

WORKFORCE



“The stress is indescribable”: Self-reported Health Implications from Child Welfare Supervisors

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Issue

Frontline child welfare workers endure higher levels of stress than other social service professionals due to factors such as high workloads, unrealistic expectations, and workplace safety risks. Overtime and exposure to stressors contribute to making workers susceptible to burnout, emotional exhaustion, compassion fatigue, and secondary trauma. Frontline child welfare workers have reported unhealthy behaviors such as using alcohol and social withdrawal to cope with the stress of their job. Studies in child welfare have indicated supervisors can buffer against stressful work conditions by listening to work-related problems, being dependable and willing to assist, expressing approval for performed work, and being friendly and approachable. Furthermore, child welfare workers who are retained in an agency are more attached to their supervisors than those who leave. Despite the importance of supportive supervision, the authors noted that prior studies have not investigated the impact of job stress on the self-reported health of supervisors in child welfare. The unique nature of the frontline supervisor role places them at risk of experiencing compounded levels of stress, yet they are often overlooked when it comes to examining child welfare work-related stressors. Findings from this study provided preliminary evidence to support systemic intervention to promote supervisor well-being and thereby improve the stability and effectiveness of the child welfare workforce.

Findings

The purpose of this study was to examine how child welfare supervisors experience work-related stress by addressing the following research question: What are the unhealthy habits that supervisors of Child Protective Services (CPS) workers report developing due to the stress of their positions? The study is part of a larger multi-pronged research project for a state child welfare agency. This piece examined frontline supervisors' responses to one of the open-ended items included in an online survey: “List any unhealthy habits you have developed because of the stress of your position.” Of the state's 268 frontline supervisors, 117 participated in the study. Only eight supervisors (7%) reported that the stress of their positions did not result in any unhealthy habits. The other 109 supervisors provided 240 unique statements describing the effects of stress. Thematic analysis of the 240 statements found four clear themes: unhealthy habits or behaviors, physical health, mental health, and work-life balance. The first three themes were further subdivided into specific subthemes. These habits and behaviors were reported to occur both during and outside of work hours. The table below presents the first three themes and subthemes.

1. UNHEALTHY BEHAVIORS N = 140 (58%)	2. PHYSICAL HEALTH N = 44 (18%)	3. MENTAL HEALTH N = 37 (15%)
<ul style="list-style-type: none"> • Unhealthy eating habits • Sleep disturbance • Substance use • Lack of exercise • Poor self-care • Taking medication to cope • Irritability 	<ul style="list-style-type: none"> • High blood pressure • Weight gain • Fatigue/exhaustion • Headaches • Other conditions 	<ul style="list-style-type: none"> • Obsession/worry • Anxiety • Negative outlook/worldview • Isolation/withdrawal • Other mental health problems

In the final theme, work-life balance, child welfare supervisors described specific home and family life consequences related to their work. A total of 19 items (8%) were extracted that reflected work-life balance. Managing personal obligations and work responsibilities simultaneously presented challenges. For example, a supervisor with 11 years' experience recounted difficulties leaving work on time, stating “my nights are often spent dealing with overtime crisis and work needs that keep me from leaving the office or the field on time.”

Findings

Several supervisors specifically described disrupted family time such, as working after hours, weekends, and holidays and being distracted by work while trying to spend time with family/children. Not only were relationships with children disrupted, but so too were marital relationships. A quote reported by a supervisor with 15 years experience summarizes the difficulties of achieving work-life balance, “*I focus more on work than my health, family, or own needs.*”

Implications

The authors stated that the study provided new information about the self-reported impact of stress when working as a frontline supervisor in child welfare. As policymakers begin exploring ways to counter high staff turnover in child welfare and ways to improve child protective service outcomes for frontline workers, the results indicated that attention to the ongoing health and well-being of those in the child welfare supervisor role is critical in building and maintaining an effective and stable workforce. Because behavioral choices such as diet, exercise, and substance use are linked to poor health outcomes, researchers should continue to examine ways to mitigate stressful working conditions through improving the workplace environment for child welfare supervisors. The authors suggested effective ways to reduce work-related stress, such as providing supervisors with workplace environments that encourage:

- self-care practices;
- asking for help with overwhelming workloads;
- setting clear expectations for work;
- self-advocacy;
- workload and time management; and
- self-awareness of personal reactions to the work.

The authors recommended future research to include a more detailed examination of the specific relationship of job-related stress and health outcomes, controlling for pre-existing conditions, personal lifestyle choices, and so forth. Researchers could expand on this self-reported study of health consequences by utilizing objective data to analyze for causation and by developing a child welfare specific *Perceived Quality of Life*¹ framework that comprehensively explores the interplay between personality and coping, as well as positive and negative work experiences. Also, although beyond the scope of this research, researchers could identify protective factors that may promote resilience and mitigate the negative effects of the work. The authors concluded that child welfare agencies, and consequently families involved with them, would benefit from taking steps to make supervisor well-being paramount.



¹ Hart, P. M., Wearing, A. J., & Headey, B. (1995). Police stress and well-being: Integrating personality, coping, and daily work experiences. *Journal of Occupational and Organizational Psychology*, 68, 133–156.