EMOTIONS MATTER STUDY
Skill Building, Emotional Resilience and Social Support for Care Workers

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The Initiative for Advanced Research on Mental Health and Society (ARMS)

ARMS aims to lead the way for mental health research in the social sciences for a safer and healthier tomorrow. Our goal is to underscore that a social science perspective should be prioritized in an effort to address the burden of mental health problems.

Community Research Platform (CRP)

The CRP is a collaborative initiative between McMaster’s Faculty of Social Sciences and Five Greater Hamilton and Toronto Area community organizations. Through the CRP, researchers and organizations work together to advance research that addresses critical societal challenges. The CRP’s main objectives are to:

1) Increase the research capacity of all stakeholders by developing, sharing, and mobilizing infrastructure, resources, and expertise.
2) Build and sustain an interdisciplinary and intersectoral community of practice involving researchers, students, and community practitioners committed to research with a social purpose.
3) Advance research that responds to needs and aspirations of local communities.
4) Provide students with unique opportunities to advance their community-engaged research skills, contribute to social impact research, and expand their professional skills and networks.
5) Increase capacity to secure academic, community, and government grants for collaborative research.

The Hamilton Public Library (HPL) is a key partner of the CRP. The Director of Collections & Program Development, Lisa Weaver, is a member of the CRP’s Steering Committee. HPL is currently collaborating with McMaster researchers on a series of other research projects.

https://socialsciences.mcmaster.ca/crp/about-us

Canadian Mental Health Association (CMHA)

Each Year CMHA provides direct service to more than 100,000 Canadians through the combined efforts of more than 10,000 volunteers and staff in locally run organizations in all provinces and territories with branches in more than 135 communities. The CMHA is dedicated to the promotion of the mental health of all people, and ensuring the provision of the best possible services for people with mental health problems. Visit www.cmha.ca.

CMHA Hamilton Branch
CMHA Hamilton Branch is a non-profit community mental health agency which provides services to adults with serious mental illness.

Our Mission
Assist and encourage consumers to achieve and maintain their optimum level of functioning in the community within the framework of self-determination.

Our Values
We believe the following values are critical to mental health and a personally satisfying quality of life:

- social justice
- open and honest communication
- enhanced quality of life
- access to appropriate and adequate resources/supports
- self-directed care
• community integration
• diversity and inclusion

Funding Sources
• The Ontario Ministry of Health and Long-Term Care
• The United Way Halton & Hamilton
• The City of Hamilton
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Introduction

The management of emotions was once a hidden and unrecognized requirement of human service work. The COVID-19 pandemic has brought the ‘emotion work’ of frontline workers—like library staff—to the forefront of conversations in the media, as well as amongst executive leaders and the public. There is an ‘emotional balancing act’—between fear for one’s personal safety and maintaining professionalism—that has been a significant stressor for service workers during the pandemic. The Sociologist Arlie Hochschild (1983) defined this almost 40 years ago as emotional labour—a type of work activity that requires human service workers to effectively display certain emotions, while at the same time internally suppressing other felt emotions. While the concept of emotional labour is not a new one, it can—in part—help us understand elevated levels of burnout, anxiety, and psychological distress among frontline workers during the pandemic.

Based on insights gained from a smaller-scale collaboration on emotional labour with CMHA Hamilton, it became evident that there was a need to conduct further research on the consequences of emotional labour. As a CRP research partner organization, The Hamilton Public Library expressed the need to strengthen the capacity of public libraries to be responsive to the emotional well-being of library staff in the Greater Hamilton Area.

Previous studies that focused on the health and well-being of library staff have shown fairly high levels of job satisfaction across various public library staff roles (CULC, 2020). However, librarians have been shown to be particularly affected by navigating difficult encounters with patrons, including instances of aggression (CULC, 2020). Previous research has shown that stress levels are highest among this group (Jordan, 2014; Shupe et al., 2015). Studies on emotional labour in library work—while limited—have demonstrated that the management of emotions is prominent in libraries (Rodger & Erickson, 2021). Research has also suggested that there are health consequences for library workers who experience extended exposure to emotional labour (Rodger & Erickson, 2021; Matteson & Miller, 2013; Simon, 2020). Our team seeks to contribute to this body of knowledge by understanding the experiences of library workers during the COVID-19 pandemic, where the intensity of performing emotional labour is much greater.

This report draws on data from the Library Employee Health and Well-Being Survey (Greater Hamilton Area), a part of the Emotions Matter Project which focuses on skill building, emotional resilience, and social support for frontline service workers. The research team has divided the report into four sections: 1) Data & Methodology, 2) Survey Results, 3) Peer Support Results, 4) Suggested Emotional Resilience Resources.

The results provide a broad overview of each survey section, such as COVID-19 Stressors, Work Context, Emotional Labour, and Health Outcomes. The Peer Support section outlines Library staff feedback on the development of peer support program planning.

Note: This research was approved by McMaster University’s Research Ethics Board (MREB# 5292).
Data & Methodology

Survey Data Collection & Sample Characteristics
The survey of library staff was administered on July 15, 2021 with two reminder emails sent out on June 22 and July 29. Staff from four Ontario Library Systems were randomly selected to complete the survey. We received a response rate of 62% (n=310), with 81% of the sample identifying sex at birth as female and 18% as male. Eighty percent of the sample identified their primary race as white, while 5% identified as mixed heritage and 6% identified as Asian (East, South & South-East).

The following library systems participated in the survey: Hamilton, Grimsby, Burlington & Brantford.

Table 1 provides a breakdown of the sample by occupation. The majority (63%) of respondents reported their occupation as library assistants and technicians. Other occupations included librarians, managers, instructional coordinators, and maintenance, security, and customer support roles.

<table>
<thead>
<tr>
<th>Occupation Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Library assistants, Clerical</td>
<td>46</td>
</tr>
<tr>
<td>Library technicians</td>
<td>17</td>
</tr>
<tr>
<td>Librarians</td>
<td>8</td>
</tr>
<tr>
<td>Managers and Chief Executives, Administrative, Operations, and Other</td>
<td>12</td>
</tr>
<tr>
<td>Instructional Coordinators</td>
<td>4</td>
</tr>
<tr>
<td>Maintenance and security</td>
<td>4</td>
</tr>
<tr>
<td>Other customer support roles</td>
<td>3</td>
</tr>
<tr>
<td>Administrative supervisors and executive assistants</td>
<td>2</td>
</tr>
<tr>
<td>Other administrative roles including analysts, designers, and developers</td>
<td>2</td>
</tr>
</tbody>
</table>
Focal Survey Measures & Descriptive Results

Covid-19 Stressors
We asked respondents several questions about COVID-19 and its impact on staff. The questions address, a) overall disruption to life; b) emotional well-being; c) stress exposure due to the pandemic.

Disruption to “Normal” Life
Figure 1 presents a breakdown of respondents who reported the degree to which the pandemic has disrupted their lives – ranging from 0 “Completely Normal” to 10 “Completely Disrupted.” Results indicate that there was a slightly higher number of respondents reporting that their lives were minimally disrupted.

Figure 1. Percent of Respondents who Report Disruption to “Normal” Life Due to COVID-19.

<table>
<thead>
<tr>
<th>Compared to before the COVID-19 Pandemic, how “normal” would you say your life is now?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completely Disrupted</td>
</tr>
<tr>
<td>Completely Normal</td>
</tr>
</tbody>
</table>

Emotional Well-Being
Table 2 presents the breakdown of respondents who reported that their emotional well-being was impacted by COVID-19. The majority of respondents (68%) reported that their emotional well-being was impacted but that they were able to manage. We also found that 15% of respondents reported that they were overwhelmed at one point but were able to get the help they needed.

Table 2. Percent of Respondents who were Emotionally Impacted by COVID-19.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>12</td>
</tr>
<tr>
<td>Yes, but I was able to manage it</td>
<td>68</td>
</tr>
<tr>
<td>Yes, but I was/am overwhelmed and couldn't find help</td>
<td>6</td>
</tr>
<tr>
<td>Yes, I was/am overwhelmed but I was /am able to get help</td>
<td>15</td>
</tr>
</tbody>
</table>
Stress Related to the COVID-19 Pandemic

We asked respondents to reflect on the past eight weeks when their stress related to the pandemic was likely the greatest; we then asked them to report how much of their stress was due to the following problems, a) family finances; b) increased social isolation; c) difficulty getting help for loved ones; d) increased arguments with family members; e) worry about getting infected; f) worry about loved ones getting infected. Forty-two percent of respondents reported that they experienced no stress related to family financial issues. With respect to social isolation, 37% of respondents reported moderate stress and 19% of respondents reported severe stress due to social isolation. Twenty-six percent of respondents reported mild stress due to difficulty getting help for loved ones and another 26% of respondents reported moderate stress on this measure. Thirty-five percent of respondents reported no stress with regards to increased arguments with family or friends. Fifty-seven percent of respondents reported moderate or mild stress due to worrying about getting infected with COVID-19, and 37% of respondents reported severe or very severe stress due to worrying about loved ones getting infected with COVID-19. See Table 3.

Table 3. Percent of Respondents Reporting Degree of Stress Due to Problems Caused by COVID-19.

<table>
<thead>
<tr>
<th></th>
<th>Very Severe Stress</th>
<th>Severe</th>
<th>Moderate</th>
<th>Mild</th>
<th>No Stress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Finances</td>
<td>3</td>
<td>8</td>
<td>22</td>
<td>25</td>
<td>42</td>
</tr>
<tr>
<td>Increased Social Isolation</td>
<td>5</td>
<td>19</td>
<td>37</td>
<td>27</td>
<td>13</td>
</tr>
<tr>
<td>Difficulty getting help for loved ones</td>
<td>6</td>
<td>8</td>
<td>26</td>
<td>26</td>
<td>35</td>
</tr>
<tr>
<td>Increased arguments with family or friends</td>
<td>4</td>
<td>8</td>
<td>25</td>
<td>28</td>
<td>35</td>
</tr>
<tr>
<td>Worry about getting infected</td>
<td>6</td>
<td>17</td>
<td>36</td>
<td>31</td>
<td>10</td>
</tr>
<tr>
<td>Worry about loved ones getting infected</td>
<td>17</td>
<td>20</td>
<td>36</td>
<td>21</td>
<td>6</td>
</tr>
</tbody>
</table>
Emotional Labour

Emotional labour was the focal point of interest for this study. While the health consequences of emotional labour are well known to those who work in healthcare, the working conditions caused by the pandemic elevated many of the mental health consequences of emotion management among frontline workers. There were four measures on the survey that captured different dimensions of the emotional labour process. Two of which are indicators of the intrapsychic aspect of emotion management—deep acting and surface acting. The remaining two measures captured the degree to which staff positions require positive and negative emotional display rules.

Emotion Regulation

Previous research on emotional labour has revealed that deep acting—an emotion regulation strategy—is a healthier internal psychological process than surface acting which is when we fake or suppress our emotions. Deep acting represents a process of empathetic reasoning to help produce a more authentic emotional display when we are interacting with others. Deep acting helps individuals bring into alignment what they are projecting to others and what they are actually feeling, which produces greater authenticity and protects the individual from alienating themselves from their own feelings and emotions.

In the field of psychology, these terms are most akin to the concepts of response-focused strategies and antecedent-focused strategies for emotion regulation—components of a process model developed by James Gross in his influential work published in 1998, entitled, The Emerging Field of Emotion Regulation: An Integrative Review. When applied to emotional labour, experts have identified antecedent-focused emotion regulation as ‘deep acting’ and response-focused emotion regulation as ‘surface acting.’

Deep Acting

We asked respondents to report how frequently they engage in indicators of deep acting on an average day at work. We found that the majority of respondents reported varying degrees of effort to actually feel and experience the emotions required of them most of the time and some of the time. See Table 4.
Table 4. Percent of Respondents Reporting Frequency of Deep Acting Indicators.

<table>
<thead>
<tr>
<th></th>
<th>All or almost all of the time</th>
<th>Most of the time</th>
<th>Some of the time</th>
<th>A little of the time</th>
<th>None of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Make an effort to actually feel the emotions that you need to display to others</td>
<td>13</td>
<td>28</td>
<td>31</td>
<td>17</td>
<td>11</td>
</tr>
<tr>
<td>Try to actually experience the emotions that you must show</td>
<td>11</td>
<td>28</td>
<td>31</td>
<td>18</td>
<td>12</td>
</tr>
<tr>
<td>Really try to feel the emotions that you have to show as part of your job</td>
<td>11</td>
<td>31</td>
<td>26</td>
<td>19</td>
<td>13</td>
</tr>
</tbody>
</table>

Surface Acting
Table 5 presents the percentage of respondents reporting the frequency of engaging in indicators of surface acting on an average day at work. We found that the majority of respondents reported engaging in these indicators some of the time. The highest percentage of respondents (39%) report hiding their true feelings about a situation some of the time.

Table 5. Percent of Respondents Reporting Frequency of Surface Acting Indicators.

<table>
<thead>
<tr>
<th></th>
<th>All or almost all of the time</th>
<th>Most of the time</th>
<th>Some of the time</th>
<th>A little of the time</th>
<th>None of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resist expressing your true feelings</td>
<td>12</td>
<td>22</td>
<td>36</td>
<td>22</td>
<td>7</td>
</tr>
<tr>
<td>Pretend to have emotions that you don’t really have</td>
<td>9</td>
<td>13</td>
<td>35</td>
<td>22</td>
<td>21</td>
</tr>
<tr>
<td>Hide your true feelings about a situation</td>
<td>10</td>
<td>16</td>
<td>39</td>
<td>26</td>
<td>9</td>
</tr>
</tbody>
</table>
Positive Emotional Display Requirements
We also asked a series of questions that capture positive emotional display requirements at work. Overall, respondents reported frequently engaging in positive emotional displays on an average day at work. We found that the majority of respondents (51%) reported expressing friendly emotions like smiling, giving compliments, and making small talk all or almost all of the time. Other reported displays of positive emotional requirements include, 1) reassuring people who are distressed and upset; 2) remaining calm when feeling astonished; and 3) expressing feelings of sympathy. Results are presented in Table 6.

Table 6. Percent of Respondents Reporting the Frequency of Positive Emotional Displays at Work.

<table>
<thead>
<tr>
<th></th>
<th>All or almost all of the time</th>
<th>Most of the time</th>
<th>Some of the time</th>
<th>A little of the time</th>
<th>None of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reassure people who are distressed or upset</td>
<td>14</td>
<td>20</td>
<td>40</td>
<td>18</td>
<td>8</td>
</tr>
<tr>
<td>Remain calm even when you are astonished</td>
<td>18</td>
<td>34</td>
<td>28</td>
<td>16</td>
<td>4</td>
</tr>
<tr>
<td>Express feelings of sympathy (e.g., saying you “understand,” you are sorry to hear about something)</td>
<td>23</td>
<td>30</td>
<td>35</td>
<td>9</td>
<td>2</td>
</tr>
<tr>
<td>Express friendly emotions (e.g. smiling, giving compliments, and making small talk)</td>
<td>51</td>
<td>36</td>
<td>10</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

Negative Emotional Displays
Table 7 presents the percentage of respondents reporting the frequency of engaging negative emotional displays on an average day at work. We found that 33% and 24% of respondents reported hiding their anger or frustration over something that someone has done some of the time and most of the time respectively. Similarly, 35% of respondents reported hiding their disapproval over something someone has done some of the time. With respect to hiding fear about someone who appears threatening, most respondents (35%) reported hiding this fear none of the time.
Table 7. Percent of Respondents Reporting Frequency of Negative Emotional Displays.

<table>
<thead>
<tr>
<th>All or almost all of the time</th>
<th>Most of the time</th>
<th>Some of the time</th>
<th>A little of the time</th>
<th>None of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hide your anger or frustration about something someone has done (e.g. an act that is distasteful to you)</td>
<td>14</td>
<td>24</td>
<td>33</td>
<td>24</td>
</tr>
<tr>
<td>Hide your disapproval over something someone has done</td>
<td>13</td>
<td>21</td>
<td>35</td>
<td>26</td>
</tr>
<tr>
<td>Hide your fear of someone who appears threatening</td>
<td>12</td>
<td>13</td>
<td>17</td>
<td>22</td>
</tr>
</tbody>
</table>

Work Context

We wanted to ensure that we were able to capture workplace contextual factors in our study. We know that in supportive work contexts, the consequences of managing emotions tend to be less severe. We have included some of the more relevant measures of work context here.

Psychological Health and Safety Climate at Work

We asked respondents to rate the psychological health and safety climate at their respective branches. We found that the majority of respondents (31%) rated their workplaces as healthy and supportive. These results are presented in Table 8.

Table 8. Percent of Respondents Rating the Psychological Health and Safety of their Workplace Climate.

<table>
<thead>
<tr>
<th>Healthy/Supportive</th>
<th>31</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good</td>
<td>29</td>
</tr>
<tr>
<td>Fair</td>
<td>17</td>
</tr>
<tr>
<td>Neutral</td>
<td>7</td>
</tr>
<tr>
<td>Not so Good</td>
<td>8</td>
</tr>
<tr>
<td>Poor</td>
<td>5</td>
</tr>
<tr>
<td>Toxic</td>
<td>2</td>
</tr>
</tbody>
</table>


**Workplace Resources**
Staff were also asked about the extent to which they agree that their workplace has **enough resources to do the job the way it should be done**. We found that the majority of respondents (45%) agreed with this statement and an additional 25% strongly agreed. Results are shown in table 9.

**Table 9.** Percent of Respondents who Agree or Disagree that their Workplace has Enough Resources to Perform their Job Appropriately.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>25</td>
</tr>
<tr>
<td>Agree</td>
<td>45</td>
</tr>
<tr>
<td>Neutral</td>
<td>15</td>
</tr>
<tr>
<td>Disagree</td>
<td>13</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>2</td>
</tr>
</tbody>
</table>

**Employer Support and Accommodation**
We asked staff the extent to which they agree that their employer provides adequate accommodation to allow them to deal with responsibilities outside of the workplace. The majority of respondents (42% and 22%) agreed and strongly agreed with this statement respectively. See table 10.

**Table 10.** Percent of Respondents who Agree that their Employer Provides Adequate Support and Accommodation for Responsibilities Outside of Work.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>22</td>
</tr>
<tr>
<td>Agree</td>
<td>42</td>
</tr>
<tr>
<td>Neutral</td>
<td>21</td>
</tr>
<tr>
<td>Disagree</td>
<td>11</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>4</td>
</tr>
</tbody>
</table>
Job Satisfaction, Turnover Intentions and Workplace Support

With regards to work, stress, and health, job satisfaction is an important psychosocial outcome. Our team wanted to ensure that it was captured in this study. These results are presented in Table 11.

When asked how satisfied they are with their jobs, 27% of staff reported that they are very much satisfied and 34% reported that they are quite a lot satisfied; 35% of staff reported that they are somewhat satisfied with their jobs. With regards to turnover intentions, 62% of respondents reported that it is not at all likely they will try to find a different job with another organization in the next two years. In terms of overall workplace support, 40% of respondents reported that they feel very much supported by their employers, directors and/or colleagues.

Table 11. Percent of Respondents Reporting their Current Level of Job Satisfaction, Turnover Intentions and Overall Workplace Support.

<table>
<thead>
<tr>
<th></th>
<th>Very Much</th>
<th>Quite a lot</th>
<th>Somewhat</th>
<th>Not at all</th>
</tr>
</thead>
<tbody>
<tr>
<td>How satisfied do you feel with your job?</td>
<td>27</td>
<td>34</td>
<td>35</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Very Likely</th>
<th>Somewhat Likely</th>
<th>Not at all Likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the next 2 years, how likely is it that you will try to find a different job with another firm or organization?</td>
<td>14</td>
<td>24</td>
<td>62</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Very Much-supported</th>
<th>Somewhat-supported</th>
<th>Neutral</th>
<th>Somewhat-unsupported</th>
<th>Not at all-supported</th>
</tr>
</thead>
<tbody>
<tr>
<td>How supported do you feel by your employer, director, or colleagues?</td>
<td>40</td>
<td>31</td>
<td>14</td>
<td>12</td>
<td>3</td>
</tr>
</tbody>
</table>
Health Outcomes
We asked a series of questions in the survey about staff’s physical and mental health to get a sense of the health and well-being of staff during the pandemic and across branches. These questions are based on validated measures of previous mental health research in the social sciences and psychiatry.

Self-Rated Health
We asked respondents to rate the current state of both their physical and mental health with response categories ranging from excellent to poor. **We found that 39% of respondents rated their physical health as either excellent or very good** while 21% rated their physical health as fair or poor. In contrast, staff rated mental health was poorer; only **27% of respondents rated their mental health as excellent or very good** while 37% rated their mental health as fair or poor. See Table 12.

<table>
<thead>
<tr>
<th>At the present time, in general would you say your physical health is …?</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>10</td>
<td>29</td>
<td>39</td>
<td>17</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>At the present time, in general would you say your mental health is …?</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>5</td>
<td>22</td>
<td>36</td>
<td>27</td>
<td>10</td>
</tr>
</tbody>
</table>

Anger
We asked respondents a series of five questions that tap into feelings of annoyance and frustration—capturing the underlying construct of anger. We adapted this measure from the 2005 Work, Stress and Health Survey (PI: Scott Schieman).

We asked respondents in the past seven days, on how many days have you felt annoyed or frustrated, felt angry, felt critical of others, yelled at someone about something, or lost your temper. The majority of respondents **did not** report yelling at someone or losing their temper (64% and 66% respectively) in the past seven days. However, we did see a higher number of respondents report feeling angry and critical of others on 1 to 2 days. See Figure 1.
Generalized Anxiety
We included four questions on anxiety symptoms. We highlight the results from these questions and present the findings in table 13.

We asked respondents to report how often they experienced a series of indicators of anxiety in the past 30 days. The majority of respondents (41%) reported worrying about a number of different things in life, such as work, family, health and finances all of the time or most of the time.

We found that 33% of respondents reported feeling worried or anxious all of the time and most of the time.
One of the main goals of the Emotions Matter Project is to address the need for evidence-based research to help inform the development of supportive workplace resources and strategies to promote emotional resiliency among community care professionals. Respondents were asked one closed and one open ended question regarding their thoughts on a formalized peer support program. Employees believed they would benefit from such a program and requested that the following qualities be central to implementation: 1) confidential and non-judgemental, 2) flexible and accessible, 3) group-based, and 4) voluntary.

We asked staff the extent to which they agree that their organization would benefit from a formalized peer support program for employees. We found that 44% of staff surveyed reported that they agree or strongly agree with the statement. See Table 14.

### Table 13. Percent of Respondents Reporting Symptoms of Anxiety Symptoms in the Past 30 Days.

<table>
<thead>
<tr>
<th></th>
<th>All or almost all of the time</th>
<th>Most of the time</th>
<th>Some of the time</th>
<th>A little of the time</th>
<th>None of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feel worried or anxious</td>
<td>15</td>
<td>18</td>
<td>39</td>
<td>23</td>
<td>5</td>
</tr>
<tr>
<td>Worry about a number of different things in your life, such as your work, family, health, or finances?</td>
<td>19</td>
<td>22</td>
<td>27</td>
<td>21</td>
<td>2</td>
</tr>
<tr>
<td>Feel more worried than other people in your same situation?</td>
<td>9</td>
<td>17</td>
<td>32</td>
<td>21</td>
<td>21</td>
</tr>
<tr>
<td>Worry excessively or too much?</td>
<td>12</td>
<td>17</td>
<td>26</td>
<td>25</td>
<td>20</td>
</tr>
</tbody>
</table>
Table 14. Percent of Respondents who Agree that their Organization Would Benefit from A Formalized Peer Support Program.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>32</td>
<td>38</td>
<td>5</td>
<td>3</td>
</tr>
</tbody>
</table>

Qualities of a Peer Support Program

In the final section of the survey, we asked staff the following open-ended question: “If a formal peer support program was implemented at CMHA for employees, what qualities would you like to see in the program?” Based on responses, we identified four main themes. Each are discussed in turn below.

Figure 3. Major Themes Emerging from Qualitative Responses Regarding Desired Features of a Peer Support Program.

Many respondents indicated that they felt a peer support program should provide strong confidentiality protocols so that those seeking peer support are not able to be identified. Not only will this ensure the protection of staff’ privacy, but it will also help mitigate any concerns about judgement. Respondents also indicated that they would like the peer supports to avoid advice giving.

Another strong theme that came through in the data was that staff wanted a program that would offer support in a flexible and accessible way to accommodate work schedules and personal schedules. Flexibility and accessibility were outlined in
many ways, but most staff wanted to have a variety of options available for engaging with peer supports. Respondents expressed that they wanted the peer support program to be in a workshop format that was fun and social.

Connecting with all peers was another strong theme that came through in the data. Staff expressed that they would like a peer support program that is in group settings instead of one-on-one.

Conclusion & Supports
In this section, we will briefly discuss the results from the survey based on the focal areas of interest for this study, 1) Convid-19 Stressors, 2) Emotional Labour and 3) Health Outcomes. We then provide an overview of how the results from the peer support section of the survey are helping to inform the workplace resources and support programs that are currently in development at CMHA Hamilton. These resources are being designed to address areas of need among frontline staff who participated in the study.

Covid-19 Stressors
Overall, it was encouraging to see that while staff struggled emotionally due to the pandemic, they were able to manage it for the most part. We also found that respondents did not feel an overwhelming disruption to their lives, compared to before the COVID-19 pandemic. One area of concern is the impact that social isolation may have had on staff’s mental health. We found that 61% of respondents reported severe and moderate stress due to increased social isolation caused by COVID-19.

A final theme that was particularly prominent in staff’s responses was that the peer support program would be voluntary and connect across library systems. Staff would like to have the option to engage with peer supports, however, they do not want it to be mandatory. They also hope to connect across Library systems to expand social connections and remain anonymous.

Elevated stress was also found among those who reported a greater intensity in worrying about loved ones getting infected by COVID-19. We found that 73% of respondents reported very severe, severe, or moderate stress over worrying about infections among loved ones.

Emotional Labour
With regards to emotional labour, we found that occupational roles held by staff at libraries are emotionally laborious. However, it was encouraging to see that the frequency of emotional displays reported by the majority of staff were positive emotional displays—those that are less likely to lead to distress or require faking and suppressing emotions. While negative emotional displays (e.g., hiding anger or frustration) were reported less frequently compared to positive displays, we found that a higher percentage of staff reported hiding anger, frustration, and disapproval over something someone has done most of the time and some of time on an average day at work. It was encouraging to see that the majority of library staff report engaging in indicators of deep acting.
strategies frequently on an average day at work (most of the time and some of the time). We also found that the majority of staff reported engaging in indicators of surface acting some of the time on an average day at work. This is not overly concerning; however, we still recommend the use and implementation of an emotional labour skills training module for staff who interact with patrons frequently.

Health Outcomes

Overall, we found that the majority of staff report good physical health, however, mental health was less positive; self-reports revealed that 37% of respondents rated their mental health as fair and poor. Interestingly, in contrast to trends around ‘covid-rage’ and elevated levels of frustration in the general population, we found that the majority of staff reported minimal indicators of anger in the past seven days from the day the survey was completed. With regards to generalized anxiety, we found that 41% of respondents reported worrying about a number of different things in life all or most of the time. Self-reported feelings of worry and anxiety were lower but less than ideal as 33% of respondents reporting experiencing these feelings all or most of the time in the past 30 days. These results support our earlier speculations that there is a current need to focus on staff resiliency and wellness as we enter a potential fifth wave of the pandemic in Ontario.

Workplace Supportive Resources

This project has, in part, been informed by recent events. The global COVID-19 pandemic revealed that the unprecedented rise in traumatic experiences around the world created an “echo pandemic” (CMHA, 2020) among frontline doctors, nurses, and social service workers who were experiencing elevated emotional strain and anxiety from working on the frontlines of the pandemic. In response to this, McMaster University and the Hamilton branch of the CMHA partnered on a smaller-scale project to implement and assess the effectiveness of a free, short-term COVID-19 intervention program—consisting of four counselling sessions—for healthcare, library, and education workers in the Greater Hamilton Area. In response to this, there has been interest in exploring support resources for library workers.

The objectives of this project are based on the insights we have gained from our team’s initial research collaboration. The findings from our initial study have shown that the experience of emotion regulation among frontline workers is a pervasive stressor—one that contributed to emotional strain and burnout before the pandemic, and extends beyond the unprecedented experiences caused by COVID-19.

These insights along with the results from this report suggest that more sustainable, long term intervention measures are required in order to fully address the needs of frontline service workers. Although there are parallels to findings from similar work with CMHA staff as both populations have experiences indicating emotional strain that has been further exacerbated by the COVID-19 pandemic, our findings suggest that library workers would be best served by an emotional labour skills training module with consideration of implementing peer support workshops.

As part of their own efforts to improve organizational practices and employee
wellness, CMHA Hamilton is leading the development of social support and emotions skills training for CMHA employees with the Emotions Matter Research Team. While much of these resources are clinically informed, we believe many of them would be valuable for library staff.

The final stage of the Emotions Matter project is currently underway. The results presented in this report are currently being used to inform the development of an Emotional Labour Skills Training Course and a Peer Social Support Program which will be piloted among CMHA staff in 2022.

A pilot project will be led by Drs. Diana Singh and Marisa Young and their research team through ARMS, along with Sue Phipps and her Clinical team at CMHA Hamilton. This project is supported and facilitated by McMaster University’s Community Research Platform and the Initiative for ARMS. CMHA Hamilton will lead the rollout of the pilot program for CMHA Staff.

The program will include multiple components and resources and will be developed in collaboration with the branch’s Wellness Committee and Clinical Director, as well as the research team. The program will include education and training on emotional labour, to be carried out by Dr. Singh as an online course offering. This is a short course designed with modules that will introduce staff to the concept, consequences, and social psychological research on emotional labour and emotion management; the modules will also include an emotional resilience skills training and coping strategies component. The course will be available to library staff in early 2022.
References


