

Spring 2011

# Burnout Prevalence and Prevention in a State Child Welfare Agency

Molly Heverling  
*Providence College*

Follow this and additional works at: [http://digitalcommons.providence.edu/socialwrk\\_students](http://digitalcommons.providence.edu/socialwrk_students)



Part of the [Social Work Commons](#)

---

Heverling, Molly, "Burnout Prevalence and Prevention in a State Child Welfare Agency" (2011). *Social Work Theses*. 69.  
[http://digitalcommons.providence.edu/socialwrk\\_students/69](http://digitalcommons.providence.edu/socialwrk_students/69)

It is permitted to copy, distribute, display, and perform this work under the following conditions: (1) the original author(s) must be given proper attribution; (2) this work may not be used for commercial purposes; (3) users must make these conditions clearly known for any reuse or distribution of this work.

Burnout Prevalence and Prevention in a State Child Welfare Agency

Molly Heverling

Providence College

A project based on an independent investigation,  
submitted in partial fulfillment of the requirements  
for the degree of Bachelor of Arts in Social Work

2011

### Abstract

This study addressed the prevalence of burnout and coping strategies within a sample of forty child welfare direct service workers. Although social work can be an extremely gratifying profession, the difficulties inherent in the social work field cause added stress to the worker. Surveys were distributed and measured participants' levels of burnout in three areas to include: emotional exhaustion, depersonalization, and personal accomplishment. Results revealed a group of dedicated workers that are under stress due to the urgency of their work. Workers described a wide array of positive and negative coping methods as means to address work related stress. Practice, policy, and research implications were addressed.

## Burnout Prevalence and Prevention in a State Child Welfare Agency

The concept of burnout originated in the 1970s as an umbrella term to describe the disintegration of the protections workers mentally employ to deal with stressors in the workplace (Brohl, 2006). Burnout is a feeling of intense dissatisfaction and emotional exhaustion that a person develops after extended periods of high stress and responsibility in various work settings. In all professions, high workloads and large amounts of stress cause employees to experience symptoms of burnout. Professionals in social service agencies have many responsibilities that lead to intense feelings of pressure. These occupations frequently encounter client systems in crisis; as a result, social workers and other professionals may overwork and exhaust themselves as their caseloads increase. Freudenburger (1974, as quoted in Poulin & Walter, 1993) defines burnout “as a condition in which workers become worn out or exhausted because excessive demands have been played on their energy, strength, and resources” (p. 1).

As the warning signs of burnout appear, depersonalization between the worker and his or her clients occurs. Workers demonstrate depersonalization through “the presence of unfeeling, impersonal responses to one’s clients” (Maslach and Jackson, 1986 as cited in Mor Barak, Nissly, & Levin, 2001, p. 643). Burnout negatively affects the well-being of the worker, which inhibits her performance, ultimately hurting the vulnerable client. Multi-complex clients can overwhelm workers; therefore, this constant interaction with high stress circumstances can potentially cause such problems if the worker has not developed satisfactory coping techniques.

Child welfare direct service workers in state agencies require ongoing support in order to cope with stress and prevent burnout in the field. In addition, social work interns in government agencies often interact with many professionals who question the interns’ desires and motives to work in the human services field. These negative remarks, likely indicative of how the workers

are currently feeling about their job and their clients, may negatively influence and impact the lifeblood of the industry by altering the way the interns view clients and the agency.

Whether consciously or unconsciously, social workers exercise various techniques to center themselves and relieve anxiety and negative thoughts related to practice. These techniques include healthy and unhealthy coping behaviors that impact the workers' job performances, which in turn affect their clientele. Workers handle this anxiety and tension in a range of ways. Restful inactivity as well as activities to refocus oneself after work impacts the worker's quality of life. These positive coping mechanisms fall under the umbrella term of self-care. Researchers define the term self-care as the methods and activities workers engage in to handle and relieve themselves from work related stress (NASW, 2008).

Many times, workers suffering the symptoms of burnout and loss of emotional attachment to their jobs may continue to work in the field. Depersonalized and burned out workers inadvertently hold the power to negatively influence clients by disregarding their clients' rights, safety, and self-determination (Glisson & Durick, 1998; McKee et al. 1992; Manlove & Guzell, 1997 as cited in Mor Barak, Nissly, & Levin, 2001). It is vital for social workers to value the impact they have on vulnerable populations and become more aware of the potential for burnout. Social workers able to identify arising feelings of negativity stemming from their work will begin to understand and detect the effects it has on their job performance.

A study conducted by the National Association of Social Workers (NASW, 2008) reported that various techniques aid in helping workers to center themselves and maintain control of their work life to prevent the occurrence of burnout. Stress resulting from the workplace further increases the likelihood of workers to burnout. Social workers benefit from techniques used by their peers to deal with the overwhelming nature of the work. Not only must social

workers advocate and work toward the healthy overall well being of the client, but they must do the same for themselves. Chronic feelings of depersonalization and exhaustion increase the likelihood for turnover in jobs; burned out and desensitized social workers cannot properly address the needs of their vulnerable clients. Social workers must have various tools to prevent themselves from overworking and exhausting themselves (Robb, 2004). Due to the frequent interaction between social workers and a wide array of other fields and client systems, social workers have an obligation to their clients and themselves to manage stress in a healthy and productive manner. This exploratory study will focus on the skills, coping mechanisms, and prevention techniques that state workers in the child welfare field employ to prevent burnout.

Burnout occurs when the worker emotionally exhausts himself from his work, which leads to a lack of empathy for and feelings of depersonalization toward the client. This research study will explore effective strategies of proper self-care techniques to prevent worker turnover and burnout. The researcher will examine questions such as: How do workers cope with this stress that they must encounter daily; what makes some workers more resilient than others; what factors cause the most stress on the job; and how do people center themselves over prolonged periods of time working with clients in the system? Overall, this study will identify the types of skills that state workers in a child welfare setting employ to cope with the stress and trauma inherent in many child welfare cases, and how these factors may prevent or further add to the occurrence of burnout.

## **Review of Literature**

### **Burnout and Human Services Work**

In the late seventies, Daley (1979) described burnout as “a reaction to job-related stress that varies in nature with the intensity and duration of the stress itself.” (p. 375). This definition

begins to describe burnout, yet does not specifically enough convey the entire meaning of this condition. Maslach and Jackson (1981) characterize burnout as, “a syndrome of emotional exhaustion and cynicism that occurs frequently among individuals who do ‘people work’ of some kind” (p. 99). Maslach and Jackson’s work in the field of burnout serves as the basis for a large portion of the current research on this topic (Anderson, 2000; Mor Barak, Nissly, & Levin, 2001; O’Donnell & Kirkner, 2009; Schwartz, Tiamiyu, & Dwyer, 2007 & Zosky, 2010) and therefore, provides a reliable definition for burnout.

### **Symptoms of Burnout**

Social workers regularly risk feeling stressed and overwhelmed due to the responsibilities and difficulties they encounter in the field (NASW, 2008). Burnout encompasses symptoms such as emotional exhaustion, depersonalization, and negative self-perception. As workers become emotionally exhausted, defined as feeling depleted of the emotional resources required to psychologically cope with stress, they no longer can competently perform their vital work. Depersonalization develops as a worker cultivates a subjective negative outlook on the intrinsic worth of clients. When a worker begins to burnout, she experiences intense unhappiness concerning her work performance and her efficacy for positively helping clients (Maslach & Jackson, 1981). Workers exhibit symptoms of burnout through high turnover rates, increased absenteeism, and negative worker attitudes (Daley, 1979). The amount of research available that discusses the symptoms of burnout further demonstrates the importance of this topic and the responsibility social workers have to nurture their own emotional and physical needs.

The high levels of stress inherent in the social work field lead to the common and almost inevitable existence of burnout. Workers experiencing burnout disadvantage families that have been ordered to receive services from a state agency in order to prevent separation. Each family

entering the system is deserving of a worker who actively acknowledges the family's importance while promoting his or her own professional mental health. Supervisors in a unit that focuses on families in a child welfare setting assign cases to a frontline worker, beginning the crucial relationship between the worker and the family. High caseloads and a limited number of workers place an extra burden on to this already stressful profession (Arrington, 2008; Jayaratne & Chess, 1984; & Zosky, 2010). These workers must operate through complex family difficulties, while simultaneously promoting the best interests of the children. Since the family cannot choose a new worker or ignore the demands of the state, children in child welfare settings are part of an especially vulnerable population. These children, unable to fully take care of themselves while often receiving minimal nurturing, must look to their direct service worker as a source of strength and support. Due to this great responsibility that the worker holds, he takes on a substantial role in the child's life. In state social service jobs, worker turnover negatively harms the well-being of children and their families, causing clients to feel abandoned and uncared for (Mor Barak, Nissly, & Levin, 2001). In order to further understand the impact of burnout on a worker, this researcher stresses the need to look into the symptoms that burnout presents.

Although social work can be an extremely gratifying profession, the difficulties inherent in the social work field cause added stress to the social worker. These stressors include resistant clients, high amounts of responsibility, and heavy workloads (NASW, 2008). Child welfare direct service workers may experience intense feelings of helplessness to fully protect children from unsafe circumstances. Frequent interaction with such devastating circumstances can overwhelm and bury the worker (Zosky, 2010), leading to burnout. This fact is further proven by a report of social workers in social service human agencies exhibiting lower levels of hope and burnout than workers in private agencies (Schwartz, Tiarniyu, & Dwyer, 2007). Nevertheless, to



fully explain the definition of burnout, one must directly apply it to the field in which it is used (Daley, 1979). For instance, police officers experiencing the symptoms of burnout report heightened positive feelings surrounding the use of violence on the job (Kop, Euwema, & Schaufeli, 1999). Negative feelings intrinsic in burnout caused salespeople to negatively impact customers and drive down sales (Verbeke, 1998). Nurses feeling emotionally exhausted contribute to the dissatisfaction their patients feel (Vahey, Aiken, Sloane, Clark, & Vargas, 2004). Social work burnout applies to overworked individuals who begin to disconnect from clients due to the stress and high level of responsibility inherent in human service occupations.

### **Causes of and Factors Related to Burnout**

Maslach and Jackson (1981) measure burnout in three main categories: emotional exhaustion, personal accomplishment, and depersonalization. The term personal accomplishment measures the feelings of personal ability and success in the workplace. These three categories of measurement encompass the various stressors frequently associated with human service professionals in their work. Feelings of depersonalization, emotional exhaustion, and lack of personal accomplishment can arise from the environment of the workplace, high caseloads, inadequate supervision and work environment, and level of experience in the field.

Issues related to the macro influencers of an agency may create an environment more conducive to worker burnout (Zosky, 2010). According to various studies, the organizational structure of human service agencies has significant repercussions on social workers' abilities to cope with stress (Nissly, Mor Barak, & Levin, 2005). In addition to managerial style, studies illustrate that the increase of responsibility and the various roles workers perform add to the stress of their job (NASW, 2008; O'Donnell & Kirkner, 2009). Workers in child welfare agencies must engage in a variety of roles involving their client and their agency. This lack of

role clarity forces workers to stretch themselves into various positions; one role may contradict another (Zosky, 2010). Jayaratne and Chess (1984) support the aforementioned statement in referencing the conflicting role of the social worker-police officer. The worker must advocate for and understand the difficulties that clients face, all the while monitoring the family functioning and maintaining a relationship with the court system. The family may feel ambivalent about the court system, and view the worker as working for the “wrong side.” For example, parents may show resistance in engaging with a worker who can ultimately have their children removed from the home. The worker must, “build a trusting working alliance with the family, when the family may hold considerable resentment regarding the child welfare system involvement in their life” (Zosky, 2010). In addition to role ambiguity, lack of adequate resources for clients further adds to the stress level of the worker (NASW, 2008). If the agency cannot provide the money or the resources necessary to enable clients to positively move forward, then their worker can only do so much to assist them.

Workers in state agencies must interact with a variety of systems and rules that shape their practice with clients. Restrictive working conditions may result from the political and organizational environment of the agency (NASW, 2008). No matter what the stress may be, the organization of a worker’s agency influences the way she feels about her job. Yildirim (2008) found a positive statistical relationship between negative attitudes from the principal and the increased feelings of burnout among counselors in a study on social support and burnout among counselors in a Turkish school system. Numerous other studies report the surfacing of stress when workers do not receive the needed support and assistance from their supervisors or their coworkers (Mor Barak, Nissly, & Levin, 2001, 2005; Munn, Barber, & Fritz, 2008 & NASW, 2008). Stalker et al. (2007) concluded that active support from supervisors helps the worker to

better manage stress in a hectic field of work. As support from one's supervisor disappears, the emotional exhaustion of the worker increases. Understandably, the supervisor must serve as a source of strength for the workers she oversees. Without this support, workers are left to internalize problems and become overwhelmed by the great responsibility they hold.

High caseloads prevail as a factor in burnout in various social work studies (Anderson, 2000; O'Donnell & Kirkner, 2009 & Zosky, 2010). The Child Welfare League of America (CWLA, 2010) states that "workloads are best determined through careful time studies conducted within the individual agency. They should be based on the responsibilities assigned to complete a specific set of tasks or units of work for which the worker is responsible." Unfortunately, research shows that large numbers of caseloads further add to the stress and exhaustion related to burnout (Landsman, 2001; Pecora, Whitaker, & Maluccio, 2000; Rycraft, 1994; Strolin, McCarthy, & Caringi, 2007 & Winefield & Barlow, 1995, as cited in Zosky, 2010). A quarter of the survey participants in a study of social workers disclosed that the stress in their profession is further increased by high caseloads that make completing worker duties increasingly difficult on a daily basis (NASW, 2008). Workers overburdened by large amounts of work risk experience feelings of emotional exhaustion and job dissatisfaction (Stalker, Mandell, Frensch, Harvey, & Wright, 2007).

Level of experience is one variable impacting burnout that researchers cannot consider in a vacuum. The worker's age and the setting in which he practices serve as two factors that can manipulate burnout levels (Schwartz, Tiarniyu, & Dwyer, 2007). Despite a possible impact by this variable, similar ages and settings among workers may impact them in opposite ways. Yildirim (2008) found that school counselors with between seven and ten years in the field reported higher rates of depersonalization than the workers with one to three years of experience.

This draws a parallel to the child welfare field since newer workers tend to be more intensely supervised and have recently gone through training (Daley, 1979). On the other hand, previous research reported findings that depersonalization, psychological strain, and lower perception of accomplishment were all higher with younger workers in human service agencies (Davis-Sacks, Jayaratne, & Chess, 1985). Understandably so, younger workers are newer to the field, and therefore may be more impacted by the high levels of stress and responsibility that they now encounter. They may not have developed enough effective coping mechanisms to deal with the pressures of the job. The impact of level of experience on burnout requires more in depth research to determine the existence and strength of a relationship among the two variables.

### **Consequences of Burnout**

Already restricted by limited funds and resources provided to clients, burned out workers further jeopardize the quality of service delivery in child welfare agencies. Money does not allow for the attention necessary to address burnout among workers (Daley, 1979). As a result, higher occurrences of worker depression, anxiety, and job dissatisfaction are left unaddressed and unattended (Jayaratne, Chess, & Kunkel, 1986). Social workers with unhealthy methods to cope with stress have a greater chance of developing problems with their physical and mental health. The more overwhelming amounts of stress the worker encounters, the more prone she is to problems with her health in the future (NASW, 2008). In addition, health problems surface for workers endlessly weighed down by stress of the job (NASW, 2008). From the sample of child welfare and family social workers surveyed by NASW, one fourth of the population had sleep disorders. Other research has mentioned similar conclusions as well (Robb, 2004). Increasing feelings of emotional exhaustion over an extended period of time threaten the physical and emotional health of the worker (Stalker et al., 2007). Somatic functioning is further inhibited by

work related stressors including, but not limited to, problems with the gastrointestinal tract, decreased energy level, and exhaustion (Robb, 2004). To competently address the problems that workers face, agencies must work to actively target, not only the causes, but the effects of burnout. In addition, identifying areas of resiliency that help an individual prevent burnout provides a greater insight into the issue as a whole.

When a worker begins to burnout, the negative feelings impact the client through a trickle-down effect. Burnout impairs a worker's behavioral functioning, causing his level of competency to decrease, and hurting his clients (Robb, 2004). Child welfare agencies operate with the goal of promoting the well-being of the children. Children at risk have cases open to state child welfare agencies; this population is reliant on its workers to advocate for its well-being and overall safety. An inadequate worker will place the child at risk. Burnout further causes worker performance to decrease as the human service professional begins to over exhaust herself. Depersonalized workers will view clients in a negative light and "deserving of their troubles" (Ryan, 1971, as cited in Maslach & Jackson, 1981, p. 99). This further inhibits the important work these professionals must do to assist their clients. Workers plagued by feelings of burnout still employed in the field can do great harm to clients. Emotionally exhausted workers will not have the ability to think clearly and make decisions that promote the best interests of the child. Children in the system are extremely vulnerable and workers who fail to disclose child abuse and neglect could place the child in imminent risk and danger (Anderson, 2000).

### **Areas of Resiliency that Internally Prevent Burnout**

Studies available identify burnout protection factors inherent within human service professions (Anderson, 2000; NASW, 2008; Ospina-Kammerer & Dixon, 2001; Stalker et al., 2007 & Zosky, 2010). Variables including workplace support, coping mechanisms, and methods

of self-care impacting social service workers aid in preventing burnout among this group of professionals.

Another crucial factor in burnout prevention is supportive supervision. Supervisors are responsible for monitoring their workers and employing burnout prevention techniques. These techniques include designated appointments for workers to come and discuss their cases with supervisors, sanctioned time-outs, and group support (Freudenberger, 1977, as cited in Daley, 1979). Further advocating this idea, the National Association of Social Workers (NASW, 2008) declares that supervision should promote the healthy mental and physical state of the worker. The relationship between lack of social support from a supervisor and increased worker turnover is present in burnout research (Munn, Barber, & Fritz, 1996). In order for workers to feel supported and confident in the choices they make, their supervision needs to come from a supporting and understanding supervisor. Supervisors provide one of the most important supports for workers in helping professions (Nissly, Mor Barak, & Levin, 2005). To further enhance the research in this area, researchers could explore personal methods supervisors use to build staff morale and provide support.

In addition to spending time with clients, social workers must naturally interact with colleagues in their respective agencies. Due to the extended periods of time people spend at their jobs, it is plausible that coworkers have an effect on the worker. Support from coworkers has been looked upon as a method of preventing burnout (Davis-Sacks, Jayaratne, & Chess, 1985). In an area such as child welfare, insufficient support from work colleagues increases the tendency of workers to leave their jobs (Nissly, Mor Barak, & Levin, 2005). A study by Nissly, Mor Barak, & Levin (2005) found that worker turnover decreases when a worker has compassionate coworkers that provide a supportive network in the field. This study suggested the

inclusion of programs that allow for routine meetings among workers to provide support to and from one another. Through support groups focused on the difficulties of the profession to colleagues, the workers can begin to relieve themselves of some of the stress inherent in the helping professions (Nissly, Mor Barak, & Levin, 2005).

### **Burnout Prevention**

In a field where workers tend to put the needs of others before their own, social workers may forget to work toward maintaining personal health in the challenging field of human services (NASW, 2008). Sirinka Jayaratne (as cited in Robb, 2004), a social work professor at the University of Michigan responsible for five national surveys on burnout, believes that many cases of burnout can be prevented (Robb, 2004). Her research has focused on areas of burnout including the positive results associated with social support on burnout, burnout in child welfare, and the negative effect it has on spouses of these workers. If agencies focus more on burnout prevention, the presence of this condition may dwindle significantly. Himle, Jayaratne, and Thyness (1991, p. 9) concluded “that informational and instrumental support may buffer the impacts of certain types of work stress and thus reduce burnout.” Informational support defines the worker’s perceived beliefs surrounding the offering of information by supervisors or coworkers when in need. Coworker and supervisor assistance with complicated assignments is defined as instrumental support (Himle, Jayaratne, & Thyness, 1991).

### **Coping mechanisms and methods of self-care**

NASW (2008, p. 269) defines social work professional self-care as “a core essential component to social work practice and [it] reflects a choice and commitment to become actively involved in maintaining one’s effectiveness as a social worker.” Due to the stressful nature of the job, active methods of self-care must continuously employ burnout prevention methods. Self-

care can be executed through the use of coping mechanisms. From the literature available on coping, Hooyman and Kiyak (as cited in Ospina-Kammerer & Dixon, 2001) describe coping as “a defense mechanism that protects the emotional and psychological well-being of the person exposed to stress” (p. 88). Ospina-Kammerer and Dixon (2001) conceptualize coping as “the link between stress and adaptation,” and identify five categories of coping: active/direct, inactive/direct, active, indirect, and inactive/indirect (p. 87).

In order to successfully balance and maintain their physiological and psychological health, social workers must develop effective techniques to deal with stress (NASW, 2008). Daley (1979) concluded that helping a worker deal with stress must be done on an individual basis due to the fact that people perceive and handle stress in very different ways. What one individual views as stressful, another may not. Qualities inherent in an individual, as well as the organization for which he works, impact the way a worker handles stress (Zosky, 2010). In a study by NASW (2008), three quarters of the child welfare and family social worker category reported exercising as a method they use to ease stress. Other reported activities to cope with job related stress included painting, camping, meditating, listening to music, and gardening (NASW, 2008). Other methods for coping include the use of cognitive restructuring and problem solving. These activities have been mentioned to be used over the reliance on social support or disclosing feelings (Anderson, 2000). Overall, Anderson (2000) stated that in order to prevent high levels of emotional exhaustion, workers must develop coping strategies centered on cognitive restructuring and problem solving. Coping mechanisms focusing on the emotions of the worker may be the most effective way to keep levels of stress lower. The use of more effective coping mechanism will increase the productivity of the worker, which will be positively reflected on the client (Ospina-Kammerer & Dixon, 2001). In other words, social workers who actively work



through difficult emotions in healthy ways will be helped as a result. The profit of positive coping will then be bestowed upon the client.

Negative coping strategies threaten the performance of workers and may cause further harm to the worker and his clients. Knowledge on ineffective coping strategies will educate workers and increase their awareness of unproductive coping mechanisms. In a study focused on coping mechanisms, child protective service workers displayed elevated levels of emotional exhaustion when employing avoidant coping strategies (Anderson, 2000). Avoidant coping occurs when a worker refuses to acknowledge her emotions and denies that a problem exists (Anderson, 2000). Social workers reported the tendency to use absenteeism or the consumption of alcohol to cope with work related stress (NASW, 2008). Other workers employed a technique called “problem masking” to dismiss the factors of burnout. Individuals using this approach attempt to cover up any problems in their work to family members and coworkers by pretending these problems are nonexistent (Jayaratne, Chess, & Kunkel, 1986). Overall, negative coping strategies cause harm to the worker, as well as inhibit his performance in working with at risk clients. Social workers and human service professionals must demonstrate healthy coping behaviors to provide competent support for their clients.

### **Applied Intervention Programs**

Interventions directed on the individual person showed a decrease in the symptoms of and feelings related to burnout. These person-directed programs utilized trainings in psychotherapy counseling, communication skills, adaptive skills, and other individualized forms of intervention (Awa, Plaumann, & Walter, 2009). Interventions targeting the organization involved job evaluations, restructuring of the work process, and providing appraisals for work. Awa, Plaumann, and Walker report (2009) that the combination of person-directed and

organization-directed programs “led to positive effects on burnout and all positive changes in burnout were significant” (p. 189). Another intervention focusing on personal growth in respect to burnout presented effective results in the prevention of burnout and its symptoms. The intervention, referred to as a transpersonal-oriented prevention program, revolved around the ideologies behind psychosynthesis. The ten day training focused on the theme “that everyone creates his or her own reality and must experience it, learn from it, change it if not satisfactory, and act on it constructively” (Van Dierendonck, Garssen, & Visser, 2005, p. 68). Another intervention program applied to students concluded positive findings when a stress management seminar given to those enrolled at a social work university. The students showed a decrease in their feelings of overwhelming stress (Dziegielewski, Rosest-Martl, & Turnage, 2004). From this information, one can conclude that intervention programs have positive impacts on a person’s feelings of emotional exhaustion, depersonalization, and feelings of overwhelming stress. The addition of such programs could be a tremendous benefit for social workers in various fields.

The literature presented displays a clear picture of the research currently conducted in the field of burnout. A solid definition of burnout allows for the direct application of the term to diverse workforce settings. With the knowledge of burnout symptoms available and a clear idea of its meaning, more research should look into the healthy ways that state workers in a child welfare setting perceive the work they do and how it influences their service delivery. Further research should include the approaches these professionals take to prevent the symptoms of burnout. In addition, little attention has been paid to the potential correlation between a worker’s feelings of emotional exhaustion, depersonalization, and negative perception of self and the level and type of education she received. To work in a state child welfare agency, a Bachelor’s or Master’s degree in social work is not required. It is plausible to believe that such realities make

some workers at risk for burnout. These factors as well as the length of time in an agency, and other burnout factors may be apparent in a state child welfare agency and further into they should be looked.

The research conducted in this study will focus on burnout related to state workers in a child welfare setting. The researcher of this current study aims to search more in depth into the coping mechanisms and methods of self-care that human service professionals use to prevent burnout. Along with the aforementioned topics, the researcher aims to discover the areas in the workplace that cause the most stress to workers. More specifically, this research will expand on burnout prevention techniques in relation to state workers in a child welfare agency. Not only will this study work to inform social workers about effective methods of self-care and more appropriate ways of coping, but it will also look into ineffective methods of coping and how they are detrimental to working directly with vulnerable populations.

### **Methodology**

The researcher conducted a relational and exploratory, mixed method study. The focus in this research included the methods state workers in a child welfare setting employ to cope with daily work-related stress; factors that contribute to this population burning out; and the techniques this population utilized to remain emotionally healthy while working in an extremely stressful and exhausting field of work. In addition, the researcher further explored the relationships between worker education level and type of degree, years of experience in child welfare, and worker burnout and resiliency. In order to understand the coping mechanisms workers use, it is imperative to discover ineffective methods currently being used by human service professionals. Coping strategies employed by burned out workers may not always be the most successful, and this needs to be addressed. Effective methods of dealing with stress among

state workers in a child welfare setting will serve as an invaluable resource for other social workers in the field.

### **Participants**

In order to gain access to the desired target population, the researcher contacted a member of the agency's Institutional Review Board (IRB) to gain permission to distribute the instrument. The researcher submitted a cover letter (see Appendix A) along with the research abstract and survey instrument to the member of the IRB. Child welfare direct service workers from a large state agency in Rhode Island were solicited to participate in the survey. Participants' ages ranged from the late twenties to the mid sixties. In order to work in this state agency, workers had to pass a state exam and go through training for their specific position. Administrative staff members were not included in the sample due to minimal direct involvement in the lives of the clients.

### **Data Gathering**

To gather data, participants were asked to fill out an anonymous and confidential survey (see Appendix B). Two hundred surveys were distributed to five major sites in the agency by the researcher and, one week later, were picked up. A member of the IRB wrote an email to supervisors from the various regions to inform them the start date of this study (see Appendix C). As specified by the consent form (see Appendix D) at the beginning of the questionnaire given to participants, filling out the questionnaire and returning it to the researcher indicated the person's willingness to participate in this study. Participants submitted their surveys by enclosing them in the envelope provided and placing them in a closed box next to the worker mailboxes. Participants were asked to provide their age, the number of years they had worked in the child welfare agency, and the educational degrees they held. The survey instrument included questions

from the Maslach Burnout Inventory (MBI) (Maslach & Jackson, 1981) , to measure burnout among the sample focusing on three areas: emotional exhaustion (nine items); personal accomplishment (eight items), and depersonalization (five items) for a total of 22 items. The questions were measured on a five point Likert scale from (1) strongly disagree to (5) strongly agree. Following this section, the survey contained open-ended questions asking the workers to elaborate on specific areas of burnout related topics. The topics included ways that workers relieve job related stress, ways for administration to promote methods of self-care among workers, and areas in the job that cause the most stress. The participants were given a significant amount of space to respond to the open-ended questions. This allowed the researcher to gain more specific and unique information that enriched the content of this study. By asking open-ended questions, the researcher hoped to gain more in depth answers to appreciate how the workers deal with stress and burnout symptoms in their work environment. The researcher's contact person at the state child welfare agency had participants place the completed surveys in a specified area in the building. The researcher returned to the five sites a week later and collected the completed surveys.

### **Data Analysis**

All of the data except for the responses to the open-ended questions were entered into SPSS. Correlational analysis examined the relationship between specific variables in this study: burnout (measured by questions on the MBI), with level of experience, age, and type of education. The open ended responses were transcribed and key findings are included in the results section. Open-ended questions provided the researcher with richer, more detailed information about the sample of direct child welfare service workers. Open-ended questions allowed for the researcher to develop a more comprehensive representation of the population

being studied and to provide this study with more specific evidence and depth. The researcher paid close attention to the different methods the workers. In addition, the research focused on ways in which the workers felt their stress level could be lowered with the help of the agency administration.

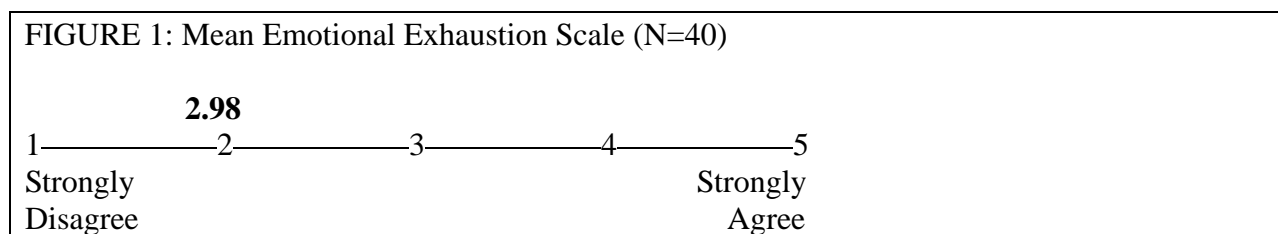
### **Findings**

Two hundred questionnaires were distributed to workers from the five units in Rhode Island that directly service families. Of the 200 distributed surveys, 40 were returned (20% response rate). The ages of participants (N =38) ranged from 28 to 66 years of age. The mean age of participants was 43.3 years of age, with a standard deviation of 11.15 years. Participants (n=39) had worked for the child welfare agency anywhere from six months to 25 years. The mean length of time working at the agency for the respondents was 9.3 years with a standard deviation of 6.18 years. Three participants were male, while 32 were female. Five participants did not share their gender. Thirty-three participants were direct front line workers, five worked in supervisory roles, and two did not include their job title at the agency, but were employed in child welfare direct service. Of the thirty-nine participants who disclosed their highest level of education, 11 (27.5%) have a Bachelors of Social Work (BSW), five (12.5%) have a Masters of Social Work (MSW), one (2.5%) is acquiring an MSW, and 22 (55%) have a non-Social Work degree.

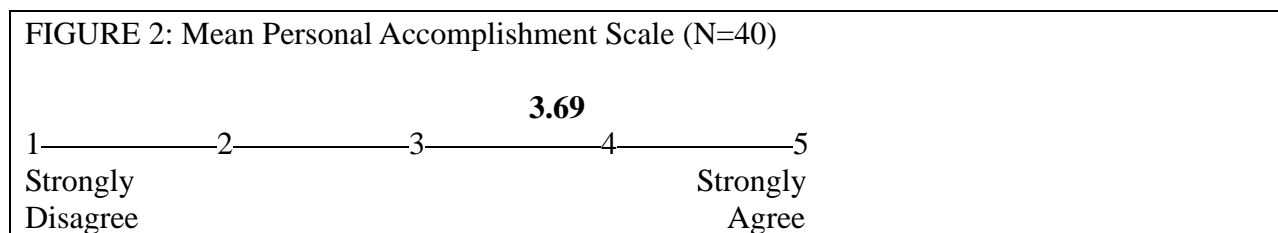
### **Psychometric Properties of the Scale Instrument**

The Maslach Burnout Inventory included three subscales for purposes of this study. The first subscale, emotional exhaustion, consisted of nine items; the second, personal accomplishment, included eight items; and the third, depersonalization, consisted of five items. The mean for each subscale was determined by the use of a descriptive statistics table on SPSS.

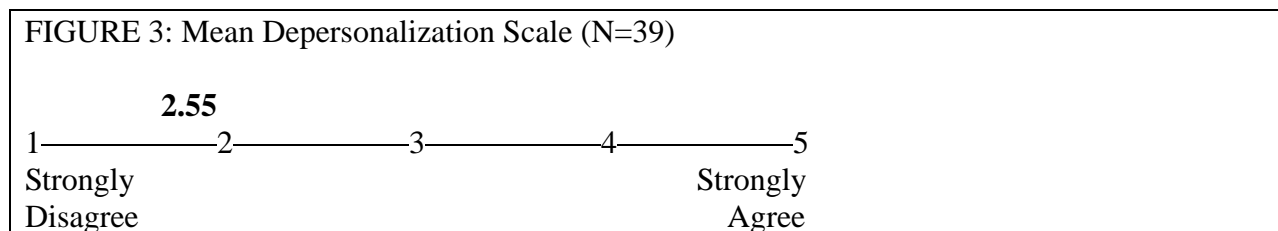
The mean score for total emotional exhaustion from the participants was 26.83, which, when divided by the total number of items (9 items) is 2.98 (see Figure 1).



This shows that the mean response by participants relating to emotional exhaustion was closest to the response of “neutral (3)” for items that described feelings of emotional exhaustion. The mean score for total accomplishment from the participants was 29.53, which, when divided by the total number of items (8 items) is 3.69 (see Figure 2).



This shows that the mean response by participants to the items indicating personal accomplishment in their work were closest to the response of “agree (4).” The mean score for depersonalization from the participants was 12.7692, which, when divided by the total number of items (5 items) is 2.55 (see Figure 3).



This shows that the mean response by participants for the depersonalization items was between “disagree (2),” and “neutral (3).” Cronbach alphas ranged from fair to very good, emotional

exhaustion (0.91), personal accomplishment (0.61), and depersonalization (0.79). These numbers indicate that the items had fairly good internal reliability.

Table 1: Psychometric Properties of the Major Study Variables

Variable	n	M	SD	Alpha	Skewness
Emotional Exhaustion	40	26.8	7.88	0.912	-0.011
Personal Accomplishment	40	29.5	3.40	0.617	-0.366
Depersonalization	39	12.8	3.91	0.799	0.322

A correlation analysis provided greater insight into the relation between the variable of “length of time working at [agency name omitted for confidentiality]” and the three burnout domains. No statistically significant correlations were found between “length of time working at [agency name omitted for confidentiality]” and the three burnout domains. There were no statistically significant correlations between “do you feel your supervisor works to promote stress among his/her workers?” and personal accomplishment and depersonalization. There was a statistically significant positive correlation between “do you feel your supervisor works to promote stress among his/her workers?” and emotional exhaustion. Although the correlation is not extremely strong, a positive relationship is indicated between these two variables ( $r = 0.421$ ,  $p < 0.01$ ).

The mean for emotional exhaustion was higher in participants who had received either a BSW (29.18) or an MSW than those who had received a non-Social Work degree (25.2). This difference was not statistically significant. When emotional exhaustion for each mean is divided by the number of items in the survey instrument (9 items), the means are as follows: BSW (3.24), MSW (3.49), and non-Social Work degree (2.80). This shows that non-Social Work workers had



a mean response closest to that of “neutral (3)” with statements indicating they felt emotionally exhausted rather than BSW and MSW workers who had mean scores that indicate a response between “neutral (3)” and “agree (4)” to the statements.

The mean for depersonalization was highest in workers who had earned an MSW (15.0), compared to participants who had received either a BSW (12.8) or a non-Social Work degree (11.95), although not statistically significant. When the depersonalization for each mean is divided by the number of items in the survey instrument (5 items), the means are as follows: BSW (2.56), MSW (3.0), and non-Social Work degree (2.39). This shows that workers with an MSW had a mean response of “neutral (3)” to statements indicating they were exhibiting depersonalization rather than BSW and non-Social Work degree workers who have mean scores that indicate a response between “disagree (2)” and “neutral (3)” to the question. None of the findings were statistically significant.

The mean for emotional exhaustion (31.8) was higher for workers who did not believe their supervisor worked to prevent stress reduction rather than those who felt their supervisors did (24.7). The means were extremely close in personal accomplishment for these two groups.

Workers who felt their supervisors worked to prevent stress reduction had a lower mean score (12.18) than those who believed their supervisor did not prevent stress reduction (14.08). This difference was not statistically significant. None of the findings in the three domains were statistically significant: emotional exhaustion, personal accomplishment, and depersonalization. In order to understand what a high mean signifies in the research, the researcher divided each mean from the three domains and divided it by the number of items of the survey instrument. Emotional exhaustion for workers that felt their supervisors prevented stress reduction then had a new mean of 2.74, which depicts a mean response between “disagree (2)” and “neutral (3)” to

questions indicating emotion exhaustion. Workers who did feel supervisory support had a mean of 2.82, which depicts a mean response closest to “neutral (3)” to statements indicating feelings of depersonalization. Although these findings were not statistically significant, they were supported by the open-ended responses provided by the participants in response to supervision received on the job. Six participants (N=31) mentioned availability as a quality that made their supervisor effective at reducing their stress level. Workers reported feeling supported on the job when their supervisors assisted them in completing tasks. One participant reported, “[My supervisor] is very supportive, patient, and is always available even after hours. I wouldn’t still be here if it weren’t for [my supervisor]. I am fortunate to have [my supervisor] assigned to me.” A worker that felt unsupported by her supervisor wrote that her supervisor, “does nothing to help workers,” and “makes snide comments about cases.”

Depersonalization among workers that felt their supervisors worked to prevent stress on the job was computed into a new mean of 2.43, which depicts a mean response between “disagree (2)” and “neutral (3)” to questions indicating personal feelings of depersonalization. Workers who did feel supervisor support had a mean of 3.54, which depicts a response right between “neutral (3)” and “agree (4)” to statements indicating emotional exhaustion.

### **Stressors at Work**

Of the 40 participants in this study, 18 participants (45%) reported large amounts of work and limited amount of time they have to complete it as the most stressful part of their job. In a 35-hour work week, participants reported various factors that caused responsibilities to increase such as high caseloads, ineffective time management, excessive amounts of paperwork, and unexpected crises with families in the system. One participant reported the “amount of responsibilities that [direct child welfare service workers have] are beyond what one person can

do. [Workers] cannot really implement and follow through with best practice.” Another participant reported, “[Direct child welfare service workers] play a lot of roles. Everyone wants something from us and there isn’t enough time to get it done effectively.” Participants frequently mentioned court as another stressful and aggravating aspect of their work. Out of the ten participants that mentioned court as the biggest stressor (25% of the sample), one worker summed up the frustrations voiced by many of the participants:

Court is now becoming very stressful and wasting hours of time. This is due to mostly waiting for a case. You may spend a whole day in court for one case. There are some judges who seem not to value what we have to say (this has only happened recently with a Judge rotation). He doesn’t want to even hear what we have to say regarding the case and we work with the families daily. Instead he will talk to [the court advocate] and [agency name omitted for confidentiality] attorney who mostly don’t have much or any (respectively) to say of the case. Then he orders unreasonable things.

Sixteen out of the 40 participants (40%) referenced the difficulty of working with the court system in some place in the survey. Not only did participants mention the amount of time put in to the court system, but participants also discussed the demeanor and competency of the agency’s legal department and the stress of assisting attorneys as an area of great frustration. Five out of the 40 (12.5%) mentioned some form of incompetency of the agency’s legal department or attorneys as an area of immense stress and nuisance. One participant acknowledged the court process when recalling a stressful event on the job:

[I was] trying to explain [a] case in court to [a] covering attorney. [The] attorney just kept laughing when told of details in case, very frustrating. [The agency attorneys] conference[d] with defense attorneys without [the direct child welfare service worker] being included.

### **Experiencing and Dealing with Stressful Events on the Job**

As participants were asked to reflect on a time they felt the most stressed on the job, the impact of positive, supportive supervision emerged as a central theme that allowed workers to deal with the stressful event. Out of 34 responses, 26 (76.5%) felt that their supervision is

supportive. Eight of the participants (20% of the sample) reported talking to and receiving support from a supervisor after the stressful event. A participant reported feeling the most stressed when:

I felt that I overlooked a situation and did not make reasonable efforts as required. I was physically sick over it. I spoke to a supervisor and coworker who assured me I had done the best I could do. It was months ago, but it still makes me anxious. We just don't have time to be thorough.

On the other hand, one participant reported:

As a [direct child service worker] my first supervisor was ineffective and not respected by the administration. I had to learn the basics of the job from workers from another unit I shared space with. I was a brand new worker without a clue and had no support and felt that I had to sink or swim on my own.

The above excerpt supports the remarks of six participants (15%) who reported they feel the most stressed on the job when interacting with unsupportive supervisors, the lack of connection with administration, and/or a combative legal department. The difficulty of the court system was mentioned when one participant recalled a time in court when:

The children had been neglected to the point of starvation. [The judge] dismissed the criminal case after my testimony and several doctors. All involved were horrified. I was so stressed I broke out in hives!

Working with such a vulnerable population, workers should feel supported and cared for by supervisors and administration. Unfortunately, many workers do not have the necessary supports and end up burning out. One participant perfectly summed up this concern by stating, "I used to love my job! I hate coming in now! I truly feel 'alone' most of the time. The stress is now making me physically ill!"

Other responses to a significant portion of the questions on the survey instrument showed stress resulting from the powerful impact of witnessing difficult problems directly and indirectly.

Removing children from their homes was reported by five of the participants (12.5%) as a time they feel the most stressed in their work. One participant explained:

Most stress occurs around non-routine job experiences like removing a child from the home. These situations can often be very emotional and sometimes pose a risk to the social worker involved. During these times I ignore the stress until after the task is complete. I stay focused on the child.

Workers must deal with the effects of directly and indirectly encountering emotional and traumatic events on a daily basis.

### **Positive Coping Mechanisms**

Thirteen out of 40 participants (32%) reported engaging in some form of physical activity as a way to relieve stress. Activities included running, exercising daily, taking walks, and going to the gym. Seven participants (17.5%) reported maintaining a sense of humor as another method of dealing with work related stress. Fourteen participants (35%) relieved stress by venting and discussing cases with coworkers and supervisors. A participant supported this theme by stating she “talk[s] to other workers to realize a lot of us are in the same boat!” Yoga, guided imagery, and other traditional relaxation techniques were reported by six participants (15%). Other examples of positive coping methods disclosed by participants included spending time with family, compartmentalizing responsibilities, crying, shopping, reading, and taking routine vacations. One of the responses that stood out to the researcher in response to positive ways of dealing with stress was a participant who stated, “With years of experience comes knowledge that there are some things you can change and there are things you need to roll with and learn to let it go.”

### **Negative Coping Mechanisms**

Participants identified a wide array of activities as negative methods of dealing with job-related stress. Twenty-five percent of the participants (ten participants) disclosed a change in

eating patterns in response to stress. Changes included overeating, eating unhealthy, easily-accessible foods due to limited time, and not eating due to stress. “Stress eating,” was described by one participant as a negative coping mechanism. Out of the ten participants that mentioned some kind of food related coping mechanism, one stated that she suffered from a loss of appetite under extreme stress at work. Ten participants (25%) reported drinking alcohol and/or smoking as negative coping methods. Another interesting response to negative coping on the job was isolation from family/friends/coworkers when the direct child welfare service workers let the stress of their work impact their relationships. This was reported by four (10%) of the participants. Workers have a great deal of responsibility and inappropriate supports and unhealthy coping mechanisms can further impact worker burnout.

### **Workers’ Perceptions about Administration Involvement in Decreasing Job-Related Stress**

Nine participants (22.5%) reported the need for the number of families on caseloads to decrease in order for their stress level to become more manageable. This aligns with the eight responses that stressed the need to hire additional staff due to their overwhelming amount of responsibilities. The notion to provide a more supportive environment surfaced as a prominent theme among 32.5% of the participants. These participants expressed an absence of a connection between administration and front line workers. This feeling is supported by a participant’s statement that, “Supervisors and administrators could support [child welfare direct service workers] instead of putting their heads on the chopping block.” In another emotional response, one worker confessed:

The finger is always pointed at [the child welfare direct service staff]. We are always picking up the pieces. We are not respected or supported as a whole. We have high caseloads and have the same cases for years; it is a recipe for disaster.

On a lighter note, three participants mentioned incentives for exercise or availability to an exercise room as a way they could more effectively cope with their high stress level.

### **Connection with Administration**

As workers were asked for additional comments, the gap between administrators and the front line workers became ever more apparent. Seven of the nine participants (78%) that provided additional comments reported a lack of support and respect from administration, and an overall negative work environment. One participant stated that the, “overall department morale is poor,” while another stated the administration to be “out of touch.” The results revealed a group of workers who have their clients’ best interests at heart, yet are discouraged and frustrated by dealing with a large and complex system:

My frustration comes from [the agency] and not so much from the families I work with. While I am always busy with so much to do I feel my productivity is low because I can’t focus on where to even begin. Shoveling sand against the tide, it never goes away. I expect difficulty with families in crisis but shouldn’t feel so unappreciated by my employer. I am not intellectually stimulated, just exhausted!

### **Stress Reduction Programs**

Out of the 37 participants that responded to the item, 27 (73%) reported they had never participated in any form of stress reduction program. One participant, when asked if she had ever participated in a stress reduction program responded, “No, and [I] would not be particularly interested. I don’t need one more thing to do.” Of the remaining participants that did have prior involvement with a stress reduction program mentioned karate, meditation, yoga, and guided imagery as stress reduction activities they had participated in. In addition, one participant disclosed, “when I worked in [name of town] office, a group of us started a stress support group that met weekly at lunch time.”

The wide array of information provided from the participants has further implications for social work research, policy, and practice.

### **Summary and Implications**

This study explored the coping mechanisms and factors related to burnout among direct service workers in a state child welfare agency. The researcher examined the reported work situations that caused the most stress for workers. The findings of this research revealed a group of dedicated workers who are under stress due to the urgency of their work in assisting families experiencing crises. Workers described a wide array of coping methods, both negative and positive, as a means to address work related stress. Such methods include: seeking support from coworkers, withdrawing from friends and family, and engaging in relaxing activities.

The most prominent themes that came from study centered on the court system, lack of support from agency administration, and the high number of caseloads. Previous literature parallels the mentioned difficulties that macro influencers of an agency can have on worker well-being (Nissly, Mor Barak, & Levin 2005; NASW, 2008). Many participants stated the difficulty of their job stems from the outdated court system and lack of support from the administration rather than the families with whom they work. The anger rooted in both the agency politics and ineffective court representatives further demonstrates the amount of passion the workers have to promote the best needs of their clients while feeling “alone” in a large, sometimes disconnected agency. Furthermore, the high caseloads associated with child welfare workers have been identified to lead to emotional exhaustion and job dissatisfaction (Stalker et al., 2007).

The findings from this study presented minimal insights into any significant relationship between the length of time that employees worked at the agency and the three domains used to measure burnout. On the other hand, the positive relationship found between the presence of



supportive supervision, and the decrease of emotional exhaustion in workers further supports a study conducted by NASW. The NASW study reported the importance of supervision in promoting the mental and physical well-being of the worker (NASW, 2008). Participants frequently wrote down coworker support as a positive method for coping, further underscoring the literature (Davis-Sacks, Jayaratne, & Chess, 1985). The idea of “we are all in the same boat” resonated throughout the participants’ open-ended response.

The positive coping mechanisms employed by the participants were in fact supported by current research (Anderson, 2000; NASW, 2008; Ospina-Kammerer & Dixon, 2001; Stalker et al., 2007 & Zosky, 2010). An NASW report identified exercise to be a popular and positive coping mechanism for job-related stress (2008). This study found similar reports, as exercise was the most prevalent positive coping method. There was no mention in the applied literature about the use of humor as a positive coping mechanism; whereas the participants in this survey mentioned the use of humor to relieve stress and get through difficult situations on the job. Relaxation activities, such as yoga, meditation and guided imagery were noted in a previous research study (NASW, 2008).

This study also revealed findings that surprised the researcher. The presence of supportive supervision among the participants was mentioned frequently throughout this study. A frequent theme expressed by participants focused on the disconnect present between administration and workers, along with the stress of overwhelming amounts of work due to large caseloads.

### **Limitations**

There were several limitations in this study. The participant group consisted of a small number of workers in relation to the number of surveys distributed (20% response rate). In

reality, the findings may not include an accurate picture that can be generalized to the entire population. In addition, due to the fast-paced and hectic nature of a job in child welfare, workers may not have taken the appropriate time to respond to the questionnaire. If a specific time period had been set aside for the workers to fill out the questionnaire, the data may have been richer. If workers were given some incentive to complete the questionnaire, the response rate may have increased.

### **Implications for Practice, Policy, and Research**

Practice implications from this study center on issues involving supportive supervision, the family court process, connection between front line workers and administration, and the high number of families per worker caseload.

Supervision serves as a crucial component in the performance and mental well-being of child welfare direct service workers. In order to expect these workers to perform at the best of their ability, it is imperative that the agency provides them with competent, knowledgeable, and supportive supervisors. Helping professionals must advocate for themselves to receive proper supervision when it has not been provided. Agency administrators must create policies that mandate routine supervision for workers.

In a high stress atmosphere such as a child welfare agency, a large portion of the workers' frustrations resulted from the disconnection and lack of support they perceived from the administration. Direct child welfare service staff care for their clients, but must remain mentally and physically healthy to perform the irreplaceable work they do. There is a desperate need for open communication between the administration and direct service child welfare workers. Administration should make an effort to include direct service workers in decision making processes. Workers who feel disconnected and unsupported from the administration will become

more stressed and burnout quicker. This notion is extremely troubling due to previous literature mentioning the negative impact of burned out workers can have on the lives of their clients (Glisson & Durick, 1998; McKee et al. 1992; Manlove & Guzell, 1997 as cited in Mor Barak, Nissly, & Levin, 2001). The child welfare system would benefit greatly by working to review the family court process as well. With this review, the role and responsibility of the child welfare direct service worker needs to be clarified to all of the parties involved. The participants in this study referenced various occasions in which they felt “less than” in the family court process, despite their frequent involvement with the families. In order for the court system to run effectively, this writer suggests that there be a depth review of family court practices and procedures.

The disempowerment felt by workers in their place in the court process is evident in this study’s findings. This disconnection is further felt by direct service workers with the increasing size of caseloads. Despite the dedication of child welfare direct service workers, high caseloads burden workers and prevent them from promoting the best interests of clients. The researcher of this study recommends that efforts are made to decrease the numbers of families per worker caseload which will lessen the overwhelming responsibilities placed on the worker. Although a certain amount of stress and responsibility is inherent in the job, the researcher suggests that the obligations must be reasonable for the amount of time and resources to which the workers have access. High caseloads inhibit the amount of attention and time a worker can spend on each family and the quality of the services provided.

The social work and human services fields can benefit from further research about burnout and its effects on clients and workers. In any profession, it is important to handle stress in a productive manner. Human service professionals in child welfare settings face an especially

rigorous and demanding work life and must routinely witness clients in crisis. Workers who can continuously and appropriately handle stress on the job will have a greater opportunity and ability to positively impact clients.

## References

- Anderson, D. G. (2000). Coping strategies and burnout among veteran child protective workers. *Child Abuse & Neglect, 24*, 839-848.
- Arrington, P. (2008). *Stress at work: How do social workers cope?* NASW Membership Workforce Study. National Association of Social Workers: Washington, DC.
- Awa, W. L., Plaumann, M., & Walter, U. (2009). Burnout prevention: A review of intervention programs. *Patient Education and Counseling, 78*, 184-190. doi: 10.1016/j.pec.2009.04.008
- Borritz, M., Rugulies, R., Christensen, K. B., Villadsen, E., & Kristensen, T. S. (2006). Burnout as a predictor of self-reported sickness absence among human service workers: Prospective findings from three year follow up of the PUMA study. *Occupational and Environmental Medicine, 63*, 98-106. doi: 10.1136/oem.2004.019364
- Brohl, K. (2006). Understanding and preventing worker burnout. *Children's Voice, 15*.
- Child Welfare League of America [CWLA]. (2010). *Guidelines for computing caseload standards*. Retrieved from <http://www.cwla.org/programs/standards/caseloadstandards.htm>
- Coleman, D., & Clark, S. (2003). Preparing for child welfare practice: Themes, a cognitive affective model, and implications from a qualitative study. *Journal of Human Behavior in the Social Environment, 7*, 83-96.
- Daley, M. R. (1979). Burnout: Smoldering problem in protective services. *Social Work, 375-379*.
- Davis-Sacks, M. L., Jayaratne, S., & Chess, W. A. (1985). A comparison of the effects of social support on the incidence of burnout. *Social Work, 240-244*.

- Dziegielewski, S.F., Roest-Martl, S., & Turnage, B. (2004). Addressing stress with social work students: A controlled evaluation. *Journal of Social Work Education, 40*, 105-119.
- Himle, D. P., Jayaratne, S., & Thyness, P. (1991). Buffering of four social support types on burnout among social workers. *Social Work Research & Abstracts, 27*, 22-27.
- Hooyman, N. & Kiyak, H.A. (1996). *Social Gerontology: A multidisciplinary perspective*. Boston: Allyn/Bacon.
- Jayaratne, S., & Chess, W. A. (1984). Job satisfaction, burnout, and turnover: A national study. *Social Work, 448-453*. doi: 0037-8046/84
- Jayaratne, S., Chess, W.A., & Kunkel, D. A. (1986). Burnout: Its impact on child welfare workers and their spouses. *Social Work, 53-58*. doi: 0037-8046/86
- Kim, H., & Stoner, M. (2008). Burnout and turnover intention among social workers: Effects of role stress, job autonomy and social support. *Administration in Social Work, 32*, 5-25. doi: 10.1080/03643100801922357
- Kop, N., Euwema, M., & Schaufeli, W. (1999). Burnout, job stress, and violent behavior among Dutch police officers. *Work & Stress, 13*, 326-340. doi: 1464-4335
- Maslach, C. & Jackson, S. E. (1981). The measurement of experienced burnout. *Journal of Occupational Behavior, 2*, 99-113. doi: 0142-2774/81/020099-15
- Mor Barak, M. E., Nissly, J. A., & Levin, A. (2001). Antecedents to retention and turnover among child welfare, social work, and other human service employees: What can we learn from past research? A review and metanalysis. *Social Service Review, 625-661*. doi: 0037/7961/2001/7504-0005
- Munn, E. K., Barber, C. E., & Fritz, J. J. (1996). Factors affecting the professional well-being of child life specialists. *Children's Health Care, 25*, 71-91.

- National Association of Social Workers [NASW]. (2008). Professional self-care and social work. *Social Work Speaks*, 268-272.
- Nissly, J. A., Mor Barak, M. E., & Levin, A. (2005). Stress, social support, and workers' intentions to leave their jobs in public child welfare. *Administration in Social Work*, 29, 79-100. doi: 10.1300/JI47v29n01\_06
- O'Donnell, J., & Kirkner, S. L. (2009). A longitudinal study of factors influencing the retention of title IV-E Master's of social work graduates in public child welfare. *Journal of Public Child Welfare*, 3, 64-86. doi: 10.1080/15548730802690841
- Ospina-Kammerer, C., & Dixon, D. R. (2001). Coping with burnout: Family physicians and social workers: What do they have in common? *Journal of Family Social Work*, 5, 85-93.
- Poulin, J., & Walter, C. (1993). Social worker burnout: A longitudinal study. *Social Work Research & Abstracts*, 29, 3-7.
- Robb, M. (2004). Burned out—and at Risk. *Practice Pointers*. Retrieved from [http://www.naswassurance.org/pdf/PP\\_Burnout\\_Final.pdf](http://www.naswassurance.org/pdf/PP_Burnout_Final.pdf)
- Schwartz, R. H., Tiamiyu, M. F., & Dwyer, D. J. (2007). Social worker hope and perceived burnout: The effects of age, years in practice, and setting. *Administration in Social Work*, 31, 103-118. doi: 10.1300/JI47v31n04\_08
- Stalker, C. A., Mandell, D., Frensch, K., Harvey, C., & Wright, M. (2007). Child welfare workers who are exhausted yet satisfied with their jobs: How do they do it? *Child and Family Social Work*, 12, 182-191. doi: 10.1111/j.1365-2206.2006.00472.x
- Vahey, D. C., Aiken, L. H., Sloane, S. M., Clark, S. P., & Vargas, D. (2004). Nurse burnout and patient satisfaction. *Medical Care*, 42, II57-II56. doi: 10.1097/01.mlr.0000109126.50398.5a.

- Van Dierendonck, D., Garssen, B., & Visser, A. (2005). Burnout prevention through personal growth. *International Journal of Stress Management*, *12*, 62-77. doi: 10.1037/1072-5245.12.1.62
- Verbeke, W. (1998). Individual differences in emotional contagion of salespersons: Its effect on performance and burnout. *Psychology & Marketing*, *14*, 617-636. doi: 10.1002/(SICI)1520-6793(199709)14:6<617::AID-MAR6>3.0.CO;2-A
- Yildirim, I. (2008). Relationships between burnout, sources of social support and sociodemographic variables. *Social Behavior and Personality*, *36*, 603-616.
- Zosky, L. (2010). Wearing your heart on your sleeve: The experience of burnout among child welfare workers who are cognitive versus emotional personality types. *Journal of Public Child Welfare*, *4*, 117-131. doi: 1080/1



## Appendix A

[Name omitted for confidentiality],

I am writing to request permission from [agency name omitted for confidentiality]'s Institutional Review Board to survey [Child Welfare Direct Service Staff] workers from the four regions in Rhode Island. This request is for research I am doing addressing the stress and coping strategies of [Child Welfare Direct Service Staff]. This is part of a requirement for my BSW at Providence College. The research is being supervised by Dr. Katherine Kranz. To collect the data, I will place my survey instrument in all of the mailboxes of the [Child Welfare Direct Service Staff]. With each survey instrument I will include an empty envelope for the workers to place their completed questionnaire to maintain confidentiality and anonymity. I will set up a box near the mailboxes to collect the completed surveys. I would like to distribute the surveys within the next two weeks in order to collect the data and analyze it in a timely manner. The analyzed data will be presented in the form of a thesis. In addition, the paper will be entered into the college's Digital Commons for the community to view. [Agency name omitted for confidentiality]'s identity will be disguised in the presentation of findings as well as in the paper itself. In addition, I would be more than willing to provide [agency's name omitted for confidentiality] with the results of my study via a report and/or a presentation once I am finished. I have attached the abstract of my study as well as the survey instrument for your review.

I appreciate your attention to this and look forward to hearing back from you. I can be reached at [researcher's phone number and e-mail address]. My instructor, Dr. Katherine Kranz can be reached at [instructor's phone number and e-mail address].

Sincerely  
Molly Heverling

**Appendix B**

**Gender (Circle One):** Male Female

**Age:** \_\_\_\_\_

**Job Title:** \_\_\_\_\_

**Length of time working for [agency name omitted for confidentiality]** \_\_\_\_\_

**Highest Educational Degree Received:** \_\_\_\_\_

**Type of Degree(s) received (i.e. MSW, BSW, etc...):** \_\_\_\_\_

**Are you in the process of earning any other degrees (Circle One)** Yes No

**If so, in what?** \_\_\_\_\_

1. What is the most stressful part of your job?
2. Think of a time where you felt the most stressed on the job. Briefly describe the situation. Essentially what did you do to address the stress you were experiencing?
3. Please describe ways *you* **positively** deal with work-related stress.
4. Please describe ways *you* **negatively** deal with work related stress.



**RATE THE ITEM ON THE SCALE ACCORDING TO YOUR LEVEL OF AGREEMENT (Circle one of the five choices)**

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
	1	2	3	4	5
1. I feel emotionally drained from my work	1	2	3	4	5
2. I feel used up at the end of the workday	1	2	3	4	5
3. I feel fatigued when I get up in the morning and have to face another day on the job	1	2	3	4	5
4. Working with people all day is really a strain for me	1	2	3	4	5
5. I feel burned out from my work	1	2	3	4	5
6. I feel frustrated by my job	1	2	3	4	5
7. I feel I'm working too hard on my job	1	2	3	4	5
8. Working with people directly puts too much stress on me	1	2	3	4	5
9. I feel like I'm at the end of my rope	1	2	3	4	5
10. I can easily understand how my clients feel about things	1	2	3	4	5
11. I deal very effectively with the problems of my clients	1	2	3	4	5
12. I feel I'm positively influencing other people's lives through my work	1	2	3	4	5
13. I feel very energetic	1	2	3	4	5
14. I can easily create a relaxed atmosphere with my clients	1	2	3	4	5
15. I feel exhilarated after working closely with my clients	1	2	3	4	5

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
	1	2	3	4	5
16. I have accomplished many worthwhile things in this job	1	2	3	4	5
17. In my work, I deal with emotional problems very calmly	1	2	3	4	5
18. I feel I treat some clients as if they were impersonal 'objects'	1	2	3	4	5
19. I've become more callous toward people since I took this job	1	2	3	4	5
20. I worry that this job is hardening me emotionally	1	2	3	4	5
21. I don't really care what happens to some clients	1	2	3	4	5
22. I feel clients blame me for some of their problems	1	2	3	4	5

### Appendix C

Below is an email from Molly Heverling, a senior BSW student at PC. She has been approved to distribute an anonymous survey to [Child Welfare Direct Service Staff]. You might recall the email [administrator's name omitted for confidentiality] sent out on 1/28 asking for [Child Welfare Direct Service Staff's] support.

Thanks for your support. Please let me know if you have questions.

[Name omitted for confidentiality]

\*-----  
-----

Hello Family Service Administrators,

My name is Molly Heverling, a senior social work major at Providence College. I know that [name omitted for confidentiality] has sent around an email saying she approved that I can distribute surveys in the mailboxes of [Child Welfare Direct Service Staff] in all four [agency name omitted for confidentiality] regions. I will set up a box near the mailboxes to collect the completed surveys labeled PROVIDENCE COLLEGE [agency name omitted for confidentiality] SURVEY. I will be dropping off the surveys this Thursday 2/10 and I will be at the offices at the following approximate times

[location omitted for confidentiality]: 8:30 AM

[location omitted for confidentiality]: 9:30AM

[location omitted for confidentiality]: 11AM

I will pick the surveys up the following Thursday 2/17.

Any directions about where to go to find the [Child Welfare Direct Service Staff] mailboxes would be GREATLY appreciated.

I appreciate your attention to this and look forward to hearing back from you. I can be reached at [researcher's phone number and e-mail address].

Molly Heverling

## Appendix D

### Consent Form

Dear Potential Participant:

I am a student at Providence College, inviting you to participate in a study on coping with stress and burnout prevalence and prevention techniques employed by state workers in a child welfare agency. Knowledge of such effects can be useful to those in helping professions as such as social work. Data gathered in this study will be reported in a thesis paper for Providence College, and no identifying information will be reported.

Participation will involve responding to several questions in a survey instrument. Total participation time should not exceed 20 minutes.

There are no anticipated significant risks associated with involvement in this research. Participants are free to decline participation in this study at any time.

Benefits of participating in this study include contributing to the generation of knowledge that may aid in work with others in the future by identifying the positive coping mechanisms used to alleviate stress as well as ways that workers can be further protected from stress on the job. There is no other anticipated compensation.

Anonymity of participants will be protected by collecting forms in a way that ensures anonymity.

Participation in this study is voluntary. Your decision to participate or to decline to participate will not influence your relationship with the interviewers or the Department of Social Work in any way.

**YOUR RETURN OF A COMPLETED QUESTIONNAIRE IN THE SEALED ENVELOPE PROVIDED AND PLACED IN THE SPECIFIED BOX INDICATES THAT YOU HAVE READ AND UNDERSTOOD THE ABOVE INFORMATION AND THAT YOU HAVE HAD THE OPPORTUNITY TO ASK QUESTIONS ABOUT THE STUDY, YOUR PARTICIPATION, AND YOUR RIGHTS AND THAT YOU AGREE TO PARTICPATE IN THE STUDY.**

Thank you for participating in this study.

**Molly Heverling**     [mheverli@friars.providence.edu](mailto:mheverli@friars.providence.edu)  
Providence College  
Department of Social Work