

Title: Organizational Responses to Child Welfare Professionals: Do they Predict Secondary Traumatic Stress, Burnout, Compassion Satisfaction and Self-Care among Front Line Workers and Supervisors?

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Background:

Previous research has established that secondary traumatic stress (STS) and burnout are prevalent among child welfare professionals (Baugerud et al., 2018; Bride et al., 2007; Sprang et al., 2011). Research has also identified that increased compassion satisfaction is associated with decreased rates of STS and burnout (Baugerud et al., 2018). Theoretical literature suggests organizations may be able to mitigate STS responses among their employees, encouraging self-care as an important component of professionals' ability to prevent and reduce STS (Figley, 1995). However, little is known about which organizational responses most promote positive worker outcomes related to professional stress. The purpose of this study was to explore organizational behaviors influencing STS, burnout, and compassion satisfaction among child welfare professionals and examine whether the frequency of self-care was associated with decreased STS and burnout.

Methods:

Data were collected via a statewide, online survey of child welfare professionals in one Midwestern state (N=324). The survey comprised 68 items, including the Professional Quality of Life (ProQol) Scale (CVT, 2019), which measured STS, burnout, and compassion satisfaction with a Likert-type scale. Organizational trauma responsiveness was measured by a modified version of the STS-Informed Organization Assessment (Sprang et al., 2017), from which a scale score was developed. Participants also reported how frequently they practiced self-care. Linear regression analyses with multiply imputed data were used to test: (1) the association between organizational trauma responsiveness and STS, burnout, and compassion satisfaction scores; the relationship between frequency of self-care and STS, burnout, and compassion satisfaction; and (3) the relationship between specific organizational responses and if they predicted related to self-care and frequency of self-care. All models controlled for demographic variables and began with bivariate analyses.

Results:

Participants were employed in public and private agencies as frontline workers (67%), supervisors (29%) and in other roles (4%). The majority of participants had been working in child welfare for less than 6 years (63%). When controlling for demographic characteristics, linear regression indicated that lower organizational trauma responsiveness predicted significantly higher rates of STS ($F(5,302)=2.208, p<.05, R^2=.035$), burnout ($F(5,302)=15.435, p<.001, R^2=.205$), and compassion satisfaction ($F(5,302)=14.372, p<.0001, R^2=.192$). Additionally, linear regression showed increased frequency of self-care was associated with lower STS ($F(5,302)=4.822, p<.001, R^2=.074$) and burnout ($F(5,302)=6.341, p<.001, R^2=.095$). Having a supervisor who encouraged self-care was not significantly related to professionals' frequency of self-care. However, having a supervisor who modeled self-care was significantly associated with increased frequency of self-care ($F(5,302)=1.195, p<.05, R^2=.019$).

Implications:

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These findings highlight the influence organizations may have on the well-being of employees. This study addresses a present gap in the literature by building evidence that suggests trauma responsive organizations may potentially have positive influence on rates of STS, burnout and compassion satisfaction. This study also suggests self-care is a significant predictor of STS and burnout and that supervisors may encourage workers' use of self-care by modeling it themselves. These findings underscore the need for further research on how organizations can use actionable strategies to improve worker well-being and resilience and thus strengthen their workforce.