Article

Preparing social work students for the realities of Practice: A content analysis of occupational stress injury in social work curricula in Canada

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Abstract
The practice of social work places social workers at risk for occupational stress injuries (OSIs) such as 1) post-traumatic stress disorder (PTSD), 2) secondary traumatic stress (STS), also known as vicarious trauma (VT) or compassion fatigue (CF), and 3) burnout (Bride, 2007; Shackelford, 2012). Therefore, schools of social work need to prepare students for these potentialities and teach them ways to mitigate risk. This study explores whether and how thoroughly schools of social work across Canada are including the topic of OSIs within their Bachelor of Social Work (BSW) curricula. A content analysis was conducted of course descriptions, from each of the 42 BSW programs across Canada, using online university calendars and program websites. Each course description was reviewed for explicit reference to OSIs, (e.g., use of the words PTSD, STS, VT, CF and burnout) and also for implicit mention to the psychological impacts of practicing social work on the social workers themselves. Only three BSW programs offered a course with explicit reference to OSIs, an additional 11 offered courses with implicit reference. Of the 1,494 course descriptions included in the sample, only four explicitly referenced OSIs and 23 made implicit mention to topics that could arguably align with the etiology of OSIs and prevention and mitigation strategies. These topics included worker stress, personal and professional sustainability, professional resiliency, and self-care. These findings raise concern as to how well social work students are being prepared for the realities of practice. Implications of the findings for social work education and preparation for the field are discussed.

Résumé
La pratique du travail social expose les travailleurs sociaux à des risques de blessures liées au stress professionnel (TSO), telles que 1) le trouble de stress post-traumatique (SSPT), 2) le stress traumatique secondaire (STS), également appelé traumatisme vicariant (VT) ou compassion. fatigue (CF) et 3) épuisement professionnel (Bride, 2007; Shackelford, 2012). Par conséquent, les écoles de travail social doivent préparer les étudiants à ces potentialités et leur enseigner les moyens d'atténuer les risques. Cette étude a examiné si et dans quelle mesure les écoles de

travail social du Canada incluent le sujet des TSO dans leur programme de baccalauréat en travail social (BSW). Une analyse du contenu a été effectuée des descriptions de cours de chacun des 42 programmes BSW à travers le Canada, à l'aide des calendriers universitaires en ligne et des sites Web des programmes. Chaque description de cours a été examinée pour faire référence explicitement aux TSO (c'est-à-dire l'utilisation des mots SSPT, STS, VT, CF et épuisement professionnel) et également pour mentionner implicitement les impacts psychologiques de la pratique du travail social sur les travailleurs sociaux eux-mêmes. Seuls trois programmes BSW proposaient un cours faisant explicitement référence aux TSO, et 11 autres proposaient des cours faisant référence implicitement. Sur les 1 494 descriptions de cours incluses dans l'échantillon, seules quatre faisaient explicitement référence aux TSO et 23 mentionnaient implicitement des sujets qui pourraient sans doute correspondre à l'étiologie des TSO et aux stratégies de prévention et d'atténuation. Ces sujets comprenaient le stress au travail, la durabilité personnelle et professionnelle, la résilience professionnelle et les soins personnels. Ces résultats soulèvent des inquiétudes quant à la qualité de la préparation des étudiants en travail social aux réalités de la pratique. Les implications des résultats pour la formation en travail social et la préparation au domaine sont discutées.

Mots-clés
Traumatismes liés au stress professionnel, stress post-traumatique, stress traumatique secondaire, épuisement professionnel, analyse de contenu, éducation sur le terrain

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Introduction

Since post-traumatic stress disorder (PTSD) first appeared in the Diagnostic and Statistical Manual of Mental Disorders (DSM) in 1980, there has been considerable interest in the prevalence and impact of occupational stress injuries (OSIs) amongst helping professionals (Bride, 2007; Cordes & Dougherty, 1993; Denne et al., 2019; Horwitz, 2006). Recently, the Canadian Association of Social Workers [CASW] (2018) expressed concern that current policies, for example workers' compensation legislation (de Boer et al., 2023), focus on the OSIs of first responders and public safety officers, leaving the injuries of social workers largely unacknowledged and unaddressed. Yet social workers, particularly child welfare workers and those engaged in direct practice, are notably vulnerable (de Boer et al., 2023; CASW, 2018). OSIs of particular relevance to social work include 1) post-traumatic stress injury (PTSD), 2) secondary traumatic stress (STS), also referred to as vicarious trauma (VT) or compassion fatigue (CF), and 3) burnout (Bride, 2007; Horwitz, 2006; Shackelford, 2012). See Table 1 for an overview of these key terms.

Table 1. Understandings of key terms

Key Term	Understandings
Occupational stress injury (OSI)	A psychological injury that arises exclusively from the nature and fulfillment of duties associated with employment, the work environment, or both. The word injury indicates the psychological damage was not inflicted by nor is it inherent to the worker. Rather an OSI refers to psychological damage that was precipitated by exposure to ongoing stresses, and/or a traumatic event or series of events, all of which occur within the context of the work environment (de Boer et al., 2022).
Post-traumatic stress disorder (PTSD)	A type of OSI that results from exposure to a traumatic event or a series of events which involve actual or threatened death, serious injury, or sexual violence. The event or series of events can be experienced directly, witnessed in-person, or experienced indirectly by learning about the trauma exposure of a close friend or family member and perhaps also close work associate or through the repeated and extreme exposure to details related to a traumatic event or series of events (e.g., social workers repeatedly exposed to details of child abuse). Symptoms of PTSD include but are not limited to intrusive thoughts, recurrent memories of the traumatic event, decreased interest in relationships and previously enjoyable activities, negative changes in mood and cognition and increased arousal and reactivity. Individuals with PTSD can also experience anxiety, depression, substance abuse and suicide ideation (American Psychiatric Association, 2013; Figley, 2012; World Health Organization, 2020).
Secondary traumatic stress (STS)	A type of OSI that is the result of knowing about and being in close contact with individuals who have experienced trauma. It is the stress that results from helping and/or wanting to help the traumatised or suffering individual. STS can result from one exposure or from the accumulation of exposures. (Bride, 2012; Figley, 1999)
Vicarious trauma (VT)	A form of STS that involves having one's view of self and others affected by continuously hearing the stories of others and witnessing the suffering of others (Knight, 2010).

Compassion fatigue (CF)	A form of STS that involves reduced empathy that is the result of prolonged professional care giving, specifically caregiving that requires being empathetic and attending to the emotional needs of others while simultaneously being exposed to the traumatic, stressful, and crisis events these individuals experience (Figley (2002).
Burnout	A type of OSI that involves physical, emotional, and mental exhaustion that is the result of exposure to prolonged and unmanaged work-related stressors. Symptoms include depersonalization (feelings of cynicism and detachment), a lack of motivation, reduced accomplishment, and feelings of inadequacy, incapability, helplessness, hopelessness and resentment (Cordes et al., 1993; Denne et al., 2019; World Health Organization, 2020).

Literature review

In essence, OSIs are a psychological response to high levels of work-related stress, which can either be experienced directly, (i.e., the worker experiences a traumatic event or series of events), and/or indirectly due to a worker's exposure to the trauma experienced by service recipients (Bride, 2007; Wooten et al., 2011). OSIs are of concern to the profession as they lead to considerable suffering for the workers themselves and can reduce professional capacity, potentially increasing the risk of harm to service recipients (Collings & Murray, 1996; Denne et al., 2019; Meldrum et al., 2002). Likewise, OSIs are of concern to organizations as they can lead to high turn-over rates for staff and be the precursor to social workers leaving the profession (Figley, 1999). For example, the CASW (2018) conducted a national survey of child welfare social workers and discovered that 46% of those who left the field, cited work-related stress and STS to be the reason. OSIs are also of concern to social work educators as they prepare individuals for a career, which in all likelihood will place them in harm's way.

Social workers are at risk for OSIs due to the nature and practice of their work. Stress that arises from the "severity and chronicity of social problems" (Wooten et al., 2011, p. 71), high levels of professional contact specifically with traumatized individuals (Bride, 2007; Tarshis & Baird, 2019) and prolonged exposure (Figley, 2002) are several of the factors cited in the literature as contributing to OSIs. Social workers predictably work with individuals who have experienced trauma, such as intimate partner violence, physical, sexual, emotional abuse, and this indirect exposure becomes an "occupational hazard" (Bride, 2007, p. 64). Bride (2007) who studied the prevalence of STS among a randomly selected sample of Master level educated social workers ($n = 282$) discovered that 55% met the criteria for STS and 15.2% for PTSD. Notably, 97.8 % of the client population of these social workers experienced trauma with 88.9% of workers explicitly addressing issues related to trauma in their work with these clients.

Research also cites the frequency of client contact as a contributing factor (Orejková & Halamová, 2022). The more time a social worker spends in direct contact with service recipients, the more likely they are to develop an OSI. For example, Orejková and Halamová (2022) discovered minimal risk of developing CF for workers who spent less than five hours a week in

direct contact with service recipients and significant risk for those who spent 36 or more. Likewise, differences were noted between workers who spent 16-20 hours per week versus 36 or more in direct client contact, with the former having fewer incidents of CF than the later. Figley (2002) noted that "prolonged exposure", which refers to "the ongoing sense of responsibility for the care of the suffering over a protracted period of time" (p. 1438) increases risk.

Organizational factors, such as high caseloads, a lack of training, and inadequate supervisory and collegial support can also contribute to OSIs (Cordes & Dougherty, 1993; Wooten et al., 2011). Burnout, among social workers, for example, seems related to high caseloads, feelings of powerlessness in the organization, and perceived unfairness (Maslach & Leiter, 1997). Burnout is particularly high among social workers working with children (Denne et al. 2019; McFadden et al., 2015) and in rural settings where social workers have limited access to services beneficial to their clients (Meldrum et al., 2002). Collins and Murray (1996) in their study on the prevalence of burnout amongst a representative sample of social workers in Britain, discovered that organizational factors such as excessive paper work and administrative responsibilities, having a supervisor who is more interested in protecting themselves and the organization than in providing support to the worker, and having to work with inadequate information are all statistically significant predictors of stress leading to OSIs.

Role of social work education in preparing students in the prevention and mitigation of OSIs

Given the prevalence of OSIs among social workers, the profoundly negative impacts on their mental health and quality of life and the resulting compromised abilities to be professionally effective, it stands to reason that schools of social work be invested in preparing students for this "occupational hazard" (Bride, 2007, p. 64). However, the empirical literature suggests that social work programs may be missing the mark. As Newell and Nelson-Gardwell (2014) explain, many social work graduates enter the field unaware of the potentialities for OSIs. According to Miller et al. (2020) practicing social workers self-reported only "moderate" levels of practicing self-care, with newer social workers faring the poorest. Likewise, Blomquist et al., (2015) in their study on the effects of self-care practices among Master-level trained social workers in mitigating OSIs, such as STS and burn out, identified a notable gap between the value schools of social work place on self-care and their failure to teach self-care practices and skills.

We suspected this gap was reflected within our own social work program as well as within other schools of social work across Canada. Anecdotally, we knew some of our colleagues included content on self-care in their courses, but we were unsure of how or whether this content was tethered to the larger topic of OSIs. Also, we did not see evidence of these content additions reflected in the course descriptions. Given our respective connections to field education (a faculty field supervisor and former field education coordinator, field education coordinator and Bachelor of Social Work student who had recently completed her field internship) we envisioned field internships as an opportunity to help prepare students for this practice reality. This led us to include a unit on self-care as an OSI prevention and mitigation strategy into the field preparation course, a six-module, non-credit mandatory course BSW students must complete prior to beginning their first field internship. We suspected, however, there was redundancy within our BSW curriculum around the topic of self-care whilst other aspects of OSIs, such as etiology, symptom identification, and prevention and mitigation strategies were inadequately covered. We wondered what other schools of social work across Canada were doing. Were they covering the topic of OSIs in their curricula? If so, what aspects were they covering and in what courses?

What could we learn from these other programs and their curricula that could inform and help us to develop our own? These questions became the impetus for the current research.

Method

A qualitative form of content analysis following Krippendorff's (2019) five-step method was used. First, we selected the content we wished to analyze, which was the course descriptions from the 40 accredited and two pre-accredited (as of June 2023) Bachelor of Social Work (BSW) programs in Canada. Programs were identified using the Canadian Association of Social Work Education (CASWE) website and included both French and English-speaking universities. We then accessed the publicly available online course calendars and the websites of each of the 42 BSW programs. In course calendars, courses within a specific program are identified using a distinctive code. Examples of the social work programs we reviewed include SWRK, SOWK, SLWK, SVS, INSW, to name a few. We only included courses with the designated social work codes. We excluded courses outside social work, from other programs such as psychology and sociology, which were cross-listed under social work as potential electives for social work students but were not referenced using the social work code. As past and current offerings of courses were listed on websites and not in the calendars, we cross-referenced content from the calendars and websites to ensure the maximum number of courses were counted in, including courses proposed for the upcoming 2023-2024 academic year. We were careful not to have any duplication of courses within the sample. A total of 1494 course descriptions were included.

Second, we identified our coding units for both the explicit and implicit content within the course descriptions that would then become the subject of our analysis. Explicit content included the actual words and/or their associated acronyms of OSIs. For the English-speaking schools these words were occupational stress injuries, post-traumatic stress disorder, secondary traumatic stress, vicarious trauma, compassion fatigue, and burnout. For the French-speaking schools these words were stress, burnout, épuisement, épuisement professionnel, blessure au travail, fatigue de la compassion, traumatisme, traumatisme vicariant, and traumatisme indirect. Implicit content included any reference to the relationship between practicing social work and the mental health and well-being of the social worker. These references included but were not limited to preparing students for practice realities, managing work-related stress, self-care, and other mitigating and prevention strategies. Given our backgrounds in field education and our recognition of the opportunity practicums and field-related courses afford in preparing students for the realities of practice, we made special note of all field-related courses.

Third, we developed a coding framework, or the set of guidelines to be used when analysing the select texts. This was to ensure that every text was analyzed in a similar way and that results were recorded consistently. The framework was transposed as a table with the name of the university and each course number listed as rows. Elements of explicit and implicit data relevant to each course was recorded in the designated columns.

Fourth, we coded the selected texts according to our coding framework. Each course description was carefully reviewed to locate keywords. If a keyword was found within the course description, it was recorded in column 1 and the frequency recorded in column 2. Each course description was also read carefully to check whether OSIs might be described using different terminology. If so, the new terms were noted and frequency recorded. Finally, general references to topics that could arguably align with etiology, prevention and mitigation strategies were noted. An initial review was conducted by two research assistants, one English-speaking and one French speaking, who recorded their data using the coding framework. The first and second

author then each reviewed all course descriptions a second and third time and compared their results with each other's findings and with the initial findings of the research assistants. If there were discrepancies with the findings, the academic calendar for the program in question was reviewed a fourth and final time. As the authors are English-speaking, an online translation service, DeepL Translate, was used to confirm the findings pertaining to the French-written course descriptions. The fifth and final step was to analyze the results and draw conclusions.

Consistent with Articles 2.2-2.4 of the *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans* (2022) ethics review for this study was not required by our home university as the research consisted of a review of material published in the public domain and human subjects were not involved.

Results

The total number of courses reviewed was 1,494. The average number of courses per BSW program was 35, with a median of 32. The number of courses offered within each BSW program ranged from 13 – 73. This range was attributable to the number of electives offered within each program, the number of entry points into the program (e.g., direct-entry, post-diploma and post-degree) and the number of streams the school was offering. Most BSW programs had a single stream, which was generalist practice. Several had multiple streams, such as generalist practice with the option for additional concentrations in Indigenous learning, women's studies, gerontology, and child welfare, to name a few. Several programs offered dual degrees, for example in social work and education, social work and women's studies, and social work and disability studies.

The results of the content analysis revealed that three of the 42 BSW programs (7%) included a course with explicit reference to OSIs within their curriculum. An additional 11 BSW programs (26%) offered courses with implicit reference to OSIs. In total, 14 BSW programs (33%) offered courses with either explicit and/or implicit content related to OSIs. Six of the universities are in western Canada and include University of Victoria (British Columbia), University of Northern British Columbia (British Columbia), University of Calgary (Alberta), MacEwan University (Alberta), First Nations University of Canada (Saskatchewan), and the University of Manitoba (Manitoba). Six universities are in central Canada: Algoma (Ontario), Laurentian School of Indigenous Relations (Ontario), King's University College at Western University (Ontario), Trent University (Ontario), Université du Québec à Chicoutimi (Québec), and the Université du Québec en Outaouais (Québec). Two universities were from Eastern Canada and include St. Thomas University (New Brunswick) and Dalhousie University (Nova Scotia). Twelve of the universities were English-speaking and two were French-speaking. Two of the English-speaking universities exclusively offered Indigenous and First-Nations programs.

Of the 1,494 course descriptions that were reviewed only two (0.13%) made explicit reference to OSIs. The exact terms used included "operational stress injury", "worker stress and burnout", "vicarious trauma", "compassion fatigue" and "secondary traumatic stress". An additional two courses (0.13%) included both implicit and explicit references, with 23 courses (1.15%) making only implicit reference to OSIs. In these course descriptions, reference was made to the impact of social work practices on women working within the human services field, knowledge and skills needed to mitigate the impact of working in trauma exposed social work environments, and the consequences for the social worker in working in the area of crisis intervention. Themes of self and professional resiliency were also noted. Self-care was another notable theme and in some course descriptions, specific methods of self-care such as using the

Medicine Wheel and sacred circle to support social worker wellness, learning to manage stress and emotions, and engaging in spiritual and contemplative practices were noted. In total 27 course descriptions, representing less than 2% of all courses offered, made either explicit and/or implicit reference to OSI content. A complete list of courses can be found in Table 2.

Table 2. Courses with explicit and implicit reference to OSI content in Bachelor of Social Work programs across Canada

Courses with Explicit Reference ONLY		
University	Course Title	Key Terms and Phrases
King's University College (Western University)	SW4415F/G – Organizational Context of Practice	"Worker stress and professional burn-out"
MacEwan University	SOWK435 – Social Work Practice with Military, Veteran, First Responders and Their Families	"Operational Stress Injury" "Mental Health Injury"

Courses with Both Explicit and Implicit Reference		
University	Course Title	Key Terms and Phrases
King's University College (Western University)	SW447A/B – Special Topics in Social Work Theory Violence Prevention	"Vicarious trauma" "Emphasis placed on self-care principles and practices"
University of Calgary	SOWK553.35 – Selected Topics: Fields of Practice (Mental Health and Recovery)	"Compassion fatigue" "Vicarious trauma" "Secondary traumatic stress" "Strategies to mitigate the impact of providing compassionate care for exploited, oppressed and vulnerable populations"

Courses with Implicit Reference ONLY		
University	Course Title	Terms and Themes
Algoma University	SWRK3356 – Social Welfare and Women	One aspect of the course is examining the impact of social work practices on women working within the human services field.
	SWRK3406 –	Reference to "Medicine Wheel as a vehicle for achieving spiritual, physical, social, and environmental well-being" – with the

	Concepts of Wellness in First Nations' Communities: An Historical Exploration	implication that it would be helpful for the well-being of social workers too.
	SWRK3407- Concepts of Wellness in First Nations' Communities: The Contemporary Context	Reference to "Medicine Wheel as a vehicle for achieving spiritual, physical, social, and environmental well-being" – with the implication that it would be helpful for the well-being of social workers too.
Dalhousie	SLWK3145 – Trauma Informed Practice in Social Work	Explores the knowledge and skills needed to mitigate the impact of working in trauma exposed social work environments.
First Nations University of Canada	INSW377-Introduction to Traditional Self-Healing	This course assists in self-healing following First Nations teachings. This course uses the sacred circle to discuss personal issues. There is an implication that self-healing is applicable to social workers too.
King's University College (Western University)	SW3302A/B – Resiliency and Social Work	Identifying and maintaining resilience in social work practitioners is a key aspect of this course.
Laurentian School of Indigenous Relations	ISWK-4256EL – Cultural Specific Helping with Indigenous People	In this course emphasis is placed on self-care, self-reflection, and self-awareness of the individual.
MacEwan University	SOWK305 – Social Work Practice with Individuals and Families	"Students develop their own model of personal/professional sustainability and explore how interventions are implemented in a sustainable way for individuals, families and agencies".
	SOWK330 – Trauma Informed Practice	In this course "students will learn about self-sustainability, professional and agency sustainability".
	SOWK430 -Gerontology – Social Work with the Elderly	Developing a "sustainable social work practice" is a topic highlighted in this course.
	SOWK445 – Practice Realities: Building Knowledge, Skills & Professional Resilience	Course helps students to examine the "impact of indirect trauma on the social worker" and to assist them in becoming "resilient practitioners."
St. Thomas University	SCWK4923 – Trauma and Social Work Practice	Course emphasis "self-awareness in relation to traumatic material" when working with those "coping with the impact of trauma in their lives."
Trent University	SWRK2001H – Skills for the Helping Professions	In this course students will be introduced to the "emotional, intellectual, and

		professional/personal characteristics required for the practice of social work and other helping professions". Speaks to professional resiliency and professional sustainability concepts.
Université du Quebec en Outaouais (UQO)	SOWK2433 – Knowing How to be and Reflective Practice	One aspect of the course is learning the "management of stress and emotions".
Université du Quebec à Chicoutimi (UQAC)	4SVS221- Intervention in the Context of Crisis and Social Emergency	Course examines the factors that hinder or help social workers to intervene in context of crisis work and social emergency and also the consequences of crisis intervention on them.
University of Calgary	SOWK361 – Professional Use of Self	One of the topics covered in the course is "self-care"
	SOWK551.02 – Selected Topics: Social Work Interventions (Loss and Grief)	"Self-care strategies" are integrated into the course.
	SOWK553.12 – Selected Topics: Fields of Practice (Addiction and Recovery)	A trauma-informed pedagogy is used in the course which emphasizes self-care, among other things. Self-care strategies are encouraged.
	SOWK553.15 Selected Topics: Fields of Practice (Mental Health)	A self-care strategy (accessing supports in the community or at the university) is encouraged.
	SOWK557.19 Selected Topics: Contexts for Practice (Spirituality and Social Work)	Themes related to spirituality in practice, including self-care, are discussed.
University of Manitoba	SWRK4272 Mindfulness and Contemporary Contemplative Practices in Social Work: Cultivating Practice Integrity	Various forms of "contemplative practice" are discussed and the development of self-and other-awareness is supported. There is an inference that contemplative practice is of benefit to social workers too.
University of Northern British Columbia	SOCW457 – Indigenous and Community Wellness for Indigenous peoples	"Self-care and self-management for Indigenous peoples and the social workers who may work in high stress situations" are explored in this course.
University of Victoria	SOCW391 – Indigenous Approaches to Healing and Helping	Students learn about traditional and contemporary healing approaches used by Indigenous peoples and how to integrate these approaches into their own lives and social work practices.

Although these courses represent the range of social work practice areas, most fall within the direct practice sphere. Twenty-two of these courses are practice courses, three are a combination of direct practice and policy, one is a theory course and one focuses on the organizational context of practice. Of the 22 courses six focused on working with First Nations and Indigenous peoples, eight are in the areas of trauma, mental health and addictions.

Interestingly, of the 27 courses that made explicit or implicit reference, six were identified as "selected topics" courses. Selected topics courses are generic courses that have variable content. They act as placeholders within a curriculum allowing a range of topics to be offered under a designated course number. Selected topics courses can be designed and delivered relatively quickly in response to the expertise of particular professors, emerging and current topics of interest, and student need. Selected topics courses tend not to be part of the mandatory curriculum and we most often find the course descriptions on program websites, rather than in the course calendars. Twenty-seven of the 42 BSW programs in our sample offered selected topics courses with a total of 83 course offerings, six of these included either explicit or implicit reference to OSIs. This is a notable finding in that selected topics courses seem to be the avenue by which several schools of social work have begun to integrate the topic of OSIs into their curricula.

Finally, with respect to our deliberate review of field-related courses, we discovered that not one BSW program made reference to OSIs in the courses offered within their field education programs. According to the CASWE accreditation standard SB 3.3.1, BSW programs must provide at least 700 field education practicum hours. In our sample there was a range of 700 to 900 hours. The number of practicums students were expected to complete ranged from one to four. However, most schools offered two practicum courses, one in the third and one in the fourth year of the program. Given the multiple entry points into most BSW programs and schools offering multiple streams, the number of field courses was explanatorily high. A total of 143 practicum courses were available, 77 included integration seminars, 66 did not. There were 39 stand-alone integration seminars (i.e., not enfolded into the practicum) offered as well as 11 field preparation courses and 25 courses that were offered concurrently with the practicum. In total, 218 of the 1,494 courses we reviewed were field-related courses and not one made either explicit or implicit reference to OSIs. That said, some of the BSW program websites we explored included access to practicum manuals and field-related forms. In some instances, it was evident that self-care was included as a competency domain on the learning contracts (see for example, the University of Toronto). We suspected other BSW programs also include self-care and/or professional resiliency markers on their learning contracts but we did not explore this as our content analysis was limited to course descriptions.

Discussion

We began this research with a sense that schools of social work were inadequately preparing students for the likelihood of acquiring OSIs as practicing professionals. Even so we were shocked by how seldom the topic was mentioned in course descriptions. Admittedly, we cannot infer that the lack of any mention to OSIs in course descriptions indicates the topic was never addressed in these courses or evidenced in the broader curriculum. A content analysis of all course syllabi, not just the course descriptions, would be required to make such a determination. That said, the glaring and uniform absence of any mention of OSIs within all social work programs across the entire country is troubling. Course descriptions highlight what topics, core competencies, skills, knowledge, and experiences are prioritized (Griese-Owens & Miller, 2021).

Are we to infer then that the topic of OSIs is neither a valued, integrated nor explicit part of social work curricula?

The International Federation of Social Workers ([IFSW], 2018) in their Global Social Work Statement on Ethical Principles, state "social workers have a duty to take the necessary steps to care for themselves professionally and personally in the workplace, in their private lives and in society" (Article 9.6). Grise-Owens and Miller (2021) convincingly note "the profession of social work has the laudable and complex mission of promoting human rights, social justice, and human well-being" yet "the training of social workers largely neglects serious attention to the well-being of the humans charged with those aims" (p. 636). Certainly, our findings lead us to question how well schools of social work across Canada are fulfilling these aims and whether graduates are adequately prepared to look after themselves both professionally and personally.

Unfortunately, there is nothing within the CASWE Education and Accreditation Standards (CASWE, 2021) that incites the inclusion of OSIs as a topic area within BSW curricula or the inclusion of related topics, such as self-care and professional resiliency. In fact, the accreditation standards make no reference to OSIs at all. We reviewed the Standards searching for the same keywords used in the content analysis and for any implicit mentions to the psychological impacts of practicing social work on social students. None were found. There were several references to "wellness" but only in relation to client wellness and not the wellness of students. The accreditation standard SB/M 3.2.15 makes mention of individuals in faculty field liaison roles needing to consult with field instructors and students regarding student progress or "problems". It is unclear as to what types of problems are being referenced here but we suspect "problems" refers to student performance rather than student wellness or well-being. At a minimum we recommend that an amendment be made to the third core learning objective, "Development of Professional Practice", specifically item 3d, to include not only the opportunity for students to "articulate a practice framework to guide their professional work" but also the opportunity to develop a "professional resiliency framework".

The literature suggests that self-care is an effective strategy in preventing and mitigating OSIs (Bloomquist et al., 2015; Griffiths et al., 2019) and as such self-care strategies need to be enfolded into a social work curriculum. As Griese-Owens and Miller (2021) argue teaching self-care needs to be a "programmatic commitment", integrated across the curricula and not isolated to a particular course or assignment (p. 641). Developing self-care competencies would undoubtedly better prepare social work students for the realities of practice, but we argue a singular focus on self-care is insufficient. Mirick (2022) suggests understandings of self-care are often limited to "manicures, facials, and exercise" and need to be broadened to include such things as "therapy, boundary-setting, and professional self-care" (p. 5). Mirick's (2022) photo journal exercise serves as an example of how this broadening can be achieved. In addition to teaching self-care, other strategies to prevent and mitigate OSIs, need to be enfolded into a curriculum. These strategies could include teaching students how to recognize potential vulnerabilities and stresses and indicators of injury, so they know when they need to receive timely support and treatment. We also recommend students be taught how to use supervision as a means of mitigating risk by learning among other things, the resources available to them in the workplace and how to access help.

We also have suggestions as to how schools of social work can better integrate the topic of OSIs into their programs. A logical first step would be to include the topic within the existing curriculum by means of selected topics courses and integration seminars (Lewis & King, 2019). We also recommend that courses currently offered in practice areas considered high-risk, such as

child protection (de Boer, et al., 2023; Denne et al., 2019; Shackelford, 2012), intimate partner violence (Tarshis & Baird, 2019), and trauma-informed practice (Bride, 2007) include modules on OSIs. Lastly, we recommend that schools of social work develop courses entirely devoted to the topic of OSIs. In completing this content analysis, we discovered two outstanding exemplars, the course descriptions of which appear below. The first is a course offered by MacEwan University titled, SOWK 445 - Practice Realities: Building Knowledge, Skills & Professional Resilience (MacEwan University, 2023).

> In this course, students explore some of the challenging aspects of social work practice that are not often discussed in formal social work education. As students progress through the course, they learn about the impact of indirect trauma on the social worker, examine the effects of being part of difficult work environments, consider potential pitfalls in the areas of team dynamics and inter-disciplinary practice, and discuss challenges in their own practice. The course is focused on building a strong academic, theoretical, and practical understanding of the issues facing social workers in day-to-day practice. Building on this understanding, the focus shifts to developing evidence-based skills to manage difficult situations and to assist workers in becoming resilient practitioners.

The second course is offered by King's University College at Western University and is titled SW4415F/G - Organizational Context of Practice (King's University College, 2023).

> An examination of the agency as the context for professional practice. Provides an overview of various organizational structures and processes, and considers such work-related topics as supervision, employee motivation, organizational culture, life-long learning, and worker stress and professional burn out.

Finally with respect to field education, we have a few suggestions to offer. First, we suggest that BSW programs include the topic of OSIs within their field preparation seminars and/or the integration seminars that run concurrently to the field practicum (Lewis & King, 2019).

 We encourage schools to include self-care, stress management, and professional resiliency strategies as a competency domain on the learning contracts. Students and field instructors could be encouraged to have the topic of professional resiliency as standing item in their weekly supervision sessions. Developing a self-care plan could be an assignment connected to either the internship itself or the integration seminar. The topic can also be raised by students in learning logs and reflective papers associated with field. Other opportunities for inclusion are the meetings between field liaison workers, field supervisors and students, which are to occur several times throughout the internship.

Limitations

A notable limitation of this study is the sole reliance on course descriptions to determine the presence of content related to OSIs. The course description provides a broad overview of the course. It is possible that a course includes the topic of OSIs but it is considered too specific to be included in a course description. We also observed that while some course descriptions were very detailed, others provided only the name and number of the course with little to no

information specific to course content, making it impossible for us to determine if OSIs were covered. Also, there was no date attached to when the course descriptions were initially drafted. It is possible that schools of social work may have revised course content to include OSIs and these revisions are not reflected in course calendars. Lastly, we know there can be inconsistencies between university calendar descriptions and the actual material taught in the course. Anecdotally we know there are several courses at our home university that include the topic of OSIs but this inclusion is not reflected in the course descriptions. It is reasonable to deduce that this may happen at other universities.

We consider this content analysis of course descriptions to be a preliminary step in determining whether and to what extent the topic of OSIs is being covered in Canadian schools of social work and accordingly how well social work students are being prepared for these practice realities. As mentioned above, a logical next step would be to conduct a content analysis of course syllabi and to perhaps interview or survey instructors and students to determine what is covered in courses and how content is tethered to broader curriculum aims.

Conclusion

In this article we have argued that the nature and practice of social work places social workers at risk for OSIs. The results of our content analysis suggest that currently BSW programs across Canada are not adequately preparing students for these practice realities. Yet we are hopeful that these programs can begin to enfold OSI content, particularly content that is focused on prevention and mitigation strategies, within the existing curricular structures. Selected topics, courses and field-related courses offer unique opportunities to provide students with the requisite knowledge and skills they need to develop strategies for personal and professional resilience and sustainability. In so doing, BSW programs will be aligning their curricula with the challenge made by the IFSW (2018) that in promoting the aims of the profession to "promote human rights, social justice and human well-being" we consider the well-being of the humans who have been charged with meeting these aims (p. 636).

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