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Secondary Trauma in the Child Welfare Workforce 2000-present

Indirect Trauma: An Occupational Hazard. (Chapter 5 in Introduction to Working With Adult Survivors of Childhood Trauma: Techniques and Strategies.)

Knight, Carolyn.

2009

The indirect trauma felt by practitioners working with adult survivors of childhood trauma is described, and secondary posttraumatic stress disorder is defined. Vicarious traumatization, compassion fatigue, risk factors for and protections against indirect trauma, and indirect trauma and countertransference are also discussed. Implications for supervision and for agencies and organizations are reviewed, and self-care strategies for helping professionals are proposed.

Compassion Fatigue in Child Welfare.

Rakoczy, Stephanie.

2009

The New Social Worker

16 (4) p. 16-18

This article explores compassion fatigue in child welfare caseworkers, what the causes are, the consequences, and what can be done to address the problem. Findings from studies on compassion fatigue are shared and the proposed Teri Zenner Social Worker Safety Act is highlighted. This Act would set up a grant program that would provide workplace safety measures, as well as equipment and training for social workers and others who work with potentially dangerous clients. The need to ensure social workers have a degree from an accredited school or program of social work or social welfare is also discussed. 19 references.

<http://www.socialworker.com/digitalmag/fall2009.pdf>

Quality of Life and Compassion Satisfaction/Fatigue and Burnout in Child Welfare Workers: A Study of Child Welfare Workers in Community Based Care Organizations in Central Florida: Presented at: NACSW Convention 2008, February, 2008, Orlando, FL.

Van Hook, Mary P. Rothenberg, Michael.

NACSW Convention (58th : 2008 : Orlando, Fla.).

2008

Given the high rate of turnover in child welfare settings, the costs associated with training and the effect that turnover has upon the quality of services for children, it is important to identify issues that contribute to turnover as well as retention. This report briefly reviews prior studies in

this area and presents the findings of a study conducted among 182 child welfare workers in Central Florida that identified levels of compassion satisfaction, compassion fatigue/vicarious trauma, and burnout among workers, and workers' suggestions regarding ways to reduce stress. The study also explored how demographic variables of age, gender, education, length in the field and in the agency, and the nature of the position were associated with different levels on these dimensions. For the study, an anonymous survey was distributed to staff members in three organizations providing child welfare services under subcontract arrangements within the community based care system of services. The survey included the Professional Quality of Life Survey (ProQOL), information about participants' ways of addressing stress, and suggestions for the agency to reduce worker stress, and demographic information. Although the scores of respondents in general did not place them in the high risk categories for burnout and compassion fatigue, groups of individuals were at heightened risk and thus can be at greater risk for leaving child welfare or being less effective in their work responsibilities. These include women, younger workers, and individuals with key responsibilities with vulnerable young children who have already have experienced major trauma and disruptions in their lives?the dependency case managers, and the lead dependency case managers. The need for workloads that are manageable and administrative support is highlighted. 20 references. (Author abstract modified)
<http://www.nacsw.org/Publications/Proceedings2008/VanHookMQuality.pdf>

Secondary Traumatic Stress and Child Welfare.

Caringi, James C. Hall, Jeanette Rankin.
2008

International Journal of Child and Family Welfare 11 (4) p. 172-184

Although secondary traumatic stress (STS) has garnered some attention in related human service fields, it has only recently begun to be investigated in child welfare. In this article I offer a detailed description of the problem of secondary traumatic stress (STS) in child welfare. The focus of this article is on child welfare in the United States; however the ideas and principles may cut across international systems of child protection. First I provide a background to justify a need for a continuing dialog regarding STS and its impact on workers. I then provide a comprehensive review of the literature including both the current state of research and emerging theory regarding STS. Also, I offer a rationale for more research regarding the impact of STS on child welfare workers. The current state of the existing STS literature provides indicators of future needs, however still is filled with mainly gaps and silences. (Author abstract)

When the Helper Becomes Traumatized: Taking Care of You (Chapter 21 in Foster Care Therapist Handbook: Relational Approaches to the Children and Their Families).

Woodard-Meyers, Tracy.
Child Welfare League of America.
2008

This chapter discusses the phenomenon of secondary traumatic stress (STS), and how it impacts foster care workers and therapists. Prevention and intervention strategies are presented and include recognition and normalization of STS, establishing positive coping strategies, establishing

support systems to talk it out, and seeking professional help. A case study is offered. 1 table and 34 references.

How to Maintain Emotional Health When Working with Trauma.

Osofsky, Joy D. Putnam, Frank W. Lederman, Cindy S.

2008

Juvenile and Family Court Journal 59 (4) p. 91-102

Vicarious traumatization, compassion fatigue, or secondary traumatization refers to the cumulative effect of working with survivors of traumatic life events as part of everyday work. Although this issue has been acknowledged and addressed among professionals such as police officers and medical professionals, it has been discussed less among juvenile and family court judges who also experience secondary traumatic stress. In fact, in one recent study, a majority of judges reported one or more symptoms of secondary traumatization. This article describes the common signs and symptoms of secondary trauma, job-related factors that contribute to secondary trauma among judges, and the potential negative impact on organizational performance. The authors conclude with specific recommendations tailored for juvenile and family court judges. (Author abstract)

Educating Child Welfare Workers About Secondary Traumatic Stress (Chapter 3 of Secondary Traumatic Stress and the Child Welfare Professional).

Pryce, Josephine G. Shackelford, Kimberly K. Pryce, David H.

University of Alabama.

2007

This chapter discusses strategies for educating child welfare professionals on how secondary traumatic stress (STS) differs from burnout, how it arises, and intervention options. Findings are shared from workshops conducted between 1997 and 2004 with child welfare professionals in five States, and indicate the child welfare professionals (n=666) were affected by STS, and less so by burnout. Younger workers and workers with less experience in the field were more affected by STS and individuals who had experienced childhood trauma had high STS scores. Information that is presented in the workshops is provided and addresses: how trauma changes the psychological frame of reference or worldview; coping with secondary traumatic stress and using social support; and self-assessment in the areas of physical self-care, social self-care, emotional self-care, personal trauma history, and disbelief and dismissal trauma. Professional coping factors are identified, and ways to use humor as a coping skill is discussed. Finally, professional development and anticipatory coping are addressed.

<http://lyceumbooks.com/pdf/stsch3.pdf>

Helping the Helpers : Guidelines to Prevent Vicarious Traumatization of Play Therapists Working with Traumatized Children (Chapter 21 of Play Therapy with Children in Crisis: Individual, Group, and Family Treatment. 3rd ed.).

Ryan, Katherine. Cunningham, Maddy.

2007

This chapter provides an overview of the challenges faced by the therapist working with traumatized children and then discusses the concepts of countertransference, general psychological distress, secondary traumatic stress, compassion fatigue, and vicarious traumatization. Techniques for managing reactions are offered, followed by a case example in which the concepts are applied. The chapter closes with study questions. 42 references. (Author abstract modified)

Prevalence of Secondary Traumatic Stress among Social Workers.

Bride, Brian E.

2007

Social work : a journal of the National Association of Social Workers. 52 (1) p. 63-70

Social workers are increasingly being called on to assist survivors of childhood abuse, domestic violence, violent crime, disasters, and war and terrorism. It has become increasingly apparent that the psychological effects of traumatic events extend beyond those directly affected. Secondary traumatic stress (STS) is becoming viewed as an occupational hazard of providing direct services to traumatized populations. The purpose of the present study was to investigate the prevalence of STS in a sample of social workers by examining the frequency of individual symptoms; the frequency with which diagnostic criteria for posttraumatic stress disorder (PTSD) are met; and the severity of STS levels. Results indicate that social workers engaged in direct practice are highly likely to be secondarily exposed to traumatic events through their work with traumatized populations, many social workers are likely to experience at least some symptoms of STS, and a significant minority may meet the diagnostic criteria for PTSD. (Author abstract)

Correlates of Secondary Traumatic Stress in Child Protective Services Workers.

Bride, Brian E. Jones, Jenny L. MacMaster, Samuel A.

2007

Journal of Evidence-Based Social Work 4 (3/4) p. 69-80

The purpose of this study was to add to the limited research on secondary traumatic stress in child welfare by investigating correlates of secondary traumatic stress (STS) in child protective services workers. Specifically, we examined the relationship between levels of STS in CPS professionals and personal history of trauma, peer and administrative support, intent to remain employed in child welfare, professional experience, and size of caseload. This study documents the existence of secondary traumatic stress in the population and the relationship between levels of secondary traumatic stress in CPS professionals and the group of potential correlates: personal history of trauma in the past year and lifetime, peer support, administrative support, intent to remain employed in child welfare, professional experience, and size of caseload. (Author abstract)

Impact of Stressors on Front-Line Child Welfare Supervisors.

Dill, Katherine.

University of Toronto.

2007

The Clinical Supervisor 26 (1/2) p. 177-193

The death of children, intense media scrutiny, and million dollar lawsuits are all potential stressors faced by child welfare professionals. Despite this, very little research or literature has explored the specific realities of stressors for the individual front-line child welfare supervisor. Therefore, as a contribution to the field of child welfare practice, this paper expands our understanding of this unique supervisory population through a detailed examination of the literature. This review links theory to practice through a series of case examples involving situations of child welfare supervisors who have been affected by workplace stressors. The paper provides both individual and organizational solutions to either prevent or intervene in situations involving child welfare supervisors who may be at risk of burnout and/or compassion fatigue. (Author abstract)

Secondary Traumatic Stress and the Child Welfare Professional.

Pryce, Josephine G. Shackelford, Kimberly K. Pryce, David H.

University of Alabama.

2007

This text explores the secondary trauma experienced by child welfare professionals, describes symptoms of secondary trauma stress (STS), and offers treatment and intervention strategies. The book begins a brief history of the study of trauma and provides data on STS. The impact of STS on professionals and implications are discussed. The book also discusses coping strategies and how to use social support to mitigate the effects of STS. It explains how to recognize when self-care strategies are failing, what to do when this occurs, and what supervisors can do to help workers who are experiencing STS. Following chapters discuss how organizational culture affects the working environment and how the organizational acceptance of STS as a normal reaction to child protection work can help workers deal with the effects of STS; strategies that work and do not work in child welfare administration to mitigate the effects of STS; and STS as an occupational hazard in child welfare work that may result in an occupational stress injury. Finally, the book addresses implications for social work education with regard to STS and child welfare. An epilogue summarizes the content and suggests areas for future research on STS and child welfare. Numerous references. (Author abstract modified)

Advanced Secondary Trauma Training for Supervisors. A Training from the Western Regional Recruitment and Retention Project.

Brittain, Charmaine. Conrad, David.

Butler Institute for Families, University of Denver

2006

In 2003, the Institute for Families at the University of Denver (IFDU), Graduate School of Social Work received a five-year federal grant from the Children's Bureau to improve recruitment and

retention at pilot sites in Colorado, Arizona, and Wyoming. Called the Western Regional Recruitment and Retention Project (WRRRP), the purpose of this five-year, federally funded training project was to increase organizational capacity to recruit, select, and retain quality child welfare staff. Secondary trauma is one of the issues that affects retention so this training will help supervisors learn how to more effectively address secondary trauma within their units.

http://www.thebutlerinstitute.org/projects_wrrrp.cfm

<http://www.thebutlerinstitute.org/images/WRRRPFiles/AdvSecondaryTraumaCompAgenda.pdf>

Compassion fatigue, burnout, and compassion satisfaction among Colorado child protection workers.

Conrad, David. Kellar-Guenther, Yvonne.

2006

Child Abuse & Neglect: The International Journal 30 (10) p. 1071-1080

Objective The goal of this study was to understand better the risk of compassion fatigue (the trauma suffered by the helping professional) and burnout (emotional exhaustion, depersonalization, and reduced sense of personal accomplishment), and the potential for compassion satisfaction (the fulfillment from helping others and positive collegial relationships) among Colorado county child protection staff using the Compassion Satisfaction/Fatigue Self-Test [Figley, C. R., & Stamm, B. H. (1996). Psychometric review of Compassion Fatigue Self-Test. In B. H. Stamm (Ed.), *Measurement of stress, trauma, and adaptation* (pp. 127-130). Lutherville, MD: Sidran Press]. An additional goal was to test the relationship of these three constructs to each other. **Method** A self-report instrument developed by Stamm and Figley was used to measure the risk of compassion fatigue and burnout and the potential for compassion satisfaction among 363 child protection staff participating in a secondary trauma training seminar. **Results** Participants were significantly more likely to have high risk of compassion fatigue, extremely low risk of burnout, and good potential for compassion satisfaction. Participants with high compassion satisfaction had lower levels of compassion fatigue ($p = .000$; mean = 35.73 high compassion satisfaction group, mean = 43.56 low group) and lower levels of burnout ($p = .000$; mean = 32.99 high compassion satisfaction group, mean = 41.69 low group). **Conclusion** Approximately 50% of Colorado county child protection staff suffered from "high" or "very high" levels of compassion fatigue. The risk of burnout was considerably lower. More than 70% of staff expressed a "high" or "good" potential for compassion satisfaction. We believe compassion satisfaction may help mitigate the effects of burnout. (Author abstract)

Compassion Fatigue, Burnout, and Compassion Satisfaction: Implications for Retention of Workers.

DePanfilis, Diane.

University of Maryland School of Social Work.

2006

Child Abuse and Neglect 30 (10) p. 1067-1069

Abstract unavailable.

Work-related trauma effects in child protection social workers.

Horwitz, Mark.

2006

Journal of Social Service Research 32 (3) p. 1-18

Child welfare workers are exposed to a variety of workplace events that could overwhelm them. This study examined whether negative workplace events were associated with workplace trauma effects amongst child welfare workers, and considered whether job support or job satisfaction moderated the influence of events on effects. Vicarious events were more highly associated with trauma effects ($r = 0.54$, $p < 0.000$) than were direct events ($r = 0.28$, $p < 0.000$), and neither job support nor job satisfaction moderated the relationship. Workplace trauma events accounted for substantial variability in workplace trauma effects ($R^2 = 0.344$) in the final regression model tested. The discussion addresses opportunities for increasing worker safety, methods for supporting workers in managing negative effects and implications for future research. (Author abstract)

Helping Children, Youth, Families and Professionals Deal With Post Traumatic Stress From Natural Disasters [Teleconference].

Kelly, Victoria J. Naturale, April J. Kromrei, Liz Hughes.

National Resource Center for Family-Centered Practice and Permanency Planning.

2006

The web cast will provide participants with information and tools to use when working with children, youth and families recovering from traumatic events. Viewers will learn some guidelines for providing psychological first aid as well as both short term and interventions. Additionally, viewers will learn about secondary traumatic stress and proven intervention strategies. Further we will examine how the state of Texas responded to the children, youth and families from Hurricane Katrina and Rita. Free registration is required for this event. (Author abstract modified)

<http://event.netbriefings.com/event/nrcfcpp/Archives/hunterncfcppp8/>

Compassion fatigue and psychological distress among social workers : a validation study.

Adams, Richard E.1 Boscarino, Joseph A. Figley, Charles R.

New York Academy of Medicine

2006

American Journal of Orthopsychiatry 76 p. 103-108

Few studies have focused on caring professionals and their emotional exhaustion from working with traumatized clients, referred to as compassion fatigue (CF). The present study had 2 goals: (a) to assess the psychometric properties of a CF scale, and (b) to examine the scale's predictive validity in a multivariate model. The data came from a survey of social workers living in New York City following the September 11, 2001, terrorist attacks on the World Trade Center. Factor analyses indicated that the CF scale measured multiple dimensions. After overlapping items were eliminated, the scale measured 2 key underlying dimension -- secondary trauma and job burnout. In a multivariate model, these dimensions were related to psychological distress, even after other

risk factors were controlled. The authors discuss the results in light of increasing the ability of professional caregivers to meet the emotional needs of their clients within a stressful environment without experiencing CF. (Author abstract) 30 references.

Burnout and secondary trauma among forensic interviewers of abused children.

Perron, Brian E. Hiltz, Barbara S.

2006

Child and Adolescent Social Work 23 (2) p. 216-234

This study examined factors associated with burnout and secondary trauma among forensic interviewers of abused children. Sixty-six forensic interviewers who are affiliated with advocacy centers across the United States completed an online survey. The Oldenburg Burnout Inventory and Secondary Traumatic Stress Scale were used to measure burnout and secondary trauma, respectively. Results indicate that organizational satisfaction has a moderate inverse relationship with burnout and a slight inverse relationship with secondary trauma. The number of forensic interviews conducted or length of employment in forensic interviewing did not have a strong relationship with either burnout or secondary trauma. (Author abstract)

Secondary Traumatic Stress in Child Welfare Workers : Exploring the Role of Supervisory Culture.

Bride, Brian E. Jones, Jenny L.

2006

Professional Development : The International Journal of Continuing Social Work Education.

9 (2) p. 38-43

The purpose of this exploratory study was to examine relationships between symptoms of secondary traumatic stress and child welfare workers' perceptions of the culture of supervision in their organizations. A convenience sample of 307 child protective services workers responded to a web based survey that included measures secondary traumatic stress and supervisory culture and practice. Results suggest that action-oriented (active) rather than emotion-oriented (passive) support from supervisors is most helpful in preventing or reducing secondary traumatic stress among child welfare workers. Further, it is the qualitative aspects of supervision rather than the quantity of supervision that is most important in preventing STS. (Author abstract)

Posttraumatic stress disorder.

North Carolina. Division of Social Services. North Carolina Family and Children's Resource Program.

2005

Children's Services Practice Notes 10 (3) p. 1-8

This article discusses the incidence of posttraumatic stress disorder (PTSD) in foster children. It discusses how children and adolescents, symptoms of PTSD, risk and protective factors, and the impact of PTSD on relationships and behavior, school performance, attachment, mental health, and later finances and employment. Recommendations are provided for preventing PTSD, using PTSD assessment tools, and treating children with PTSD. The impact of PTSD and secondary

traumatic stress on child welfare workers is also addressed, along with preventative strategies.
http://www.practicenotes.org/vol10_no3.htm
http://www.practicenotes.org/vol10_n3/cspnv10n3.pdf

Stress, Trauma and Support in Child Welfare Practice.

Lambert, Liz. Regehr, Cheryl.

Research Institute for Evidence-Based Practice. Children's Aid Society of Toronto.
University of Toronto.

2005

This fact sheet presents the findings of a mixed methods research study that was conducted among 175 child welfare workers at the Children's Aid Society of Toronto to better understand how exposure to stress and trauma impacts workers and the role of social supports in moderating experiences of workplace trauma. Organizational factors, critical incident related factors, and individual factors contributing stress are identified, as well as strategies for reducing stress. Results from the study indicate that the workers were exposed to a significant amount of traumatic stimuli and exhibited high levels of post-traumatic distress. 4 references.

http://www.socialwork.utoronto.ca/docs/Image/Research%20Institute/FACTChildworker_trauma.pdf

Breath of Relief: Transforming Compassion Fatigue into Flow. Second edition.

LaRowe, Karl.

2005

This text explains compassion fatigue is pervasive among care giving professionals and family members who are caring for a loved one who is suffering, and also affects the rest society with the constant exposure to the sounds of suffering, the images of trauma, and the threats of war and terrorism. FlowMotion is highlighted as a method for releasing the stagnant energy trapped in the body and breaking the adrenaline short circuit of compassion fatigue. Based on Qigong, an ancient Chinese martial art used to harmonize breath, energy, and movement, FlowMotion is a series of movements and breathing exercises designed to provide relief from physical, emotional, mental, and spiritual exhaustion. An introduction shares three basic governing principles of the Healer-Warrior philosophy: self-honesty, personal responsibility, and self expression. Chapters then discuss the caregiving personality, the cost of caregiving, the impact of secondary stress on the body, the connection between the heart and the brain, and the power of breath. Following chapters describe breathing exercises for relief, awareness, acceptance, and transformation, and the process of FlowMotion and transformation energy into motion. 47 references.

Secondary Trauma.

Conrad, David.

Western Regional Recruitment and Retention Project.
Secondary Trauma Prevention Project.

2005

This document is a training curriculum on secondary trauma in child welfare workers. The

purpose of the training is to provide child protection staff with new insight and understanding into why they are at risk for secondary trauma, and to provide them with tools and strategies they can use to protect themselves. The training will also help workers to recognize and understand the difference between PTSD, Burnout, and Secondary Trauma.

<http://www.thebutlerinstitute.org/images/WRRRPFiles/CaseworkerSecondaryTraumaCurriculumFinal.pdf>

Stress, trauma, and support in child welfare practice.

Regehr, Cheryl. Leslie, Bruce. Howe, Phillip.

University of Toronto

2005

APSAC Advisor 17 p. 12--18

There is considerable evidence that workers in child welfare organizations experience high workloads and multiple demands that often result in stress and ultimately job turnover. In addition to these stressors, workers are also faced with traumatic situations involving violence to both themselves and others. Despite the attention to workplace trauma in other fields, the issue of stressors has been largely ignored in child welfare. This study examines ongoing stressors as well as critical incident stressors and supports in 175 workers within a large urban child welfare agency. Findings indicate that workers are exposed to significant amount of traumatic stimuli and consequently experience high rates of posttraumatic stress. It is suggested that posttraumatic stress symptoms are not ameliorated by either personal or organizational supports.

Best practice/next practice : family-centered child welfare, Winter 2004 : mental health in child welfare : a focus on caregivers.

National Child Welfare Resource Center for Family-Centered Practice

2004

Best Practice/Next Practice

The mental health and emotional well-being of child welfare workers and caregivers have a significant impact on outcomes for children and families. This issue of the newsletter of the National Child Welfare Resource Center for Family-Centered Practice addresses the effects of secondary traumatic stress and the ways in which the child welfare system can support professionals, parents, and other caregivers. The articles describe the responsibilities of caseworkers and the potential for stress, as well as the need for training, limitations on caseloads, and reflective supervision. Strategies for strengthening the skills of parents also are discussed in the context of family preservation and reunification. Other topics include lessons from Child and Family Services Reviews, systems of care for foster children with mental health problems, and custody options for children with severe emotional difficulties. 4 references.

<http://tinyurl.com/38kee6f>

Predictors of post-traumatic distress in child welfare workers : a linear structural equation model.

Regehr, Cheryl. Hemsworth, David. Leslie, Bruce. Howe, Phillip. Chau, Shirley.
University of Toronto.

2004

Children and youth services review. 26 p. 331-346

Two important bodies of literature explore the issue of stress in social workers, that investigating the impact of burnout and that investigating the impact of traumatic events. This study integrates these two concepts and tests a hypothesized model for predicting post-traumatic distress in child welfare workers. In this model, individual, incident and organizational factors combined to produce post-traumatic stress distress in child welfare workers. That is, individuals with a greater sense of control over their lives and a better ability to engage in meaningful relationships with others reported lower levels of distress. In addition, those who had less recent and less frequent exposures reported lower levels of distress. However, the strongest predictor was the organizational environment one aspect of which was ongoing, chronic stressors. It thus appears that critical events in child welfare practice are encountered by individuals whose resources may already be taxed through coping on an ongoing basis with high levels of challenge and stress, thereby increasing the intensity of trauma reactions. (Author abstract)

Understanding and preventing worker burnout (Chapter 8 of *The new miracle workers : overcoming contemporary challenges in child welfare work.*)

Brohl, Kathryn.

2004

The severity of cases and the structure of the child welfare system place workers at risk for burnout, a feeling of helplessness and exhaustion from the work environment. This chapter reviews the external and personal stressors that contribute to burnout and describes the symptoms of the condition. Tips for preventing and overcoming burnout also are presented. The following factors can lead to burnout: poor agency management, work schedules, monotonous work, inadequate training and coping skills, safety risk, illness or trauma, and unrealistic expectations of coworkers and administrators. Symptoms include physical and emotional problems, such as depression, anxiety, and headaches; behavioral expressions of substance abuse and aggression; and changes in personal interactions. Workers can prevent burnout by arranging opportunities for respite, support, and assistance. Strategies for overcoming burnout focus on taking time for rest and relaxation and developing work patterns that alleviate high expectations and build a capacity for self-awareness. 2 references.

The Tennessee Child Protective Services Supervisors Development Project : evaluating process, outcome, and the role of secondary traumatic stress and burnout.

Bride, Brian E. Jones, Jenny L. MacMaster, Samuel A. Shatila, Suzanne.
University of Tennessee, Nashville.

2003

Professional development : the international journal of continuing social work education. 6 p. 79-84

This article provides an overview of the evaluation plan for the Tennessee Child Protective Services Supervisors Development Project. Specifically, it describes three primary components of the evaluation design: process evaluation, outcome evaluation, and examination of the role of secondary traumatic stress and burnout. Further, this article describes a plan to use a Web-based survey and the instruments selected for data collection. (Author abstract modified)

Organizational prevention of vicarious trauma.

Agency culture

Bell, Holly. Kulkarni, Shanti. Dalton, Lisa.

Alliance for Children and Families.

University of Texas at Austin.

2003

Families in society : the journal of contemporary human services. 84 p. 463-470

For the past 30 years, researchers and practitioners have been concerned about the impact of work stress experienced by social workers. Although research on burnout has been a useful field of exploration, a new concern has arisen about work stresses specifically associated with work with victims of trauma. The concept of vicarious trauma provides insights into the stresses of this particular kind of work. Like the burnout research, early research on vicarious trauma has identified both personal and organizational correlates. In this article, the authors review the growing literature on the organizational components of vicarious trauma and suggest changes in organizational culture, workload, group support, supervision, self-care, education, and work environment that may help prevent vicarious trauma in staff. (Author abstract)

http://www.alliance1.org/Publications/fis/FIS_PDFs/84-4PDFs/FIS84-4_Bell.pdf

Childhood Abuse History, Secondary Traumatic Stress, and Child Welfare Workers.

Nelson-Gardell, D. Harris, D.

Univ. of Alabama, Tuscaloosa. School of Social Work.

2003

Child Welfare 82 5-26

Social workers are exposed to trauma vicariously through the trauma of their clients. This phenomenon, called secondary traumatic stress, vicarious traumatization, or compassion fatigue, presents a risk of negative personal psychological consequences. The effects of secondary traumatic stress were examined in a sample of 166 child welfare workers who attended a training program on the topic. Participants completed the Compassion Fatigue Self Test for Psychotherapists, which distinguishes between secondary trauma and burnout. Data analyses revealed a link between a personal history of primary trauma, childhood abuse or neglect, and the heightened risk for secondary traumatic stress in child welfare workers. 33 references and 6 tables. (Author abstract modified)

Inquiries Into Deaths of Children in Care: The impact on Child Welfare Workers and Their Organizations.

Regehr, C. Chau, S. Leslie, B. Howe, P.

2002

Children and Youth Services Review. 24 885-902

In recent years public inquiries into the murders of children have served to dramatically shift child welfare services throughout North America and Great Britain. The present study is a qualitative analysis of the impact of these death reviews and the subsequent changes to child welfare services on child welfare workers. The themes that emerged occurred at three primary levels, distress experienced by individual workers, radiated distress throughout the agency and weakened public and community support. Factors contributing to distress by individual workers included re-exposure to traumatic material, the all-consuming nature of inquiries and the critical nature of inquiries. Radiated distress occurred as a result of empathy for colleagues undergoing an inquiry and changes emanating from the inquiry which constricted practice and increased the policing function of child welfare. Finally, negative media and public attention contributed to concerns that all members of child welfare organizations were under scrutiny and had become tainted. While accountability and continuous improvement of services are worthy goals, we must continue to search for accountability processes that do not have such a devastating impact on child welfare workers and their organizations.

The Cost of Caring : Secondary Traumatic Stress and the Impact of Working With High-Risk Children and Families [e-learning].

ChildTrauma Academy.

2002

The purpose of this course is to present an overview of the topic of secondary trauma. The goal is to gain a better understanding of how to better serve the children we work with by making sure we are at our best. The better we understand how working with traumatized children affects us both personally and professionally the better able we will be to serve them. In order to remain emotionally healthy ourselves it is critically important that we understand how the elements of a child's trauma of children can be absorbed. All professionals working with traumatized children can learn approaches and strategies to protect themselves from being emotionally overwhelmed by this work. In the end, the ability to help traumatized children depends upon our ability to stay emotionally healthy and motivated in difficult and often very frustrating situations. The course objectives are: 1. To introduce and discuss the concepts of burnout and secondary traumatic stress; 2. To review how unpredictable stress and trauma can negatively impact emotional, cognitive and physical functioning; 3. To describe individual, event-related and systemic factors which increase or decrease risk for developing trauma-related symptoms; 4. To help individuals understand the value of developing individualized "protective" strategies when they work in conditions likely to cause secondary traumatic stress; and 5. To direct individuals to additional resources that can further assist in meeting objectives. (Author abstract)

http://www.childtraumaacademy.com/cost_of_caring/index.html

The Influence of Risk and Protective Factors on Burnout Experienced by Those Who Work with Maltreated Children.

Stevens, M. Higgins, D. J.

Deakin Univ. (Australia). School of Psychology.

2002

Child Abuse Review 11 313-331

This study explored the degree and type of burnout and trauma symptoms, personal histories, and coping strategies retrospectively reported by professionals who work with maltreated children and their families. A self-selected sample of 44 workers completed a self-report questionnaire assessing childhood maltreatment, family background characteristics, current adjustment, coping strategies, and burnout. Workers reported high levels of emotional exhaustion and depersonalization, and a low to moderate sense of personal accomplishment. Family background characteristics predicted the occurrence of maltreatment and current adjustment, and a personal history of maltreatment predicted current trauma symptoms, but not burnout. This finding indicates that trauma and burnout have different symptoms and etiologies. Workers frequently used problem-focused coping strategies and sought social support. However, coping strategies were not associated with the level of either trauma symptoms or burnout. Although child welfare workers employ positive coping strategies, they may be affected by other interpersonal, intra-individual, and job resource issues. Agencies can support workers by recognizing their histories of child abuse and by addressing trauma symptoms, depersonalization, and emotional exhaustion. 40 references, 1 figure, 5 tables. (Author abstract modified)

Best practice/next practice : family-centered child welfare, Winter 2002 : trauma and child welfare.

National Child Welfare Resource Center for Family-Centered Practice

2002

Best Practice/Next Practice

This edition of the biannual newsletter of the National Child Welfare Resource Center for Family-Centered Practice examines the impact of the September 11, 2001 terrorist attacks on children, families, and professionals in the child welfare system. The articles highlight the effects of personal loss, economic recession, and state funding shifts on individuals and families who were under stress before the traumatic event. Emphasis is placed on the ways in which child welfare agencies can plan to address the needs of affected children and parents. Responses from the New York City Administration for Children and Families and foster care agencies across the country are described. The newsletter also addresses strategies for identifying and treating children with post-traumatic stress disorder and other mental health needs, training for child welfare staff, the role of parents in decreasing stress, and secondary traumatic stress among child welfare workers. 2 references.

<http://tinyurl.com/37lbj6d>

The Traumatic Stress Institute Belief Scale as a Measure of Vicarious Trauma in a National Sample of Clinical Social Workers.

Adams, K. B. Matto, H. C. Harrington, D.
Maryland Univ., Baltimore. School of Social Work.
2001

Families in Society 82 363-371

The authors report on a study of convergent and discriminant validity of the Traumatic Stress Institute Belief Scale (TSI) Revision L (Traumatic Stress Institute, 1994) as a measure of vicarious trauma in a random sample of master's level clinical social workers. Forty-nine items from six subscales of the TSI were used. The scale purports to measure disturbed beliefs that may be caused by direct traumatic experience or repeated exposure to details of clients traumatic stories. Results of correlational analyses of the TSI score with study variables and exploratory multiple regression analysis on the TSI score indicate its association with younger age, more reported somatic symptoms, lower annual salaries, lower scores on the Perceived Social Support (PSS) Friends subscale (Procidano & Heller, 1983), and greater burnout as measured by the Maslach Burnout Inventory (Maslach & Jackson, 1986). TSI scores were not associated with social workers' personal trauma history, their reported weekly amount of face-to-face client contact, or a self-report of the level of intrusiveness of client material into the social workers' lives. TSI scores appear to be measuring perceptions about self and work that, like burnout, may relate to social workers' general outlook, not necessarily to the effects of traumatic stress, vicarious or otherwise. Significant overlap of the TSI with burnout scores in this social work sample suggests a lack of clear distinction between burnout and vicarious trauma. Numerous references, 2 tables. (Author abstract)

Stressors in child welfare practice.

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2000

The present study explores stress and traumatic events in a child welfare setting. Data for the study included a total of 175 questionnaires returned from child welfare front line, clerical, and management staff, interviews with 20 participants, and consultation group meetings with members from the three constituencies. Findings of this study demonstrate that child welfare staff are exposed to a significant degree of traumatic stimuli. Approximately 20% of staff in all job categories had been victims of assault on the job (and 60% of child and youth workers) and 50% had been verbally threatened (70% of child and youth workers). One quarter of respondents had a child die for which they had service responsibility and 1/5 had an adult client die. Other traumatic events reported included riots and attending coroner's inquests. In addition, several staff members indicated that apprehensions of children were particularly traumatic due to the high emotional reactivity of family members, which often lead to verbal or physical assault. These events occurred more recently for intake workers and clerical workers than for other staff members. In total 82.7% of respondents reported encountering a traumatic event on the job and 70% of these workers reported significant emotional distress as a result. The subjective ratings of

emotional distress were corroborated by scores on the Impact of Event Scale. The mean score of all respondents on the IES was 29.5. When data for social workers within in the agency were reviewed independently, their mean score was 34. These scores are considerably higher than the cutoff point associated with a diagnosis of Post-traumatic Stress Disorder (26). Consistent with earlier literature on stress and burnout in social workers, 68% of respondents in this study identified workload as the primary stressor in their jobs. The study concludes that strategies to assist with managing workload must consider issues beyond time management to increase the control and satisfaction that workers experience in the job.

<http://web.archive.org/web/20041018054038/http://www.cecw-cepb.ca/DocsEng/Stressors.pdf>

Child Welfare Workers: An Innovative Approach for Interacting With Secondary Trauma.

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New York Univ., NY. Shirley M. Ehrenkranz School of Social Work.

2000

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Although child welfare workers (CWW) are assigned a critical role to protect children, little focus has been placed on helping them cope with stress and secondary trauma that can occur when they observe and hear the affect-laden experiences described by clients. This article summarizes two focus groups which provided data to develop a two day training module for CWW to gain knowledge and skills through didactic and experimental learning. The model offers coping strategies to respond to job stress and vicarious traumatization. Benefits and implications for agency and school collaboration are discussed. 1 figure, numerous references. (Author abstract)