PREDICTORS AND HEALTH CONSEQUENCES OF SECONDARY TRAUMATIC STRESS AMONG PUBLIC CHILD WELFARE WORKERS

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The social workers who took the time to complete the surveys
OBJECTIVES

• Share the purpose of our recent study
• Discuss Secondary Traumatic Stress (STS) and some of the previous research on this topic
• Discuss our study findings
• Share some recent resources to mitigate the effects of STS
POLL: WHAT IS YOUR PROFESSIONAL ROLE?

- Child welfare workers/supervisors
- Foster parents
- Mental health providers
- Educator/Trainer
- Law enforcement
- Researcher
- Manager/Director of child welfare
EFFECTS OF PROVIDING SERVICES TO CLIENTS EXPERIENCING TRAUMA: DIFFERENT TERMS

- Secondary traumatic stress
- Compassion fatigue
- Compassion satisfaction (won’t discuss today)
- Vicarious traumatization
- Burnout
- Cost of caring
- Emotional contagion
- Indirect trauma
SECONDARY TRAUMATIC STRESS SYMPTOMS

- Anxious
- Reactive
- Heightened threat perception
- Sleep problems
- Lack of concentration

- Physical problems
- Intrusive thoughts
- Work interfering with personal life
- Feeling inadequate
- Avoidance
- Loss of energy, gratification, and hope
- Separation
- Self-medication

-Gentry (2002)
WHO CAN BE IMPACTED?

• Helping professionals • Emergency Response
  – Pediatricians
  – Psychologists
  – Psychiatrists
  – **Child welfare workers**
  – Probation
  – Foster Parents
  – Teachers
  – Police officers
  – Fire fighters
  – Emergency medical technicians
  – Nurse crisis workers
“STS is one of the most pervasive and influential factors in child welfare, and yet few recognize it’s impact on the nature of the work, the ability of people to stay and prosper in field, and the world view of the people who labor every day to serve this nation’s children” – Charles Wilson (Collins, 2009)
SECONDARY TRAUMA IMPACT

PERSONAL
• Symptoms similar to PTSD/Diagnoses
• Intrusive thoughts
• Avoidance/Vigilance
• Hyperarousal
• Cynicism and detachment
• Physical and/or emotional exhaustion
• Illness and disease

PROFESSIONAL
• Decrease in productivity
• Difficulty with focus and concentration
• Feelings of incompetency and self-doubt.
• Job dissatisfaction
• Moving on, leaving one’s job
ORGANIZATIONAL IMPACT

• Turnover, Turnover, Turnover
• Increased Workloads
• Compromised Continuity of Care
• Organizational Mistrust
• Low Staff Morale
• Team Erosion
PREVALENCE OF STS AMONG SOCIAL WORKERS

- Child welfare workers have some of the highest STS rates, about 30-40% scoring above the clinical cutoff.
  - Social workers (Bride and Lee, 2012)
    - 15% scored above the clinical cutoff, indicative of PTSD
  - Child welfare workers (Bride, Jones, & MacMaster, 2007)
    - 92% experienced some symptoms of STS, 43% scored above the clinical cutoff and 34% met criteria for PTSD
  - Social Workers working with Domestic Violence/Sexual Assault Clients (Choi, 2011)
    - 29% scored above the clinical cutoff, and 21% met criteria for PTSD
FACTORS ASSOCIATED TO STS

• Severity of the trauma
• Type of the trauma
• Caseload, size and characteristics, types
• Demographic characteristics
  – Age
  – Education level and discipline
  – Experience
  – Gender
  – Ethnicity
• Personal trauma history: protective and risk factor
WORK SUPPORT

• Helpfulness of coworkers
• Coworkers help us out when needed
• Ability to process traumas
• Working as a team
• Supervisor support
  – Helpfulness, ability to process, satisfaction with support
• Organization: autonomy, appreciation, fairness
EXPERIENCED STS SYMPTOMS POLL

• Have you experienced the following symptoms *often or very often in the last 7 days*
  – Trouble sleeping
  – Feeling jumpy
  – Discouraged about the future
  – Little interest in being around others
  – Reactive
  – Feeling inadequate
  – Not feeling gratified, feeling hopeless

• Never experienced the symptoms
• Experienced 1 of these symptoms
• Experienced 2 of these symptoms
• Experienced 3 or more symptoms
OUR RESEARCH STUDY AND FINDINGS
GENERAL PURPOSE OF THE STUDY

• Examine the reported levels of STS among child welfare supervisors in California
• Examine factors significantly related to STS
• Investigate what variables predict STS and how STS predicts health and work outcomes
METHODOLOGY

• Obtain IRB approval UC Davis

• Anonymous self-administered voluntary survey administered during training classes 2014-2015 to child welfare supervisors

• Survey information entered into SPSS
MAIN STUDY MEASURES

- Perceived supervisor support
  - 2 questions averaged, Cronbach alpha=.70 in this study

- Secondary Traumatic Stress Scale (STSC) (Bride et al., 2004)
  - Consists of 17 items, self-administered
    » Intrusion
    » Avoidance
    » Arousal

  - 9 items on a four point likert type scale, Cronbach alpha=.81 in this study

- Health Outcomes
  - Physical health, RAND 36 survey
  - Because of work expect health get worse
  - Eating for comfort
DEMOGRAPHICS

N=100

Average Age
44.37 years

Gender

- Female: 81%
- Male: 15%
- Missing: 4%

Highest Level of Education

- MSW: 69%
- Bachelor’s Degree: 15%
- MA/MS Degree: 12%
- Some college: 3%

68% MSW related to Title IV-E Program
DEMOGRAPHICS

Race/Ethnicity

- White: 71%
- Hispanic/Latino: 7%
- Black/African American: 7%
- American Indian/Alaskan Native: 6%
- Native Hawaiian/Pacific Islander: 3%
- Two or more races: 3%
- Asian American: 2%
- East Indian: 1%

Years Supervising

Current Position

M = 4 years

Years Working in Child Welfare

M = 14.13 years
ADVERSE CHILDHOOD EXPERIENCES

**Experienced Childhood Trauma**

- **Parental Mental Health Problems**: 21%
- **Exposure to Domestic Violence**: 21%
- **Parental Drug/Substance Abuse**: 30%
- **Emotional Abuse**: 21%
- **Neglectful Home Environment**: 17%
- **Physical Abuse**: 18%

- **23%** experienced more than one of these traumas
- **11%** experienced 4 or more of these traumas
LIFESTYLE CHARACTERISTICS

**Alcohol Drinking**

22% report drinking an alcoholic drink more than 3 times a week in 12 months.

**Smoking Cigarettes**

15% report being a current smoker, with an average of 4.8 packs of cigarettes smoked in a week.

**Eating Habits**

25% report eating for comfort often, always, or almost always.

31% report their emotions affect what and how much they eat often, always, or almost always.
WORKPLACE CHARACTERISTICS

Perceived Supervisor Support
M = 2.33
Indicating on average from time to time feel supported by supervisor

Perceived Coworker Support
M = 2.19
Indicating on average from time to time feel supported coworkers

Time Spent at Work
73% feel happy or very happy with time spent at work

Health Get Worse
16% reported that because of their work they expect their health to get worse

Physical Health Interferes Normal Activities
18% reported that their physical health interfered with their normal social activities.
SECONDARY TRAUMATIC STRESS

• A total of 32% of the supervisors had a score indicative of PTSD
ANALYZING THE PREDICTORS AND OUTCOMES OF SECONDARY TRAUMATIC STRESS
N=100
CFI=.97, TLI=.96; RMSEA=.04, SRMR=.05, Chi-square=43.88, df=32, p=.08
SUMMARY OF STUDY FINDINGS

• Perceived confidence in abilities to supervise when problems arise and feeling supported by supervisor reduces STS symptoms

• Higher STS symptoms predictive of poorer health outcomes

• Higher STS symptoms predictive of lower levels of wanting to remain in child welfare services
FUTURE DIRECTIONS OF OUR STUDY AND PROJECT

• Look at some other variables in our study as predictors and outcomes
• Adding the alcohol coping question to the survey
• Administer surveys to child welfare workers and supervisor 2015-2016
  – Suggestions of questions to ask?
• Continue developing training, curricula, and awareness
As Salston and Figley (2003) noted, “We must do all that we can to insure that those who work with traumatized people—including but not limited to those exposed to crime victimization—are prepared...A place to start is to incorporate stress, burnout, and compassion fatigue into our curriculum, and especially our supervision” (p. 173)
CREATING TOOLS FOR RESILIENCY FOR CHILD WELFARE WORKERS IMPACTED BY SECONDARY TRAUMA

• Developing training curricula
  – Communities of practice worker health website
  – Self-Care strategies
    • Fitness exercises
    • Mindfulness meditation

• On-line peer support systems
REDUCING STRESS IN THE WORKPLACE: EXERCISES FOR SOCIAL WORKERS

RETRIEVE FROM WEBSITE: NORTHERN CALIFORNIA TRAINING ACADEMY, UC DAVIS
OR
HTTPS://WWW.YOUTUBE.COM/WATCH?V=VEOCVPHVE3O
SELECTED REFERENCES

QUESTIONS?

Thank you!

For more information concerning this project, please contact Holly Hatton Bowers at hhatton@ucdavis.edu