responsibility in social work that encourages the needs of others to be placed above one's own. Consequently, the subordination of the 'self' is seen as an ethical responsibility alongside the apparently conflicting expectation to care for oneself to enable continued functioning. This, she argues, is a wider socially constructed ideological dilemma that needs to be resolved, as well as an ethical dilemma on the level of the individual worker.

> The two positions cannot easily be reconciled: the individual who looks after herself to avoid burnout and is not 'addicted' to work versus the person who is altruistic and goes the extra mile to ensure that sound and ethical work is done on behalf of one's service users.'
> (Weinberg 2014: 94)

This may also play out in social work education where students are reluctant to seek support for fear that they will be seen as unable to cope with the social work role thus threatening the successful completion of their university programme (Newell and Nelson-Gardell 2014).

The review found that these issues are heavily influenced by organizational and structural factors, the presence of which impact on the likelihood of self-care occurring. For qualified social workers, heavy workloads, long hours, and limited supervision can impede attention to self-care (Newcomb, Burton, and Edwards 2017). Similarly, for social work students, competing demands for time present a barrier to self-care (Newell and Nelson-Gardell 2014) with studies often taking precedence (Diebold, Kim, and Elze 2018). Stuart (2021) notes how much of the literature on self-care in social work identifies organizational challenges such as these yet proposes individual self-care strategies in response. In relation to social work education, universities can give inconsistent messages about self-care in emphasizing its importance while not providing opportunities to practise it due to multiple expectations (Diebold, Kim, and Elze 2018). Consequently, the perception by some students is that '*performance and program completion are ultimately valued more than their personal well-being as students*' (Diebold, Kim, and Elze 2018: 665).

Grise-Owens et al. (2018) advocate for incorporating 'organizational wellness' (p.183) into self-care in social work to promote the idea it is a collective responsibility as well an individual one. This approach

recognizes the demands placed on social work practitioners and students, and seeks to address these at source as well as encouraging self-care to be practised. While measures such as organizations making time available for self-care during working hours (Martin, Myers, and Brickman 2019) are useful on a surface level, a deeper cultural shift is necessary within social work and educational organizations that has self-care embedded at its core (Griffiths et al. 2019). Deeper still is the need to redefine self-care not as a discrete and time-consuming endeavour but as integral to life, both personally and professionally.

Conclusion

Self-care is essential for social work practitioners and students, and should be seen as such at both an individual and organizational level. The ways in which current social work practice and education are configured and the range of concerns this raises about practitioner and student wellbeing, mean that systemic and cultural shifts are imperative to create an environment in which self-care is embedded and space authorized for it to be practised.

Explicit attention to self-care in the social work profession and curriculum can usefully serve to highlight its importance but, for self-care to be addressed more fundamentally, it is required to be absorbed into the very ethos of social work practice and education. Being embedded more implicitly, self-care can be seen not just as a necessary competency but as a central ethical and social justice dimension, and an underlying enabler to effective social work such that, if self-care is undertaken, it provides the foundation for competency and wellbeing to flourish.

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