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# Self-Care, Stress, and Well-Being Among Practicing Psychologists

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Increasing attention has been given to the importance of self-care for preventing the negative consequences of stress and promoting well-being. A small body of research has suggested that psychologists view self-care as important and that self-care behaviors are linked to professional and personal outcomes. The purpose of the current research was to provide a more detailed examination of how self-care functions to reduce risk for burnout and increase life satisfaction among practicing psychologists. Using archival data from a survey of 422 psychologists, the present research examined 5 areas of self-care: professional support, professional development, life balance, cognitive awareness, and daily balance. Results suggested that a key mechanism through which self-care may impact well-being is by reducing stress; higher scores on all 5 areas of self-care predicted lower stress, which then predicted less burnout and greater life satisfaction. Results provided weaker support for the role of self-care as a buffer protecting against the negative effects of stress on well-being. These findings suggest that self-care is most effective when practiced proactively, as a preemptive measure aimed at reducing stress and thereby avoiding the progression to negative outcomes such as burnout and enhancing good outcomes such as life satisfaction. Further, analyses comparing the relative contribution of different types of self-care to well-being outcomes suggest that life balance, cognitive awareness, and daily balance are particularly important to psychologists' personal and professional functioning.

### **Public Significance Statement**

This study on self-care among practicing psychologists suggests that self-care may decrease risk for burnout and promote personal and professional well-being by reducing stress. Findings indicate the value of engaging in ongoing, preventive self-care.

*Keywords:* self-care, burnout, professional psychologists, stress

Over the past several decades, increasing attention has been given to the importance of self-care for practicing psychologists in preventing the negative consequences of work stress and promoting positive outcomes such as optimal professional functioning and enhanced well-being. In fact, self-care has been described as an ethical imperative (e.g., Barnett, Baker, Elman, & Schoener, 2007; Norcross & Guy, 2007; Wise, Hersh, & Gibson, 2012), and efforts to promote self-care have yielded a substantial literature that includes books (e.g., Baker, 2003; Carter & Barnett, 2014;

Norcross & Guy, 2007) and articles in professional journals (e.g., Barnett et al., 2007; Dorociak, Rupert, Bryant, & Zahniser, 2017; Norcross, 2000; Wise et al., 2012) offering advice, tips, and ways of thinking about self-care.

Across the professional literature, there is clear agreement that self-care is important. Yet defining self-care, particularly identifying critical aspects of self-care, is difficult. In a general sense, self-care involves engaging in behaviors or activities that promote health and well-being—put simply, doing things to make oneself feel better physically and emotionally. The challenge, however, is that self-care may encompass a wide range of activities across multiple life domains and may vary considerably across individuals depending on their personal preferences and life situations. Further, when considering self-care within a professional context, one faces the additional challenge of identifying those behaviors that are effective for maintaining personal and professional well-being in the face of the unique demands of psychological work. In response to these challenges, the professional literature has taken a variety of approaches to discussing self-care that include outlining key principles of self-care, identifying domains and important areas of self-care, and suggesting specific self-care behaviors or activities.

Despite the complexities involved in defining and assessing self-care, there has been some research examining behaviors or

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strategies that psychologists use to help cope with the demands of their work and sustain their ability to function effectively. Using terms such as *well-functioning strategies* (Coster & Schwebel, 1997) and *career-sustaining behaviors* (Kramen-Kahn & Hansen, 1998; Rupert & Kent, 2007; Stevanovic & Rupert, 2004) rather than *self-care*, early research typically presented a list of behaviors and asked psychologists to rate the importance of each behavior to their functioning. Behaviors ranged from those related to personal life (e.g., engaging in hobbies, spending time with friends) to professional development or workplace behaviors (e.g., receiving regular supervision, taking breaks between sessions) to cognitive strategies (e.g., maintaining sense of humor, reflecting on positive experiences). Results have indicated that psychologists rate many different types of strategies or behaviors as important for maintaining their professional functioning. In addition, two studies have linked ratings of career-sustaining behavior importance to indices of professional well-being. Rupert and Kent (2007) found that psychologists with higher total ratings of the importance of career-sustaining behaviors reported lower levels of burnout, and Stevanovic and Rupert (2004) found that career-sustaining behavior importance ratings related to higher job or career satisfaction. Overall, this small body of research indicates that psychologists perceive self-care behaviors as valuable and offers limited evidence linking the perception of self-care importance to positive outcomes. Unfortunately, given the lack of a consistent, valid approach to measuring self-care, this research does little to contribute to a more systematic understanding of critical aspects of self-care.

In an effort to advance research in this important area, Dorociak and colleagues (2017) have reported the development of a self-care scale for use with professional psychologists. Their measure development process resulted in a 21-item Self-Care Assessment for Psychologists (SCAP; previously known as the Professional Self-Care Scale) with five factors: Professional Support (cultivating supportive relationships with colleagues), Professional Development (seeking opportunities for professional growth and involvement in enjoyable professional activities), Life Balance (cultivating relationships and activities outside of work), Cognitive Awareness (monitoring workplace stress and reactions), and Daily Balance (managing demands and structuring the workday). In their initial work, these researchers linked self-care behaviors to positive outcomes, finding that higher scores on each of the five factors related significantly to lower levels of burnout, less perceived stress, and greater life satisfaction. In a separate study, Zahniser, Rupert, and Dorociak (2017) replicated the scale's factor structure with graduate students in clinical psychology and linked self-care to positive outcomes in these students, with higher scores on each factor relating to lower stress, better mood, and greater overall well-being.

The development of the SCAP represents a significant step in identifying critical domains of professional self-care and linking self-care to professional and personal well-being. Many questions remain, however, regarding what types of self-care behaviors are most important and how these behaviors serve to promote personal and professional well-being. Although the professional literature provides extensive discussion of professional stress and the role of self-care, research is crucial to refining the understanding of self-care and to helping professionals develop effective approaches to self-care.

A close examination of the professional literature indicates an increasing focus on the preventive role of self-care and reveals two related, but slightly different, perspectives on how self-care promotes well-being. Most often, proponents of self-care emphasize its role in managing the stress that is inherent in psychological work and thus preventing negative outcomes such as burnout and impaired professional functioning. Put another way, self-care promotes professional well-being by protecting against the potentially dangerous downward spiral that is depicted in the stress–distress–impairment–improper behavior continuum proposed by the American Psychological Association's (APA) Advisory Committee on Colleague Assistance (ACCA, n.d.-a). This perspective considers self-care to be a moderator that protects against the aversive effects of stress on well-being. Zahniser et al.'s (2017) study of self-care with graduate students provides some limited support for this perspective. They found that self-care protected against the negative impact of perceived stress on student flourishing, such that the negative relationship between perceived stress and flourishing was weaker among students who had higher scores on each self-care factor compared to students who had lower scores.

Recently, Wise and colleagues (e.g., Wise & Barnett, 2016; Wise et al., 2012) drew from positive psychology to emphasize the role of self-care not only in protecting from bad outcomes but also in promoting good outcomes. They encouraged a focus on flourishing rather than surviving and advocated for the integration of self-care strategies into daily life. This focus on the integration of self-care into daily life suggests a slightly different, more primary, prevention role for self-care. That is, in addition to playing a role in helping one cope with or react effectively to stress, self-care may, when practiced on a regular basis, function more proactively to decrease the experience of stress, thereby promoting personal and professional functioning. Put simply, self-care may help psychologists structure their lives such that they experience less stress and, as a result, fewer negative and more positive personal and professional well-being outcomes. This perspective suggests that stress reduction is a key mechanism through which self-care influences well-being. To date, no research has examined this possibility.

The present research sought to advance the understanding of self-care by examining these two perspectives on the role of self-care and by assessing the contributions of different types of self-care in promoting professional and personal well-being. We used data from the Dorociak et al. (2017) measurement development study, which, as already discussed, generated a professional self-care scale that assessed five factors or aspects of self-care. This study also provided evidence for the value of self-care, reporting significant correlations between each of the five self-care factors and lower perceived stress, lower burnout, and greater life satisfaction. Building upon their work, our research conducted more detailed analyses of these data with three goals in mind: (a) to determine the role of each self-care factor as a moderator that protects against the aversive effects of stress on well-being outcomes, (b) to determine the role of each self-care factor in impacting well-being outcomes through the process of reducing stress, and (c) to determine the relative importance of each self-care factor in influencing specific well-being outcomes. In each case, the well-being outcomes of burnout (i.e., emotional exhaustion, depersonalization of clients, and personal accomplishment) and life satisfaction were examined.

## Method

### Participants and Procedures

This study used data from the Dorociak et al. (2017) Professional Self-Care and Well-Being Survey. This anonymous paper-and-pencil survey was sent in March 2015 to 1,500 psychologists who were randomly selected from a list of approximately 4,800 licensed psychologists in Illinois. Of the 1,500 selected, 438 psychologists (29.5%) returned the surveys. Sixteen surveys were excluded because the participants were no longer engaged in clinical practice or left the survey unanswered. Data from all 422 remaining participants were included in analyses for the present study. Of these participants, 295 (69.9%) were female, the majority were White (87.2%), and most (76%) were married or in a committed partnership. Participants were employed in a variety of work settings, including solo independent practice (33.6%), group independent practice (19.0%), hospital setting (13.7%), community center (1.9%), outpatient clinic (9.7%), or other settings (21.8%). The mean age was 50.48 years ( $SD = 14.50$ ), mean years since licensure was 16.71 years ( $SD = 12.39$ ), and the mean number of hours worked per week was 44.13 ( $SD = 14.38$ ).

### Measures

The Professional Self-Care and Well-Being Survey contained demographic questions as well as measures of stress, self-care, and well-being. The present study used data from the measures described in the next four sections.

**Self-care.** The 21-item Self-Care Assessment for Psychologists (SCAP; Dorociak et al., 2017) assesses aspects of self-care relevant to personal and professional functioning of mental health practitioners in five subscales: Professional Support (five items related to cultivating professional relationships), Professional Development (five items related to participating in professional organizations and events), Life Balance (four items related to strategies that build a balance between work and nonwork life), Cognitive Awareness (four items related to monitoring workplace stress and emotions), and Daily Balance (three items related to managing daily workplace demands). Participants were asked to indicate the frequency with which they engage in each self-care behavior on a 7-point scale from 1 (*never*) to 7 (*always*). Cronbach's alphas for subscales were adequate ( $\alpha$ s ranging from .70 to .83).

**Perceived stress.** The Perceived Stress Scale (PSS; Cohen, Kamarck, & Mermelstein, 1983) is a 10-item measure designed to assess perceived stress, conceptualized as the degree to which situations in one's life are perceived as uncontrollable and overwhelming. The PSS has significant correlations with life satisfaction, alcohol use, and other health-related outcomes (Cohen & Williamson, 1987). Cronbach's alpha has been reported as .91 (Cohen & Janicki-Deverts, 2012), and the scale yielded good internal consistency with the current sample ( $\alpha = .86$ ).

**Life satisfaction.** The Satisfaction With Life Scale (SWLS; Diener, Emmons, Larsen, & Griffin, 1985) is a five-item measure designed to assess the life satisfaction component of subjective well-being. Extensive evidence has found that an individual's satisfaction with life positively correlates with a range of life outcomes, including mental and physical health (Pavot & Diener,

2008). Cronbach's alpha has ranged from .79 to .89 (Pavot & Diener, 2008). This scale yielded good internal consistency with the current sample ( $\alpha = .87$ ).

**Burnout.** The Maslach Burnout Inventory—Human Service Survey (MBI-HSS; Maslach & Jackson, 1996) is a 22-item measure that assesses three components of burnout: emotional exhaustion (EE), depersonalization (DP), and a reduced sense of personal accomplishment (PA). The MBI-HSS is the most widely employed measure of burnout among human service professionals and has consistently reported sound psychometric properties (Maslach & Jackson, 1996). In the current sample, internal consistency for these subscales ranged from adequate to good ( $\alpha$ s = .89, .71, and .73 for EE, DP, and PA, respectively).

## Results and Discussion

### Role of Self-Care

**Impacting well-being by buffering the effects of stress.** To assess the potential protective effects of self-care against the harmful effects of stress, we tested moderation models via regressions in which the interactions of perceived stress and each self-care factor were evaluated for their ability to predict psychologist's burnout (EE, DP, and PA) and life satisfaction. Post hoc probing was conducted via conditional moderators and simple slopes to further understand significant interactions.

Results revealed no significant interactions between perceived stress and the self-care areas of professional support, life balance, and daily balance in predicting burnout or life satisfaction. Concerning professional development, there was a significant interaction between perceived stress and professional development in predicting DP ( $\beta = -.16, p = .014$ ), such that greater perceived stress was more strongly related to greater DP for those scoring low on professional development ( $\beta = .41, p < .001$ ), compared to those high on professional development ( $\beta = .22, p = .001$ ). For cognitive awareness, there was a significant interaction between perceived stress and cognitive awareness in predicting PA ( $\beta = .09, p = .048$ ). For those low on cognitive awareness strategies, greater perceived stress was related to less PA ( $\beta = -.28, p < .001$ ). However, for those high on cognitive awareness strategies, perceived stress was not significantly related to PA ( $\beta = -.12, p = .058$ ). Although both interactions found that the self-care strategies served classic protective—or buffering—effects, the interactions between stress and self-care occurred in only two of the 20 moderation analyses.

In interpreting these results, it is important to keep in mind that our data are cross-sectional and thus did not allow us to draw causal conclusions. Nonetheless, our findings suggest that once an individual begins to feel stressed and as this feeling builds, the protective role of participation in the types of preventive self-care activities we assessed may be limited. The two exceptions to this have some potentially important implications for practice. First, participating in professional development activities (e.g., staying current in professional knowledge, connecting with professional organizations, participating in professional activities that promote development) may help prevent depersonalization of clients in the face of stress. Thus, this type of self-care may be especially important to maintaining constructive client relationships and providing competent services. Second, cognitive awareness strategies

(e.g., being aware of and monitoring feelings, being proactive in managing challenges of work) may serve to protect against erosion of one's sense of personal accomplishment at work and help in maintaining positive feelings about work under times of high stress.

**Impacting well-being by reducing stress.** Mediation analyses were conducted using the approach recommended by Baron and Kenny (1986) and Holmbeck (1997, 2002) to examine whether perceived stress mediated the relationships between the five self-care factors and the outcomes of burnout and life satisfaction (see Figure 1). According to this approach, four conditions must be met to establish that mediation has occurred: (a) The predictor variable must relate to the outcome, (b) the predictor variable must relate to the mediator, (c) the mediator must relate to the outcome after the effects of the predictor variable are controlled, and (d) the strength of the relationship between the predictor variable and the outcome variable must significantly decrease or become nonsignificant after the effects of the mediator are controlled.

Results for the mediation models are presented in Table 1. An examination of results for the five self-care factors indicates that, for each model, all four conditions of mediation were met: (a) The self-care factor (i.e., Professional Support, Professional Development, Life Balance, Cognitive Awareness, and Daily Balance) significantly predicted all four outcomes in expected directions (i.e., higher scores on the factor predicted lower EE, lower DP, greater PA, and greater life satisfaction); (b) the self-care factor significantly predicted lower perceived stress; (c) perceived stress significantly predicted the four outcomes in expected directions, after controlling for the self-care factor score; and (d) Sobel's (1988) test indicated significant reductions in the strength of the relationships between the self-care factor and the outcome after the introduction of the mediator into the equation. With five self-care predictor variables and four outcome variables, a total of 20 mediation models were tested. In every case, significant mediation was found; each type of self-care significantly predicted lower perceived stress, which in turn predicted improved outcomes: less emotional exhaustion, less depersonalization of clients, greater sense of personal accomplishment, and greater life satisfaction.

Further, for six of the 20 mediation models, when perceived stress was entered into the model, the self-care factors were no longer significant predictors of the outcomes, with the drop in predictive ability significant according to the Sobel test ( $p < .001$ ).

This significant drop in predictive ability indicates that full, or complete, mediation has occurred. Specifically, when perceived stress was entered in the model, professional support and life balance no longer predicted emotional exhaustion or depersonalization. Full mediation also occurred with professional development, such that when perceived stress was entered in the model, professional development no longer predicted emotional exhaustion. Finally, when perceived stress was entered in the model, daily balance no longer predicted depersonalization.

Although the cross-sectional data limited our ability to draw causal conclusions, our findings are consistent with the notion that self-care serves to reduce stress and thus impacts a range of well-being outcomes. Remarkably, this was the case for all aspects of self-care; professional support, professional development, life balance, cognitive awareness, and daily balance strategies each predicted lower perceived stress, which then predicted better personal and professional well-being, as reflected in less emotional exhaustion, less depersonalization of clients, greater sense of personal accomplishment, and greater life satisfaction. The consistency of these mediation findings provides compelling evidence that stress reduction is a key mechanism through which different types of self-care may impact well-being. In addition, our findings of full mediation in six instances further underscore the important role of self-care in reducing stress; stress reduction appeared to be the primary mechanism through which self-care in the areas of professional support, life balance, and daily balance influenced the professional well-being outcomes of emotional exhaustion and depersonalization.

### Relative Importance of Self-Care Factors in Influencing Well-Being Outcomes

To identify the most important aspects of self-care for the personal and professional well-being outcomes, we conducted forward regression analyses allowing for the inclusion of all five self-care factors for the outcomes of perceived stress, all three burnout components, and life satisfaction. In forward regression analysis, the most significant predictor of the outcome is entered first, followed by the next most significant predictor, with the process repeated until no predictor variables improve the model to a statistically significant extent. Results for the final step of each of the five models (i.e., the step at which all aspects of self-care

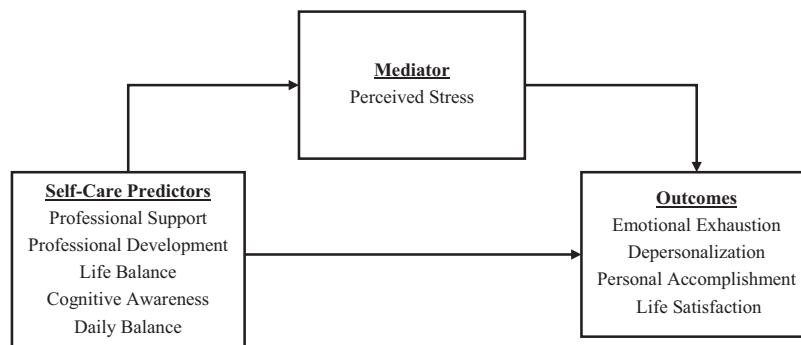


Figure 1. Mediation model for the associations between the five self-care factors and the outcomes of burnout and life satisfaction as mediated by perceived stress.



**Table 1**  
*Mediation Model Statistics Examining Whether Perceived Stress Mediates the Relationship Between Self-Care and Well-Being Outcomes*

Relationship tested	β for outcomes				
	EE	DP	PA	LS	PS
Condition 1: Self-care factor predicting the outcomes					
Professional support	-.12*	-.11*	.22**	.26**	
Professional development	-.22**	-.25**	.27**	.29**	
Cognitive awareness	-.34**	-.34**	.44**	.32**	
Life balance	-.34**	-.24**	.36**	.48**	
Daily balance	-.45**	-.21**	.25**	.31**	
Condition 2: Self-care factor predicting the mediator					
Professional support					-.17**
Professional development					-.24**
Cognitive awareness					-.36**
Life balance					-.42**
Daily balance					-.42**
Condition 3: Perceived stress predicting the outcome (adjusting for self-care factor)					
PS (adjusting for professional support)	.64**	.37**	-.31**	-.47*	
PS (adjusting for professional development)	.63**	.33**	-.29**	-.45**	
PS (adjusting for cognitive awareness)	.60*	.29**	-.21**	-.44*	
PS (adjusting for life balance)	.62**	.33**	-.23**	-.36**	
PS (adjusting for daily balance)	.56**	.35**	-.28**	-.45**	
Condition 4: Self-care factor predicting the outcome (adjusting for PS)					
Professional support	-.01	-.04	.17**	.19**	
Professional development	-.06	-.17**	.20**	.19**	
Cognitive awareness	-.11**	-.23**	.36**	.16**	
Life balance	-.06	-.09	.25**	.33**	
Daily balance	-.20**	-.06	.13*	.12*	

Note. EE = emotional exhaustion; DP = depersonalization; PA = personal accomplishment; LS = life satisfaction; PS = perceived stress.  
\*  $p < .05$ . \*\*  $p < .01$ .

that constituted significant predictors of the outcome were included) are presented in Table 2.

As can be seen in Table 2, overall participation in the five self-care areas was a significant predictor of all personal and professional well-being outcomes, explaining between 13.6% (depersonalization) and 27.5% (perceived stress) of the variance in these outcomes.

In addition, the pattern of individual regression coefficients provides unique information about the contribution of specific types of self-care to each well-being outcome. In this regard, several findings are especially noteworthy. First, consistent with expectations and results of our previous analyses, the specific

types of self-care predicted outcomes in the expected ways; that is, more engagement seemed to reduce bad outcomes and increase good outcomes. There was one surprising exception, however. Professional support predicted greater emotional exhaustion, greater depersonalization of clients, and greater perceived stress. These findings were counter to expectations and inconsistent with our previously discussed mediation analyses showing that professional support predicted reduced stress and better outcomes. In other words, the relationship between professional support and our well-being outcomes was completely reversed when additional self-care factors were included in the regression equations.

**Table 2**  
*Overall Model and Individual Predictor Statistics for Self-Care Predicting Personal and Professional Outcomes*

Self-care factor	Outcome									
	Emotional exhaustion		Depersonalization		Personal accomplishment		Perceived stress		Life satisfaction	
	R <sup>2</sup>	β	R <sup>2</sup>	β	R <sup>2</sup>	β	R <sup>2</sup>	β	R <sup>2</sup>	β
Overall	.252**		.136**		.211**		.275**		.251**	
Professional support		.13*		.14*		—		.11*		—
Professional development		—		-.20**		—		—		—
Life balance		-.21*		—		.18*		-.31**		.42**
Cognitive awareness		-.16**		-.31**		.36**		-.14**		—
Daily balance		-.34**		—		—		-.28**		.16**

Note. Dashes indicate that the self-care factor did not enter the model as a significant predictor of the corresponding outcome.  
\*  $p < .05$ . \*\*  $p < .01$ .

This reversal in the nature of the relationship may reflect a statistical suppression effect occurring when professional support entered the regression equation as a predictor after other self-care factors had already entered the equation. Suppression is more likely to occur when there is a strong association among the predictor variables (Gaylord-Harden, Cunningham, Holmbeck, & Grant, 2010) and results in a “surprise” relationship between the predictor variable and the criterion variable (Kline, 2011). From a more conceptual standpoint, it may also reflect a complex relationship between professional support and well-being outcomes. That is, professional support may play a preventive role in reducing stress and promoting well-being and in that sense, may share much in common with other aspects of self-care. On the other hand, professional support may function in unique ways. For example, it may be a natural reactive coping strategy for those who are under increased stress, and in those instances, more engagement in professional support strategies may be linked to poorer outcomes. This might explain the shift in the relationship between professional support and outcomes once the variance due to other self-care factors is removed.

Although the self-care literature consistently emphasizes the importance of nurturing and maintaining supportive relationships at work (e.g., Carroll, Gilroy, & Murra, 1999; Norcross & Guy, 2007), research examining the relationship between professional support and indices of burnout has yielded mixed results. Studies have consistently found that professional support relates to an increased sense of personal accomplishment (e.g., Rupert, Miller, & Dorociak, 2015). However, findings regarding its relationship to emotional exhaustion and depersonalization have been less consistent, with some studies failing to find any relationship (e.g., Rupert et al., 2015). Further, the Rupert and Kent (2007) study examining career-sustaining behaviors found that the professional support-seeking behavior of discussing work frustrations/seek support from colleagues related to higher emotional exhaustion. Overall, further research is needed to understand how professional support self-care strategies are linked to well-being over time.

A second noteworthy finding relates to the value of life balance and cognitive awareness strategies. These aspects of self-care emerged as significant predictors of four of the five outcomes. This is certainly not a surprising finding; the importance of establishing work-life balance and of maintaining self-awareness and a balanced perspective on one's work is consistently emphasized in the professional literature (e.g., Baker, 2003; Carroll et al., 1999; Norcross, 2000; Norcross & Guy, 2007). In addition, research on career-sustaining behaviors has found that behaviors related to maintaining a balance between professional and personal lives and behaviors related to self-awareness and cognitive strategies are consistently among the most highly rated behaviors in terms of their importance for professional functioning (e.g., Coster & Schwebel, 1997; Rupert & Kent, 2007; Stevanovic & Rupert, 2004). Our results provide additional empirical evidence of the important role of life balance and cognitive awareness in influencing a range of personal and professional outcomes in positive ways. Life balance strategies emerged as a significant predictor of both lower emotional exhaustion and greater sense of personal accomplishment and, it is important to note, as the most significant predictor of lower perceived stress and greater life satisfaction. Similarly, cognitive awareness strategies emerged as a significant predictor of lower exhaustion and stress and, of importance, as the

most significant predictor of lower depersonalization and greater sense of personal accomplishment. These strategies thus seemed particularly important to professional functioning.

Daily balance followed close behind life balance and cognitive strategies in emerging as a significant predictor of three of the five outcomes. Again, this was not surprising in that behaviors related to daily balance such as taking breaks throughout the workday are often emphasized in the professional literature (e.g., ACCA, n.d.-b; Baker, 2003; Norcross & Guy, 2007; Wise et al., 2012). Our findings, however, are the first to link daily balance strategies to well-being outcomes, and the regression results indicate that they are particularly important for reducing feelings of stress and exhaustion. Daily balance emerged as the most significant predictor of lower emotional exhaustion and closely followed life balance in emerging as the second most significant predictor of lower perceived stress and the only other significant predictor of greater life satisfaction.

Finally, we should note that professional development emerged as a significant predictor of only one outcome: depersonalization of clients. Keeping in mind that professional development predicted all outcomes in our mediation analyses, we should not interpret this to indicate that professional development is not important. It does suggest, however, that professional development behaviors may have their greatest value in reducing depersonalization. This finding is also consistent with the moderation analysis finding that professional development can serve as a buffer in reducing the impact of stress on depersonalization. Thus, although the impact of professional development self-care strategies may be more focused, these strategies have the potential to exert a significant influence on one's ability to provide competent service.

## Conclusions and Implications

Before concluding, we should consider several limitations of the present survey. First, our participants were all licensed psychologists in Illinois. Although they were a fairly diverse group in terms of age, experience, work setting, and hours worked, they were predominantly White and highly educated (all held doctoral degrees). Consequently, one should be cautious about generalizing our findings to more demographically diverse groups and to groups of other mental health professionals. Second, our measures were all self-report, and as such, we recognize that factors such as reporting bias and common method variance may have inflated the relationships among variables. Further, all measures were completed at one point in time, and as a result, we cannot draw causal conclusions regarding the relationships we observed. It is noteworthy, however, that the pattern of relationships was consistently in line with expectations and with theoretical conceptualization of how self-care impacts well-being. Thus, although further research is needed to replicate our findings with more diverse groups and to assess self-care and well-being over time, our study provides some valuable insight into ways that self-care may promote personal and professional well-being.

Most important, our results suggest that a key mechanism through which self-care may impact both personal and professional well-being is stress reduction. All five aspects of self-care seem to operate in this way, suggesting that ongoing engagement in multiple types of self-care strategies may decrease perceived stress and influence one's well-being. On the other hand, our

results provide much weaker support for the role of self-care as a buffer between the experience of stress and negative outcomes. Considered in light of the stress–distress–impairment continuum described by the APA’s ACCA (n.d.-a), these findings suggest that self-care is most effective when practiced on an ongoing basis with the goal of reducing stress and thereby avoiding the progression to negative outcomes. As stress builds toward distress, self-care needs become more pressing but paradoxically, self-care and the ultimate prevention of negative outcomes may become more difficult. Certainly, more research is needed to understand how self-care may buffer the impact of stress. Our findings provide encouraging evidence, however, that by engaging in ongoing self-care, one may reduce feelings of stress and that this has the potential to prevent negative outcomes as well as enhance positive outcomes. They are thus consistent with the increased emphasis on the prevention and enhancement roles of self-care (e.g., Wise & Barnett, 2016; Wise et al., 2012).

Our results also underscore the multifaceted nature of self-care and indicate that many different types of self-care may have positive impacts on our well-being. In this regard, it is noteworthy that all five types of self-care measured by the SCAP were significant predictors of lower perceived stress and better outcomes in both the professional life domain (all three components of burnout) and personal life domain (life satisfaction). Although supporting the value of all types of self-care, our results also provide information about the relative importance of specific types of self-care in terms of their potential to influence personal and professional outcomes. Consistent with the emphasis on awareness and balance in the self-care literature (e.g., Baker, 2003; Norcross, 2000; Norcross & Guy, 2007), life balance and cognitive awareness strategies seem particularly important. They both emerged as significant predictors of lower perceived stress and multiple other positive outcomes. In this regard, we would emphasize that life balance strategies demonstrated the potential to positively influence not only components of professional burnout but also the personal outcome of life satisfaction. This was also the case for daily balance strategies, further highlighting the valuable role of balance in self-care (ACCA, n.d.-b).

In sum, this study represents an important step in advancing the understanding of the value of self-care, particularly of the five types of self-care measured by the SCAP: professional support, professional development, life balance, cognitive awareness, and daily balance. Although more research is needed, our findings provide evidence linking all five types of self-care to lower perceived stress and better professional and personal outcomes. In that regard, our research provides insight into important aspects of professional self-care and offers empirical support for the growing emphasis on the value of engaging in ongoing, proactive self-care.

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