

Indigenous Alcohol and Other Drug (AOD) Workers' Wellbeing, Stress & Burnout

Brief Report No.1

“The recent history of ...Aboriginal and Torres Strait Islander communities, is one of loss of land (often accompanied by violence), forced removal, and detention of differing clans in missions and reserves, with consequent loss of culture, autonomy, identity and life skills. Many patients come from such traumatised family backgrounds. Dealing constantly with traumatised patients and the resulting problems of unemployment, poor education, substance misuse and violence can become a threat to the wellbeing of staff. (1, p.3) ”

“...high levels of stress and burnout impact on the effectiveness and wellbeing of individual workers, AOD organisations and the wider sector. Preventing stress and burnout, and addressing current levels of stress and burnout, is a priority workforce development (WFD) issue for the AOD field. (2, p.528) ”

Little is known about factors that effect Indigenous AOD workers' wellbeing, but, anecdotal evidence indicates that Indigenous AOD workers are placed under considerable work pressure.

The National Centre for Education and Training on Addiction (NCETA) has studied AOD workers' wellbeing, stress, and burnout. The project described here explores Indigenous AOD worker-related issues.

This project uses the South Australian Aboriginal Health Partnership's definition of wellbeing:

“Enjoying a high level of social and emotional wellbeing can be described as living in a community where everyone feels good about the way they live and the way they feel. Key factors in achieving this include connectedness to family and community and control over one's environment and exercising power of choice.”³

Background and Context

Indigenous Australians are at high risk of health and social problems associated with AOD use.⁴ They are often marginalised in terms of health care services and other forms of social inequities (e.g., income, housing, education, and employment).⁵ Compared to non-Indigenous Australians, a larger proportion of Indigenous Australians live in remote areas where health services are limited.⁵ Cultural differences can add to difficulties in accessing culturally safe health care and AOD services.⁶

Indigenous people are also under-represented in the health workforce. Indigenous people comprise 2.5% of the population, but represent only 1% of the health workforce.⁷ This places additional stress on Indigenous workers.

There have been few investigations into the wellbeing of Indigenous AOD workers. There is also limited research on Indigenous AOD issues including Indigenous workers' experiences of dealing with clients with AOD problems, and the impact that this may have on them as workers.

Indigenous AOD workers may experience a greater range of stressors and pressures in their work roles than non-Indigenous AOD workers. The role of an Indigenous AOD worker can involve an especially heavy burden. Further, the work that is undertaken by Indigenous AOD workers is often complex and demanding, and can entail very personally relevant issues including:

- loss and grief,
- trauma,
- stigma, and
- social disruption.

What is Stress and Burnout?

Stress is a psychological, physical and behavioural response to work-related demands over a short-term period.

Almost one in five AOD workers experience high stress levels, contributing to lower job satisfaction, and an increased likelihood of leaving their job.⁸

Burnout is a result of chronic strain that develops over prolonged periods of high stress.

The 3 main factors of burnout that have been identified are:

1. Emotional exhaustion (for example, feeling like there's too much to do, and you don't have enough time or energy to carry out tasks at work and or home)
2. Depersonalisation (for example, feeling negative or pessimistic towards your work or not caring about your clients)
3. Reduced personal accomplishment (for example, feeling like you are useless at work or 'not worth anything' to others).

Stress and burnout can have a range of negative consequences for workers' health and wellbeing, including:

- Depression
- Psychosomatic complaints such as aches and pains and stomach upsets
- Health problems such as being at greater risk of cold and flu.

What can be done about stress and burnout?

Things that can help prevent stress and burnout include:

1. Rewards and recognition
2. Flexible working conditions that help balance work and family and community commitments
3. Support from co-workers, supervisors and senior management
4. High quality, fair and supportive supervision
5. Receiving feedback on performance
6. Being able to contribute to decision-making (e.g., about organisational policies and procedures)
7. Autonomy / being able to do your work in a way you think is appropriate
8. Career development (opportunities for promotion, job security)
9. Opportunities to attend professional development activities, such as training and networking
10. Improving the physical work environment.

Take a moment here to think about which of these you have at your workplace.

**Are any missing for you?
Could any of them be improved?**

(Contact NGETA for references to the research underpinning these strategies)

Strategies for Wellbeing and Stress Reduction

There are things you can do to assist in maintaining your personal wellbeing and reducing stress. As one worker told us, the key is 'finding what works for you'. You might like to try a range of strategies from the lists below that workers have told us they used.

In general:

- Regular exercise (e.g. running, football, yoga, and swimming) and adequate sleep helps
- Eat healthy foods
- Have regular medical checks
- Watch a funny movie
- Laugh
- Spend time with family and friends
- Go for a walk alone, with friends, the kids or the dog
- Try meditation, massage, prayer, keeping a journal, gardening, reading, photography, or listening to music.

At work:

- Debrief with fellow workers regularly and seek support from other Indigenous workers
- Professional supervision can make a huge difference
- Try not to worry about things and to look at the same issue in another way
- Identify stress management strategies in clinical supervision sessions
- Focus on positives and the achievements accomplished
- Network and liaise with other workers
- Pace yourself with regular breaks during the day
- Take rostered days off (RDO's) and/or use flexi hours
- Try to leave work at work.

The NCETA Indigenous AOD Worker Wellbeing Project 2007-2009

To gauge levels of stress experienced by Indigenous AOD workers, and to determine what strategies worked well in terms of maintaining wellbeing, NCETA has undertaken interviews, focus groups, site visits, and an online survey.

Some initial findings from the online survey are presented below.

A total of 282 workers completed the survey, 177 Indigenous and 105 non-Indigenous AOD workers. The number of respondents from different states, geographic locations and organisation sectors are shown below.

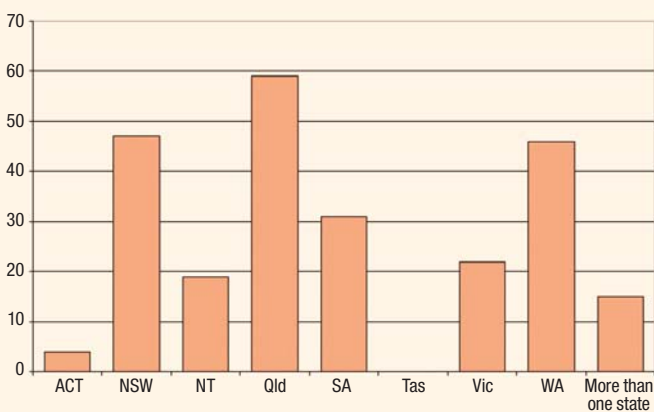


Figure 1. Survey respondents' workplace by state

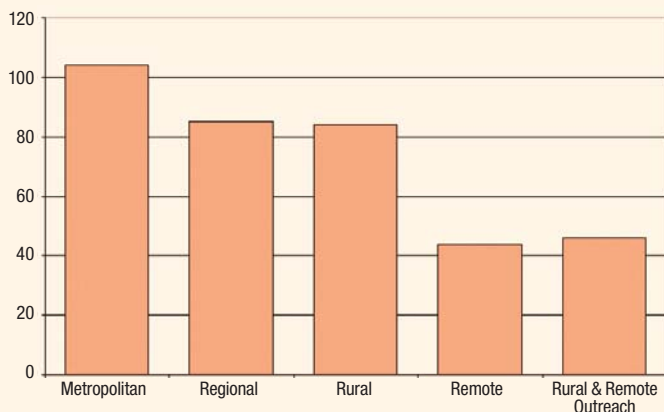


Figure 2. Survey respondents' workplace by geographic location

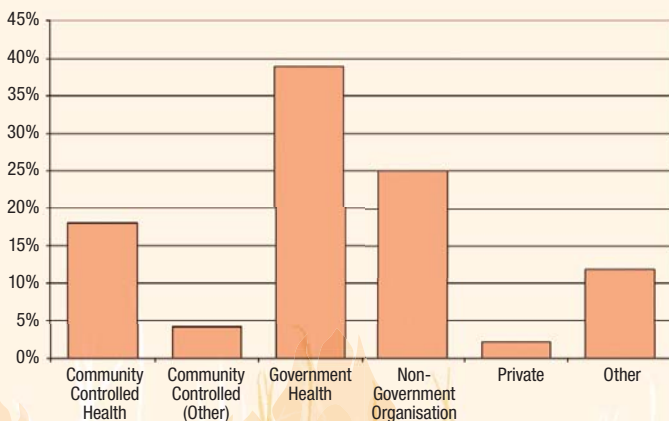


Figure 3. Types of organisations survey respondents work in

Age and Length of Service

Indigenous workers were younger on average and had shorter lengths of service in their current organisation than non-Indigenous workers. The majority of Indigenous workers had worked in their organisation for less than three years.

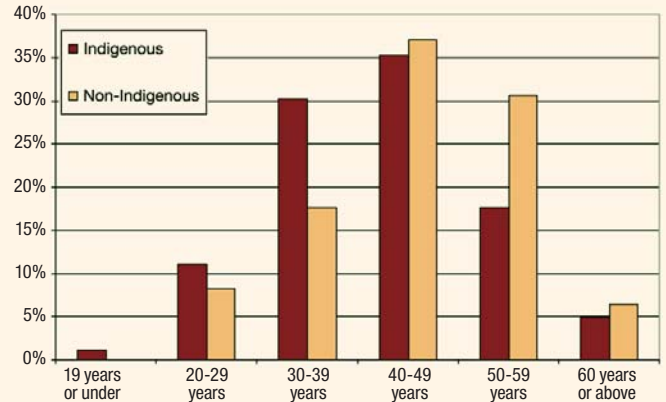


Figure 4. Age of survey respondents

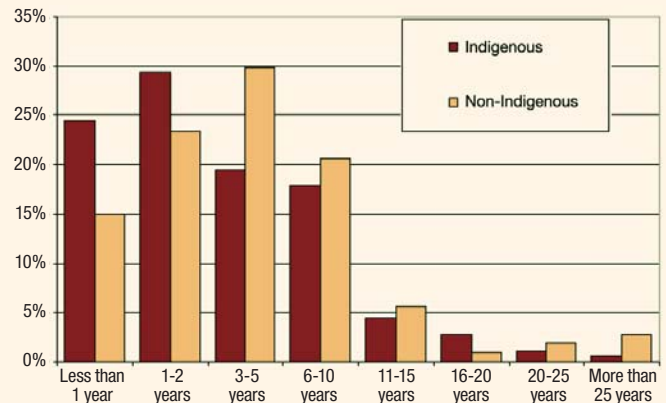


Figure 5. Survey respondents' length of service in current organisation

Salary

A substantial difference between the salaries of Indigenous workers and non-Indigenous workers can be seen in Figure 6. Non-Indigenous workers were twice as likely as Indigenous workers to reach the top salary bracket of greater than \$60,000.

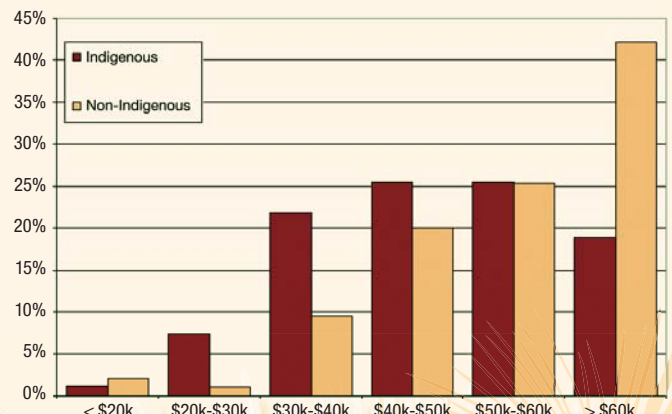


Figure 6. Survey respondents' annual salary

Strategies to retain workers

Survey respondents were asked which strategies they believed to be most important to retain workers. Strategies rated as 'important' or 'very important' in order of priority were:

For Indigenous workers:

1. Salary increases
2. More training opportunities
3. More recognition / appreciation of effort
4. More supportive workplace
5. **More career opportunities***

For non-Indigenous workers:

1. More recognition / appreciation of effort
2. More training opportunities
3. More supportive workplace
4. **Reduced administrative workload***
5. Salary increases.

*indicates items specific to Indigenous or non-Indigenous workers

References

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7. Australian Institute of Health and Welfare. *Health and community services labour force 2006*. Canberra: AIHW. Cat no. HWL 43; 2009.
8. Duraisingam V, Pidd K, Roche AM, O'Connor J. *Satisfaction, stress and retention among alcohol & other drug workers in Australia*. Adelaide: National Centre for Education and Training on Addiction; 2006.

About the project

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For further information about this project please feel free to contact NCETA:

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This project is part of a wider program of work by NCETA examining worker wellbeing, stress and burnout among workers involved in the alcohol and other drugs (AOD) field. For details of related projects visit the NCETA website.

Other publications in this wider program of work include the following:

- Skinner, N., & Roche, A. (2005). *Stress and burnout: A prevention handbook for the alcohol and other drugs workforce*.
- Duraisingam, V., Pidd, K., Roche, A.M., & O'Conner, J. (2006). *Satisfaction, stress and retention among alcohol and other drug workers in Australia*.
- Duraisingam, V., Roche, A.M., Pidd, K., Zoontjens, A., & Pollard, Y. (2007). *Wellbeing, stress, and burnout: A national survey of managers in alcohol and other drug treatment services*.



Free copies of these resources are available from NCETA
email: nceta@flinders.edu.au or phone: 08 8201 7535



www.nceta.flinders.edu.au

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© 2009. This project is funded by the Australian Government Department of Health and Ageing and is also a Flinders University in-kind project for the Cooperative Research Centre for Aboriginal Health (CRCAH).

