

The Reality Gap

***A grounded theory study investigating turnover intention
among Australia's rural-based, early career community
mental health professionals***

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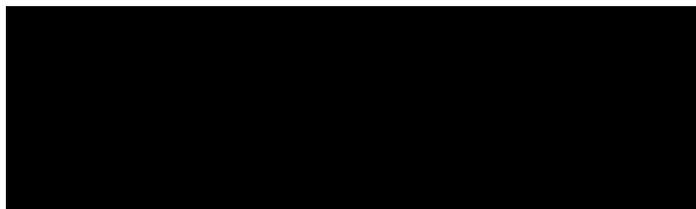
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I certify that I am the sole author and that the substance of this thesis has not already been submitted for any degree and is not currently being submitted for any other degree or qualification.

I certify that, to the best of my knowledge, any help received in preparing this thesis, and all sources used, have been acknowledged in this thesis.



Catherine Cosgrave

September 2015

Dedication

To my Mum – Judy Cosgrave

1933-2015

Thank you for believing in the value of education

and

Encouraging me always to do my best

Acknowledgements

Firstly, I wish to thank the early career community mental health professionals working in rural and remote services who took part in this study, sharing their stories and generously giving me their time because they wanted things to be better for the staff who came after. I hope that I have told your stories honestly. I wish to pay respect to the hard and demanding jobs you do in difficult circumstances on a daily basis – rural based community mental health is not for the fainthearted and I know the big efforts you make go mostly unrecognised. I hope the recommendations arising from this research help improve staff retention and this helps to ease your burden a little.

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Abstract

Community mental health (CMH) case management services in rural Australia are an important public sector mental health service, heavily relied upon by people living with serious and/or persistent mental ill-health. Chronic staffing shortages are widespread within these rural CMH services, arising from long-term vacancies and high staff turnover. This study aimed to investigate how employment and rural-living factors impacted the turnover intention of early career CMH professionals in their first few years working in rural services. Using a grounded theory methodology, the study aimed to produce a substantive theory explaining this turnover intention phenomenon as well as to identify the basic social process to assist with theoretical conceptualisation. Twenty-six in-depth interviews with early career health professionals who had worked for over 12 months for NSW Health in rural CMH positions were undertaken.

Data analysis identified the basic social process concerned change encompassing stages of adjustment, adaption and assessing. The theory proposed that employment and rural living factors influenced turnover intention depending on manageability of the gap between individuals' professional and personal expectations and the reality of their employment and living experience (*the reality gap*). This gap was found to intensify or lessen depending on workers' particular characteristics. These were: whether they had prior relevant work experience and/or a well-formed professional identity when starting the job; whether they were an outsider-newcomer to the town; their sense of place dependence towards the town; and their current life-stage.

Based on these factors, differing risk levels for experiencing a reality gap were identified and a risk vulnerability assessment tool developed. This study also found that the decision to stay or leave a rural job is generally made early on and often in the adjusting stage. Professional factors most strongly impacted the reality gap in the adjusting stage and most workers experienced a large reality gap due to their unfamiliarity with performing a demanding job and having to adapt to working in a resource-constrained rural health service. In this stage, the reality gap was lessened for those with relevant work experience and/or a formed professional identity. At this stage those who were very inexperienced and recruited from outside the town were the most vulnerable. After adapting to the job, personal factors impacted workers more and the reality gap was heightened for those in early-adulthood who generally had little or no place dependence, especially if outsider-newcomers. Workers in middle-adulthood concerned with raising family generally had strong place dependence towards the town and chose to stay in their CMH job.

This study has improved understanding of turnover intention for rural-based early career CMH professionals. The risk vulnerability matrix and recommendations made have relevance for other public sector human services for helping in the development of effective policy and procedural responses to reduce avoidable turnover among early career staff working in rural services.

Publication of this research to date

Cosgrave, C., Hussain, R., & Maple, M. (2015). Factors impacting on retention amongst community mental health clinicians working in rural Australia: a literature review. *Advances in Mental Health* 13(1), 58-71. doi:10.1080/18374905.2015.1023421

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Glossary of terms

ABS	Australian Bureau of Statistics
AIHW	Australian Institute of Health and Welfare
Aboriginal MHW(s)	Aboriginal Mental Health Worker(s)
ALP	Australian Labor Party
ASGC-RA	Australian Standard Geographical Classification–Remoteness Area
CAMHS	Child and Adolescent Mental Health Services
CMH	Community mental health
COAG	Council of Australian Governments
CPD	Continuing Professional Development
CRN	Collaborative Research Network
CTO	Community Treatment Order
GP(s)	General practitioner(s)
GT	Grounded theory
HWA	Health Workforce Australia
LHD(s)	Local Health District(s)
LNC	Liberal National Coalition
MH	Mental health
MBI	Maslach’s Burnout Inventory
MHA	Mental Health Act
NGO(s)	Non-governmental organisation(s)
NMHC	National Mental Health Commission
NSW	New South Wales
OT(s)	Occupational Therapist(s)
RN(s)	Registered Nurse(s)
UK	United Kingdom
UNE	University of New England
USA	United States of America
WHO	World Health Organization