

Burnout, Turnover and Nonprofit Social Work

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Rec date: Dec 05, 2021; Acc date: Dec 15, 2021; Pub date: Dec 20, 2021

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Introduction

Burnout is still not being taken as seriously as it should be. Burnout is a worldwide dilemma in the social work profession. Articles were reviewed from Italy, England, Korea and the United States. Burnout in health care professionals continues to gain attention, in particular within the social work profession. Burnout seems to be particularly prevalent among mental health social workers who work with marginalized populations. These social workers (SW) work with vulnerable people, and these populations can have heavy emotional burdens on workers, especially in areas that have fewer resources. This often results in the work feeling physically and mentally exhausting.

The literature looks at different themes that contribute to burnout for community mental health workers. The work they do is so important; they are the leaders in helping marginalized populations reintegrate into society through work, housing, school and family connections. This does take a lot of time, effort, energy and emotions on the part of the worker; however, most of the studies finds that workers' burnout was not correlated with the population they serve. Some of the major themes leading to burnout were found to be disconnection from managers and the organization as a whole. Burnout leads to high turnover, resulting in poor staff retention, which directly impacts the care clients are receiving (Salter, 2015). The goal of this review is to provide an overview of the impact of burnout on client care.

Maria Apuzzo-Okon is the Intake Supervisor for ICL's Personalized Recovery Oriented Services (PROS) program. Maria graduated with her MSW from NYU's Silver School and is excited to further her studies. She's invested in promoting self care for staff and helping improve the work environment for both staff and clients served. With a 8-year career in PROS programs, Maria has experience working in community mental health with adults with complex trauma, substance abuse history and helping clients with forensic involvement reintegrate in the community. Some of her skills and areas of focus in this setting are group therapy, harm reduction, grief counseling, crisis intervention, integrative health, dual diagnoses, trauma informed care and person centered planning. She is apart of ICL's Recognition/Moral Committee, Integrated Health Team and Crisis Response Team where she is committed to providing support to staff at the agency and to communities and programs that have experienced crisis. Maria has received several recognitions for her commitment to client care. Maria has an eclectic style approach with an appreciation for relational theory. She continues to be interested in studying how MSW interns, and social work staff can improve their self-care and foster their professional development as they enter/maintain in the social work field.

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