Workplace supports in the Infant Mental Health field: A mixed methods investigation Tanika Eaves Simpson MSW, IMH-ETM

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This mixed methods investigation explores the phenomena of work-related stress and employee well-being in human service practitioners and supervisors specializing in the field of infant mental health (IMH). The question of how the emotional strains and secondary trauma of direct practice with potentially vulnerable children and families can be contained through the integration of reflective supervision into infant-family service systems is gaining traction in the empirical literature (Barron & Paradis, 2010; O'Rourke, 2011; Osofsky, 2009; Shea, 2018; Watson, Gattis, & Neilssen, 2014). However, the relationship between organizational supports and self-care practices in managing work-related stress and promoting employee well-being has yet to be examined in the infant mental health literature.

Two studies were developed to: 1) examine the lived experience of the infant mental health clinical practitioner and professional/personal self-care practices identified as effective in managing work-related stress, 2) probe the broader IMH workforce about organizational supports and individual self-care practices that may promote management of work-related stress and employee well-being. Inductive, thematic analysis of qualitative data centered around four key themes: individual coping and self-care, reflective supervision as professional self-care, organizational supports facilitating self-care, and barriers to self-care.

The quantitative investigation, surveyed a national sample of 280 infant-family practitioners across varying job titles and sectors. Results of this study yielded findings suggesting significant weak to moderate correlations between organizational supports including structural and relational features and work-related stress. Results of both investigations raise

important questions about the interdependence of individual and organizational factors that may contribute to employee well-being.