

Workforce experiences of consumer peer workers in mental health: A survey study exploring job satisfaction, burnout and turnover intention

Justin Scanlan

Megan Still

Jae Radican

Daya Henkel

Tim Heffernan

Peter Farrugia

Jemima Isbester

Jessica English



The Team



Justin Scanlan
The University of Sydney
Sydney Local Health District



Tim Heffernan
COORDINARE – South Eastern NSW
Primary Health Network

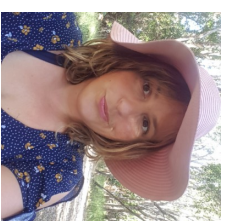
Megan Still
Sydney Local Health District



Peter Farrugia
Flourish Australia



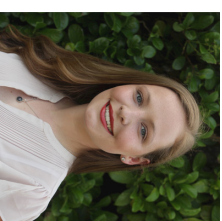
Jae Radican
Previous: NSW Ministry of Health
Current: Western Sydney LHD



Jemima Isbester
Sydney Local Health District



Daya Henkel
Previous: Hunter New England LHD
Current: NSW Ministry of Health



Jessica English
Previous: Being
Current: Sane Australia

The context

Peer work is the most rapidly expanding element of the mental health workforce

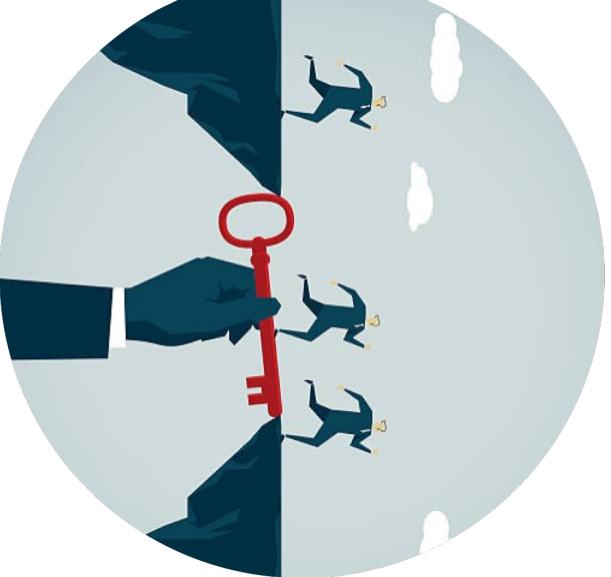
Previous studies exploring the experiences of peer workers have identified a number of challenges, including

- Attitudes of non-peer mental health staff
- Stigma, discrimination, isolation
- Peer workers perceived to be “too emotionally fragile” for mental health work
- Workplace cultures not aligned with recovery principles
- Poor understanding of the peer worker role
- High workload, poor job security, lack of career progression opportunities
- Lack of peer work colleagues and access to supervision from senior peer workers
- The need to be “agents of change”

The context

- Previous research had explored concepts of job satisfaction, turnover intention, burnout, job demands and job resources in the 'traditional' mental health workforce
- However, no previous studies had explored these concepts for the emerging and expanding peer workforce

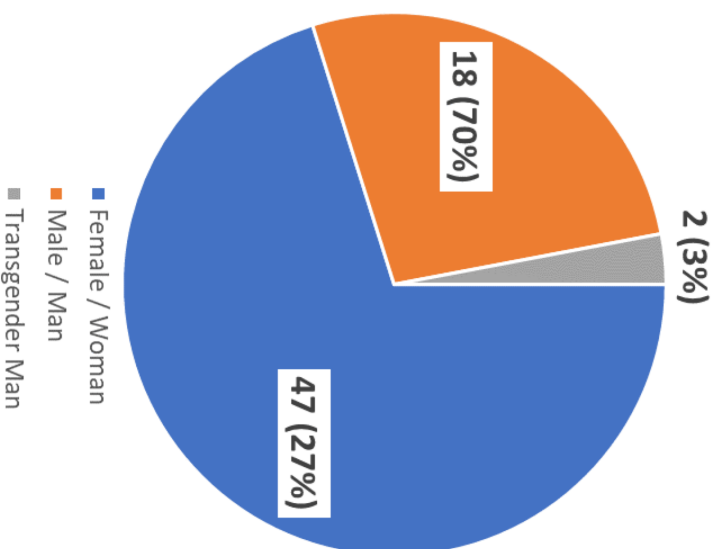
This study



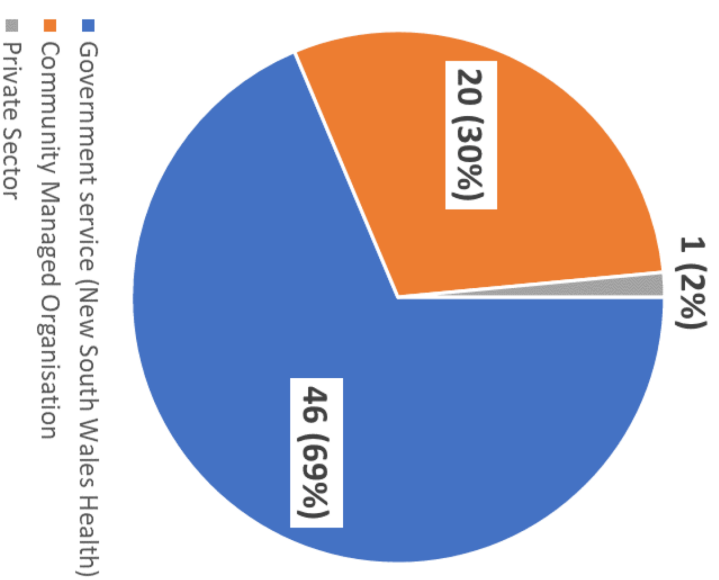
- Collaborative project engaging peer work leaders from the government and community managed sectors and researchers with experience in researching workplace experiences of mental health staff
- Focus on consumer peer workers in NSW
- Focus on those individuals in identified peer worker roles
- Survey-based design, exploring several aspects
 - Likes and dislikes of current position
 - Overall job satisfaction
 - Satisfaction with supervision, professional development and opportunities for career progression
 - Turnover intention
 - Burnout
 - Job demands and job resources

Participants (N = 67)

Gender identity



Sector



Likes and dislikes

Likes

- Connecting with consumers (44, 66%)
- Making a difference (28, 42%)
- Positive culture / team relationships (28, 42%)
- Supporting others' recovery (22, 33%)
- Enjoyable, interesting or challenging work (16, 24%)

Dislikes

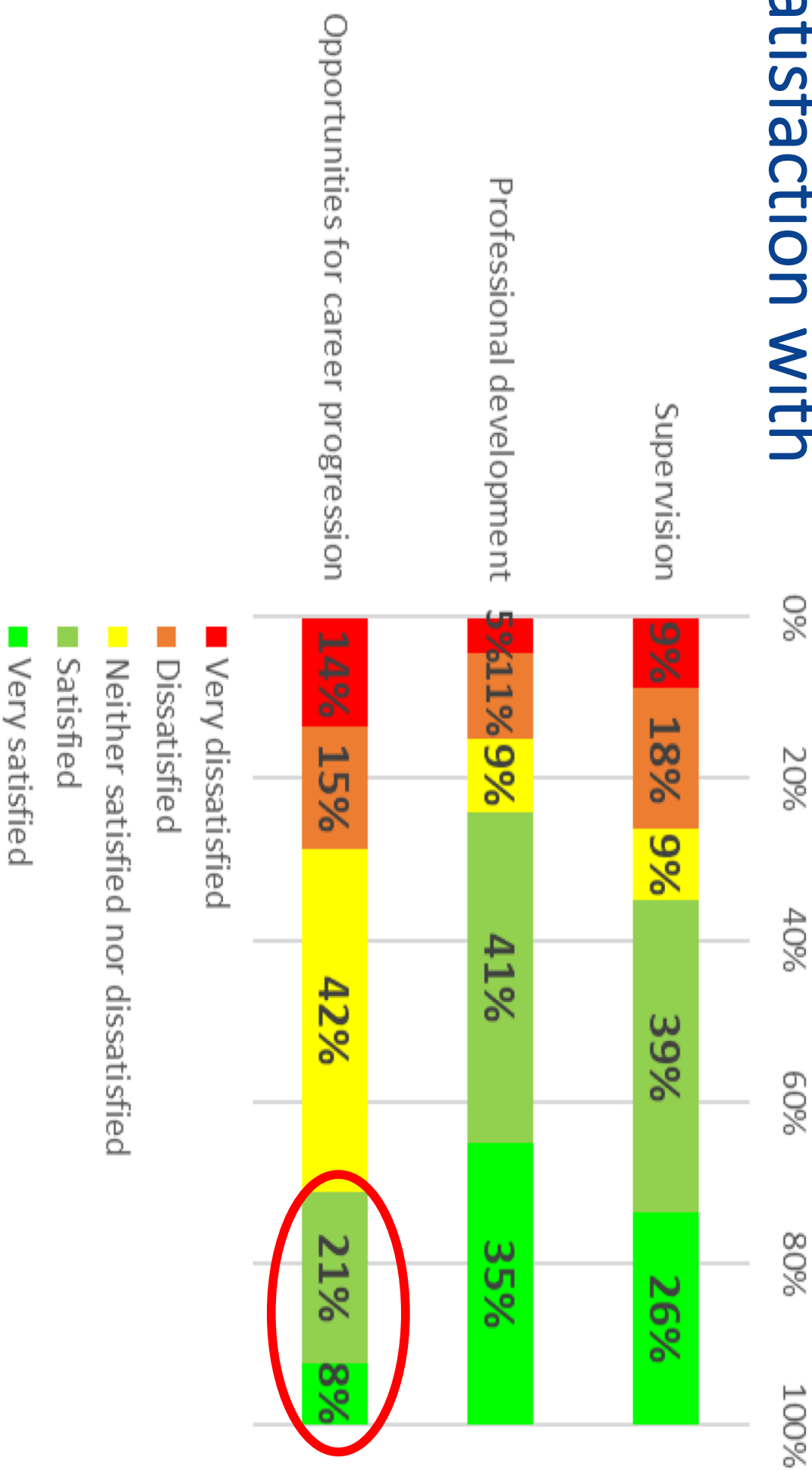
- Attitudes of clinicians / workplace culture (22, 33%)
- Role not valued by others (19, 28%)
- Lack of understanding of role (15, 22%)
- Poor management (13, 19%)
- Poor pay / Lack of parity in pay / Not enough hours (12, 18%)

Job satisfaction, turnover intention, burnout

Component	Potential range	Government sector	CMO sector	Combined	Other MHW
Job satisfaction	1 to 10	7.4 (2.1)	6.8 (2.1)	7.3 (2.1)	6.9 (2.0)
Turnover intention	1 to 3	1.6 (0.7)	1.6 (0.6)	1.6 (0.7)	1.5 (0.7)
Disengagement	1 to 4	2.2 (0.5)	2.2 (0.5)	2.2 (0.5)	2.2 (0.4)
Exhaustion	1 to 4	2.5 (0.5)	2.4 (0.5)	2.4 (0.5)	2.4 (0.4)

No statistically significant differences between Government vs CMO or Peer workers vs other mental health workers

Satisfaction with



Key Associations (correlation > 0.5)

Job satisfaction	Turnover Intention	Disengagement	Exhaustion
<ul style="list-style-type: none">• Satisfaction with supervision• Rewards and recognition• Job control• Satisfaction with professional development• Feedback• Physical environment• Job security• Supervisor support	<ul style="list-style-type: none">• Satisfaction with opportunities for career development	<ul style="list-style-type: none">• Rewards and recognition• Satisfaction with supervision• Job control• Satisfaction with professional development• Physical environment• Feedback	<ul style="list-style-type: none">• Shiftwork / working hours• Rewards and recognition• Physical environment• Feedback• Emotional demands

Key Associations (correlation > 0.5)

Job satisfaction	Turnover Intention	Disengagement	Exhaustion
<ul style="list-style-type: none">• Satisfaction with supervision• Rewards and recognition• Job control• Satisfaction with professional development• Feedback• Physical environment• Job security• Supervisor support	<ul style="list-style-type: none">• Satisfaction with supervision• Satisfaction with opportunities for career development	<ul style="list-style-type: none">• Rewards and recognition• Satisfaction with supervision• Job control• Satisfaction with professional development• Physical environment• Feedback	<ul style="list-style-type: none">• Shiftwork / working hours• Rewards and recognition• Physical environment• Feedback• Emotional demands

Results from this study in the context of previous research

Previous studies

- Attitudes of non-peer mental health staff
- Stigma, discrimination, isolation
- Peer workers perceived to be “too emotionally fragile” for mental health work
- Workplace cultures not aligned with recovery principles
- Poor understanding of the peer worker role
- High workload, poor job security, lack of career progression opportunities
- Lack of peer work colleagues and access to supervision from senior peer workers
- The need to be “agents of change”

Attitudes of other workers / workplace culture key “dislikes”

Results for burnout no different to other mental health workers

Role not understood / valued

Lack of pay / hours
Lack of career progression opportunities – associated with higher turnover intention

Lack of access to supervision and connection with senior peer workers
Quality supervision associated with positive experiences

Key recommendations

- Better understanding of unique contribution of peer workers from managers / colleagues
- Ensure peer workers have access to adequate workplace resources (e.g., desk, phone, computer)
- Continue to increase numbers of peer workers
- Create leadership / senior positions for peer work
 - Opportunities for career progression
 - Provision of supervision
 - Service-level advocacy
 - A genuine place at the “decision making table”
- Stronger multidisciplinary support for recovery oriented service provision

Questions

RESEARCH ARTICLE

Open Access



Workplace experiences of mental health consumer peer workers in New South Wales, Australia: a survey study exploring job satisfaction, burnout and turnover intention

Justin Newton Scanlan^{1,2*}, Megan Still², Jae Radican^{3,4}, Daya Henke^{5,6}, Tim Heffernan⁷, Peter Farrugia⁸,
Jemima Isbester² and Jessica English^{9,10}

Abstract

Background: Consumer peer workers are individuals with lived experience of mental health issues and recovery who are employed to use their lived experience to support others. The consumer peer workforce has expanded substantially in recent years. While some research has explored the workplace experiences of peer workers, no previous studies have explored job satisfaction, burnout or turnover intention for this workforce.

Methods: Consumer peer workers in New South Wales, Australia were invited to complete a survey designed to explore their workplace experiences. The survey included measures of job satisfaction, burnout, turnover intention,



Scan the QR code to access
the full text paper

For more information, please contact:
justin.scanlan@sydney.edu.au

Coping Strategies for Trauma- Affected Researchers of Mass Violence

Dr Melanie O'Brien
@DrMelOB



All photos:
Dr Melanie O'Brien



Atrocity sites

Auschwitz

Atrocity sites



Mauthausen &
Bergen-Belsen



Fotograf unbekannt, aus der Sammlung des deutschen Soldaten Josef Landgraf
Schenkung Eberhard Pollard
Photographer unknown, from the collection of Wehrmacht soldier Josef Landgraf
Donated by Eberhard Pollard

Photos of atrocities



18. April 1945
Fotograf: Sergeant Oakes
"[...] SS-Frauen laden am anderen Ende der Grube Leichen ab."
Aus den Notizen des Foto-

18 April 1945
Photographer: Sgt. Oakes.
"[...] SS women unloading dead at the other end of the pit."
From the photographer's "caption sheet"

Photos in the Bergen-Belsen Museum





Graveyards & Memorial Sites

Bosnia (Srebrenica) &
Cambodia (Choeung Ek Killing
Fields)

Refugee camps



Kutupalong refugee camps,
Bangladesh

Meeting & interviewing survivors



Sakib & Ifeta, Bosnia;
Hanna Pick, Israel;
Bou Meng, Cambodia;
the women of Ocevija, Bosnia

Impact & Coping mechanisms

- Very personalised form of research
- Can be lonely
- Distress
- Sadness
- Heightened awareness of misogyny & violence against women, incl in daily life
- Anger, esp at authority figures
- Sense of helplessness
- Exercise (e.g. yoga)
- Skype/zoom with partner back home
- Watch Netflix; or socialise if possible
- Close friendship with other genocide researchers
- University risk assessment poor; psychologist service poor
- Sourced psychiatrist specialising in trauma
- Acknowledge that I do what I can, i.e. give survivors a voice, try to change law & policy
- Use anger proactively to motivate me
- Talk about the content that I am exposed

Thank you



THE UNIVERSITY OF
WESTERN
AUSTRALIA

melanie.obrien@uwa.edu.au
@DrMelIOB