

Self-Care Needs, Practices, & Supports for Two Distinct Populations

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The populations

- My research interests so far have focused on issues related to “self-care” among two populations:
 - Mothers in the prenatal and early postpartum period
 - Frontline family workers (e.g. home visitors) who serve at-risk mothers

Mothers' self-care ideas & practices

- My dissertation focused on ideas and practices of self-care in a group of mothers in the early postpartum, and factors that facilitated or hindered caring for oneself.
- Made use of semi-structured interviews (prenatal, 5 days, 2 weeks, 2 months, & 6 months, postpartum) from 20 middle-class CT mothers. Data were drawn from the International Baby Study (Super & Harkness, et al.).

Key findings on maternal self-care in the prenatal and early postpartum period

- Most important self-care needs...
- Most important strategies...
- Most influential “facilitating” or “hindering” factors...

- (1-2 mother quotes here?)

Empowerment of home visitors

- Effects of training for home visitors in the Nurturing Families Network (“NFN”), a voluntary program to prevent child abuse/neglect.
- Questionnaires & interviews done pre-training, 1 year, and 2 years, after; ethnographic visits.
- Thematic analysis indicates that after training there was more discussion of the importance of families’ empowerment, one’s own professional development, and one’s joy and fulfilment in the role of family worker.

Changing to a positive perspective: A home visitor after training

“Well, my experience in the beginning was the deficit model, what was wrong with the family, as opposed to what’s right with the family. So with...FDC, they had us look at things differently, things that we wouldn’t even notice... Looking back at some of the clients that I’ve had in the past, it’s like, wow, there were so many strengths there and I didn’t even realize it.”

Learning skills for work and home life: A home visitor after training

“I’m different as a home visitor just by...listening...if you listen, you gain so much from the family, that I incorporate it at home...in my house, it was so ‘power-over,’ but during the training I learned that I have to be quiet and let my kids talk.”

Becoming empowered to care for self: A home visitor after training

“Mindfulness, being mindful of yourself first. Because being in this field I can see how a person can be burned out. And I think that you have to care about yourself first... (Since FDC, I) exercise more, I take ‘mindful minutes’ throughout the day...just to breathe...”

Workers' stress, support, and self-care

- Frontline family work (at agencies, or in homes) can be highly stressful.
 - Emotional stress (family crises or lack of progress, low pay, threats of budget cuts, unpredictable/busy schedules, physical dangers) can lead to burnout or “compassion fatigue”
 - Routines and environments may not be physically health-promoting (sedentary in the car/homes, eating on-the-go, i.e. fast food)
 - The culture and climate of the workplace (shared ideas, supports) may help or hinder workers' self-care.

Research on family workers

- Most studies of family worker experiences focus on job stress, burnout. Very few studies have looked at self-care needs, stress-coping or “self care.”
- Interventions are few and only focus on psychological well-being (no inclusion of work-related health issues or promoting health behaviors).

Future research plans

- To learn more about...
 - What are the self-care and support needs of various “frontline family workers?”
 - What are workers’ major stressors? Supports? Self-care needs? How do these vary depending on job/role?
 - What self-care strategies would work best in the context of particular daily routines?
 - What sources/forms of support could contribute to a “sustainable daily routine” as it relates to integrating self-care?
- To design a tailored intervention to promote not only emotional, but also physical, health and well-being for family workers.