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## Planning for Emotional Labor and Secondary Traumatic Stress in Child Welfare Organizations

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*When new workers return from the field for the second component of their core training, they've changed; they are wearing emotional armor.*

A state child welfare leader

*I have felt disgust for the people I serve.*

A child welfare caseworker

*I have a deeper level of despair than ever before.*

Another caseworker

*I live with lots of guilt.*

Another caseworker

Three pioneering initiatives funded by the Children's Bureau yielded the quotes above. Together, these initiatives have been instrumental in the development of formal knowledge and understanding regarding the centrality of emotions in child welfare. The first initiative, completed in the late 1990s, focused on child welfare practice with families manifesting co-occurring needs, especially substance abuse, depression, domestic violence, health disparities, and under the newly implemented Temporary Assistance to Needy Families initiative, employment challenges. The second was a child welfare workforce retention grant. The third, now in the launch phase, will develop "trauma-informed child welfare systems" in American Indian communities.

Different in many respects, these three initiatives have provided an important insight: child welfare professionals at all levels of the system are not technical automatons who operate on a task-centered, emotionally neutral automatic pilot. To the contrary, child welfare practice, life in child welfare organizations, and leadership, management, and supervision are inherently, indeed richly, emotional. Put another way, all such roles, including the interactions they entail, the work practices they structure, and the organizational impacts they have, involve emotional labor.

Under the best circumstances, this emotional labor is positive. Positive emotional labor ought to be manifest in direct practice with families and also in workplace interactions and experiences because it yields multiple benefits to frontline workers, their supervisors, top level leaders, and the organization overall. Perhaps above all, positive affect in the workplace validates professional identities as child welfare professionals and solidifies organizational commitments (Ashforth, 2001). It is, in short, a driver for desirable workforce retention, it facilitates the

development of workers' resilience and self-efficacy, and it contributes to a work- and life-enhancing organizational climate.

The systematic development of positive emotional labor begins with what individuals learn, know, and do. Both preservice and professional development programs are implicated, but it does not end here. New organizational designs also are needed. These designs are structured to establish and sustain the optimal conditions for positive emotional labor with special priorities for it to be reinforced and rewarded. The three Children's Bureau initiatives provided this set of insights and another set that follows.

When suboptimal practice, workforce, and workplace conditions prevail, emotional work in child welfare is decidedly negative. All such negative emotional labor is manifested in multiple, deleterious effects. Above all, emotionally traumatic events create secondary traumatic stress (STS), and STS symptomatology is an ever-present risk in work with vulnerable children and families (Caringi, 2008; Caringi & Hardiman, 2012). But STS also can originate in the workplace, especially in passive-defensive organizational climates in which the quality of treatment and interaction are suboptimal and workplace violence is normative. What is more, the two sources of STS are not mutually exclusive. STS stemming from work with children and families spills over into the workplace and vice versa.

Child welfare systems thus must place a new premium on emotional labor in general and STS in particular. This work entails a conceptual system as well as new organizational designs. Where STS is concerned, this new agenda entails early detection and rapid response systems. Ideally, these systems will be dovetailed with continuous quality improvement mechanisms and turnover prevention interventions.

Such is the foundation for the ensuing analysis. It is grounded in the main assumption that child welfare professionals' work-related cognitions and behaviors at every level of the system are laden with affect. Once this affective component receives due recognition, the emotional labor construct becomes a centerpiece in four related questions:

- What can be done to facilitate positive emotional labor and achieve its multiple benefits?
- How can negative emotional labor, especially STS, be minimized and prevented?
- What are the design-related specifications for child welfare organizations?
- What are the policy implications, especially at the state level?

The first three questions serve as implicit guides for the ensuing analysis of emotional labor. The implications for state policy belong in another analysis. For starters, a short review of the emotional labor construct is provided. This review acknowledges the roots of this emotional labor construct in the private sector's customer services industry. In the private sector, emotional labor is treated as a problem to be minimized, just as it often has been framed in child welfare.

In our framework, in contrast, the idea of positive emotional labor is offered as a companion, desirable construct. This positive emotional labor is consistent with norms of professionalism as well as the incentive and reward systems for social work with children and families. When it becomes an explicit priority, new avenues are opened for policy, practice, research, and organizational development.

The import of positive emotional labor is illuminated as our analysis turns to STS as a key example of negative emotional labor. We summarize the relevant research and explore implications for child welfare. These implications include the development of early detection and rapid response systems. We also emphasize new social work leadership roles and responsibilities, especially in workplaces with few official social workers.

Finally, we address the practice, workforce, and workplace conditions needed for positive emotional labor's development, optimization, and sustainability. New organizational policies and practices provide a fitting conclusion.

### **An Overview of Our Framework**

Directly attributable to investments by the Children's Bureau, our framework has been under development for several years. Even with the time needed to develop it, this analysis remains a work in progress. We readily acknowledge its limitations and selectivity. We offer it to others for expansion and as a guide to future research even as we continue work on a companion paper that provides a more expansive conceptual system for child welfare policy makers, system leaders, researchers, and professional educators.

Figures 1 and 2 (see Appendices) offer a conceptual picture of the underpinnings of our framework. This framework is grounded in four interdependent findings, which stem from the three Children's Bureau initiatives. All four findings have research supports.

First, the work of protecting and serving vulnerable children and their families continues to be viewed narrowly as a technical set of tasks, a view that typically excludes child welfare workers' emotions. Second, a

diverse, sometimes under-prepared workforce tends to emphasize people-processing technologies (e.g., completing the forms, maintaining records, brokering services) at the expense of people-changing work focused on emotions (Lipksy, 1980; Smith & Donovan, 2003). Third, leaders' concerns about high-profile cases and child deaths, in combination with a diverse and often under-prepared workforce, have been instrumental in their preference for top-down, compliance, and control-oriented, leadership management and supervision models and strategies, especially punitive ones conducive to negative emotional labor and even workplace violence. Fourth, high workforce turnover is endemic under these circumstances, complicating improvement planning and inadvertently reinforcing suboptimal configurations and operations that inadvertently reinforce and coproduce negative emotional labor. Details follow, starting with the emotional labor construct.

### **Emotional Labor and Its Impact on Child Welfare Organizations**

All human relationships and interactions focused on helping others involve emotions. Emotions (i.e., affect or feelings) are an inherent part of caring for others. Reciprocally, emotions are involved when one is being cared for by others (Noddings, 1986). The idea of emotional labor is rooted in these fundamental realities. Child welfare organizations are by design impacted by emotional labor. Studies related to STS levels have shown high levels of this phenomenon (Caringi & Hardiman, 2012). We propose that STS is in fact a co-occurring condition infecting child welfare workers at alarming rates, a condition which contributes to turnover (Strolin-Goltzman et al., 2008; Strolin, McCarthy, & Caringi, 2007). We offer more evidence of the impact of emotional labor in the literature review.

Emotional labor refers to the “work” of expressing and regulating affect or feelings in the context of paid employment (Hochschild, 1983; Pugliesi, 1999). The main idea—and core assumption—is that full-time employment in settings such as child welfare brings a special set of affective demands accompanying formal jobs. All paid jobs that involve interactions with other people, especially under challenging circumstances and in difficult places, thus entail emotional labor.

Child welfare workers routinely perform emotional labor in their relationships and interactions with clients. For example, emotions are embedded in investigations of abuse and neglect, child removals, emotional visitations with birth and foster parents, and a negative public perception of child welfare work in general. Additionally, emotional labor is manifested in their interactions with coworkers. Compassion, attachments, receptivity, relatedness, and responsiveness, all

indispensable aspects of caring for others, depend fundamentally on emotion. More than behavioral displays, these emotional features also serve as identity markers. More specifically, they comprise what Lord and Brown (2004, p. 50) call one's "relational identity"—the helping, nurturing, and caring relationships with others that define the self, both on the job and in one's personal life.

Furthermore, how workers think (cognition) and how they act (behavior) are intertwined with their affective states. In the same vein, what workers consider as their "knowledge for work"—their work epistemologies—also have affective components (Rein & White, 1981; Rein & White, 1982). In brief, emotions often drive both cognition, behavior, and work epistemologies (Ashforth & Saks, 2004; George, 2004).

In all such cases, child welfare workers are influenced by organizational and professional rules. These rules, whether implicit or explicit, tend to be control-oriented. Striving for emotional control, people rely on personal, professional scripts, and selected behavioral display strategies learned in the organizations employing them or perhaps during professional education programs. For example, when social workers learn how to establish and maintain professional distance from their clients, avoiding the tendency to "get too close to them," they are learning professional scripts and accompanying rules for their emotional labor in practice.

Notwithstanding their import and value, all such professional and organizational rules and scripts are designed to reduce each individual's emotional autonomy. The main idea here is that consistency in performance also requires consistency in demeanor and emotional displays. It follows that the best way to produce this consistency is by providing rules that workers are expected to follow. Emotional labor qualifies as work because of these external constraints and directives.

### **Private Sector Research: The Roots of Emotional Labor**

Most mainstream analyses of emotional labor are in the private sector (Hochschild, 1983; Pugliesi, 1999). Examples include customer service representatives in businesses and flight attendants in the airline industry (Karabanow, 1999). These analyses tend to treat emotional labor as inherently problematic. Here, emotional work focuses on conflicts between the individuals' emotions, their perceptions of their roles and responsibilities, their supervisory structures, and their organizations' requirements for consistent, appropriate emotional displays in routine interactions with customers. As this is the first exploration of the concept

of emotional labor applied to the field of child welfare, the private sector provides the best means to provide context to our model.

This private sector research literature emphasizes the voluntary strategies people use to create, display, and modify emotional expressions in all of their relationships and interactions. People do this emotional work to create and maintain a normative emotional state, one that is considered normal, proper, and appropriate. In psychological terms, this emotional labor reflects and helps to characterize each person's personality, especially one facet of it called "emotional expressivity" (Pugh, 2004). Additionally, it is a "gendered" construct, one that is influenced by culturally proscribed and prescribed roles for men and women.

More concretely, when people engage in emotional labor, they are guarding against spontaneous, authentic displays of their feelings. As a function of organizational expectation, professional norms, or personal aspiration, they want to display positive emotions, at the same time that they are expected and required to suppress and hide negative emotions such as displeasure or anger.

**The managed heart.** This emotional work is especially stressful when it involves masking true feelings in order to present the self in socially desirable, appropriate ways. Such is the context for Hochschild's (1983) pioneering work. Hochschild coined the telling phrase "the managed heart" to describe organizational attempts to manage their employees' feelings, i.e., emotional management and control aimed at uniformity and consistency. Perhaps in no other public setting are the emotions of workers "managed." For good reason, workers are taught to "leave work at work," be detached, and have professional boundaries. However, the reality of working with children and families is that we must work *in relation* with one another. Relationships require an expression of feelings. Thus, child welfare work and organizational policies are often at odds.

In Hochschild's (1983) original analysis, emotional labor is defined in three parts. First, it involves face-to-face contacts and interactions. Second, the worker is expected to produce a desired emotional state in another person—the client or the customer, typically making the client or customer satisfied and even happy. Third, the employer (and the employing organization), through training, socialization, and supervision, strives to exercise influence and control over the emotional activities of employees.

**Surface acting and deep acting.** This line of research also offers an important distinction between two kinds of emotional work. One is

called surface acting. The other is called deep acting. The dramaturgical metaphor emphasizes the roles professionals play.

Surface acting can be described as “going through the motions” without significant emotional investments. Who I am—my core identity and value system—is divorced from the job I do and how I behave. This kind of emotional labor is not especially or inherently stressful.

Deep acting, in contrast, is emotionally engaging, and it involves identity-investments. Who I am and what I do are intertwined. Potentially rewarding and a motive for intense engagement—indicative of positive emotional labor—deep acting also can extract emotional tolls and can cause harmful distress, which qualifies it as negative emotional labor. The catch phrase “keep laughing on the outside, while crying on the inside” is indicative of deep acting at a cost, i.e., negative emotional labor.

**Multilevel management of emotions.** To recapitulate, emotional labor qualifies as “work” because it requires special efforts to manage and regulate personal emotions and their expressions. Fundamentally, emotional work is at least taxing, and it may be stressful. While some such stress may be associated with personal and professional benefits, it shall become apparent that many needs and problems stem from, and are associated with, ineffective, unsuccessful, and inappropriate emotional work.

### **Rules and Strategies for Regulating Emotions: Missing Components in Training Programs**

Emotional labor thus involves self-regulation in relation to organizational rules, professional norms, and personal goals. All in all, it can be classified as a kind of impression management. It takes special effort, often involves stress, and entails special skills and abilities. It is “work” to the extent that it requires special efforts, especially when surface acting is the norm and negative emotional labor is present or highly probable.

Significantly, this positive emotional labor can be facilitated and optimized if workers at all levels of the system are prepared for it (during preservice education and agency training) and when the agency provides follow-up assistances, social supports, and resources. Self-regulatory skills and abilities, for example, can be provided in these education programs with follow-up reinforcements and supports in the organization. Specifically, workers at all levels of the system can learn self-regulatory strategies and develop companion meta-cognitive strategies (i.e., how I should think about how I think).

### **Emotional Labor Strategies**

Child welfare workers can learn to regulate their emotions by focusing on their antecedents (the events and stimuli that triggered them), their responses to these antecedents, or both (Pugh, 2004). In child welfare settings, triggers may include the trauma of the children, interactions with families and professionals, and the court system. Interestingly, these same triggers also may be implicated when STS occurs. Emotional labor in child welfare settings may be self-directed (self-focused), other-directed (e.g., toward coworkers, managers, clients), or both.

Three general kinds of strategies are salient to both antecedent-focused and response-focused emotional regulation (Pugliesi, 1999). Significantly, all can be learned. That is, these emotional strategies can be viewed as part of the recommended behavioral repertoires for child welfare workers at all levels of the system, and training and learning systems can be developed accordingly.

People employ *cognitive strategies* (e.g., cognitive reappraisal and reframing) to interpret and reinterpret events and situations. They use *behavioral strategies* (e.g., scripted responses) to control or regulate their emotional displays. And they use *physical strategies* (e.g., alcohol, tobacco, exercise, medications) to reduce their arousal or mollify their emotional states.

These three strategies are not mutually exclusive. In fact, people may employ combinations of them in their relationships and interactions. The actual strategies they employ often are influenced, if not determined, by their expertise and skill (Pugh, 2004) and by the demands of the task environment. These demands include the stress, complexity, and uncertainty of the task and special rule structures for their emotional labor.

The most stressful and exacting demands occur when newcomer child welfare workers are underprepared for the most challenging and dangerous cases and when they lack the strategic preparation for their emotional labor strategies. Suboptimal outcomes for the worker and the family are likely under these circumstances because the emotional labor probably is negative. For example, DePanfilis and Zlotnik (2008) reported that undesirable workforce turnover was caused in part by emotional exhaustion (and by implication, negative emotional labor).

### **Rules for Emotional Work**

Alongside the strategies for emotional labor are the operational rule structures for its productive management. As with emotional labor strategies, these rules need to be centerpieces in training and a focal point

for timely assistance, social supports, and resources for workers on the job.

Four related kinds of operational rules may guide emotional work (Ashforth & Saks, 2004; Hochschild, 1983; Morris & Feldman, 1996; Pugliesi, 1999). Some people rely on all four. Others employ various combinations as a function of their situation. All have import for child welfare organizations.

*Framing rules* prescribe how to approach clients, problems, and situations—especially how to ascribe meaning, plan actions, and implement strategies (Ashforth & Saks, 2004). They are like recipes for child welfare work. Framing-rules-as-recipes sometimes determine workers' interactions with others, especially coworkers and clients.

*Feeling rules* prescribe emotional states, including the range of permissible emotions in specific relationships, interactions, situations, and settings. For example, when child protection workers learn how to “put their feelings on hold” even when they encounter gut-wrenching or anger-inducing instances of child abuse and neglect, they are conforming to feeling rules. “Keeping one’s cool” under these circumstances requires extensive and intensive emotional labor, at times making the job emotionally exhausting.

*Display rules* guide and determine the behavioral expression of emotion. These rules identify which emotions are appropriate in a given situation and how these emotions should be expressed publicly. Where child welfare practice is concerned, these rules are integral to work performances (Pugh, 2004). For example, when child protection workers “put on their game face” and operate on “automatic pilot” as they assess risks and strengths and plan immediate service strategies with challenged families, these workers are being guided by display rules. In short, these display rules provide emotional norms and scripts. In essence, they are designed to strip the individual of emotional autonomy—the ability to express emotions without referencing external, rule-bound constraints and inhibitions (Brotheridge & Grandey, 2002). They are the essence of “the managed heart” in child welfare.

*Interaction rules* guide emotion and, in turn, cognition and behavior aimed at achieving personal, professional, and organizational goals. These rules encompass both verbal and nonverbal behavioral displays (Steinberg & Figart, 1999). More than directives for individuals and groups, these interaction rules comprise a key element of each organization's emotional climate as well as its emotional culture (Ashforth & Saks, 2004). As with the other rules structures, these interaction rules can be explicit or implicit. Especially when they are implicit, informal, and

nearly random and the organization is experiencing some turmoil, interactions typically are suboptimal and even violent. Negative emotional labor runs rampant under these circumstances, in part because there are no formal rule structures or recommended injunctive norms regarding how people are expected to treat each other.

### **Beyond Rules for Individuals to Organizational Rules**

Organizational and professional rule systems may influence, and sometimes determine, each individual worker's preferred framing, feeling, display, and interaction rules. These organizational and professional rule systems are control-oriented. They also qualify as moral practices (Hasenfeld, 2000) because they implicitly carry values and ideas about what's good and just. Oftentimes, they are aimed at scripting emotional expressions and behavioral displays, while attempting to reduce, or strip way altogether, each individual's emotional autonomy. Whatever tensions and conflicts arise in this interplay among the individual, the organization, and the profession increase the required emotional labor.

*Proscriptive rule systems* set the boundaries for emotional labor. These systems often are expressed as formal and informal norms, i.e., mutually accepted standards for behavior. Like all behavioral norms, they provide guidance to workers but also allow opportunities for their discretion. Oftentimes, officially endorsed norms provide the standards for this emotional labor with the assumption that everyone in the system will jointly endorse and steward them. Our experience in child welfare indicates that, in most organizations, these norms tend to be informal and open to multiple interpretations. When this is the case, opportunities are lost for formal norms to be facilitators of strong, positive organizational climates with preferred interactions among staff members at all levels of the system as well as comparable interactions with children, families, and professionals representing other systems.

*Prescriptive rule systems* provide firm directives regarding the "do's" and "don't's" of emotional labor. Typically, these rules are very specific, leaving no doubt about the recommended, indeed required course of action. They orient workers toward scripted performances and roles, and thus they are aimed at reducing opportunities for individual discretion while standardizing, in the name of quality control, workers' contributions to overall agency performance. Oppressive and deprofessionalizing for experienced, expert workers, these prescriptive rule systems often provide enabling supports for newcomers, especially caseworkers thrust too quickly into full caseloads with challenging, even dangerous, cases.

### **The Never-ending Challenge: Aligning Organizational, Professional, and Personal Rules**

Rules, rules, and more rules: The main idea is that so many rule systems and levels automatically deprofessionalizes workers and makes the work oppressive. The above analysis has served one of its primary purposes if readers are prepared to react differently. While some rule systems may indeed be oppressive and serve as a root cause of deprofessionalization, rules can be facilitative and enabling mechanisms for positive emotional labor.

Two keys make a difference. One key is to proceed with theoretically sound, research-supported designs, ones that encompass preservice education and agency-based training for workers at all levels of the system. The other key is to implement mechanisms for continuous learning and quality improvement with an explicit focus on positive and negative emotional labor. Both have implications for organizational and educational policies regarding child welfare and the education of future child welfare organizations.

The planning priority thus is to synchronize and harmonize external policy related to rule systems and workers' preferred framing, feeling, display, and interaction rules. Here, the aim is to maximize *positive emotional labor*—emotional work that yields benefits—while minimizing and preventing *negative emotional labor*—emotional work that causes problems and may be harmful. STS and other examples of the impact of negative emotional labor are special priorities.

### **Negative Emotional Labor and the Primacy of STS**

STS is, for child welfare, a new phenomenon. Even so, it probably deserves the status of a long-standing, hidden epidemic among child welfare workers and other human services professionals who routinely confront violent acts and their manifest consequences. The main definition follows from this view: STS refers to behaviors and emotions resulting from helping a traumatized or suffering person (Figley, 1995, p. 7). STS symptomatology includes compassion fatigue, hyperarousal, hypervigilance, numbing out, disengagement and disidentification with the job, the work, and the organization.

Since child welfare workers routinely help traumatized and suffering children, parents, and entire families, it is not surprising that they are vulnerable to STS. Put differently, STS symptomatology is an ever-present risk in work with vulnerable children and families (Caringi, 2008; Caringi & Hardiman, 2012). Fortunately, STS specialists are developing

specialized interventions (Bride, 2007; Pearlman & Caringi, 2009; Pryce, Shackelford, & Pryce, 2007).

Although STS may be expected in practice with families, it also can originate in the workplace, resulting in more primary forms of traumatic stress. Acts of violence (especially verbal abuse), punitive supervision and management strategies, adult-driven bullying, and acts of leadership-related intimidation also are traumatic. These and other unfortunate, undesirable acts are especially prevalent in passive-defensive organizational climates in which the quality of treatment and interaction are suboptimal (Glisson & Hemmelgarn, 1998).

In our framework, the two sources of workplace trauma are not mutually exclusive. (See Figures 1 and 2 in the Appendices.) STS stemming from work with children and families spills over into the workplace and vice versa.

### **STS in the Workforce**

STS among child welfare workers has received more attention and research within human services within the last 10 years. A comprehensive review of the literature follows. It includes the current state of research regarding STS in child welfare workers as well as a detailed look at programs specifically addressing STS through researched and developed trainings and Title IV-E programs. This review of STS literature also acknowledges areas where future programs can be developed.

Many of the risk factors identified in current STS literature are found in the demands of the work as well as the organization of the service delivery system in child welfare. Individual stressors, organizational stressors, and critical incidents on the job all potentially place child welfare workers at risk for STS (Regehr, Hemsworth, Leslie, Howe, & Chau, 2004; Caringi, 2008). Many strategies have been identified for educating child welfare professionals on STS and how it differs from burnout. Pryce, Shackelford, and Pryce (2007) reported their findings from workshops conducted between 1997 and 2004 with child welfare professionals in five states; their findings indicated that these professionals are affected by STS more so than burnout.

The impact of STS on child welfare workers has been the focus of several studies. Conrad and Kellar-Guenther (2006) surveyed child protection workers in Colorado who were participating in a STS seminar to measure the risk of compassion fatigue, burnout, and compassion satisfaction among Colorado county child protection staff using the Compassion Satisfaction/Fatigue Self-Test. The study found that, while

50% of Colorado County child protection staff suffered from “high” or “very high” levels of compassion fatigue, the risk of burnout was lower, as 70% of staff expressed a “high” or “good” level of compassion satisfaction, the positive impact of working with traumatized individuals. Thus, despite a high risk of compassion fatigue, these staff members had a low risk of burnout, finding that compassion satisfaction may mitigate these levels.

Caringi and Hardiman (2012) studied the impact of STS on New York State child welfare workers using the Secondary Traumatic Stress Scale (Bride, 2007) in a Children’s Bureau-funded workforce initiative. Their study revealed that 75% of workers and supervisors were experiencing significant levels of STS. Over 50% of workers were likely experiencing symptoms that mirror those of post-traumatic stress disorder.

Nelson-Gardell and Harris (2003) studied 166 child welfare workers who attended a full-day training on STS. The workers completed the Compassion Fatigue Scale (Figley, 1995), a test which distinguishes between STS and burnout and surveys their symptoms of STS and knowledge of it, before and after the training. Data analyses found a link between a personal history of primary trauma, child abuse, or neglect and the heightened risk for STS in child welfare workers. Younger workers were also found to have more STS (Nelson-Gardell & Harris, 2003). Van Hook (2008) conducted a study among 182 child welfare workers in Central Florida looking for high levels of compassion fatigue and found the highest levels of compassion fatigue in women and young workers.

Dane (2000) conducted qualitative focus groups of 10 child welfare workers; these focus groups identified data to help develop a two-day training module for child welfare workers to gain skills and knowledge through didactic and experiential learning. The focus groups identified five emerging themes that became the focus of the trainings: secondary trauma, child fatalities, successful and difficult cases, organizational stress and burnout, and spiritual beliefs.

### **STS-Related Organizational Priorities in Child Welfare**

Other areas of research have begun to examine organizational issues as related to STS (DePanfilis, 2006; Bell, Kulkarni, & Dalton, 2003). DePanfilis (2006) studied the findings of the Conrad and Kellar-Guenther (2006) study to look for implications for retention of social workers. Bell et al. (2003) examined the overall work environment and agency culture, education, group support, and supervision and found that the more that is learned about STS, the greater the possibility that the agency culture can play a role in mitigating, treating, and preventing STS in child welfare workers. This study highlights needs and future areas of study of

organizational factors and their contribution to possibly mitigating STS in child welfare workers (Bell et al., 2003).

Caringi and Lawson (2012) emphasized the relationship between STS and two related constructs: organizational culture and organizational climate. Organizational “culture” encompasses norms, values, and operational routines, especially historical artifacts, meaning systems, and traditions. Because culture is an historical construct, it often outlives individuals who come and go, and it is difficult to change.

Culture influences climate, and reciprocally, climate has the potential to influence culture. Even so, climate is unique. Like the weather, climate can change quickly. It is a here-and-now construct used to describe how child welfare professionals feel about their organizations (Glisson & Hemmelgarn, 1998). It is a target for new STS policies because studies link organizational climate to workforce STS (Bride, 2007; Caringi, 2008; Caringi & Lawson, 2012).

Organizational structure has a significant impact on both climate and culture and also on STS-related interventions and policies. For example, Catherall (1995) found that the “hierarchical nature of the organization, impersonal nature of the bureaucracy, the mission statement of the institution, and group dynamics” were related to workers’ STS levels (p. 242). So-called culturally blind organizational structures, policies, and supervisory practices no doubt contribute to STS symptomatology.

### **Organizational Imperatives and Improvement Strategies for STS Needs for Culturally Competent STS Policies**

Moreover, STS policies must be developed with an eye toward making the *cultural diversity of the workforce* a priority and an asset. More concretely, the design of new STS policies should begin with due recognition that the workforce’s cultural diversity must be taken into account in all organizational policies, that STS-specific policies must be culturally competent, and that workforce cultural diversity and uniqueness stand as important resources for STS policy development and organizational redesign.

The main STS question, of course, mirrors a sister question for practice with children and families: *Which workplace and workforce interventions are generic and generalizable, and which ones must be specific, tailored, and adaptable to the point where they are truly culturally competent?* Part of the work that lies ahead is getting the conditions right for addressing this question and providing alternative frameworks and new interventions.

For example, an organization that is open to cultural exchange and practice in the workplace may offer a means for workers to use culturally competent activities in order to prevent and mitigate STS in the workplace. Here, top-level leaders and managers can develop new policies that reflect and promote cultural diversity in the workforce as a resource to be protected and utilized instead of a problem needing to be managed in service of “one-size-fits-all” personnel and leadership systems.

Closer to the frontline, supervision is a top priority for new STS policies and practices. Culturally competent, STS-sensitive, responsive, and effective supervision protocols and strategies are part of the new frontiers for organizational redesign—and with benefits accruing to the organization overall. For example, research on child welfare turnover has demonstrated that adequate supervision was found to decrease worker stress and burnout, concepts different from but related to STS, again in studies on worker turnover (Wayne, Shore, & Liden, 1997). Supervision offers a realm for managers to promote workers’ use of cultural practices to prevent and mitigate STS. Recent research indicates the context-specific challenges of readying supervisors for the work needing to be done (Claiborne & Lawson, 2011).

### **STS Interventions**

The Resilience Alliance Project was formed by the Administration for Children’s Services (ACS)-New York University Children’s Trauma Institute (CTI) to try to mitigate the impact of STS among child protective staff in New York City, while mutually building upon resilience. The Resilience Alliance Project uses a six-month, modulated course that can be adapted to meet diversified needs of population and size. The lessons aim to increase staff job satisfaction, resilience, optimism, self-care, and social support and decrease staff stress, attrition, and burnout (Administration for Children’s Services-New York University, 2011).

Two STS priorities involve child welfare teams, and both entail new organizational policies. One involves team practice models, ideally models in which STS prevention and intervention are embedded in everyday practice with children and families. The other involves organizational redesign teams (Caringi, Lawson, Strolin, McCarthy, & Briar Lawson, 2007) in which the cultural diversity of the workforce is instrumental in the development of new organizational policies that reshape the agency’s structure and improve its climate and culture.

Both kinds of teams mark a major transformation in how child welfare organizations are structured and operate and also how workers at all levels of the system are treated and feel about their organizations.

Teams democratize relations in the workplace, empowering workers and giving voice and choice to diverse individuals and teams. Teams, in short, are a policy priority for STS designs and intervention development.

Another promising intervention innovation derives from New York State workforce retention research sponsored by the Children's Bureau. In this state, child welfare is characterized by a mixed workforce, including some agencies without even one official MSW on the workforce. Two pioneering agencies recognized the need for clinical social workers with MSW degrees but also knew the constraints surrounding the undersupply of such talented people statewide, together with the constraints of the civil service system's workforce requirements.

Above all, these leaders prioritized two needs. One is STS prevention, early detection, and rapid response systems. The other is embedded professional development for caseworkers and supervisors without MSW degrees, some of whom lack clinical competence.

One solution was to position an MSW employee as a special kind of supervisor who worked with the agency's trainer and also debriefed cases with other supervisors and frontline caseworkers. The other was to create "a cooling out" room with what amounted to STS prevention and early intervention services offered by the MSW. Qualitative interviews in both agencies (never published) revealed the importance of these new organizational designs, especially for caseworkers and supervisors.

A third Children's Bureau-funded initiative involves a partnership between the National Native Children's Trauma Center (NNCTC) and the School of Social Work at the University of Montana. This initiative is focused on the creation of trauma-informed systems that use evidence-based, culturally competent interventions for affected children and families in Indian Country. Mounting evidence from adverse childhood experiences research with American Indians documents the disproportionate prevalence of trauma. What is more, an emergent line of research documents STS in the adult workforce, reducing their ability to help affected children and families and contributing to turnover. Therefore, the designers of this intervention take the stance that it is an "ethical imperative" to provide STS training to those who implement evidence-based practices to children impacted by trauma (Pearlman & Caringi, 2009).

Thus, a central element of the work of the NNCTC is the development of a trauma-informed system that entails evidence-based detection, treatment, and prevention mechanisms for children, families, and STS-affected social services professionals. With tribal child welfare systems as a starting point and later a centerpiece for the development of

companion, trauma-informed behavioral and mental health systems, this work will involve collaborative work in six tribal demonstration sites. All the while, STS training in the realms of personal, professional, and organizational health will be central to the work. Emotional labor is central in this STS training, including how to prevent STS and, at the same time, maximize positive emotional labor.

Clearly, additional research should be focused on new organizational designs that prevent STS as well as suboptimal configurations that enable it to develop and even thrive—at the expense of the vulnerable families, the workforce, and the workplace. In the meantime, something can be done, and as it is, trailing research can document the development of promising models, strategies, and important lessons learned.

### **Situational Demands, the Limits of Individual Strategies, and New Organizational Designs**

Figure 1 (see Appendices) presents a simplified overview for new child welfare priorities involving positive and negative emotional labor. Significantly, this figure indicates that some such labor is mixed, an important reality that the preceding analysis has not emphasized. Figure 1 also provides reminders about the consequences, both desirable and undesirable, of emotional labor.

Our preceding analysis has indicated that better preparation programs and targeted agency training programs are vital, but insufficient to prevent STS and to maximize the probability that child welfare professionals' emotional labor trends toward "the positive." Individuals and friendship networks can only do so much. Organizational designs and strategies are needed as long-term proactive systems and response mechanisms.

After all, the situational demands placed on child welfare workers are extraordinary, perhaps surpassed only by police officers on dangerous streets and soldiers in combat. Situational constraints start with workers' encounters with dangerous situations and their accompanying fear. Situations involving workers' experiences with shocking, horrifying, gut-wrenching, disgusting, and potentially traumatizing encounters with children and families in crisis are especially salient.

Workers' interpersonal challenges derive from these less-than-ideal situations. Although most child welfare caseworkers receive training for strengths-based, solution-focused practice, they are, after all, only human. Simply stated, some clients are more appealing than others, and in some situations involving severe cases of child abuse and neglect, workers'

feelings understandably may include repugnance, anger, and even hostility. No wonder they play favorites and even ration services (Lipsky, 1980; Smith & Donovan, 2003).

Under these circumstances, workers are challenged to muster up the requisite affective and cognitive preconditions for deep acting and, subsequently, to actually engage in deep acting. Arguably, some never make it. They settle for surface acting, implement attendant practices, and must cope with negative emotional labor. They process clients, often giving up any hope of changing them (Lipsky, 1980).

Those who manage to get beyond their immediate negative feelings and reorient themselves so that they are able to engage in deep acting and relate positively to clients (in strengths-based, solution-focused terms) merit special attention. Theoretically, they rely on their emotional expertise and, more specifically, their emotional regulation mechanisms. Additionally, experienced workers apparently rely on personal norms and standards, effectively resisting blanket organizational expectations and gauging personal performances that are “good enough” (Karabanow, 1999). Thanks to these skillful emotional regulation processes, they are able to avoid surface acting, engage in deep acting, and reap the benefits of positive emotional labor.

That said, this kind of heroic transformation tends to exact steep emotional tolls. For example, such transformations no doubt are accompanied by mixed feelings borne out of indelible memories of the first encounter. Pendulum-like swings between negative and positive emotions probably are normative, and these mood shifts require extensive emotional labor. This emotional labor includes the suppression of bad memories and accompanying negative emotions and, at the same time, the work of mustering up fresh images and attendant possibilities with positive emotions.

Furthermore, as the number of such cases and attendant transformations accumulate, so may the negative consequences of this emotional labor. So-called “sleeper effects” may be relevant here—whereby the real costs and consequences of these heroic transformations appear months and years later. Issues like these merit future research.

Finally, our framework has emphasized the need for new organizational designs predicated on positive and negative emotional labor. Mindful that agencies are not identical, there are no “cookie cutter” models. Instead, we draw on our Children’s Bureau grants to nominate for research and development 25 organizational design principles-as-priorities. Presented in Figure 2 (see Appendices), they are not rank-ordered.

Far from the final word on the subject at hand, together they maximize the probability of positive emotional labor and, at the same time, minimize negative emotional labor, especially STS. We offer them as a whole that is greater than the sum of its parts. More than a simple checklist, they need to be aligned to form a coherent whole as they are progressively implemented.

Post-implementation, they serve as the evaluation foci for continuous learning and quality improvement. By prioritizing their development, continuous improvement, and expansion, child welfare leaders will address the long-standing neglect of emotional labor. When productive, beneficial organizational learning and improvement systems are developed, leaders stewarding these systems are positioned to experience the positive emotional labor of beneficial leadership.

In a nutshell, leadership for positive emotional labor is a special kind of clinical and direct practice. Here, leadership practice proceeds with child welfare organizations and policy systems as the clients and the work are rewarding and sustainable to the extent that positive emotional labor accompanies leaders' jobs, enabling them to provide the same beneficial conditions to others in their organizations.

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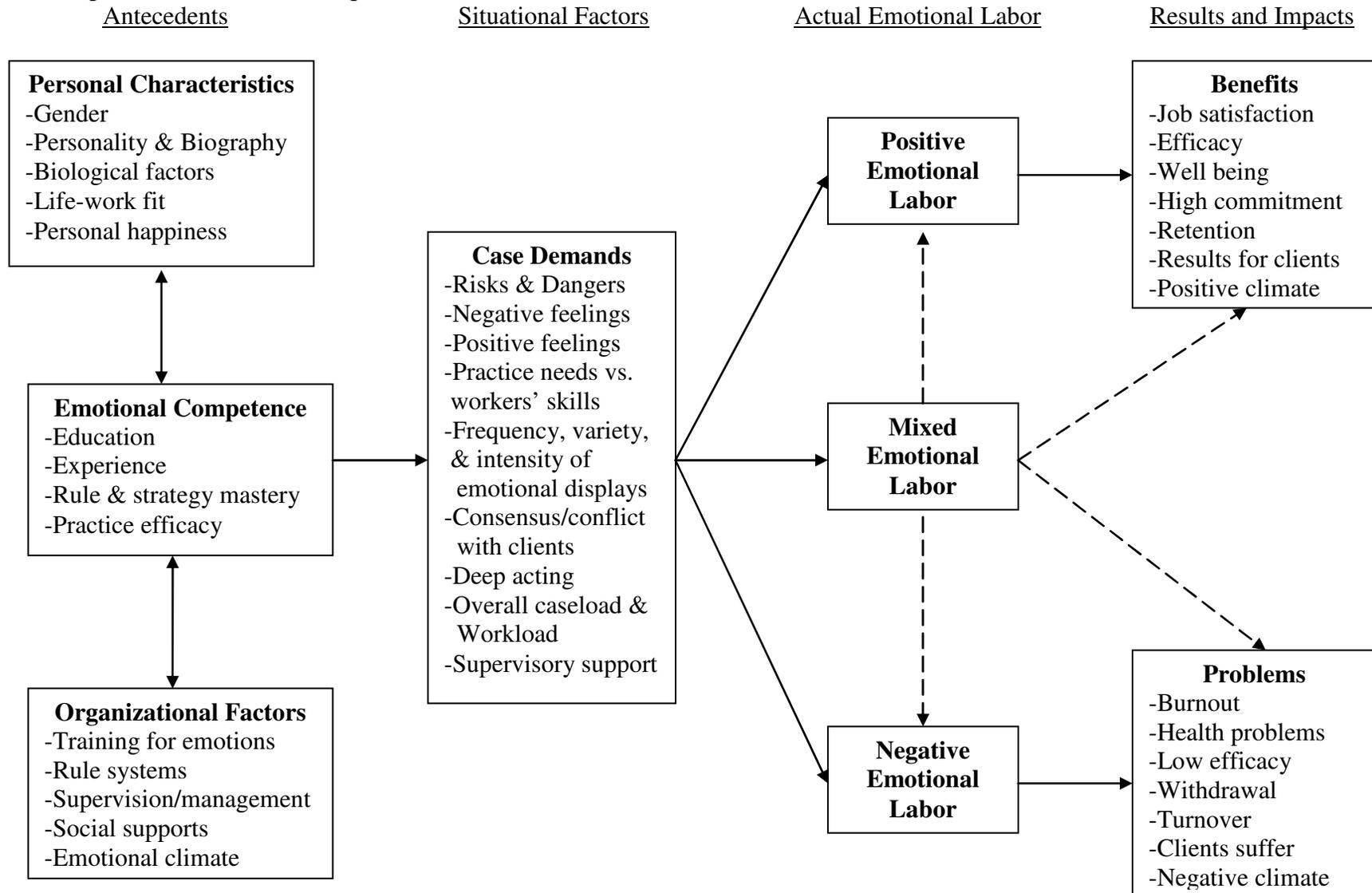
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**Appendices**

*Figure 1. Positive and negative emotional labor in child welfare*



*Figure 2. 25 strategies for organizational redesign*

1. Make emotional labor an explicit organizational planning priority (e.g., Ashforth, 2001; Grandey, 2000; Grandey, 2003; Morris & Feldman, 1996). More specifically, do the following: a) develop a language system for it, perhaps using the conceptual system provided in this analysis; b) engage workers at all levels of the organization in focused planning, implementation, evaluation, learning, and improvement activities since emotions and emotional labor are everyone's business; c) develop local agency definitions of positive and negative emotional labor, emphasizing procedures and structures that facilitate positive emotional labor; and d) strive for the development of emotional climates supportive of positive emotional labor with coworkers and clients.
2. Henceforth, frame leadership as an affective event (Lord & Brown, 2004), giving due recognition of how much emotion-focused (affective) leadership and tone-setting matter. Focus leadership strategies and activities on the emotional labor of workers, the development and maintenance of emotional competence in the workforce, and organizational structures and operations that facilitate the development of positive emotional labor and the achievement of its benefits.
3. Help local leaders learn how to buffer their workforces from the negative stresses caused by turbulent institutional environments (Lively, 2002), and develop operational bridges to local assets and resources for STS prevention and positive emotional labor.
4. Avoid and prevent compliance-oriented, punitive, "tighten-the-screws" supervision and management structures and processes, including a reliance on negative sanctions and punishments. Focus on commitment-generating management and supervision structures and operational processes, aiming to increase workers' well-being and build their capacities for exercising discretion and sharing leadership responsibilities.
5. Use every opportunity to develop, reinforce, and reward workers' genuine, deep engagements in their jobs, work, departments, organization, and communities and to emphasize and celebrate the emotional labor associated with the intrinsic benefits and values of child welfare practice. In addition to facilitating positive emotional labor, these deep engagements alleviate and prevent burnout and its correlates (Maslach, Schaufeli, & Leiter, 2001). Be aware that these engagements strengthen "job embeddedness" (Mitchell & Lee, 2001), which helps to optimize the workforce and reduce turnover.

6. Make firm commitments to participatory-democratic decision-making processes and distributed (shared) leadership, and develop implementation processes and structures such as design and improvement teams (Caringi, et al., 2007).
7. Make firm commitments to fair and just decision making in the organization (e.g., Lord & Brown, 2004; Rhoades, Eisenberger, & Armeli, 2001). Ensure four kinds of justice: procedural justice, especially when considering promotions, assignments, and transfers and effecting sanctions; interactional justice, providing equal access to mentors, coaches, supervisors, and managers; distributive justice, striving to create unjustifiable inequalities; and contributive justice, whereby workers at all levels assume shared responsibility and joint accountability for the organization's record of fairness.
8. Minimize and, if possible, eliminate altogether petty bureaucratic rules, which cause frustration, anger, and alienation, in turn contributing to negative emotional climates and cultures. Replace them with norms and standards of professionalism.
9. Be mindful that perceived organizational support builds affective commitments to the agency and facilitates retention (Smith, 2005a). Emphasize strategies, services and social supports which enhance well-being, improve life-work relations, and increase workers' perceptions that the agency cares about and supports them supervision systems.
10. Use participatory-democratic processes to achieve basic consensus on the proscribed and prescribed rules for emotional labor. Emphasize the preferred display rules for interactions with clients and also with coworkers, including superiors and subordinates. Strive to maximize coherence and harmony among personal, professional, and organizational rule systems, and develop evaluative structures and processes that yield improvement-generating information regarding this emotional labor.
11. Use participatory-democratic processes to examine thoroughly and improve the emotional sides of the organization's climate and culture. For example, promote integrated cultures, i.e., ones that unite veteran and novice workers (Johnson & Birkeland, 2003). Promote and safeguard confidentiality in the workplace, and prevent rumor-mongering and back-biting (Elsdon, 2003). Figure out what it takes to facilitate and maintain "positive emotional contagion" and emotional resilience in the workplace, including the vital contributions of off-site programs and informal activities (Van Maanen & Kunda, 1989) and the pivotal roles played by supervisors (Pugh, 2004).

12. Complete thorough job and work analyses, aiming to identify, describe, and explain the emotional requirements of particular positions. Alter job descriptions and work requirements as needed, mindful that ill-designed jobs discourage recruitment and cause turnover. Strive to optimize the goodness of fit between the worker's personality, especially the worker's "emotional expressivity" (Pugh, 2004), the desired emotional labor for the job (Grandey, 2003; Maslach & Leiter, 1997; Morris & Feldman, 1996), and the worker's assignment to a particular unit or department. Ensure that recruitment and selection mechanisms also are oriented toward this fit between individual predispositions and actual job requirements (Ashforth & Saks, 2004). Avoid involuntary transfers whenever possible (Lawson, et al., 2005).
13. Be mindful that negative emotional labor and its correlates are inevitable when workers' knowledge, skills, and abilities are not adequate for them to meet clients' needs and demands. As such, develop a case assignment and caseload development policy that takes into account the important relationship between workers' expertise and client needs, especially the complexity of these needs and the emotional requirements of workers (e.g., frequency, intensity, and variety of emotions needing to be displayed). In other words, develop alternative formulas for workload and caseload assignments, avoiding automatic standardization based on twin assumptions that "when you've seen one case, you've seen them all" and "everyone needs to have the same number of cases."
14. Develop a comprehensive, research-supported system for providing workers, especially frontline caseworkers, with social supports, clinical services, and work-related resources. For example, develop procedures whereby traumatized workers enjoy immediate access to clinical services. Develop workplace structures and operational processes, starting with the preparation, orientation, and deployment of supervisors and senior caseworkers, aimed at facilitating the development of positive emotional labor, at the same time minimizing and preventing negative emotional labor. Finally, in due recognition that workers' inability to access resources for their clients is a source of negative emotional labor, ensure that workers have ready access to resources that their clients need.
15. Add emotional labor to the list of priorities for state and local agency training programs and for the local agency's professional development programs. More specifically, do the following: a) provide new and veteran workers at all levels of the agency with appropriate language, self-regulatory and coping strategies, norms and rules, and procedures

- for securing clinical services, social supports, and resources, for example, preparing workers at all levels to differentiate between positive and negative emotional labor, including how to turn the latter into the former; (b) prepare them for self-initiated and other-assisted emotional guidance and processing techniques (Grandey & Brauburger, 2004), don't restrict this training to client-focused emotional labor, and prepare them for interactions and affiliations with coworkers (Elsdon, 2003); c) prepare them for the emotional labor associated with micro role transitions (Ashforth, Kreiner, & Fugate, 2000), i.e., the everyday changes required of workers as they move among the several settings for their lives and work (office, field, courts, home), keeping in mind that life (home)-work fit and harmony no doubt is a special priority, especially for women who perform lateral roles as mothers, partners, and caregivers (Wharton, 1999).
16. Dovetail the agency's induction and initiation programs—its organizational socialization processes and mechanisms—with state and agency training for emotional labor. Add emotional competence to the list of socialization priorities, and provide mentoring, coaching, and supervision systems in support emotional competence in new workers and positive emotional labor agency-wide.
  17. Develop trouble-shooting procedures aimed at situations that breed negative emotional labor—for example, inter-unit relationships and case transfer processes. Additionally, develop protocols for defusing affectively charged events and processes (e.g., a child death). Make it safe for workers to identify the need for these procedures and protocols, ensuring they can be implemented immediately. Use these opportunities to debrief and gain new knowledge and understanding, paving the way for improvements in the agency and in these protocols and processes.<sup>1</sup>
  18. Develop agency-wide understanding of the common antecedents of negative emotional labor and some of its correlates, including burnout, excessive work stress, and undesirable turnover. Strive to eliminate and prevent these antecedents, including role overload, role ambiguity, work and client demands that exceed workers' competencies, little job autonomy and discretion, a lack of safety and security on the job and in the field, mismatches between the job and the person's abilities and

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<sup>1</sup>Here, as in the previous sections of the analysis, it is apparent that the regulation and management of emotional labor may serve as a springboard for the development of high-performing learning organizations. Alternatively, where the implementation of learning and improvement systems is already underway, emotional labor can be added to the list of priorities for accompanying evaluation, feedback, and learning-control systems.

- aspirations, and routine people-processing priorities (Ashforth & Saks, 2004; Grandey, 2003; Morris & Feldman, 1996).
19. Develop agency-wide understanding of the common antecedents for positive emotional labor and its attendant benefits, especially workforce professionalism. Strive to develop and maintain these antecedents, i.e., conditions favorable to positive emotional labor, including manageable caseloads and workloads, acceptable variety and complexity, warranted job autonomy, competent and supportive supervision, training and supports for regulating emotional labor, and strengths-based, solution-focused practice strategies that enable workers to reap the extrinsic and intrinsic rewards of deep acting with their clients.
  20. Adopt a research-supported practice model that improves agency performance, enhances workers' job satisfaction and well-being, and facilitates the development of positive emotional labor. Ensure that this model provides clear directives regarding the enforcer-healer paradox and that it includes a "front-end" risk assessment and client prioritization system that results in manageable caseloads.
  21. Promote the agency and the workforce in local communities, trumpeting the workers' courage and the importance of their jobs and work. Implement strategies such as neighborhood-based child protection teams and community-based systems of care,<sup>2</sup> which ease workloads, provide emotional and social supports, enhance resources, and increase everyday understanding because all facilitate positive emotional labor, while alleviating and preventing negative emotional labor.
  22. Implement strategies that effectively challenge the perception that child welfare is "dirty work," strategies that also strengthen commitments to the job, work, and career (Ashforth & Kreiner, 1999). Specific strategies include condemning the condemners, supporting and promoting long-standing supporters, and helping workers make selective social comparisons (Ashforth & Kreiner, 1999). Another involves recognizing and celebrating both routine and extraordinary acts of courage and heroism in jobs and work that are inherently risky and even dangerous (Worline, Wrzesniewski, & Rafaeli, 2004).
  23. In mixed workforces, develop special jobs and leadership roles for professional social workers, jobs and roles that enable them to maintain and strengthen their professional identities and ethics. Know that identity work entails important emotional labor, that the conflation

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<sup>2</sup>See, for example, the special issue of *Child Welfare* (84[5], 2005).

- of genuine social workers with other workers causes turnover, and that turnover also results when jobs and work do not tap fully professional social workers' expertise. Also know that the recruitment, strategic deployment, promotion, and development of professional social workers, especially those with MSW degrees, comprise a key pathway toward workforce optimization.<sup>3</sup>
24. Dovetail planning for positive emotional labor with retention planning because rampant turnover destabilizes every aspect of the agency and provides fertile grounds for negative emotional labor, unhealthy emotional climates and cultures, and future turnover (Lawson, et al., 2005). For example, workers surveyed and interviewed in New York identified relationships with coworkers as a key reason to stay. Affective ties cement these relationships and affiliations; they strengthen work identities (Lord & Brown, 2004) and engender commitments to the work, the profession, and the organization (Elsdon, 2003). In brief, planning for emotional labor, including its regulation and management, is an integral part of retention planning, albeit a neglected topic until now.
  25. Develop improved working relationships between agency leaders and state leaders, ensuring that every new initiative—for example, a new computer program, a new reporting system, or a new accountability structure—in fact improves agency structures and operations, especially frontline practice. Postpone as needed innovations that qualify as “nice, but not vital,” recognizing that agencies and their workforces often lack the ability to absorb more changes and that requiring them to do so encourages negative emotional labor.

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<sup>3</sup>A line of developing research supports this claim, and the same can be said of the testimonials provided by commissioners who enjoy the services of MSWs. Mindful of the dramatic undersupply of BSW and MSW workers, plans for their strategic recruitment, deployment, and leadership in mixed workforces comprise an important priority for public child welfare leaders, their professional associations (e.g., CWLA, APHSA), and social work's professional organizations (NASW; CSWE).