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Workplace Stress and Reward: A Case Study of Mental Health Workers' Experiences

**A thesis presented in partial fulfilment of the
requirements for the degree of**

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This report covers sensitive information therefore the name of the organisation and identifying references have been changed to protect confidentiality. The organisation's name has been given the pseudonym 'Recovery Care (RC)' and participants' names have been changed throughout the report.

Abstract

A healthy workplace is now widely recognised as vital in the achievement of optimal wellbeing for employees and a thriving organisation.

The purpose of this study was to gain insight into both the rewarding and stressful work experiences of Mental Health Workers (MHWs) in one community-based mental health care organisation. The focus was to shed light upon the strengths and weaknesses in this particular organisation for possible future remediation for staff and the organisation. The addition of reward and positive stress (eustress) ensured that there was also a focus upon positive qualities rather than solely pathology.

Staff of Recovery Care (RC), an organisation situated in the North Island that supports individuals in the community who experience mental illness were invited to individually take part in a semi-structured interview. Twenty MHWs volunteered to participate ranging in ages 18 to 64 years old, with 15 participants identifying themselves as New Zealanders (10 NZ European, 5 NZ Maori and 5 other) and 16 as women.

MHWs' interview narratives were transcribed into a written format, thematically analysed and clear patterns and themes emerged. These were discussed in combination with relevant literature and theory, which thereafter supported the ability to provide recommendations for the organisation.

The findings identified several areas that affect the health and wellbeing of MHWs and the functioning of the organisation. MHWs found working with clients, making a difference and having meaningful work to be most rewarding. Elements of eustress and strength were found in working with clients, competing demands, team/colleagues and certain aspects of the job (diversity, autonomy and flexibility). However the majority of MHWs found clients, management, change in management and competing demands to be distressing. Other weaknesses were around pay, resources and inadequate training. Upon further examination it became clear that a lack of reward, mismanagement and pay had a major impact on MHWs' perception of their future with the organisation.

This research highlights the importance of engaging with employees and gaining insight into their individual experiences of rewarding and stressful aspects in their work to be able to create healthier thriving workplaces with happy employees.

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1. INTRODUCTION

The health and wellness of employees plays an important role in the successful functioning of an organisation. Empowering staff, creating a healthier workforce and therefore more productive and successful organisations is a goal to strive for. It is important to acknowledge and to understand the barriers to and facilitators of, health and wellness in the workplace in order for this goal to be achieved.

There is growing recognition that caring professions are exposed to high levels of occupational demands (Davey, Arcelus, & Munir, 2014). Those demands can be both rewarding and stress-inducing for the individual care worker and can have major effects on the quality of the service provided and subsequently the organisation itself (Green, Miller, & Aarons, 2013).

According to Volpe et al. (2014), Mental Health Workers (MHWs) work in highly interpersonal and emotionally loaded environments and are often affected by stress related syndromes which can be debilitating. The literature on stress within mental health professions suggests that there is often a link between the rewards and stresses that staff experience and the efficiency and effectiveness of the organisation (Astvik & Melin, 2012; Green et al., 2013; Salyers, Rollins, Kelly, Lysaker, & Williams, 2013). This means that it can be important to investigate staff experiences to improve the individual's work experiences and also to improve the functioning of the organisation.

This study investigated MHWs' experiences of the rewarding and stress-inducing aspects of their work. It differs from the majority of published research since it emphasises the importance of positive aspects of the workplace such as positive stress (eustress) and the nature of reward (Seligman & Csikszentmihalyi, 2000). This research partially incorporated a positive psychology approach where the focus is on building positive qualities and not solely repairing pathology (Seligman & Csikszentmihalyi, 2000). The purpose of the study is to gain insight into the experiences of reward and stress that MHWs encounter in their job. One aim of the research is to provide useful recommendations which will enable the organisation to maximise its strengths and address issues which may be creating problems for staff.

This research looked at the experiences of MHWs in one mental health organisation in New Zealand. The term 'Mental Health Worker' is used to cover any worker who offers a service improving and/or treating the mental health of individuals. MHWs in this research were mental health support workers employed by Recovery Care (RC), a healthcare organisation which aims to support individuals who experience mental illness to live successfully and independently in the community, through the application of recovery principles (Recovery Care, 2010). MHWs work alongside the

client and their family/whānau in their journey to recovery where the support provided is tailored to the needs, personal goals and challenges that are faced by the individual.

The principles upon which support is provided are active participation, self-determination, hope, attitude, knowledge and community inclusion, where the overall goal is to make a positive change for the individual (Recovery Care, 2010).

RC has several offices throughout New Zealand in various districts, with teams ranging from 6 to 18 staff members. The teams are predominantly made up of women. Within the several districts the organisational structure can be identified by 3 main levels of staff. The MHW who works directly with clients (including senior MHWs who have more responsibility), the Mental Health Leaders who are responsible for the teams, and finally higher management (Clinical, Regional and General Managers).

This research investigated the rewards and challenges which RC's MHWs' experience in their job. It utilised a psychological framework based on the idea of stress and eustress within the workplace. The rewarding and stress-inducing aspects of MHWs' jobs are important to identify because the role of a MHW is relatively diverse. Demands (tasks/accountabilities) such as client interactions, managing resources, relationship management, reporting, workforce development, health, safety and quality are all part of a MHW's role. RC also places great importance on staff to be result driven, team centred and quality focussed.

The four main research questions and areas are as follows:

- What areas of their work do MHWs find rewarding and stress-inducing?
- What areas are perceived by MHWs as eustress?
- What coping strategies/solutions do MHWs apply or suggest in dealing with stress-inducing demands at work?
- Are there any organisational changes (strengths/weaknesses) which MHWs would like to see within RC?

To summarise, this research investigates the participants' subjective experiences of what is rewarding and stressful in their job. Their experiences are analysed in the hope of discovering common themes surrounding areas that work well and areas in need of possible remediation.

2. LITERATURE REVIEW

The literature around occupational health covers an extensive variety of themes and theories. This review focusses on organisational health and wellbeing, stress, distress/eustress, reward and coping in the workplace. The chapter begins with an overview of health and wellbeing in the workplace.

This is an important introductory area as the research is based upon the concept of increasing health and wellbeing for employees and creating healthy and more productive workplaces. Then the review goes into a discussion around stress in the workplace, more specifically distress and eustress (positive stress). Rewards in the workplace and applicable motivation theories are explained, then a short overview of coping in the workplace. The relationship between stress and reward are mentioned and finally a section which focuses specifically on MHWs and literature on stress/eustress and reward at work.

Health and wellbeing in the workplace

On average a third of an adult's life is spent at work which indicates an opportunity to promote health and wellness in the work environment. The overarching goal of a healthy workplace is about achieving optimal health of employees and the business (Burton, 2007; Regional Public Health, 2012; World Health Organization, 1999). Russell (2009) states that there is a clear two way-relationship between the health of employees and workplaces. Namely that the health of an employee can affect the workplace and that the workplace can affect an employee's health. This amplifies the importance of the dynamic nature of the workplace and employee relationship, and the continuous need for exploration in this area.

Literature on occupational health and wellbeing is continuously growing, however in the past the primary focus of organisations has been on physical safety in the workplace (Pitt, 2008; World Health Organization, 1999). Acts such as the Health and Safety in Employment Act (1992) and the Health and Safety in Employment Amendment Acts (2002 & 2003) entail that employers identify what potential sources of stress may affect employees' wellbeing and find ways to manage these (Howard, 2008). Kelloway and Day (2005) confirm this and suggest that the focus of a 'healthy' workplace has to encompass different indices: the individuals' health (physical, behavioural and psychological), organisational indices (customer perceptions, productivity, turnover) and societal indices. This implies that workplace structures are evolving and acknowledges that there are more components to a 'healthy' workplace than solely the physical environment of employees.

This section on health and wellbeing in the workplace will focus on definitions, more detail around what a healthy workplace entails and benefits of a healthy workplace for employers and employees.

Definitions of health and wellbeing

Awan and Sitwat (2014) explain that health in the modern world is not of passive nor static state, but rather a process of continuous development and increase in wellness. It comes to no surprise that definitions around health and wellbeing have changed throughout the years, but often encompass similar psychological, physical and organisational dimensions of the work environment (World Health Organization, 1999). The distinction between definitions around health and wellbeing will be made early on to complement the rest of the literature review.

Russell (2009) suggests that the terms health, wellness and wellbeing are often used interchangeably. ‘Health’ is defined by the World Health Organization (WHO) as “a state of complete physical, mental and social wellbeing, and not merely the absence of disease”, a definition often used throughout occupational literature (Regional Public Health, 2012, p. 2; Russell, 2009). The definition is appropriate for use in this particular research as it encompasses both the ‘absence of disease’ and a fulfilled state of wellbeing. This creates an opportunity to focus on both the negative and positive aspects of MHWs’ experiences in the workplace.

Literature of occupational well-being has generally defined well-being in a variety of ways. The Rehabilitation Foundation suggests that wellbeing means healthy, safe and productive work, having a well-managed organisation and skilled employees (Heikkila & Makela-Pusa, 2014). It encompasses that employees find their work rewarding and meaningful and that they have some control over their life within the work context (Heikkila & Makela-Pusa, 2014). Well-being in its simplest form can be described as a state of being healthy, comfortable and happy (Oxford Dictionary, 2017a). Overall wellness and wellbeing constructs are multi-dimensional, where it is about positive functioning and a healthy body and mind (Dodge, Daly, Huyton, & Sanders, 2012).

What is a healthy workplace?

It is vital to a nation’s economic and social growth that a healthy workplace encourages the evolution of a healthy workforce (Kelloway & Day, 2005; WHO, 1999). This section will explain what is involved in a healthy workplace and in particular Burton’s (2007) explanation of a healthy workplace is considered in more depth.

Burton (2007) proposes that a healthy workplace encompasses both what the workplace can provide for employees and what employees bring to the workplace. Hill (2003) describes this as a “shared, co-operative venture” (p. 2) with both parties having roles and responsibilities to creating healthy work. With regards to past literature two broad but distinct perspectives can be found when looking

at what a healthy workplace is. One focus is on pathology and is centred on the hazards and risks (adverse aspects) that are in need of remediation to support health and wellbeing (reducing, amending risk factors). The other focus lies in identifying and strengthening the areas, seeking areas that work well, providing an environment that is satisfying, productive and stimulating for employees (WHO, 1999). This approach looks more at finding and promoting areas that could be enhanced to create health and wellbeing (Russell, 2009; Seligman & Csikszentmihalyi, 2000).

Burton (2007) suggests that a healthy workplace can be explained by a combination of the physical work environment, personal health resources and organisational culture. Physical comfort is important, affects ones mental clarity and therefore an employee's output/productivity. The physical environment can include factors such as lighting, noise, temperature, electrical, chemical, musculoskeletal and machine hazards (Burton, 2007; Hill, 2003; WHO, 1999). The ability to recognise and control the immediate environment to suit preferences and needs of the employees is beneficial to the worker and company (Burton, 2007).

The personal health resources Burton (2007) mentions are the opportunities, resources and flexibility provided by the organisation. These are important for personal growth and the improvement of working conditions which can also support maintenance and improvement of lifestyle or personal health practices (Hill, 2003). Examples of some resources are quit smoking support, counselling support, healthy food choices, training in stress management and exercise support (Regional Public Health, 2012; WHO, 1999).

Finally, the organisational culture is concerned with the values, attitudes and beliefs that affect an employee's physical and mental well-being (Burton, 2007). More specifically this can include non-physical hazards such as workplace stressors or organisational factors that influence employee health. Some key examples of non-physical hazards described by Burton (2007), Hill (2003) and the WHO (1999) are a lack of appreciation, respect, autonomy, sense of control, rewards, decision making, work-life harmony support, balanced workloads, and employee involvement. It is important to acknowledge the organisational culture as the research is based on the perception of MHWs and their experiences of the workplace, depending on the organisational culture, the strength, perceptions and opinions can be largely shared as part of a bigger system. To get an overall view of the workplace culture is priceless, it can be beneficial in terms of growth, promotion and changes that need to be made.

Benefits of a healthy workplace

Investing in the health and wellness of staff has benefits for employees and organisations which often outweigh the organisational costs of implementing programmes and interventions (Burton, 2007; Russell, 2009). This research is based upon the assumption that humans have a right to live happy, healthy lives and reach their potential, which are elements that can be fostered and promoted in the workplace. Employers then also have the right to have productive well-functioning employees and a healthy working culture within the organisation.

In past literature the benefits of a healthy workplace for employers and organisations are mostly around finances and productivity (Burton, 2007; Regional Public Health, 2012; Russell, 2009; WHO, 1999). Financial benefits can include improved staff retention, reductions in costs relating to healthcare, reduced absenteeism, increased presentism and a reduction in workplace accidents. Productivity benefits may include improved staff retention, morale, caring and positive image, loyalty, employee health and wellness, a resilient/happier workforce and improved performance (Regional Public Health, 2012; Russell, 2009; WHO, 1999). One can clearly see that the benefits of investing into the health of an organisation and employees affects multiple levels.

Employee benefits of a healthier workplace then go beyond a safe working environment. A healthy work environment can increase job satisfaction, employees have higher energy, morale and self-esteem, reduced stress, better health outcomes, quality of life, mental wellbeing, fitness, physical health, a healthier community and family, nutritional practices and less injuries/accidents (Regional Public Health, 2012; Russell, 2009; WHO, 1999). According to several articles health and wellness in the workplace will provide motivation and productivity for employees which can increase job satisfaction (Regional Public Health, 2012; Russell, 2009). Overall the benefits for employees and organisations are enmeshed, which highlights this reciprocal relationship and the importance of a healthy workplace. Therefore looking at weaknesses, areas in need of remediation and how the strengths of an organisation can be maximised are equally important.

Stress in the workplace

The psychological literature surrounding workplace stress has been beneficial in providing recommendations for employers to manage issues relating to employee stress and is therefore of importance in the creation of health and wellbeing in organisations.

The factors that accompany and drive the research behind organisational health are the increasing compensation claims that are related to psychological stress and research which suggests that several occupations have high levels of job distress (Sturmfels, 2009). Stressed workers are more

likely to be poorly motivated, unhealthy, less safe and productive at work. The organisation is then less likely to be successful. It is the duty of the organisation, under the Health and Safety Employment Amendment Act (2002) to ensure the well-being of employees and create a healthy environment by identifying, eliminating and isolating occupational stress (Baehler & Bryson, 2009).

Literature around stress in the workplace has largely focussed on 'distress', pathology and damage repair, which is important in understanding everyday stressors that are experienced by employees (Nelson & Simmons, 2003). However past research also suggests that some stress is good and necessary in everyday life, which can produce positive outcomes and responses (McGowan, Gardner, & Fletcher, 2006; Nelson & Simmons, 2003).

This section of the literature review focusses on occupational stress. Firstly, there will be an explanation on the definitions of stress and stress in the workplace. Thereafter an overview of two sides of stress; distress and eustress are discussed with common theories of occupational stress. Following is a view of stressors in the workplace and finally societal perceptions of stress are mentioned.

Stress

Stress is a commonly used term in day to day life which has many facets and can be difficult to define as a singular concept. Stress definitions are therefore generally an evolutionary creation of their time (Dewe, O'Driscoll, & Cooper, 2012). The historical use of the concept of stress must not be left unexplored, as several definitions have been greatly influential over the years. One needs to keep in mind that stress is highly subjective to the individual, although the majority of the population does experience stress, the extend of the stress experience and perception can be different for each person.

One of the first stress pioneers, Hans Selye (1956) defined stress as "the non-specific response of the human body to any demand made on it", a definition which leaves a person open to experience stress in their own way (as cited in Landy & Conte, 2013, p. 449). Likewise, Lazarus and Folkman (1984) defined stress as resulting from a demand and resource imbalance (as cited in Griffin & Clarke, 2011).

Palmer's (1989) definition, although similar to Lazarus and Folkman's (1984) definition, suggests that the imbalance is then likely to lead to ill health.

The occupational Safety and Health (OSH) definition of stress also suggests that stress elicits a negative emotional response due to the person not being able to cope with demands created by person and environment interactions (Hill, 2003). It appears that as time moves through different

definitions the connection between stress and ill health or a negative distressing state becomes more prominent. However, Blaug, Kenyon and Lekhi (2007) state that the more modern stress definitions generally consist of three elements: personal experience, a causal demand/pressure and the impact upon an individual's perception or ability to cope, which does not necessarily imply ill health.

The above definitions show that the stress process is complex and no definition explains all aspects of stress. Work-related stress can be more specifically defined as a mismatch between the work demands and pressures people are presented with and their ability to cope with the challenges (Blaug et al., 2007; Leka, Griffiths, & Cox, 2004). Most other definitions of stress in the workplace also tend to identify a mismatch between the job requirements and the worker's ability to respond (Baehler & Bryson, 2009).

Stress theories

To gain greater understanding of occupational stress there will be a brief overview of three theories/models which have dominated research around stress in the workplace. The stressor-strain approach will be explained first, thereafter the Demand-Control model and the Transactional Model.

Cotton and Hart (2003) suggest that most of the occupational stress research over the past three decades has been influenced by stressors and strain approaches. This kind of approach would suggest that stress is a poor physical and psychological health outcome which arises out of stressors (negative work experiences) (Cotton & Hart, 2003). The dominance of this approach towards stress in the workplace has caused a narrow focus on adverse experiences (Griffin & Clarke, 2011). Research suggests that the stress process is more complex than that, and that perhaps a lack of positive experiences or positive emotions could be influencing people's perception of their experience of stress (Baehler & Bryson, 2009; Cotton & Hart, 2003). This approach also tends to create a problem by focussing on the individual level rather than holding the organisation/employer accountable.

The Demands-Control model developed by Karasek (1979, as cited in Landy & Conte, 2013) is also a prominent workplace stress theory that takes on a stressor-strain approach. This model proposes that the stressor-strain relationship is largely dependent on the relationship between job demands and job control/decision latitude (Griffin & Clarke, 2011; Landy & Conte, 2013). In this theory, job demands refer to aspects in the workplace of the job that require sustained or additional psychological, physical or emotional effort (Griffin & Clarke, 2011). Job control would then suggest

the amount of decision making control (plus possible support) to deal with demands (Lawson, Noblet, & Rodwell, 2009). The theory suggests that there will be an increase in strain when there are excessive job demands, however high job control should in theory lessen the negative effect (Dewe et al., 2012; Griffin & Clarke, 2011). This theory highlights the importance of job control and available resources in dealing with demands which can significantly influence the outcomes.

Dewe et al. (2012) explain Lazarus's Transactional Model of Stress which proposes that stress arises from an individual's appraisal that a demand is about to exceed the resources the individual possesses. When the individual feels unable to cope it threatens their well-being. The emphasis of the transactional model is the constant interaction between the environment and person, where stress is then located in the relationship between the environment, appraisal and coping (Griffin & Clarke, 2011). There are two stages of cognitive appraisal within Lazarus's model. Firstly, there is primary appraisal, which is where the individual appraises a demand as a threat or perhaps a challenge. Thereafter the secondary appraisal is when the individual evaluates the coping resources to respond. This transactional model opens up the possibility of both distress and eustress (positive stress) outcomes. If the demand is appraised as a challenge then there is more likelihood that one can cope, create positive affect and eustress is said to be present (McGowan et al., 2006; Nelson & Simmons, 2003). The opposite is true for appraising a demand as a threat which can then lead to an inability to cope and distress.

Distress and eustress

Selye (1956) was influential in distinguishing between eustress (positive stress) and distress (negative stress) (Landy & Conte, 2013). However, the majority of occupational research has emphasized work-related demands/stressors and the negative consequences these have on the individual worker and organisation (Bentley et al., 2009; Happell et al., 2013; McGowan et al., 2006; Sturmfels, 2009).

Selye (1956) explains distress as stress that results from a demanding situation, producing health outcomes that are identified as negative (Landy & Conte, 2013). More recent definitions share similarities, for example Hill (2003) suggests that stress is an emotional response of negative nature when becoming aware that one is unable to cope with the demands in the immediate environment. The negative effects of stress on the employee can present themselves in physiological, cognitive, emotional, social, behavioural ways which will affect the worker from carrying out daily tasks (Leka et al., 2004). This can lead to negative effects on the organisation also, such as reduced

performance, loss of productivity, high turnover, worker absenteeism, lowered morale, interpersonal conflict and increased costs regarding retraining, staff replacement, compensation costs and reduction in quality of service (Baehler & Bryson, 2009; Leka et al., 2004).

Not all stress however is negative, certain amounts of stress can be beneficial for health and wellbeing, keeps up levels of motivation and engagement, removes boredom, and at the end of the task can provide a sense of achievement and positive affect (Baehler & Bryson, 2009; McGowan et al., 2006). Eustress (positive stress) is described by Selye (1956) as a certain type of stress that produces challenges. These challenges provide motivation for individuals to meet goals and work hard (Landy & Conte, 2013). Eustress is therefore not only found in the rewarding aspects of a job but can also be found in the challenging and stress-inducing demands that a job presents (Seligman & Csikszentmihalyi, 2000). Another aspect linked to the positive affect found in eustress is flow. Flow is when one is absorbed in the moment, task or situation and has no awareness of the surroundings, experiencing intrinsic motivation and enjoyment (Csikszentmihalyi, 1990)

The Yerkes Dodson Law attempts to explain the relationship between arousal and performance, and hence a form of positive stress (Le Fevre, Matheny, & Kolt, 2003). This law suggests that people perform better when they are a little nervous/anxious/stressed/aroused, however performance diminishes when this stress is too little or too great, the stress can then be seen as distressing. Also attention and motivation were supported by the increased level of stress and arousal, but only to a certain point. This concept is difficult to assess, however the lesson learned from this has had major influences upon literature and research around positive stress in the workplace. Le Fevre et al. (2003) suggest that this law has assumed a certain amount of stress/anxiety/fear/pressure in the environment will lead to higher employee performance rather than if stress was not present. This may well be true, however this also encourages organisations to maximise stress levels rather than to minimise them. The majority of empirical research does not support keeping stress at an optimal level for employees, this could have unhealthy consequences (Le Fevre et al., 2003).

The concept of eustress or positive stress in this research implies that a certain amount of stress can have positive aspects. Eustress is explained by McGowan et al. (2006) as a “positive psychological response to a stressor as indicated by the presence of positive psychological states” (p. 93), which can be found in psychological states and certain behaviours such as: meaningfulness, hope, engagement, manageability, forgiveness behaviours, and positive affect (Baehler & Bryson, 2009; Nelson & Simmons, 2003).

Eustress is therefore not only linked to the wellness of staff but also to greater work performance which is beneficial to the organisation. Overall the stressful demands and rewards in the workplace can lead to positive benefit perceptions (McGowan et al., 2006).

Stressors

Every occupation is likely to bring distinctive stressors which can be identified as “events or circumstances which may lead to the perception that physical or psychological demands are about to be exceeded” (Hill, 2003, p. 8). Landy and Conte (2013) explain stressors in a similar way, as a person responding to psychological or physical demands. Stressors are the sources of stress, and the responses/reactions of stressors are often called strains. Stressors are the demands that make it difficult for the individual to cope, and literature encourages how individuals decrease/deal with these stressors (Nelson & Simmons, 2003). Stressors are likely to vary depending on conditions like business trends and technological changes, but also time is a big factor (Baehler & Bryson, 2009). Thus it is important to acknowledge that not all stressors in care work can be mentioned with accuracy, especially as interactions among the organisation, individual and wider context are continuously changing. Stressors are highly subjective to the person however commonalities can often be categorised.

The most common stressor categories that have been identified in the occupational stress literature are around support, demand, control, change, role, relationships, work-life balance and culture (Palmer, Cooper, & Thomas, 2004). Support includes sponsorship, encouragement and resources which the organisation, management and other colleagues can provide that could play a role in reducing stress and potentially sourcing eustress (Blaug et al., 2007; Palmer et al., 2004).

Demands are aspects of a job, for example working conditions, working environment, tasks and deadlines which are generally, regardless of occupation a source of stress (negative/positive) (Blaug et al., 2007; Palmer et al., 2004). When demands are placed upon an employee these can be perceived as exceeding their capacity and resources to respond effectively, which then creates a premise for distress. Job control then includes employees having autonomy and a say over the work environment and conditions (Blaug et al., 2007; Palmer et al., 2004).

Change in the workplace can cause stress for workers, and is often acknowledged in the psychological literature. The way change is communicated, introduced and managed can have a large impact on stress levels (Blaug et al., 2007; Palmer et al., 2004). Often role confusion is mentioned as a stressor category as it can impact on relationships and creates ambiguity about

responsibility, making role clarity important to keep stress levels down (Blaug et al., 2007; Palmer et al., 2004).

Relationships with colleagues and employers can also act as stressors. Issues like bullying, conflict and harassment are all evident in the workplace and can cause immense stress upon an employee. Work-life imbalance is also a prominent stressor category in literature. The organisational culture, also called the psychosocial work environment is about the values, attitudes and beliefs of employees and the organisation (Blaug et al., 2007; Palmer et al., 2004). When stress arises in the workplace one of the most important steps is the approach the organisation and management take towards solving the issue.

Perception of stress

Knowledge is built through research at specific times and places, which creates the emergence of different definitions and creates building blocks for development of further research and theories. One of the major points to note is that 'stress' is part of people's daily vocabulary but like Blaug et al. (2007) state, its meaning and reach remain unclear. People's perceptions of stress associated with the workplace have been given negative connotations. When an individual says "I am so stressed today" the assumption is that the person is experiencing something that is adversely affecting them. Cotton and Hart (2003) suggest that the perception people have of the experience of stress can be caused by "a low level or lack of positive work experience and positive emotional states" (p. 118) rather than the presence of negative experiences. Stress has evolved and it appears alarming that evidence suggests that there is more stress and less happiness in people's lives than previously (Blaug et al., 2007). This implies that perhaps a focus on what people find rewarding, meaningful and joyful in their life and workplace may be equally important to investigate.

Reward

The need for recognition for a job well done can be considered part of human nature. Several links have been made between rewards, motivation and positive affect for employees and benefits for the workplace (Nelson, 2016). Investigating the sources of reward in the job can identify areas that could facilitate employee retention and employee motivation which is of benefit to the employer also (Bowden et al., 2015). This part of the literature review will look at types of reward, reward in the workplace and motivational theories.

Types of rewards

A reward is an incentive which can be uplifting and motivating, and can generally be categorised as extrinsic or intrinsic to a person. Extrinsic rewards come from outside of the person, and are then also controlled by others. Extrinsic rewards are tangible rewards where generally something is physically given for an accomplishment (James et al., 2015). Examples could include money, certificates, salary, a trophy, commissions, points, and so on, something that originates from outside of the person, with employees it could be something from the organisation. Woolley and Fishbach (2016) made comparisons between extrinsic rewards to delayed rewards and having instrumental benefits. This suggests that when employees have long term goals it is more about the outcomes of the experience rather than the experience itself, more external to the person.

Intrinsic rewards then come from within, an employee may be intrinsically motivated by aspects in their own control, and intrinsic rewards are self-initiated satisfactions employees get from the job. Intrinsic rewards are intangible, responses to achievements, recognition, thanks, praise and so on. Woolley and Fishbach (2016) also suggest that intrinsic rewards are often more closely associated with immediate rewards and also have experiential benefits, meaning direct involvement. This would suggest in relation to long term goals that the intrinsic rewards are important for employees to have the want to continue doing their job and reaching long term goals. Where it is about the experience of the pursuit of an activity.

Reward in the workplace

A reward can be defined as “a thing given in recognition of service, effort, or achievement” which commonly results in positive feelings and behaviours (Oxford Dictionary, 2017b). Nelson (2016) suggests that reward, incentives and recognition are often accompanied by each other.

Past research around reward in the workplace suggests that money was recognised as the major incentive to retain, attract and motivate employees. This could imply that monetary gain significantly impacts people’s performance, behaviour and an organisation’s effectiveness (Tang & Gilbert, 1995). According to Thomas (2009) rewards and motivations in the workplace have changed rapidly over that last few years, where changes to how employees work and the kinds of jobs that they do has created more room for different types of reward. More recent research has shown the importance of employee recognition, verbal words of appreciation and respect towards employees to be ranked higher than money incentives (Beck, 2016). This is a major shift from previous research and acknowledges the importance of non-monetary rewards. Non-monetary rewards can come from

the work itself, but management is also important in providing recognition and respect which affects an employee's job satisfaction and the desire to stay with an organisation.

Extensive research has shown that consequences shape human behaviour, thus if a 'good' behaviour is recognised/noticed or rewarded then that behaviour tends to positively repeat itself (Nelson, 2016). Positive consequences (rewards/incentives) in the workplace then enhance the preferred behaviour and in turn enhance performance. An employee who is happy and content in their job exhibits positive behaviours, such as career success, high job performance and employee retention, which benefits their quality of life, health and contributes to the organisations' functioning (Wang & Yang, 2015).

Reward in the workplace largely implies an element of motivation, it is about some positive form of recognition towards an employee, which makes them feel valued and appreciated. This could increase their productivity, job satisfaction levels and motivate them to continue or improve the desired behaviour. Motivational theories are influential in this research as these can explain what drives an employee and why they may behave in certain ways.

Motivational theories

Reward and motivation are established in literature as part of the same process, especially in occupational research. Motivation can be looked at as a drive, desire, need, or want within the individual, a process which stimulates the direction of behaviours that accomplish goals (Landy & Conte, 2013). Theories of motivation are diverse, however for this research three motivational theories relating to rewards in the workplace are explained. There will be an overview of the Expectancy Theory, Incentive Theory of Motivation and the Self-Determination Theory. There is not one theory that fully encompasses all elements of motivation at work however they inform the current research.

The Expectancy Theory is concerned with the higher levels of mental functioning. The Expectancy Theory, proposed by Vroom (1964, as cited in Landy & Conte, 2013) also known as the VIE (valence, instrumentality, expectancy) Theory appears to look at the decision-making process with the VIE components influencing the motivating behaviour to be performed (Landy & Conte, 2013). Instrumentality relates to the relationship between the person's beliefs about the possibility of an outcome occurring if a certain behaviour is performed. Expectancy refers to the beliefs about the ability one has to perform a behaviour, if a person increases their effort in a certain task, will this lead to a more successful performance? Valence is then the way a person values the outcomes, this

can be how positive or negative their strength or preference is. The theory in a nutshell suggests that values and beliefs influence the choices being made and then guide the behaviour. Although this theory has been used widely it also has some shortcomings in the sense that it neglects personality and emotional facets of the human being (Landy & Conte, 2013).

Distinguishing between intrinsic and extrinsic reward and motivation is best explained by looking at the Incentive Theory of Motivation. This theory is more concerned with the external motivational aspect and can be likened to the Operant Conditioning Theory of Skinner. Motivation in the workplace comes from external rewards, where theory assumes a pull towards actions that can lead to gaining reward (Cherry, 2017). This theory relates back to the extrinsic reward/intrinsic reward types, where extrinsic motivation can be from both types of reward, however this theory places less emphasis on the internal motivation push, but rather the attractiveness of stimuli external to the person is emphasised (Frommer, 1999).

The Self-Determination Theory is a broader framework that considers motivation and personality. This theory is not unlike the Incentive model described above, in the sense that it includes extrinsic and intrinsic motivational aspects, however the focus is more on internal processing. First developed by Deci and Ryan (1985) this theory encompasses human motivation, optimal functioning and personality (as cited in Deci & Ryan, 2000). The Self-Determination Theory links in well with this research project as it takes on a positive psychology approach as it is a theory which incorporates nurturing the individual's strengths and dealing with positive emotions. The Self-Determination approach suggests that there are 3 basic psychological needs that human beings have, namely: autonomy, competency and psychological relatedness (Deci & Ryan, 2000). Autonomy concerns the ability to do something or act out of an individual's own values or interests, having a free will, some form of control over one's life and the aspects in it. Competency suggests being able to effectively deal with the environment, a desire to master and control outcomes and actions. Finally relatedness is about relationships with others and the desire to feel connected, feel like you belong, are able to interact and care for others. Intrinsic rewards are about the satisfactions one gets from doing an activity rather than a consequence or outcome (Tran, 2017).

All theories are in line with human behaviour and thought in the workplace. The idea of the theories above is to acknowledge the different approaches to motivation in the workplace, and to touch upon the theories relevant to the current research. For the purpose of this research eustress and reward will be loosely linked in the sense that there are positive outcomes, whether these are feelings or actions from both. The Incentive Theory and Self-Determination Theory will be of interest

when looking at rewards in the workplace, as to gage where employees get their motivation from and what they find rewarding in their job. This could inform future employee behaviour, reward systems and organisational activities.

Coping

Coping is the way people use and control the resources around them to solve problems. Coping mechanisms are used in everyday life and especially in the workplace where demands are placed upon the employee each day. Coping is defined by Folkman and Moskowitz (2004) as behaviours and thoughts used to “manage the internal and external demands of situations that are appraised as stressful” (p. 745) which is also how emotional responses are shaped. Similarly Lazarus and Folkman (1984) define coping as individuals’ behavioural and cognitive efforts that are constantly changing to manage the demands (internal/external) that are appraised as exceeding or taxing the resources a person has available to them (as cited in Tobert & Moneta, 2013). Krohne (2002) agrees that most approaches follow Lazarus and Folkman’s definitions of coping, and makes it clear that coping strategies can be either adaptive or maladaptive.

Adaptive coping relates to problem solving or emotion focussed coping and is about seeking support or controlling the cause which reduces stress levels. This kind of coping is effective in the way that it eliminates a problem and prepares the person for similar future problems and how to deal with these more effectively (Folkman & Moskowitz, 2004). Maladaptive coping then requires a reaction and attempt to cope with a stressor which reduces the stress level temporarily only. This type of coping on the other hand is not only temporary but also does not deal with the problem directly and fails to provide any support in similar future situations (Folkman & Moskowitz, 2004).

Coping responses vary immensely amongst human beings. How a person copes, their coping style, is mostly reflected by personality and life experiences. Not only the way a person copes but the scale as to size and diversity of responses and situations is different. Overall there are four categories of coping described by Folkman and Moskowitz (2004) which are emotion-focused coping, task-focused coping, social factor and meaning-focused coping. The effectiveness of these ways of coping are dependent on the situation and can change from being unsuitable in one instance to more appropriate to use the next. A few examples of ways of coping listed by Carver (1997) are through emotional support, instrumental support, religion, self-distraction, humour, denial, acceptance, venting, positive reframing, substance use, planning, disengagement, active coping, and self-blame.

It appears that mental health workers could have expertise in the field of coping as they are constantly dealing with stressors of others and their own. The interest in coping within this research

lies in the ways the mental health workers cope, and if they have suitable resources within the organisation to cope. Mental health work has often been portrayed as particularly stressful, which implies a need for adaptive coping strategies and accessible resources.

Stress and reward

Qualitative studies around MHWs' experiences with regards to distress, eustress and rewards have rarely been researched together in one research project. The overall scope of this research is to look at stress and reward which are both prevalent in any workplace. An attempt is made to explain the relationship between stress and reward by looking at the Effort-Reward theory. This relationship is important as it is partially the reason why both stress and reward are central to this research.

The Effort-Reward Theory is a model of work stress formulated by Siegrist (1996) and takes a more in depth account of some of the mental activities that were possibly lacking in behaviourist approaches. The Effort-Reward Theory suggests that effort and reward are ideally at balance, where efforts are reciprocated by rewards that include esteem, status control (job security/promotion prospects) and money (Weyers, Peter, Boggild, Jeppe Jeppesen, & Siegrist, 2006). An imbalance is experienced with for example high effort and a lack of reward, which then elicits stressful experiences at work. According to Tsutsumi and Kawakami (2004) the emphasis of the model is on social roles (work) that offer a person potential beneficial effects on self-regulatory needs such as options of belonging, performing/contributing (self-efficacy) and being esteemed/rewarded (self-esteem), which is similar to eustress effects. The imbalance between efforts and rewards is dependent upon a social exchange process of fairness and reciprocity (Tsutsumi & Kawakami, 2004). This imbalance can result in distress and adverse health outcomes for the individual worker. A personal component is also included in the Effort-Reward Model, namely over-commitment, which suggests emotions, behaviours and attitudes of coping with job demands.

According to the Effort-Reward Theory stress model one can see an example of the relationships around stress, eustress, reward and coping which has influenced the areas of this research. The research also looks at the strengths and weaknesses of the organisation which tie in with stressful and rewarding aspects of the workplace. When looking at rewards and eustress, linked with motivational drives, the hope is to uncover strengths within the organisation but also within its employees. This could be the key in an organisation, to refine aspects of the job to attain to the strengths of the employees. Whereas the distressing aspects of the job could be seen as weaknesses but also starting points, where the problems lie, and where the organisation could problem solve.

MHWs' experiences of stress and reward in the workplace

MHWs work in highly emotionally demanding environments which can be stress-inducing and rewarding at the same time. MHWs' provision of care can come at a personal cost and often their own mental health and wellbeing is affected (Lim, Kim, Kim, Yang, & Lee, 2010). However satisfying aspects of the job such as client relationships and playing an active part in supporting clients add to meaningfulness in the work of MHWs and can be rewarding (Salyers et al., 2013). This section briefly outlines more detail around literature of MHWs' stress and rewards in the workplace.

The nature of the job of a MHW places a responsibility on MHWs to provide care for their clients, fulfil their role requirements and maintain their own physical health, mental health and wellbeing. Occupational literature suggests that MHWs are often linked to low levels of well-being, emotional exhaustion, burnout, risk, stress, compassion fatigue, job dissatisfaction, low morale and negative consequences. In particular MHWs have been found to be exposed to high levels of threats, staff sickness, susceptible to impairment and vulnerable to depression, trauma, substance abuse and relational difficulties (Johnson et al., 2012; Richards, Campenni, & Muse-Burke, 2010; Wood et al., 2011). These significant connections between MHWs and distressing symptoms are key in understanding that there can be specific job related stressors for employees working in mental health services.

Foremost MHWs' job is to care for clients who are diagnosed with mental illness, which can be challenging within itself, where the complex needs and slow progress with clients in an environment that is limited and lacking in resources/finances is a premise for dissatisfied and stressed MHWs (Fernandes & Marziale, 2014). This together with high job demands, low social support at work, uncertainty about the changing mental health care environment and conflicted expectations are all identified as possible sources of stress (Acker, 2011; Van Daalen, Willemsen, Sanders, & Van Veldhoven, 2009). The stressors for many MHWs specifically appear to consist of high caseloads, clients' unpredictable behaviour, a lack of control/time/autonomy, change in the workplace, not being rewarded when a job was well done and management's involvement (Astvik & Melin, 2012; Fothergill, Edwards, & Burnard, 2004; Salyers et al., 2013; Van Daalen et al., 2009).

On the other hand working in the mental healthcare sector can also be rewarding. The rewards and joys for MHWs in their job predominantly stem from interactions with clients. For many MHWs it is about enjoying the relationship they have with their clients, seeing them succeed and actively being a part in supporting the client moving towards recovery (Salyers et al., 2013). Glajz, Deane and

Williams' (2017) research on MHWs also puts the client at the centre of work value for MHWs. For MHWs it is about impacting the clients, making a difference and change. Literature around MHW and the caring profession often relates back to the actual work with the clients rather than the job itself. This could be due to the link between mental health care organisations, financial deficits and limited funding which leads to dissatisfaction for MHWs around wages, a lack of administrative support, resources and lack of opportunity for professional development (Acker, 2011).

The dissatisfaction around wages may mean that MHWs need to rely more heavily on non-monetary rewards for job satisfaction and motivation. Non-monetary rewards can include other aspects of the job such as recognition, praise from management, commendation, leadership attention and taking on new/important projects (James et al., 2015). Job satisfaction is important and found to be a protective factor against work related stress (Acker, 2011). Motivation for MHWs is then also likely to come from numerous rewarding sources such as engaging with clients, personal satisfaction and making a difference (Bowden et al., 2015). The impact of non-monetary rewards suggests that even when monetary gain is minimal there is great opportunity to add to the wellbeing and success of employees and the workplace. This can be done by providing rewards such as recognition, respect, appreciation, gratitude and other incentives (Beck, 2016). This could prove to enhance positive experiences in the workplace.

Similarly, Hargrove, Nelson and Cooper (2013) explain that individuals working with clients can report eustress by indications of active engagement and hope in their work. Also, meaningfulness, manageability, positive affect and forgiveness behaviours are found to be important here (Baehler & Bryson, 2009; Nelson & Simmons, 2003). Links between MHWs and the values of autonomy, self-determination, empowerment and choice, relating to clients have been made (Glajz et al., 2017). These are all values that can add to rewarding and eustress aspects of the job. Apart from working with clients MHWs work in an organisational setting with demands, a culture and environment unique to the organisation which enables the possibility of enriching areas that are rewarding and positive.

Overall MHWs' stressors and sources of reward are evident throughout literature which means that the experiences of MHWs at RC can be compared to the current research where similarities can be drawn and differences can be examined.

3. METHODOLOGY

This chapter describes the methodology used in this research, starting with an explanation of the research setting ‘Recovery Care’ (RC) and a section about the theoretical framework underlying this research. The research design, participants and recruiting strategy will then be discussed followed by a procedures section describing the way the interviews were conducted. The data analysis will be explained followed by a discussion of ethics, confidentiality and a final section on recordings and transcriptions.

The research setting: ‘Recovery Care’

‘Recovery Care’ (RC) is a healthcare organisation in New Zealand which aims to support individuals who experience mental illness to live successfully and independently in the community. MHWs work alongside the client and their family/whānau in their journey to recovery where the support provided is dependent upon the needs, personal goals and challenges that are faced by the individual. The principles upon which support is provided are active participation, self-determination, hope, attitude, knowledge and community inclusion, where the overall goal is to make a positive change for the individual (Recovery Care, 2010).

RC has several offices throughout New Zealand in various districts, with teams ranging from 6 to 18 staff members. The teams are predominantly made up of women. Within each district the organisational structure can be identified by 3 main levels of staff. The MHW who works directly with clients, the Mental Health Leaders who are responsible for the teams, and finally higher management (Clinical, Regional and General Managers).

The role of a MHW is relatively diverse. Demands (tasks/accountabilities) such as supporting clients, clients’ families, liaising with other organisations, community support, managing resources, relationship management, reporting, workforce development, health, safety and quality are all part of a MHWs’ role. Generally staff travel to client homes, work on goals with clients either in the home or the community. RC also places great importance on staff to be result driven, team centred and quality focussed.

Theoretical framework underlying this research

Psychology has previously largely been about repairing damage and healing, and has concentrated on human functioning from a disease model approach (Seligman & Csikszentmihalyi, 2000). This model tends to neglect a thriving community and individual fulfilment. The theoretical framework underpinning this research is positive psychology. Positive psychology complements problem focussed psychology by also looking at what makes people’s lives fulfilling.

The purpose of this research is to look at both factors that hold workers and organisations back creating adverse effects and the valued positive experiences at the subjective, individual and group level. Positive psychology was chosen for this research as there is a need to acknowledge the good and the bad in organisations, more importantly how to support the organisation and employees to flourish, enhancing the experience of work and the need for fulfilment and meaning in life.

Research design

RC was used as a case study for this research project. The organisation itself was of interest as it contains MHWs who have diverse demands and experiences within their job roles. The several teams spread over a large area provides for a wide range of staff experiences of the organisation and specific demands of the job. This section will look at both the case study and qualitative research methods used for this research with a mention of their strengths and weaknesses. Detail about semi-structured interviewing is also mentioned.

A case study research method was used as it allows for rich, real-life, detailed qualitative information and has the ability to discover the experiences of a particular group of workers that are specific to their work context (Davey et al., 2014; McLeod, 2008). Case studies are about in-depth and holistic explanations of situations within a specific organisation (Harrison, Birks, Franklin, & Mills, 2017; McLeod, 2008; Zainal, 2007). A case study focusses on an issue, and the participants are there to provide insight into the issue, rather than looking at the individual creating the issue. Researching a specific organisation in depth allows more detail to emerge concerning that particular organisation as well as possible applications to similar cases.

Although there are many advantages to case studies, there has been some criticism of this type of research. Some major weaknesses and disadvantages of case studies have been identified in literature including the lack of generalizable results, a low number of participants, replication can be difficult, and problems of confidentiality (McLeod, 2008; Mariotto, Zanni, & Moraes, 2014). However Coolican (2009) argues that case studies are interesting and even if they are not quantifiable they can certainly be effective and valid. Case study methods are widely reported throughout literature and continue to be important in providing detailed insight into people's lives and experiences.

This research makes use of qualitative data as the purpose is to capture the subjective perspectives and experiences of MHWs. The majority of research on occupational stress, health and wellbeing utilises quantitative methods. Although the importance of quantitative methods is undeniable, this approach may ignore aspects that are unique to the worker and context (Mazzola, Schonfeld, & Spector, 2011). Using a qualitative approach ensures that the rewarding and challenging aspects for

the MHW at RC can be discovered that may be unique to the job and not necessarily pre-identified in literature (Davey et al., 2014). A major part of the appeal of qualitative methods is the ability to discover and identify new information, and be able to look at a variety of perspectives (Mazzola et al., 2011). Davey et al. (2014) suggest that qualitative research where the participants' own realities, understandings and collectively produced themes are explored has been found to be of particular use in investigating care work. As with case studies the major benefits of qualitative research are the ability to gather in depth data of the experiences of the participants. It is a more subjective and holistic way of doing research where the responses are rich and dynamic in nature, and the participants are active beings in the research process and in social interaction with the researcher (Coolican, 2009).

Qualitative research has also been linked to disadvantages, such as a lack of scientific rigour, possible researcher bias and difficulty of replication/generalisation (Chapple & Rogers, 1998). Qualitative research, unlike quantitative research is not automatically about cause and effect or proving anything, rather it is about people, their experiences and perceptions of the world (Coolican, 2009). Scientific rigour can then be debated when having qualitative findings that relay what is already mentioned in existing literature and theory. Bias and 'falsification of reality' are often mentioned however the use of participants' own interpretations, quotes and terms are kept central to the data and analysis of the findings which keeps the researcher from straying from the original experience (Coolican, 2009; Zainal, 2007). The participants' experiences only enhance the richness of the findings. Generalisation/replication of the research can be problematic however the purpose of qualitative research is to offer guidelines rather than make generalisations. Replication would be difficult for the current research as it is tailored to the organisation.

The qualitative data was collected through participants engaging in interviews which were relational and interactional in nature. Semi-structured interviewing means that the researcher has pre-prepared questions about the topics and themes that will be covered in the conversation. However this way of interviewing also allows the researcher to follow topical trajectories that come up in the conversation that are not necessarily in line with the prepared guide (Cohen & Crabtree, 2006). Using an open-ended semi-structured method of interviewing provides participants with more freedom to express their views (Cohen & Crabtree, 2006). This flexibility allows for more insight into the experiences of the MHWs in areas that appeared relevant to the research as it allows participants to respond how they want, from their personal experience (Mazzola et al., 2011).

Participants and recruiting

The twenty participants were Mental Health Workers who work for Recovery Care (RC). A participant detail sheet was filled out at the start of the interview process which included age range, gender, ethnicity, years of experience working in mental health services, highest qualification and time spent in current job. This was important to gain understanding of the group of MHWs as a whole.

Table 1: Participant details

Details	Range	Participants
AGE RANGE (years)	18-24	1
	25-34	3
	35-44	7
	45-54	5
	55-64	4
GENDER	Male	4
	Female	16
ETHNICITY	NZ Maori	5
	NZ European	10
	Other European	3
	Other	2
EXPERIENCE (month/years)	Under 1 year	1
	1-2 years	5
	2-4 years	7
	4-6 years	4
	10+ years	3
HIGHEST QUALIFICATION	Certificate	9
	Diploma	3
	Bachelor's Degree	5
	Post Graduate Dip	1
	Master's Degree	1
	NIL	1
TIME SPENT IN CURRENT JOB	Under 1 year	6
	1-2 years	4
	2-4 years	6
	4-6 years	4

Participants were recruited by asking permission from the organisation's general manager and regional managers to contact staff via their work emails. Permission was granted and staff were contacted via email with a participant information sheet explaining the scope and aim of the study. This ensured that participants were aware that this interview was about investigating the rewarding and challenging/stress-inducing aspects of working as a Mental Health Worker.

Participants who were interested were invited to make contact with the researcher by email to participate on a voluntary basis. A time and place to meet were arranged between staff member and researcher, which was comfortable, private and quiet. The General Manager and Regional Service Manager were not informed of which staff members participated (confidentiality), also staff had

been given permission to be interviewed during work time if this did not affect client care. By way of thanking and acknowledging participants of their contribution to research and time participants were offered a muffin for their involvement in the research.

Procedure

The interviews took place at a location and time agreed between the participant and researcher, some in the home of the participants, a quiet office space or public area (quiet cafe). The researcher started each interview with a short introduction thanking the participant for their interest in participating in the research and providing a short overview of how the interview would proceed: starting with going over the participant information sheet, rights, the consent form, participant detail sheet and finally the interview.

The participant and researcher went over the participant information sheet (see Appendix A) briefly, focussing on the purpose of the research and reading the rights aloud, participants were then asked if they had any questions. Then the consent form (see Appendix B), which included several items: whether the client had read the information sheet and had study details explained/questions answered, whether they agreed to have the interview sound recorded, whether they wished to have recordings returned to them, significant risk to participant or organisation to be disclosed to management confidentially, and agreeing to participation under the information sheet conditions. The interviews were tape-recorded with permission, and were returned to the participant if this was identified in the consent form (only one participant wanted their audio recording returned).

Tape-recording started once the consent sheet had been signed and the interview questions started. Recording instead of note-taking allows the researcher to focus on the information the participant provides, develop dialogue and rapport with the participant (Cohen & Crabtree, 2006). Participants were told to ask questions at any time throughout the interview process and to request the tape stopped or interview at any time if they felt need to.

The interviews took a minimum of 28 minutes and a maximum of 1 hour and 26 minutes to complete with an average time of 58 minutes.

The research questions (see Appendix C) were asked through semi-structured interviewing. The questions were divided up into sections: rewarding, stress (distress/eustress), coping, and strengths/weaknesses of the organisation. Straying from the guide was only done if the information appeared relevant to gain greater understanding of the topic. The researcher was able to prompt when necessary. At the end of the interview participants were asked if there was anything they wanted to add to the interview, thanked for their participation and the session was closed off.

Data analysis

The interview recordings were turned into audio files and put on the computer for transcription. Each recording was transcribed into a written text, a written record of the interview is important to make it simpler to engage with the information. Transcription was done in preparation of analysis where transcripts were then analysed using thematic analysis.

Thematic analysis involves looking for themes within and across transcripts, searching the data for key phrases and statements that capture recurring views and emerging patterns (Braun & Clarke, 2006; Coolican, 2009). Thematic analysis is a widely used analytic method of qualitative research as it is versatile and flexible, with the ability to adapt to different research aims (Braun & Clarke, 2006; Coolican, 2009).

Although thematic analysis has many advantages it is not without disadvantages. These disadvantages are more about researchers poorly conducting the analysis without there being a guide as to how the analysis should be carried out. Although Braun and Clarke (2006) describe thematic analysis to have theoretical freedom they also provide a more systematic plan with a six step guide to conduct the research in a more rigorous and deliberate way (Braun & Clarke, 2006). Step one starts with familiarisation with the data, through transcription and reading/noting down some points of interest. Step two: generating initial codes, the researcher did this by collecting the data relevant to the categories stress/eustress, reward, coping, weaknesses and strengths of the organisation and noting down themes within these categories that occurred several times, or themes that were out of the ordinary. Step three: searching for the themes was done by looking in depth within the categories and collating the themes. Step four was about reviewing themes, which were also put in a summary table. Step five was about refining, defining and naming the themes, looking at the specifics within each theme. The final step: producing the report by writing up the findings and analysis section. This includes extracts and relating evidence back to literature and the research question. This research followed the guidelines, however 'coding' was accomplished by writing down themes within each category in a summarised manner. Then linking these with other themes across the transcripts that related to the same category.

A summary table was created to gain oversight into the themes that arose (see Appendix D).

Ethics

In accordance with Massey University policy the researcher gained approval for this study from the Massey University Human Ethics Committee before commencing the research. This project was judged as low risk, and the responsibility of the ethical conduct laid with the researcher and supervisor.

Confidentiality

Pseudonyms were used in order to protect the identity of the organisation, staff, and ensure confidentiality. Also management was asked if they were satisfied with details about the case study organisation presented in the research. This ensured that the organisation will remain unidentifiable by anyone who reads the research documents.

Staff who participated are protected through the use of pseudonyms. Confidentiality is crucial as the interviews may contain sensitive information. There is a need to ensure that staff are not identifiable by other staff, management nor the audience.

Staff were invited to participate on a voluntary basis. An ethical consideration was to gain informed consent from participants. The consent form and information sheet for participants ensured they were informed about the research purpose, procedures, expected duration, right to decline/withdraw, asking questions at any time, be given a summary of findings, and limits of confidentiality. Informed consent for recording the interviews was obtained prior to starting the interviews and all participants agreed to the set-out statements.

Recordings and transcriptions

Keeping audio recordings and transcriptions confidential was a necessity. The audio recordings were kept in a secure place on a password protected laptop and used for research purposes only. The only people that had access to the audio recordings were the researcher and supervisor. The researcher transcribed the recordings after the interviews had taken place.

The recordings will be stored until the research project is finalised and thereafter erased (participants will be informed of a destruction date).

The transcriptions were kept under pseudonyms at all times on a password protected laptop. There will also be a backup of the transcriptions on a secure hard drive. The transcriptions were for research purposes only and were only to be viewed by the researcher and supervisor. Further usefulness, storage and destruction of transcriptions will be discussed upon finalising the research

project. Participants will be kept informed and are ultimately able to make the final decision regarding the transcripts.

4. FINDINGS

This chapter outlines the findings in order of 6 categories: rewards, eustress, distress, coping, organisational weaknesses and organisational strengths. The reward in the workplace section will explain three recurring themes: clients, making a difference, and meaningful work. The eustress section entails challenges, clients and competing demands as themes. Stress or distress is a section which explains the stressors that arose such as clients, management, change in management and managing competing demands. The following section is around coping in the workplace which has two themes, namely coping strategies and coping resources. Organisational weaknesses were explained by MHWs as management/change in management, pay, resources, training and staff turnover (intention). Finally the organisational strengths section describes job role and team/colleagues as the main two themes. The findings are explained with relevant quotes and excerpts from MHWs that best capture the collective themes that were expressed through the narratives.

Reward in the workplace

Rewarding work in the workplace is essential for job satisfaction, general health and wellbeing. Without some rewarding or joyous aspects it would be difficult to continue doing the same work each day. Rewards in the workplace, whether they are intrinsic or extrinsic to the individual often have positive effects. Workers who feel that their work is rewarding and meaningful are likely to be more motivated and report a greater sense of wellbeing (Steger, Dik, & Duffy, 2012). Likewise receiving rewards and incentives can provide workers with the motivation to strive, meet goals, and be more productive employees. The findings around reward showed three key themes that the majority of MHWs spoke of in their experiences when asked what they found rewarding in their work. The first theme explained below is the client. The second theme that emerged was to make a difference, and the final theme of meaningful work is about personal fulfilment, job satisfaction and the importance of recognition in a job. The findings will be closely outlined below with supporting evidence through carefully chosen segments and quotes to capture each theme as wholly as possible.

Clients

Providing client support is a large part of a MHW's job role. All 20 MHWs spoke of their clients as the most prominent and central rewarding aspect of their work. This 'client' theme included concepts relating to empowerment of the client, impacting the client's lives, the individuality of the client, autonomy, client outcomes (recovery) and overall it showed a client-centred approach. This is reflected by some of the following quotes.

"Seeing a person develop in their own ability to do things." (C)

"Most rewarding would be the client work, so being with the clients, helping them meet their goals, seeing progress. ... It means that we are working [on] empowering the client or the client empowering themselves, yea I think that their progress, that's rewarding." (T)

"Seeing a client progress ... watch them grow and become more confident." (S)

The client centred approach means that MHWs are committed to the purpose of the job, providing support for clients and putting the client's needs first.

Making a difference

MHWs described supporting and working with clients in their interview as capturing the most rewarding aspect of the work that they do with 18 out of 20 MHWs defining 'making a difference' and seeing progress/outcomes as important. Making a difference in this case included having an impact on someone, making a positive change and being a part of improving someone's life.

"even though I have only been here a short time the clients that I started working with, seeing where they were at and where they are now, seeing that positive change ... it's nice, hearing them say I was in such a dark place but now I feel like I can actually manage." (B)

"Working with a client and seeing them grow ... improve their lives to the point where we are no longer needed. ...seeing them grow in confidence. One in particular I think of is huge, the difference in the person I started working with to when I finished working with the person." (H)

MHWs spoke about making a difference in their clients' lives with passion, commitment and a genuine interest in their wellbeing. It appeared important for MHWs to see progress over time.

Meaningful work

Meaningful work was a recurring theme throughout MHWs' narratives. This suggested that they found meaningful work rewarding and important to have. Meaningfulness in a job can increase job satisfaction, longevity, motivation, individual development, performance, empowerment and personal fulfilment (Robinson, 2017). Meaningful work was expressed by the way MHWs felt:

"I think it's about doing a selfless thing and in return making you feel really good about yourself." (G)

"Rewarding work to me means I can feel satisfied at the end of the day by what I have done, or how I have helped someone ... I think you have got to be happy in your job, ... have a job that is meaningful." (L)

Meaningful work is described through the relationship between the MHW and client, where MHWs described recognition to be a major part of meaningfulness. Nine out of 20 MHWs described recognition directly through feedback, kind words and compliments from clients, their families or other organisations.

"Makes me feel valued and that I'm doing an all right job ... having that person thank you, being appreciated." (E)

"And you know they will give you the feedback and then we will realise they remember everything ... you supported me and I am really grateful to you. So those words really touch my heart and especially when the family appreciates our work and when we see them going back to school or back to work, ... and then you feel like you are doing something meaningful." (Q)

"When I get feedback that I have done the job well then that makes my heart sing." (D)

These experiences point out that having a meaningful job and receiving positive feedback enriches the relationship between MHW and client, but also is personally satisfying on an individual level for MHWs. This aids wellbeing, job continuity and meaningfulness where 19 out of 20 MHWs expressed that having a meaningful/rewarding/joyful job was important to them otherwise they wouldn't be doing this type of work.

"If I wasn't enjoying it I wouldn't do it." (R)

MHWs described their work as a big reason to get up in the morning, a reason to come to work each day, to feel good about oneself and as a motivating factor.

The analysis of the themes in the rewarding category suggest that many MHWs felt that the most rewarding aspect was supporting a client, making a difference and seeing positive progress. This in combination with recognition gave MHWs a sense of meaningfulness.

Occupational eustress (positive stress)

Positive stress also called eustress is a concept not necessarily widely known or acknowledged in the workplace. Seligman and Csikszentmihalyi (2000) suggest that stressful and challenging demands in a job can produce positive stress, which could be beneficial for both employees and the organisation. Experiencing positive stress can increase employee motivation, productivity and be beneficial for the health and wellbeing of employees and the organisation. MHWs were questioned around positive stress after a brief introduction to the concept. This introduction was around perceiving something

as a challenge rather than a threat, which is stressful but can elicit positive affect. The themes that emerged from the interview were: challenges, clients and competing demands.

Challenges

MHWs were asked to describe their own experience of positive stress. Several MHWs (50%) had not heard of the concept of eustress or thought about it previous to the introduction at the time of the interview.

The notion of a 'challenge' often arose out of the way MHWs spoke about positive stress:

"Positive stress is making yourself more productive and there are better ideas that come out of your mind as a result. I perceive it as more of a challenge positively." (M)

(O) goes on to say the following:

"When you said it now, when you first asked me it was all negative, I didn't think I wasn't thinking about positive stress. But I totally understand it you know and yes there is a lot of stress that is positive. I just don't think of the word stress as being positive it's more the word challenge." (O)

With the idea of challenges as part of the eustress concept 15 out of 20 MHWs expressed positive affect which indicated eustress as shown in the following excerpts:

"Positive stress to me looks like the challenge I wanted, I might say this is a bit stressful but I want the answer. ... I get euphoric about that, positive stress is not really a bad thing. I think we need some stress." (D)

"You feel good, in control, capable, that you can do anything if you put your mind to it." (H)

"Positive stress ... like you have actually achieved or accomplished, got closer to the goal post." (C)

Certain psychological states and behaviours such as meaningfulness, motivation, hope, engagement, manageability and forgiveness behaviours were evident and suggestive of some form of eustress expressed by MHWs which were mainly around clients and competing demands in the workplace.

Clients

Just over half (12 out of 20) of the MHWs mentioned clients as a theme in the workplace that elicited aspects of eustress. MHWs state that aspects around clients such as challenging behaviours, communication with clients, challenging situations and the ability to support clients in a way that is

beneficial are found to be positive stressors. The following quote is indicative of how MHWs spoke about eustress and clients:

"When I deal with difficult situations and clients, I feel stressed and it becomes a positive feeling for me when I see the outcome and I become more confident to deal with it." (Q)

Competing demands

Organisational demands such as tasks and deadlines, although often seen as distressing can also be seen as motivators and can enhance productivity. Forty percent of MHWs stated that they did indeed find documentation, deadlines and targets challenging aspects which were seen as positively stressful.

"If it's stressing me and it's work related beating a deadline, I just have to do it." (M)

"Paperwork is a positive stress, getting things done on time or being able to accomplish weekly targets." (E)

Other organisational demands such as communication with managers and being in meetings were also found positively stressful by 20% of MHWs.

"Coaching, ... nerve wrecking meeting with the new boss, but there is always something good that comes out of it." (I)

"Nerves, ... you are challenged ... You know you want to do it but you kind of put it off because it's a bit harder. With the manager wording things in the right way, speaking at meetings." (O)

Throughout the quotes several signs of eustress arose, such as: manageability, positive affect and active engagement. Although MHWs were prepared to use the concept of eustress, describe possible eustress experiences and stated they would be interested in training or learning more about positive stress in the workplace it was still a vague concept to most. Many MHWs still see stress as distressing and some felt that perhaps the word 'stress' was not suitable to explain the concept, nor that positive stress would be something to necessarily promote in the workplace.

Occupational stress (distress)

Literature has emphasised 'ill' health and 'negative' emotions when it comes to stress in the workplace (Palmer, 1989). Employees who suffer from stress in the workplace are found to be less

productive, less motivated and generally unhappy in their job. To be able to manage workplace stress one must first investigate which stressors are impacting employees.

This section around occupational stress asked MHWs about stressful experiences in their job and how these impacted them. The following themes emerged from the findings: stress as distress, clients, management, change in management and managing competing demands.

Stress as distress

Stress is often seen in a negative light which was evident from the way MHWs described stress. MHWs were asked about stress and particularly stress in the workplace, where 19 out of 20 MHWs described a negative perception around an imbalance, inability to cope, not being in control, and impaired functioning. The following quotes draw attention to the way MHWs perceive stress in a general sense.

“Feeling tense I guess. Exhausted. And things aren’t going right.” (G)

“Being in a situation that you have no control over or a negative unwanted situation.” (I)

“I’ll get anxious and overwhelmed and just feel like I can’t cope and then I might have to talk to somebody else about it.” (D)

Seventy-five percent of MHWs mentioned stress to have had negative effects not only on their physical/mental health but also on their views/values at work.

“Stress has made me angry, stress has made me cry. Stress has affected me physically where I don’t eat.” (P)

“I don’t feel like I have the self-esteem that I used to have. I don’t feel like I have the up and go to come to work every day now.” (K)

The way MHWs described stress suggests that it elicits negative emotions and behaviours, which impact the employees’ and organisation’s health and wellbeing.

Clients

Literature around occupational stress largely focusses on negative demands in the workplace named stressors. MHWs were asked what they found most stressful in their work. The findings suggest that ‘clients’ are not only one of the major rewards of the job, but for many also one of the most stressful demands. The majority of MHWs, 70%, found it stressful to engage with clients presenting with challenging and unpredictable behaviours as shown through the following excerpts:

"When clients are argumentative that was stressful. ... this client [wouldn't] stop and would go after me everywhere I go, and trying to still carry on with the same repetitive argumentative talking.

Which is pointless, which is irrelevant. Was just stressful." (M)

"Yea the client that I was talking about today, she is a little bit unpredictable with what she is going to say. Even what she is going to do, and you are out in the community with her. I don't feel unsafe, it's more around just the uncertainty and it's a bit like walking on egg shells with her. You have got to be careful with what you say and yea that can be a little stressful." (O)

Like (O) also (D) mentions difficulty with stigma around mental health clients in public areas:

"Most stressful are client issues, and I have had a few of them. ... Being asked for identification at eftpos machines. I have a couple of clients, they look different sadly to the public so that is tricky in shops so that can be stressful." (D)

Several MHWs (7 out of 20) found difficulty in getting through to clients where clients were seemingly unable to make changes in their lives, and had an inability to comprehend certain aspects and move forward.

"Sometimes things are stressful when you have a client that is constantly asking for the same thing over and over all the time, you know when you have to reiterate yourself quite often." (S)

"One of my clients has got depression and is very negative which [is] hard because you want to be optimistic and happy ... and really there is nothing she can do about it but you feel like you are repeating stuff again or changing the subject or let her have a rant and try move on to something else." (H)

As shown from the above excerpts working with clients was stressful in a way which appeared to impact the MHWs emotionally. The inability to support clients to make positive changes and to make a difference was mentioned to be stressful and frustrating.

Management

Management has great responsibility in the functioning of an organisation and plays a major role in the wellbeing of employees. Within this case study management and managerial actions were mostly mentioned in the stress experiences described by MHWs. Many MHWs (65%) identified management as a negative stressor somewhere in their interviews.

"I think the one stressful thing ... it is negative that there has been a lot of organisational mismanagement over the past particularly couple of years. It felt different when I first came here.

When I was first employed everything was structured and things were in place. I feel like it has just unravelled and nobody has caught up, and so everything is mismanaged at the moment.” (O)

For some it was about management lacking in their presence/support, communication and organisation:

“I am a planner, ... and the biggest stress for me in the workplace is having to work with a management person who does not plan.” (C)

“Suppose one of the most stressful things was appointments made by management, twice now and they didn’t turn up. Which left me to go [to] the meeting on my own, I had no preparation, no brief, no nothing.” (D)

“We haven’t had (manager) around a lot, she has been managing (town) as well so that can be stressful because you feel like you don’t have the support, you can’t just come into the office and say I need help with this client.” (B)

Other MHWs felt that managers were not meeting their job role duties and responsibilities, creating negativity due to broken/empty promises and a lack of consistency.

“You got pissed off clients because your boss hasn’t answered her phone. Because you are the front person you cop it first, that makes it negative.” (R)

MHWs appeared to have difficulty coping with certain aspects of management appears to interfere with their ability to perform their job and feel supported in their role. These are indicators of a lack of trust in management, cynicism towards management and a negative workplace culture.

Change in management

Change can be a time of positive improvement and rejuvenation within an organisation. Although organisational change is meant to be a positive undertaking it can be difficult for employees, managers and the overall organisation to cope with, causing adverse effects. This section on change is closely linked with management change as a stressor. Around 40% of MHWs mentioned change as a distressing factor, in particular a high turnover of management within the company, which created repeated changes in organisational policies and procedures:

“You have all these great ideas sounded out, hey if it all happened it would be really good, then there is another change of management, another one, and that person will put everything on hold, and in the meantime staff morale just drops down. You have been pumped to this is going to happen. None of it happens. That’s another stress factor.” (C)

"I have had to repeat myself from management to management to management to 6 or 7 different people. And so I have repeated my story several times because of that and am still on the same rate of pay. So I find that massively stressful, hugely stressful and in fact I have been signed off with stress leave (multiple times) since I have worked here." (J)

High management turnover is experienced as difficult by MHWs due to the changes this created in the workplace. This leads to cynical thinking, distrust and disregard about management and the job which was well explained by (R) through the following quote:

"Doesn't matter who my boss is, it's [going to] be someone else in another 12 months anyway. Give or take." (R)

It appears that consistency is important and that the management turnover with additional organisational changes suggests that change is not well received by employees.

Managing competing demands

Time management is important in most jobs and a skill that enables an individual to use their time productively and effectively. Considering the nature of the job of MHWs, with scheduling visits, prioritising high needs and organisational demands it appears to be a crucial skill to have. Several MHWs (7 out of 20) mentioned the concept of 'time' specifically and this impacting the work that they do with clients, as shown in the following excerpts.

"It's when I know I have only got a certain amount of time to see clients in and I feel like I haven't got enough time to give everyone what they need. So, things like when there is a public holiday and you have only 4 days to see your clients in I feel like I need to still see everyone within those 4 days when it would normally take me 5 days." (B)

"Like today like I finished with my client, first time I met them, like to keep my meeting short at the start, can be uncomfortable. Haven't stopped since 8.30 this morning. ... [I] sometimes pick my kids up late, pretty stressful." (G)

At RC it appears that many MHWs find the expectations from the organisation difficult where there seems to be a misfit between what MHWs are able to do and what the organisation expects from them.

Overall the stressors described by MHWs were clients, management, change in management and competing demands which aligns with other findings in occupational stress literature.

Coping with stress in the workplace

Coping strategies in the workplace are essential and highly individual to a person. It is important to investigate whether MHWs describe their coping experiences as adaptive or maladaptive and which coping resources are available in the workplace. This could aid the organisation in being able to support their staff in specific areas of need and acknowledging which coping resources are necessary to create a healthier workforce. The themes that arose within the coping category were coping strategies and coping resources.

Coping strategies

Over half of MHWs (60%) listed that they coped with stress by seeking social support from colleagues/friends/family for advice or offloading about their stress.

"Just suck it up. And whinge later, I am not going to call it de-escalating but you ring your colleague or someone and just vent." (F)

Acknowledging that things were not going right and needing to take some time to look after oneself was highlighted in the experiences of 50% MHWs who described self-care activities in their descriptions of coping with stress (25% solely described activities and 25% described a combination of activities and social support). Self-care and activities such as exercise, reading, music, fresh air and support were described as most important when attempting to cope with stress as shown in the following narratives:

"Look at the light at the end of the tunnel. Always plan things on the weekend that nourish me as a person." (G)

"I talk a lot, so yeah I offload a lot. Exercise. ... if I have had a particularly weird day I will unwind with a wine. ... being aware that I am stressed out so I want to make sure I go to the gym, go to the hot pool, or Friday night have a wine, and just being mindful. I recognise when I am stressed and I try put things in place to deal with it. So it's not overwhelming me." (T)

From all 20 MHWs only 7 described their coping strategy to include a combination of coping strategies: problem solving, social support and activities.

"If I am really stressed out and having to solve a problem I will talk to someone about it. I just think, don't panic, be calm. ... I just take a minute and take a couple of breaths and then look at everything and how it's playing out and then go and deal with it. Evaluate the situation before you go head first into it." (S)

"I will talk to my colleagues about the stress and also to my reporting person. I sometimes try to talk to myself and think about it and find the positives and make me more confident by thinking how wonderfully I dealt with it. I will watch movies, have nice food, go for an outing with family, pray, exercise etc." (Q)

Seeking social support, avoidance, releasing pent up emotion (e.g. through exercise), distracting oneself with activities are all part of emotion focussed coping. In total 95% of MHWs stated they used some form of emotion focussed coping which aims to ameliorate the negative emotions that are associated with the problem (Folkman & Moskowitz, 2004). This does not necessarily mean each emotion focussed coping strategy is appropriate to managing stress. Emotion focussed coping mechanisms such as avoidance or distancing oneself may be maladaptive in the long run. Problem focussed coping could be seen as more adaptive in the long term as one would be dealing directly with the problem and looks into steps and a plan of action. Positive cognitive restructuring was also evident by some suggesting humour, acceptance of the problem and positively reinterpretation of the problem.

"Just try to tell myself do the best that you can, deal with what you have got to deal with, and if it doesn't work out how it's supposed to or how it's not as long as you have done the best you can and dealt with it the best you can then there really is nothing else you can do." (H)

Coping resources

One of the questions around coping in the workplace was about how staff felt about support and resources being offered in the workplace to cope with stress. The overall conception appears to be that the majority of trainings and workshops offered by the organisation are aimed at client support and not directed at MHWs' wellbeing in the workplace or training around self-care, coping and stress.

"All training we have always had has been about the client. I have not had any training at all about me, ... if we could look after staff people would want to be here, attitudes would be different." (C)

"Training is not about your personal stress, that's about dealing with clients. So about dealing with our personal stress yea that is what supervision, the training is that we got someone to talk to I guess." (O)

Although staff were negative about management and saw management (especially support) as a negative stressor 45% did mention that their manager, supervision and/or coaching were an available avenue to access when in need.

"There is always support from management. If there is any stressful event especially I mean we are dealing with clients so definitely there is support from management." (M)

This is highly contradictory to previous findings around management and will be touched upon in the discussing section.

The 75% of MHWs did mention the EAP (Employee Assistance Programme) being offered as a support service. This service appeared underutilised by staff, solely 2 MHWs out of 20 had used the service with one MHW having a positive experience. Reasons for not using EAP varied between MHWs' negative views of counselling, not having needed to use it, not knowing where to find information about EAP or how to use EAP or a general disinterest in using EAP.

"EAP is very good on paper. Like on paper I could say my boss is abusing me, bullying me which has happened, and I can go to EAP but EAP don't actually report the case back to anybody they are only there to listen so I could really go to a rock and talk to a rock. It doesn't go back to the manager to reflect upon their findings." (J)

"There is nothing available at work. Oh no EAP but I don't use it. It's a waste of time to me, they are only going to tell me what I already know, I know how to deal with stuff, it's just so (organisation) can get a mention. I suppose everybody said EAP first." (F)

"They offered me counselling and I declined. Between my study, my (children) and my (other appointments) and my work you think I have time to see a f...ing counsellor." (I)

It appears that although MHWs work in mental health they are reluctant to use the health services available to them.

Organisational weaknesses

Organisations can take many actions to create a healthier workforce and a stimulating environment for staff. It is important to take into account what MHWs themselves find difficult and would like to see changed in their work environment and their organisation. This can pinpoint to areas that could be reviewed by the organisation. MHWs mentioned several weaknesses, where some themes merged with the stress-inducing areas mentioned previously, these findings will be mentioned briefly. The overall findings resulted in the following themes: management/change in management, pay, resources, training and turnover intention.

Management/change in management

Management was mentioned by 14 out of 20 MHWs in their interviews as a weakness in the organisation, which also included the lack of stability in management (change). These themes were also previously raised as found to be stress-inducing by MHWs. This confirms that the magnitude of problems with management, a high turnover in management and the changes this brings to the workplace and employees are found to be problematic.

"I really think the management is the biggest issue for our office and I think from the sound of things it always has been." (T)

Several MHWs expressed more negative emotions around management in this weakness section and the impact this made upon the way they felt.

"I really don't have any respect for middle management or even upper management. They are nameless, faceless entities at the end of an email." (R)

"Consistent change in managers. We are being told how to do our job by a variety of people at different points in time. Feel annoyed, frustrated, embarrassed when relaying this to clients." (I)

"I haven't got confidence in management because it keeps changing. You can think you are doing the right thing because you were and by the end of the week you aren't because it changed." (C)

"I think being firm with policies, sticking to policies because it changes which confuses staff." (M)

Change in the workplace appears to have a negative impact due to the high level of inconsistency. The quotes show that around 70% of the interviewed MHWs found management to be an organisational weakness.

Pay

Seventy percent of MHWs expressed that pay, in particular low wages were not consistent with the job and responsibility MHWs have on a day to day basis and saw this as an organisational weakness. Some even stated that more pay could increase worker happiness/productivity.

"To make me feel better is to be paid appropriately.... You need to put wages in there. We are the lowest paid throughout the organisations, yet we are doing the jobs of let's say what a keyworker does. We assess their mental health, assess whether they need to go into the ward making those calls you know there is a lot on our plate and I don't think we are paid appropriately." (F)

"They don't pay people good money, they are f...ing lucky they got me (and other workers) I can't believe we have stuck around as long as we have. It's a stepping stone company and they openly acknowledged it, step up to bigger and brighter things." (R)

Although barely any MHWs mentioned pay as a stressor it did arise as a theme in organisational weaknesses by the majority of MHWs which suggests that it is indeed an issue for staff.

Resources

Several MHWs (9 out of 20) mentioned a lack of resources in the workplace:

"Probably that it is still paper based, and a lot of time is spent writing out notes and then having to hole punch them and then go and find the file and save them and every time I want to do anything we have to photo copy it 3 times, 1 for the person, one for that person. The fact that we have got a tiny little office and there is so many of us and we are all trying to use 2 computers so when you do get in the office you might have 10 or 15 min to do something and there is someone on the computer ... Feel like you have to fight for resources." (B)

"We are so poorly resourced, I mean the cars come out today for Christ sake, it's been 6 months. We got no tablet, no phone you know we are poorly resourced." (D)

"We would be operating so much better and efficiently if we had tablets. What value do they put on us as employees. We are trying our best for the clients so and for the business but it has got to be reciprocated." (U)

Resources appear to be quite important for several MHWs to be able to work more efficiently which could lead to better productivity and an increase in motivation. Resource availability can result in MHWs feeling more valued as employees as it could suggest that the organisation is making an investment into their staff.

Training

Fifty five percent of MHWs mentioned training as an organisational weakness. Whether this was about the initial induction training, ongoing training or personal development MHWs wanted more and better training.

"What we need for personal development. Because they get you doing the same courses over and over and over." (F)

"I think training more than anything would benefit the organisation. Wouldn't an organisation want people that are properly trained? I mean there definitely seems to be resistance in providing that training I mean we use about 20% of the training budget. Why are they resisting, why are they not providing the training they have a budget for. It's almost like they don't want good workers on the ground. I think that there is a fear that they are investing in people that are going to leave. But where does that come from. Ideally you would offer people the training and they wouldn't want to leave. That comes with the whole culture I suppose of the organisation." (T)

Training, similar to resources, is important for job longevity, for personal development and job satisfaction.

Staff turnover (intention)

An additional theme that arose as an organisational weakness is that there is a likelihood that many MHWs will leave their job in the near future: turnover intention (Green et al., 2013). Just over a third of MHWs (7 out of 20) said they would leave for better pay. Including this figure were also participants who were already looking at other opportunities or were adamant they were not in the job long term.

"I recognise that it is not going to get better, not at the moment anyway and I am looking for other opportunities." (T)

"This is not well paid, so if I was to find work that was better paid, yes I would certainly apply and try." (C)

"I can't wait now to get out of here. When you look at your emails it's like three people resign every week, it's like that all the time, I have never been through a week where no one has resigned." (K)

This is important to address specifically because it could suggest that the negative stressors and other organisational weaknesses impact the MHWs' decision to leave. Pay again appeared to be quite important for MHWs within this theme.

Organisational strengths

It is important to find out what MHWs enjoy and appreciate about their job and organisation as this may pinpoint some areas that are working particularly well for the organisation and staff.

Acknowledging the organisational strengths MHWs experience can be beneficial in finding out what is meaningful, positive and which areas provide job satisfaction. This in turn promotes motivation, productivity and a sense of wellbeing. The two themes that arose were the job aspects and team/colleagues.

Job aspects

MHWs mentioned organisational strengths and joyful areas in their job around autonomy, flexibility, team/colleagues, community work and diversity.

Out of the 20 MHWs about 30% spoke about autonomy and flexibility being important:

"For me I like being able to manage my own time, so I can you know I work with my clients to work out times that suit them, it's flexible." (B)

"They give you the freedom and space to be able to do what you think is best. That is the main thing." (P)

There was a 70% indication from MHWs that it was important to be able to work in the community with other organisations and clients in combination with diversity in the workplace. Community work and diversity in one's day gave MHWs a positive outlook.

"No day is the same, I like being able to get out and about in the community. And do all these different things with the clients. I like being able to travel and not being stuck in an office kind of thing. Yea I like travelling." (G)

"Location, it's central, close to our referral bases, close to communities. Just an ideal location. Working in the community because I'm free, not stuck in an office, not office bound. Getting people out and about, getting the clients out in the community or fresh air." (E)

The experiences imply that it is beneficial and important for MHWs to have aspects in their job that they enjoy, which can be a buffer against stress and organisational weaknesses.

Team/colleagues

Several MHWs (45%) spoke about the team and their colleagues as a strength of the organisation and a favourite aspect of the job.

"Yea I think that the major strength are the people on the front line, are the workers. They are what keeps this place in business." (T)

"We are a good team here, a tight team we all get on really well. We can all say what we want and there are no boundaries or barriers." (U)

It is important for employees to enjoy their colleagues as it is human nature to want to have trusting and meaningful relationships in the workplace. Additionally social support is a major component in coping with distressing demands in the workplace.

The findings indicate that there are several stress-inducing and rewarding aspects in the workplace that MHWs described in their experiences. By looking at the common stressors that arose such as clients, management, change in management and competing demands there is an opportunity to address these stressors and adverse effects they have created. The findings also suggest several rewarding/eustress and joyful areas MHWs find in their job, namely the clients, making a difference, meaningful work, competing demands, job aspects and colleagues/team. These positive aspects of the job suggest that these areas are beneficial for fulfilment, job satisfaction, meaning and productivity. Taking on both problem focused and positive psychology standpoints enables the findings to be significant in providing recommendations for RC which benefit both employee and organisation. Further analysis in the discussion chapter will reconnect the findings with literature and explain the significance.

5. DISCUSSION

The discussion chapter will describe and interpret the significance of the findings in light of what is already known about stress and reward in the workplace. Adding to this will be explanations of new insights or understandings about reward, eustress and distress specific to MHWs working at RC. This will then lead into recommendations being made for RC, limitations, future research and the conclusion.

Discussion

The discussion illustrates the main themes that MHWs highlighted in their interviews. Reward, clients, management and change in management will be discussed with thereafter sections on managing competing demands, resources (human resource orientation), support and job aspects.

Reward

In this case study the findings indicate that MHWs link clients, making a difference and meaningful work with being most rewarding in their work. This section shows connections between types of reward, motivation and positive affect in the workplace.

MHWs' descriptions of reward in the workplace were all non-monetary. This complements Thomas' (2009) article which states that a considerable value is being placed on non-monetary rewards and motivations rather than solely financial gains. For MHWs the rewards appear to be about the experience itself, direct involvement and immediate rewards. According to Woolley and Fishbach's (2016) research this is important for longevity, long term goals and the pursuit of an activity. This is important as working in mental health care can be emotionally exhausting, often lacks in positive outcomes and is disheartening when there is an inability to meet the client's needs (Acker, 2011). However monetary reward was likely not mentioned was due to a lack of pay. The findings indicate that many MHWs experienced negative affect (feeling undervalued, not recognised/acknowledged) around their level of pay and described this as a weakness and reason for wanting to leave the organisation. This highlights that monetary reward still has value and is seen as an important motivator and reward for MHWs at RC.

MHWs also imply that large parts of their rewarding experiences are intrinsic. These experiences are self-initiated satisfactions MHWs get from aspects of their work with clients; making a difference, positive affect, personal satisfaction and meaningfulness. This suggests that motivation for MHWs appears to be more of an internal motivational push rather than an external pull as external rewards are limited. Motivation is important in a job as it provides an element of continuation and stimulates

behaviours that are beneficial for the workers themselves and the organisation. The most significant finding around reward in the workplace is that although MHWs mentioned some external rewards such as feedback/compliments/recognition from clients/family/other organisations there is a lack of organisational reward. MHWs did not mention the organisation in the provision of external rewards which plays a major role in the workplace culture at RC. This is discussed further in the ‘management’ section.

Clients

The theme of ‘clients’ arose in several areas of the research, namely as a rewarding aspect of the job and having elements of eustress and distress which will be discussed below.

MHWs indicated that they found working with clients the most rewarding aspect of their job which was directly linked with making a difference. This highlights the satisfaction one gets from making a positive change in someone’s life which then leads to meaningful work. Bowden’s et al. (2015) research confirms this finding which entails that rewarding aspects such as personal satisfaction, making a difference and engaging with clients enhances employee motivation, which contributes to health, happiness and positive experiences in the workplace for both MHWs and the organisation. Steger et al. (2012) add that people want their work to mean something. To have a job that serves some greater communal or social good then relates to the person possessing desirable qualities to the organisation, reports of positive mental health and meaningfulness. The findings suggest that it is likely that MHWs primary motivation is the value they place on helping their clients, the positive feelings, eustress, sense of fulfillment and intrinsic rewards experienced from supporting clients and seeing the clients’ progress in their lives.

Although working with clients appears mostly rewarding and positive several MHWs also indicated working with clients to be distressing in some instances. The Yerkes Dodson Law can be used to offer an explanation. A certain amount of stress can be beneficial, enhancing performance and motivation, which could be seen in the challenging demands around clients (Le Fevre, Matheny, & Kolt, 2003). However when stress is too great (or little) then these demands can become distressing. This could explain why some demands, such as clients are described by MHWs as rewarding and positively stressful but can also be found to be distressing. Research in mental health care work has often acknowledged clients as a main stressor for staff (Acker, 2011; Astvik & Melin, 2012; Fothergill et al., 2004). Rossler (2012) suggests this could partially be because MHWs in particular have demanding relationships with clients and challenging interaction which can also stem from the

stigma associated with the mental health profession. MHWs' experiences in the workplace confirmed this.

The significance of the findings 'clients' as a major component in the workplace. MHWs appear to put value into their work with clients which then defines a large part of why they still work in mental health. One reason for 'client' being a recurring theme in different categories, apart from it being most at the centre of a MHW's work, could be explained by looking at the Effort-Reward Theory. MHWs put a lot of effort, emotion, time and thought into their interactions with clients. When these have positive outcomes such as progress it facilitates feelings of reward. However when seeing a lack of improvement/progress/change it can cause feelings of distress and frustration. Another way of linking these findings with relevant literature is that it could be about how the demand (client) at the time is perceived, as a challenge or a threat. This relates back to Lazarus's Transactional Model of Stress, and opens up the possibility of both perceptions of eustress and distress. This implies that perception is very important, and perhaps also a lack of positive experiences/emotions could influence the MHWs' perceptions around clients. Therefore this is an area that can, with additional support, training and other resources be enhanced to increase the positive experiences MHWs have with their clients.

Management

Management is important in the functioning of an organisation and its employees. Management was a theme mentioned by MHWs as distressing, a weakness and area of difficulty. This section will focus on the significance of the findings around management as a theme and any new understandings around MHWs and management in relation to RC.

Davey et al., (2014) argue that organisational factors are often more of a concern and cause for distress than patient factors. Management is one of the key organisational factors that consistently arose throughout the research. MHWs mentioned that management lacks in their presence/support, consistency, communication and organisation. With broken promises, an inability to meet job role duties and responsibilities which implies a form of mismanagement. Symptoms of mismanagement were portrayed by MHWs through negative affect such as cynicism, disrespect and disregard for management and the organisation, a lack of trust, low morale and an overall negative tone when mentioning management. Hill (2003) suggests that distress and low morale symptoms are evident of an unhealthy work environment. There appear to be clear indications that management plays a large

role in affecting the attitudes, beliefs and values of MHWs which therefore affect the physical and mental well-being of MHWs.

A significant finding mentioned in the reward section was around the lack of reference to monetary and non-monetary rewards and incentives directly relating to the organisation and management. Literature suggests that employees who receive rewards and recognition from management perform better (Nelson, 2016). However when recognition and rewards only include client factors and aspects relating directly to the client it may suggest that the organisation is not invested in creating external incentives for MHWs to be more motivated, productive and happy in their jobs. This is consistent with Astvik and Melin's (2012) article which suggests that an important reason for employees' (working in human services) intention to leave is due to a lack of management interest in the health and wellbeing of their workers. Non-monetary rewards such as recognition for a job well done, respect and support from management can play a large role in sourcing eustress and reducing distress, which affect job satisfaction and a desire to stay with the organisation (Blaug et al., 2007; Palmer et al., 2004). Cartwright and Holmes (2006) link a lack of reward with feelings of inefficacy, meaninglessness and cynicism which is evident in MHWs' experiences. When stress arises in the workplace management is most important in taking steps towards solving an issue. However when management is lacking in competence, consistency and support (MHWs views) this can be difficult.

The significance in this finding for RC is that it creates an opportunity for remediation. The majority of MHWs imply that they have concerns around management. In addition 50% of MHWs have worked at RC less than 2 years which could also be a symptom of high employee turnover and possible mismanagement. This sheds light upon the need for re-evaluating management, management styles, including organisational incentives, and the importance of non-monetary reward through managerial actions toward employees.

Change in management

Change in management, or in this case a high turnover of management, was another theme that arose multiple times throughout the interviews as a weakness and negative stressor. This section will focus on the significance of this finding in relation to relevant literature and what this finding means for MHWs working at RC.

The findings indicate that several MHWs found a change in management at RC to be problematic and distressing due to uncertainty and inconsistencies this brought. A seemingly high turnover in management at RC influences the work environment, affecting policies, procedures, processes and

the way MHWs are able to perform tasks in the workplace. Green et al. (2013) explain that a high turnover is mostly related to job or organisational factors which means that there could be stress at the managerial level. Change is also among the most common stressors identified in occupational stress research (Palmer et al., 2004). Palmer et al. (2004) and Blaug et al. (2007) state that change in the workplace can put pressure on workers and have negative impacts, which is indeed what appears to be evident at RC. An implication of this negative work environment is that it can lead to negative consequences at an organisational level also, for example low quality work and outcomes with clients (Green et al., 2013).

The findings demonstrate a depth of issues around management and change in the workplace. It also implies that RC is showing symptoms of organisational and individual stress, therefore it can be an unhealthy environment for MHWs to work in. Research has shown that the behaviour of management/supervisors affects employee mental well-being more than factors such as work events, life and stress (Gilbreath & Benson, 2004). Gilbreath and Benson (2004) move on to explain that the way employees are supervised can be a viable way to improve employee wellbeing and the psychosocial work environment. The findings point towards investigating the reason for a seemingly high management turnover at RC, whether there may be a mismatch between job roles and ability to perform duties. Perhaps see which style of management is most suitable for the organisation and employees, and look into the way change is conveyed to staff. At this point in time there appears to be a negative culture at RC, with resentment from several staff toward management and organisation.

Managing competing demands

Managing competing demands was a theme mentioned by several MHWs in both the eustress and distress categories of the research. The significance of these findings lies in the concept of a demand being able to be perceived both as positively stressful and negatively stressful but it also acknowledges areas of motivation and sources of concern.

Several MHWs perceive targets, deadlines and documentation in the workplace as challenging, motivating and positive which aligns with eustress symptoms. This is an encouraging finding as it highlights that employees can be stimulated and motivated by different types of competing demands, which is consistent with current literature around eustress (Hargrove et al., 2013; Nelson & Simmons, 2003). This is significant in the sense that an organisation can then use the more positive stressors in combination with rewards or joyful aspect of the job to create a more

stimulating and engaging workplace environment. However as the Yerkes Dodson Law explains too much of a challenge can create distress rather than positive stress, therefore this is a sensitive area which needs to be approached with caution.

Managing competing demands such as 'time to meet organisational demands and client needs' were also expressed by several MHWs throughout their interviews as a distressing theme. This appears consistent with Blaug et al. (2007) and Palmer's et al. (2004) research which states that client and organisational needs are demands in the workplace placed upon the worker, which can be perceived as exceeding the capacity and resources to respond effectively. A lack of time was mentioned by several MHWs which put another constraint on employees suggestive of a premise for loss of control and an inability to cope (Astvik & Melin, 2012; Fothergill et al., 2004). Leka, Griffiths and Cox (2004) suggest that job design, poor work organisation and work systems can be a cause of distress. One possibility for RC is that MHWs have a high case load or work overload, which is often mentioned as a stressor in organisational stress literature concerning human service workers (Acker, 2011; Thomas, 2009). MHWs could be having difficulty managing their schedules as it appears to be a relative autonomous role with job control. Also there could be a misfit between the expectations the organisation places upon the MHWs and the job role or the ability to perform the tasks within the designated time (Person-Environment Fit Theory) (Le Fevre et al., 2003).

Overall the demands in a workplace can have both positive and negative premises for workers. It is necessary to find a way to balance and manage the organisational demands with the environment and staff capabilities.

Resources (human resource orientation)

Inadequate resources and a lack of training are often found in occupational literature as areas of stress (Acker, 2011; Fothergill et al., 2004). In this research however MHWs mentioned resources/training more as weaknesses within the organisation which also impact on MHWs ability to cope in the workplace.

The findings show that several MHWs suggested different resources, such as technology, tablets, phones, training, and personal development as important for greater productivity and better work flow. This is in line with existing literature which indicates that learning opportunities and managing resources are important for the improvement of employee performance, job growth and career development (James et al., 2015). For any employee to have the maximal resource availability,

whether these be practical, personal or emotional resources, enables them to do a more efficient job which is important in the prevention and amelioration of stress and job burnout (Acker, 2011; Thomas, 2009). Maximising staff resources also implies that an organisation and management are interested in the health and wellbeing of their workers, making staff feel more valued and respected (Astvik & Melin, 2012).

Another significant finding was specifically around one personal resource offered at RC, namely EAP (Employee Assistance Programme). This service is underutilised by MHWs and reasons were largely inconsistent with each other. It appears odd that employees working in the mental health workforce seem reluctant to engage with another health service for their own health and wellbeing. MHWs spoke about a lack of supporting resources offered in the workplace however 75% mentioned EAP as being offered as a support service. Miller (2009) links this reluctance with a lack of education around availability and types of EAP services which is consistent with the findings around some of the reasons MHWs did not use EAP services. MHWs mentioned that it was a somewhat vague service to access, some did not know where to find the number, or knew enough about it though it is offered (perhaps inconsistently) by the organisation. Another reason Miller (2009) suggests a reluctance to using the service is a fear of confidentiality breach, fear of demotion or showing weakness by needing assistance or a lack of knowledge as to how EAP actually works. It could be beneficial to give MHWs working at RC more information, contact numbers and a recommendation to use the service.

Insufficient resources have been linked with difficulties to manage workloads and a reason for employees in social services to leave their occupation (Astvik & Melin, 2012). This appears to have some consistency with MHWs' views of resources, including training, personal development/resources and views about intention to leave. Jimenez and Dunkl (2017) also explain that workplace resources have a buffering influence on stress-strain relationships which is therefore an important area to enhance.

Overall the findings suggest that a lack of resources, training and human resource orientation (interest from management in the health and wellbeing of employees/reward for a job well done/workers feeling taken care of) in RC is problematic and in need of remediation.

Support

Supportive relationships are important for general job satisfaction and coping in the workplace. Many MHWs working at RC stated in their narratives that they were able to use adaptive coping strategies and were very positive about their supportive environment which included the team/colleagues and management. Supportive themes arose in both the coping and strengths sections of the research.

Folkman and Moskowitz (2004) suggest that adaptive coping is an essential skill to possess in the workplace, where one seeks support or controls the cause to reduce levels of stress. Most MHWs used supportive/emotional coping where they actively sought out people around them, especially colleagues. This is significant as it implies a supportive environment which has been linked to lower levels of stress, better morale amongst workers and team spirit (Wood et al., 2011). The Demand-Control model suggests that support can be a buffer/protection against strain (Wood et al., 2011). RC has an opportunity to build on quality relationships, fostering the relationships between colleagues and also bettering the relationships with management can be beneficial for staff and organisational wellbeing.

Contradictory to the majority of the findings where MHWs were negative about management's support, the coping section revealed that 45% of MHWs felt that management was supportive when they needed them. The findings suggest that the organisation and especially management was present and an effective support through the use of coaching and supervision for several MHWs. This is a curious and inconsistent finding however may imply that there could be some truth in a lack of positive experiences in the workplace enhancing the negative experiences. Where a lack of positive emotions could be influencing MHWs' perceptions of their experiences around management. Management being named as distressing, allocating all negative feelings towards management but perhaps realising that management also have some strengths (Baehler & Bryson, 2009; Cotton & Hart, 2003).

Upon investigating these contradictory findings further it appeared that MHWs who were positive around management were relatively new to the job. They had worked at RC several months to 2 years. This may suggest that more positive change and consistency has been happening over the past two years regarding management. This may mean that the organisation has already recognised some areas of weakness and has taken steps towards improvement.

Job aspects

MHWs mentioned several aspects of their work as strengths and areas of enjoyment. Recognising these aspects/areas is significant because it can enable workers to be happier, more motivated and adds to general health and wellbeing in the workplace.

The findings indicate that various MHWs mentioned their most favourite aspects of the job to include autonomy, job flexibility and diversity in people and the environment. These findings tie in with the Self-Determination Theory, with the three basic psychological needs human beings have:

autonomy, competency and psychological relatedness (Deci & Ryan, 2000). The strengths of the work of MHWs provide positive elements in the job and appear to add to the intrinsic motivation, personality and optimal functioning of MHWs. Thoroughgood (2016) suggests applying the Self-Determination Theory to the workplace and the values of autonomy, competency and psychological relatedness in the workplace can nurture individual strengths. The workplace has the ability to offer the potential to be more engaging and motivating. Managers can tap into this potential which can have positive consequences for both the employees and organisation.

Overall the findings generally align with the existing occupational stress and reward research. The stressors that were mentioned by MHWs such as clients, management, change in management and managing competing demands had an impact on MHWs' perception of their workplace culture. Several symptoms of negative affect were described such as low morale, feeling undervalued and not recognised which lead to several MHWs having intentions to leave the job. As for rewarding and joyous aspects in the workplace MHWs described finding eustress in their work with clients and through managing competing demands. Rewards were largely intrinsic to the individual rather than extrinsic rewards received from the organisation which lead to a conclusion that client factors were more pleasurable than organisational factors. Although support, autonomy, competency and relatedness aspects were described to be strengths in the job the weaknesses around management and human resource orientation suggest a need for remediation at RC. The significance in the findings is a greater insight into the unique experiences of stress and reward particular to MHWs working at RC which enables the ability to put forward several recommendations.

Recommendations

The discussion of the findings point towards the ability to make several recommendations for RC to increase the health and wellbeing for both MHWs and the organisation. The recommendations are solely around the more prominent areas of concern, remediation and additional positive aspects that can be enhanced and would appear beneficial for the workplace. First several recommendations will be made around dealing with particular stressors/distress/weaknesses of the organisation, to address the issues in the workplace that may be creating problems for MHWs. Then recommendations will be made on some of the rewarding, eustress and joyous aspects to maximise the strengths of the job and fulfilment for MHWs.

MHWs described distress and weaknesses in the workplace to come from specific stressors, mainly, management, change in management, clients, competing demands, resources (human resource orientation) and pay. Several recommendations can be made for RC:

- Investigate the cause of high turnover in management and remediate.
- Ensure that managers have a positive approach to the health and wellbeing of employees. With this ensuring consistency and clarity in organisational processes, procedures and policies.
- Management should adopt a positive leadership style which includes supporting employees and encouraging employee creativity, encouragement, recognition, praise and support. These are non-monetary rewards in the workplace which could enhance employee motivation, increase morale, culture and in general can add to employees feeling valued in their job.
- Re-assess the way change is managed and communicated in the workplace.
- Provide employees with training and resources that can support their work with clients, where they can gain more confidence in approaching stressful situations, challenging client behaviour and stigma.
- Identify and address issues with demands in the workplace particular to the individual employee. E.g. time appeared to be stressful for several MHWs. This suggests that the organisation may need to set clearer boundaries around seeing clients, allocate a manageable case load to each employee and provide support. But at the same time employees need to hold some degree of control which is appropriate to their job role.
- Enhance social coping resources for MHWs and any trainings aimed at MHWs and their emotional wellbeing/self-care. Including this are avenues for social support, peer support and supervision.

- Invest in employees by providing them with adequate training for improvement of skillset, personal development, an interest in their health and wellbeing, reward for a job well done and ensure that employees feel taken care of.
- Provide employees with information, contact numbers and a recommendation to use the EAP service, for personal and/or occupational reasons.
- Address pay-based on the employee's experience and skill level.

MHWs described the positive aspects of their role through eustress, reward and strengths of the organisation. Some of these include clients, rewards, competing demands, support and job aspects.

- Generate eustress by enhancing the positive aspects of experiences at work. Client work is most central to MHWs, and enhancing the positive experiences employees have with their clients would be valuable. When trying to make a difference in the life of clients the perceptions of effort and reward can be imbalanced. Even with an imbalance there is an opportunity to nurture strengths and positive emotions around client work. For example generating hope and optimism, sharing client accomplishments with others, revisiting clients who are on a positive journey, and receiving recognition, praise and acknowledgement from the organisation/management.
- Enhance external rewards and challenges (competing demands) through the use of targets, certificates, healthy competition and points in the workplace. This can create eustress, a more motivating, stimulating and engaging workplace environment (apply with caution not to create distress).
- Support employees with developing competencies to recognise eustress within themselves and others. This creates an opportunity to shift focus with additional insight into why a demand can be positive but also negative and what is needed to enhance this experience.
- Foster and promote team work and a sense of community. Allow for good relationships by encouraging employees to have a voice, employee interaction and team building to enhance workplace culture.
- Acknowledge and enhance the positive areas around autonomy, competency and psychological relatedness in the job aspects as this can nurture individual strengths (Self-Determination Theory). Autonomy, job flexibility, diversity in people and environment were enjoyable parts of the job which opens up the possibility to focus on enhancing and highlighting these areas for more positive perceptions around the job.

- Consider health promotion programmes for example: diet, quit smoking and physical activity.

These recommendations are options which could support RC in creating a healthier workplace environment. By addressing the concerns that became apparent through the research the recommendations would be an investment into the health and wellbeing of the MHWs and organisation. Finally, acknowledging which areas are working well for MHWs working at RC creates an opportunity to foster and enhance strengths. This could improve employee work experiences and the functioning of the organisation.

Limitations and future research

Limitations

The limitations of this research explained below are around the research design, the researcher, participants and the concept of eustress.

The qualitative case study design in combination with a thematic analysis of the narratives of MHWs poses several limitations for the research. The weaknesses and disadvantages of the research design were previously mentioned in the methodology chapter including a difficulty to generalise findings, a low number of participants, difficulty around replication and confidentiality. Due to the small sample of participants it could be seen as problematic to generalise. However the findings indicate common themes that are indeed valid and effective for the MHWs in this particular case study and therefore the purpose of the research. It is about discovering useful and practical insight into the experiences of MHWs through qualitative means rather than quantifying data to fit a different purpose. Though this study used a sample of one organisation with MHWs which does not reflect the views of all MHWs in other mental health organisations.

Researcher bias is another possible limitation, however the findings were approached with an objective stance where excerpts and quotes were used to convey the experiences of MHWs. The recommendations to the organisation are therefore purely around discussions of the themes in the findings. Many findings in the research are consistent with existing literature around occupational stress and mental health care. This in combination with theory provides some form of scientific rigour and evidence of objectivity while completing the research.

Participant recruitment processes could also be a limitation and may have a possible impact on the research findings. Participants were recruited on a voluntary basis. This could have implications as participants who gravitated towards the research may have been more interested in talking about their stressors in the workplace. This could sway generalisations made around the common themes and findings as several MHWs spoke of the organisation more negatively, rather than the participants who were perhaps content in their workplace. Also there was the ability for participants to talk to each other between interviews and discuss topics which could have influenced perceptions around stress/reward in the workplace, weaknesses and strengths of the organisation.

A final limitation is the way the researcher explored the eustress concept with participants. This may have informed participants to think of the concept in a different way than intended. Also introducing a new concept did not give participants time to think about the concept in depth nor do some

outside research. Several MHWs described the concept as ‘vague’. This may have influenced findings around eustress, however the common themes did align with other research literature around eustress.

Recommendations for future research

Future research recommendations that arose out of this research are around the concept of eustress and a more positive focus in the workplace.

As described in the limitations section the concept of eustress is still somewhat difficult and vague to work with. Future research could look more closely into the concept, discourse, and perhaps the perception of ‘eustress’ by employees. How does the concept of ‘eustress’ fit in society when the word ‘stress’ still has such a negative connotation? How can eustress be generalised for different occupational groups in the workplace and then individuals at the same time when experiences are so unique? If employees are themselves responsible for generating eustress what can an organisation do to support this process?

The research findings suggest that MHWs find working with clients both distressing and positively stressful. This would suggest that indeed as described in the literature stressors can be seen as both positive and negative, which leads to eustress and distress to sit relatively close to each other.

Overall the stress process appears very complex and in line with the Transactional Model of stress where it is about the appraisal of the demand. Future research could look into whether employees would be more positively stressed if they acknowledged what this would look like for them, as the research showed this is an area that many employees had not thought of. Would this change their perception of their experience of stress? Or do employees need more positive experiences/emotions in the workplace to create a happy and healthy workforce rather than focussing on eustress?

Another avenue for future research is to place more importance on the positive qualities of a job when assessing health and wellbeing in the workplace rather than placing the focus solely on stress. Because MHWs very much rely on intrinsic motivation it can be useful to apply a theory to the workplace that nurtures individual strengths such as the Self-Determination Theory. This theory could highlight positive qualities of the work and employees themselves which an organisation can invest into. The presence of more positive aspects in the workplace can lessen the experiences of distress.

Conclusion

The purpose of this study was to gain insight into the rewarding and stressful experiences of MHWs in their job. Acknowledging areas of reward, eustress, distress and coping in the workplace creates opportunities to enhance the wellbeing and health of MHWs and the organisation. A focus was also to shed light upon the strengths and weaknesses in this particular organisation for possible future remediation for staff and the organisation. The addition of reward and positive stress (eustress) ensured that there was also a focus upon positive qualities rather than solely pathology. This lead to the ability to make recommendations specifically intended for RC.

The findings have identified a range of aspects that affect the health and wellbeing of MHWs and the organisation RC. MHWs found the client, making a difference and meaningful work to be most rewarding in their job. Eustress was perceived through clients and competing demands, whereas the strengths of the job and organisation MHWs spoke of were aspects of the job (autonomy, diversity and flexibility) and the team/colleagues. MHWs found areas around clients, management, change in management and competing demands distressing. Although MHWs experienced symptoms of distress they used several coping strategies and were able to use social support resources such as the team and management/supervision. There were several areas MHWs identified as weaknesses and changes they would like to see within RC namely: management (change), more pay, different resources and adequate training. Alarmingly there is a relatively high turnover intention, just over a third of MHWs are either looking into other options, do not see this job as long term or would leave for better pay. There appears to be an underlying culture of dissatisfied employees working at RC where MHWs feel undervalued, disrespected and under acknowledged. MHWs also imply that the organisation is not functioning optimally which is impacting the health and wellbeing of the MHWs and organisation. Therefore the recommendations for RC rely heavily on ensuring that MHWs get more recognition from management, more incentives in the workplace and a focus on positive qualities (and eustress) of the job/MHWs and enhancing these. Fostering positive aspects in combination of remediation of the causes of distress for MHWs is a way to address both the concerns of MHWs and aid fulfilment, job satisfaction and a more productive work environment.

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APPENDICES

Appendix A- Participant information sheet



A qualitative exploration of Mental Health Workers' experiences of the rewarding and stress-inducing aspects of their work.

INFORMATION SHEET

My name is Femke de Feijter and I am doing a research project as part of my Masters in Health Science. I am looking at the things that Mental Health Workers find rewarding and stressful in their workplace.

MHNZ Management has given me permission to contact you as a Mental Health Worker to invite you to participate in my research. If you agree to take part in the research I will interview you about the rewards and challenges/stresses in your job.

Please reply to this email if you are willing to participate in the research or have any questions regarding the project.

Project Description

The aim of this study is to interview employees at MHNZ about what they, as Mental Health Workers find rewarding and challenging/stressful in their job. I would like to ask questions around rewards, stress, coping strategies and solutions. I hope the findings of the research will be helpful in promoting awareness, growth and well-being for staff and the organisation.

Project Procedures

If you agree to take part in this research we will meet at a time and place that suits you to discuss the things you find rewarding and challenging in your job. The interview will probably take about an hour. If you give permission the interview will be recorded.

Data Management

The interviews will be recorded (with consent) and the researcher will type all interviews into a written format. The interview recordings will be stored in a secure place until the research is finalized and thereafter erased (participants will be informed of a destruction date).

The written formats will only be viewed by the researcher and supervisor, and will be stored on a password protected laptop. Further storage and/or destruction of the written formats will be discussed

once the research is finalized. Participants will be kept informed and are ultimately able to make the final decision.

The participant's identity will be kept confidential, and will be protected by changing the name of the participant in the written format. The final version of the thesis will only refer to participants by pseudonym and any identifying details will be omitted.

A summary of the project findings will be sent to participants and MHNZ management once the project is finalised.

Participant's Rights

You are under no obligation to accept this invitation. If you decide to participate, you have the right to:

- *decline to answer any particular question;*
- *ask for the recorder to be turned off at any time during the interview;*
- *withdraw from the study;*
- *ask any questions about the study at any time during participation;*
- *provide information on the understanding that your name will not be used unless you give permission to the researcher;*
- *be given access to a summary of the project findings when it is concluded.*

Project Contacts

Please feel free to contact myself (researcher) and/or my supervisor with any questions about the project.

Researcher- *Femke de Feijter*

[REDACTED]

[REDACTED]

Supervisor- *Jocelyn Handy*

J.A.Handy@massey.ac.nz

"This project has been evaluated by peer review and judged to be low risk. Consequently, it has not been reviewed by one of the University's Human Ethics Committees. The researcher(s) named above are responsible for the ethical conduct of this research."

If you have any concerns about the conduct of this research that you wish to raise with someone other than the researcher(s), please contact Dr Brian Finch, Director, Research Ethics, telephone 06 356 9099 x 86015, email humanethics@massey.ac.nz".

Appendix B- Consent form



A qualitative exploration of Mental Health Workers' experiences of the
rewarding and stress-inducing aspects of their work.

PARTICIPANT CONSENT FORM

I have read the Information Sheet and have had the details of the study explained to me. My questions have been answered to my satisfaction, and I understand that I may ask further questions at any time.

I agree/do not agree to the interview being sound recorded.

I wish/do not wish to have my recordings returned to me.

I agree/do not agree that if an issue is identified that reflects a significant risk to myself or the organization the researcher may identify this to management confidentially.

I agree to participate in this study under the conditions set out in the Information Sheet.

Date:

Signature:

.....

Full Name - printed

.....

Appendix C- Research questions

Participant detail sheet

Age

- 18-24 years old
- 25-34 years old
- 35-44 years old
- 45-54 years old
- 55-64 years old
- 65-74 years old
- 75 years or older

Gender

Ethnicity

Years of experience working in Mental Health services

Highest qualification

Time spent in current job

Questions

GENERAL:

1. How would you describe your job/the work that you do?
2. What key aspects of your job do you perform on a weekly basis?

REWARDING WORK:

1. Tell me about some areas you find most rewarding in your job-why?
2. What does rewarding work mean to you?
3. What are the three most favourite things about your job or where you work-why?
4. Why is it important to you to have areas you find rewarding/or find joy in?

STRESS QUESTIONS

1. How would you describe 'stress'?
2. Why do you think you look at stress in this way?
3. Tell me about some areas/demands you find most stressful in your job-why?
4. Tell me about some of the most stressful experiences in your job.
5. Do you feel that you look at stress the same in respect to your job as in other areas of your life?
6. Has stress affected your physical/mH/emotions? How?
7. Do you feel that stress has affected your views/values within the workplace?
8. Has stress affected your relationship with clients and colleagues? How?

NEW CONCEPT INTRODUCTION- EUSTRESS

EUSTRESS/POSITIVE STRESS: this second series of questions regarding stress are in the realm of positive stress, also known as eustress- which is a good type of stress. This type of stress can promote health and growth, increase performance, general happiness and a sense of well-being.

It is a positive reaction to a stressor, the way we perceive the situation or stressor is what determines whether we feel distress (-ve) or eustress (+ve).

Eustress can be very unique, the reaction and perception of what causes us stress and what we are capable of doing about it varies between people.

Often positive stress is about perceiving challenges rather than obstacles or threats. It is interchangeable, meaning that good stress can turn negative just as easy as negative stress can turn into something positive.

EXAMPLES: Due date for an assignment at school- some people say they thrive on having a deadline, seen as positive, a challenge and the ability to cope.

Getting married-can be very stressful, however positively stressful, similar to having children.

1. Have you ever heard of 'eustress'/positive stress or thought about it?
2. What does positive stress look like to you?
3. Tell me about your experiences of positive stress in your job.

4. How has eustress affected your physical/Mh/emotions?
5. How does eustress affect your relationship with clients/co-workers?
6. Do you feel that the positive side of stress is something that could be enhanced in the workplace? Would this be beneficial for staff and organisation? Why?
7. How would other staff feel about enhancing +ve stress strategies/recognition/thoughts.

COPING

1. How do you tend to cope/deal with stress? –ve and +ve
2. What are some of your stress reduction techniques?
3. Do you provide clients on your caseload with these same techniques? If so why? If not why?
4. Do you feel like working in mental health has aided you with the ability to cope with stress? How so?
5. The strategies you described as coping/dealing with stress- do these always work for you?
6. Have at times you felt unable to cope? What did you do at that particular point in time?
7. How do you feel when you are unable to use the resources and strategies around you to cope ‘effectively’?
8. What training have you received to manage stress in the workplace (if any)?
9. Tell me about how you think you could cope better with the resources/skills that you have around you?
10. Tell me about what you would suggest that could support you with coping/dealing with these demands?

ORGANISATIONAL CHANGES

1. What are the strengths of the organisation?
2. What changes could you think of that would benefit you as a Mental Health worker within this organisation?
3. What changes could you think of that would benefit you as a mental health worker in your job.
4. Can you think of any different changes that could be beneficial for the organisation?
5. Weaknesses of the organisation.

FINAL

1. Is there anything else you would like to add that you feel is important and may not have been covered by the above questions?

Appendix D- Summary table of transcripts/themes

Thematic map

Categories	Themes	Sub-themes
Reward in the workplace	<ul style="list-style-type: none"> • Helping people to make a difference/ positive change • Recognition (feedback/compliments) • Personal satisfaction. • Meaningfulness 	<ul style="list-style-type: none"> - Seeing positive change in clients/seeing clients achieve - Past-present progress/results/seeing clients improve - Making a difference/impact clients lives through support provided. - Client feedback with positive compliments, family and other organisations - Personal satisfaction/feel good about myself. - Important for longevity/fuel, job satisfaction. - Meaningfulness.
Occupational stress (distress)	<ul style="list-style-type: none"> • Stress as distress • Clients • Management • Change in management • Competing demands/time 	<ul style="list-style-type: none"> - Off balance/not in control/not able to cope. - Impaired functioning. - Disruption in routine. - Personal thing, past experiences of stress were negative. Personality/how once problem solves. - Majority MHWs affected by stress: emotion and attitude, irritability, anger, annoyance, crying, anxiety, aggression, absence from work, not eating/sleeping. - Seen as difficult/stuck/restricted in behaviour, expression/approach. - Or more control, leave when want, stay professional - Client challenging behaviour; unpredictable/argumentative, difficulty getting 'through' to clients, repetitive, client inability to comprehend and move forward. Clients in crisis. - No change - Empty and broken promises/lack of consistency/not meeting demands, duties and responsibilities. - Managers not onsite, lack of communication, presence and support when needed. - Change of management happened often. - Change in procedures/policies. - Not enough time to see clients/meet client needs.

	<ul style="list-style-type: none"> ● Expectations and boundaries ● Negative effects 	<ul style="list-style-type: none"> - Not enough time to meet deadlines, or do administrative work. - Management role, policies/procedures/expectations have negative impacts on clients, working within set boundaries is difficult - Were affected by stress for majority. In relation to management, losing respect/no value, more cynical thinking regarding organisation and management. - Several staff not have the want to go to work anymore - Negative effects were more with colleagues, loss of trust, disagreements/complaints, and boundaries up.
Occupational Eustress (positive stress)	<ul style="list-style-type: none"> ● Challenge ● Clients ● Competing demands ● Opportunity ● Positive effects 	<ul style="list-style-type: none"> - Deadlines like paperwork/files/weekly targets and coaching. - Being busy, "getting it done", challenging aspect to the experience descriptions. - Clients, challenging-positive stress=good outcome. - Need for more positive stress as in challenges/having a drive, achieving targets. - Challenge/driving force, solution/getting it done. Positive outcome/feelings. Motivational, deadline, productive. Half in half heard of eustress/positive stress - Clients are seen as a challenge-good outcomes. - Deadlines for paperwork, targets were challenging to accomplish. Feel good once completed. - Acknowledgement when achieved "they don't tell us we are doing a good job". - Motivation - Euphoric/positive, achievement, motivation. - Reason to continue doing the job. - More of a team feeling, improves relationships, positivity ripples through to clients/staff. "in it together". - More team spirit came out of stress, support. - Learned from previous stress, able to support clients better. - Awareness around client/staff relationship. - Own shortcomings in dealing with clients.
Coping with stress in the workplace	<ul style="list-style-type: none"> ● Self-care activities ● Personal experience 	<ul style="list-style-type: none"> - All MHWs listed activities, self-care, strategies and support avenues to cope. Taking time off, knowing when things aren't going right. - Most have felt able to cope in the workplace/or avoid issues. - process - Experience with mental health, past personal mental health/family most helpful in coping with stress. - Working in the field was less of a factor - Inability to cope with stress was more at home with personal issues, personal trauma overrides workplace stress. - No training around staff stress - Training more aimed at client support.

	<ul style="list-style-type: none"> • Support 	<ul style="list-style-type: none"> - Ability to talk to others (colleagues, coaching, and supervision with manager) was present and effective. - EAP (counselling) service is offered by organisation to MHWs for support, appears not consistently offered, unused resource due to several factors.
Organisational weaknesses	<ul style="list-style-type: none"> • Resources • Management • Pay • Change in management • Training • Staff leaving 	<ul style="list-style-type: none"> - In need of more resources, cars, computers, phones, tablets. - Needs to be more stable, less change, more support/better communication, improvement of management structure. - No respect/equality/acknowledgement/support from organisation/management. - Staff feel not listened to, no respect for management, unfair treatment - Pay scale and low wages need to be addressed, 'too much responsibility for low pay. Would increase productivity - Change is the major common denominator, change in management, changes in policies/procedures and systems. –effects on MHWs, negative mind-set, always new changes, need consistency, confusion/frustration. - Policies/procedures/ systems Need clarity and consistency. Specifically around clients. - Role clarification was found important. - Staff want more adequate and continuous training and personal development. - Many staff would leave for better pay.
Organisational strengths	<ul style="list-style-type: none"> • Job itself/favourite aspects • Colleagues/team • Management/ policies and procedures 	<ul style="list-style-type: none"> - Major strength, working with clients, concept of the job and service the MHWs provide. - Being out in the community/not office bound. - Diversity of clients/days - Job flexibility/autonomy - Majority of MHWs enjoyed their team, positive about the team/colleagues. Want more team building for increased productivity e.g. team rivalry Relationships: clients, staff, team - Some staff found these to be positives however those staff members had spent less time in the job.