

# Valuing and Retaining Staff: Understanding and Being Responsive to Trauma Can Benefit Both Organizations and their Workforce

## **Authors:**

Kathleen McGowan, Project Coordinator, Center on Child Wellbeing & Trauma  
Alix Rivière, Research and Policy Analyst, Massachusetts Office of the Child Advocate  
Audrey Smolkin, Executive Director, Center on Child Wellbeing & Trauma  
Melissa Threadgill, Director of Strategic Innovation,  
Massachusetts Office of the Child Advocate



The Massachusetts Center on Child Wellbeing & Trauma's (CCWT) mission is to support organizations in becoming more responsive to trauma and in reducing secondary traumatic stress in their workforce by fostering staff resiliency and wellbeing. This article explores how the CCWT addresses the challenge of burnout and turnover in human service organizations and suggests how being understanding and responsive to trauma can address this problem.

## **High rates of burnout and turnover are not new challenges for human service organizations, but the COVID-19 pandemic has made these challenges even worse.**

The scenario is well-known: staff who work with children and families experiencing trauma can feel hopeless, exhausted, or even angry. Over time, some of these staff members develop what experts call empathy-based stress. Empathy involves the ability to understand and share the feelings of another person or group. Empathy-based stress is a condition that includes secondary traumatic stress (STS), compassion fatigue, and displaced trauma.

**Being continually exposed to the trauma of others can have serious negative effects that may be the same as experiencing it directly.**

Without proper supports, this "cost of caring" paid by individual workers can snowball into an organization-wide problem. Individual symptoms of empathy-based stress, such as anxiety, trouble concentrating, and mood changes, can lead to work-related problems such as reduced productivity, lack of professionalism, and job dissatisfaction. This can then translate into organizational problems such as people missing work, leaving their jobs, and performing their work poorly. While self-care can be helpful for staff dealing with empathy-based stress, it is not sufficient to address organizational challenges. Instead, human service organizations need to get to the root of the problem by fostering an organizational culture that is more sensitive and responsive to trauma. Research shows that changing an organization's culture is necessary to help staff members stay at their jobs and perform more high-quality work.

**"DCF is pleased to partner with the Center on Child Wellbeing and Trauma to bring technical support and customized trauma trainings to the provider community that serves the Commonwealth's children and families. The Center will build on and strengthen the provider community's skills and help deliver critical trauma-informed services that promote child safety, stability, and wellbeing."**

*– Linda S. Spears  
Commissioner, Massachusetts  
Department of Children & Families*

## Working With Families Who Experience Trauma – The Untold Cost of Caring on Individuals and its Impact on Organizations

Working directly with children and families who have experienced the trauma of violence, abuse, poverty, and other adverse events is deeply meaningful work – but it can take a toll on professionals' mental health. Repeated and prolonged exposure to the trauma of others leaves staff more likely to feel empathy-based stress.<sup>1</sup>

Professionals in organizations serving the health and well-being of others are more likely to have personally experienced trauma than the general population, which puts them at increased risk of developing secondary traumatic stress at work.<sup>2</sup> These professionals are also more likely to be Black or Hispanic and generally earn less than the national average, and for those who experience financial stress or racial trauma, working with children and families impacted by trauma also increases their risk of experiencing empathy-based stress.



Being continually exposed to the trauma of others can have serious negative effects that may be the same as experiencing it directly. These effects include disturbing thoughts, difficulty concentrating, anxiety, and negative changes in mood.<sup>3</sup> Empathy-based stress not only negatively impacts the staff's personal lives but can also have an impact on their:

- **Relationship with clients**, as employees may become less receptive to their clients' needs, treat them in a derogatory manner, and generally demonstrate less professional behavior. Staff with a personal history of trauma can be more sensitive to rejection and interpersonal conflict and may struggle to respond empathetically to frustrating client behavior. Without trauma-responsive training and support, staff may use strategies focused on controlling behaviors that don't work and may even harm clients.<sup>4</sup>
- **Cognitive function**, leading to lower levels of concentration and difficulty with decision-making. Empathy-based stress also increases the likelihood that staff may view the traumatic experiences of others through the lens of their own personal trauma, reducing their objectivity when making decisions.
- **Job satisfaction**, as professionals suffering from compassion fatigue report feeling less committed to and satisfied with the work.



This, in turn, can lead to negative outcomes at the organizational level, including:

- **Reduced work performance:** Not only does empathy-based stress affect staff's efficiency, it can also impact their enthusiasm for and focus on caring for the individuals they are trying to help.<sup>5</sup>
- **High employee turnover:** Studies have repeatedly shown that empathy-based stress plays a large role in staff turnover, which makes it more difficult for organizations to provide consistent, high-quality, and affordable services to the families they serve.
- **Poor work environment:** Compassion fatigue can lead to chronic tardiness and absences, irritability towards clients, colleagues, and management, and avoidance, which all contribute to strained professional relationships and unhealthy work environments.



## Staff dealing with trauma in non-trauma-responsive environment

Personal history of adverse experiences

Higher rates of poverty

Racial Trauma

Workplace stress

Increased likelihood of empathy-based stress

Negative impact at the individual and organizational level

Turnover & Absences

Reduced work performance

Poor work environment

### From Compassion Fatigue to Compassion Satisfaction: The Role of Trauma-Responsive Organizations

While self-care can help reduce the impact of empathy-based stress on staff, focusing on individual-centered strategies merely puts a band-aid on the larger problems facing human service workers. By implementing trauma-responsive organizational practices, child-serving organizations can greatly benefit the whole work environment, not just the individual employee.

These practices can increase job satisfaction and commitment, decrease empathy-based stress, and strengthen compassion satisfaction, which is the professional fulfillment experienced by helping others. In turn, all of this is closely linked to better work performance, higher rates of retention, and higher quality service delivery.<sup>6</sup>

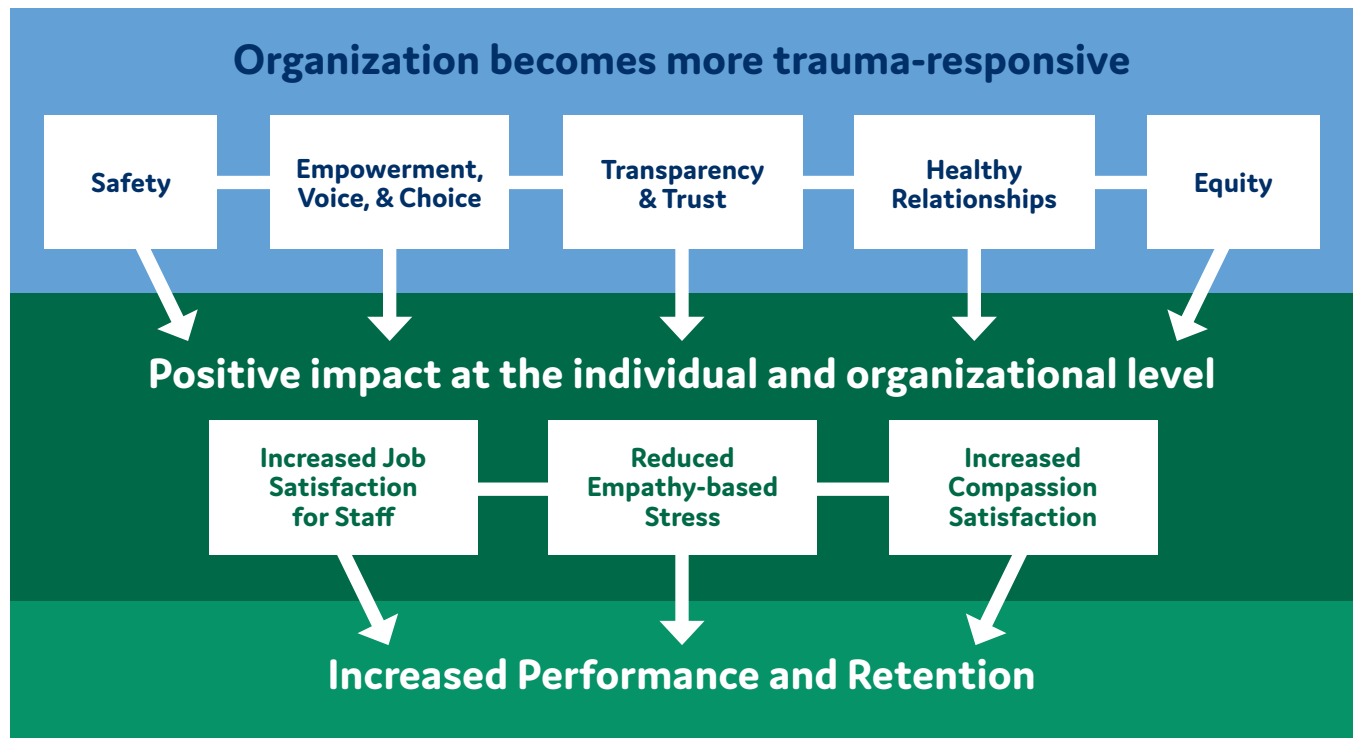
#### Effective trauma-informed and responsive organizational practices include:

- **Fostering transparency and trust**, which are key to ensuring that employees collaborate professionally, feel engaged in their work, and are committed to their job.<sup>7</sup>
- **Creating a safe environment** where staff know that necessary measures and policies are in place to keep them physically and emotionally safe as they work. Employees who feel safe at work are less likely to be depressed and more likely to be engaged, to be productive, and to experience compassion satisfaction.
- **Empowering staff and affirming their experiences**, including ensuring that staff can take ownership of issues that affect their everyday work and clearly communicating that management appreciates their efforts and encourages new ideas.<sup>8</sup> A study of social workers found that feeling valued at work usually translates to low workplace stress and high levels of compassion satisfaction.<sup>9</sup>



**Implementing trauma-responsive organizational practices can increase job satisfaction and commitment, decrease empathy-based stress, and strengthen compassion satisfaction, which is the professional fulfillment experienced by helping others.**

- **Promoting healthy professional relationships** among staff as well as between staff and management. Research shows that implementing trauma-responsive organizational practices helps professionals feel a greater sense of camaraderie and empathy for colleagues.<sup>10</sup> In addition, structured supervisory support – such as reflective supervision, which is a trauma-informed and responsive organizational practice – lowers the risk of empathy-based stress among helping professionals and increases compassion satisfaction.
- **Acknowledging systemic injustices and adopting an equity lens** in all domains of trauma-responsive organizational practice, including training and development/revision of policies. Research shows that organizations' commitment to equity issues (particularly gender and race) positively affects staff and middle management's job satisfaction and retention.<sup>11</sup>



The CCWT has developed a three-pronged approach to supporting child-serving organizations on this journey.

- 1. Learning for everyone:** Our website ([childwellbeingandtrauma.org](http://childwellbeingandtrauma.org)) provides information on both positive and adverse experiences that can impact child wellbeing, resources for practitioners, and a framework for change. We regularly add toolkits and best practices and offer updates through newsletters and blogs.
- 2. Training and Technical Assistance:** We work directly with state agencies and community-based organizations to develop professional learning communities. These communities focus on various topics, including adverse and positive childhood experiences, trauma, race, and resilience, reflective supervision, and more. Since CCWT's inception, we have created these learning opportunities in collaboration with schools, family shelter providers that support pregnant and parenting teens, and others.
- 3. Full assessment and coaching sessions:** In partnership with the National Child Traumatic Stress Network, we have been using the *Trauma-Informed Organizational Assessment* to work with congregate care/residential treatment programs, family resource centers, and multi-system service providers to assess where the organizations are in their journey to being more trauma-responsive. We then spend six to nine months coaching the organizations to develop their trauma-responsive skills and tools in particular areas.



Working with children and families who have experienced trauma can be both profoundly gratifying and challenging. By adopting trauma-responsive practices, organizations can reduce the impact of empathy-based stress on their staff and bolster work performance and satisfaction, leading to higher performance and retention. Better yet, the children being served reap the benefits of positive interactions with a stable, informed, and well-trained staff delivering caring and compassionate support and resources.

**“My organization is currently working with the Center on Child Wellbeing & Trauma, and we have seen a positive shift in our work as a direct result of their support. The resources and support provided by the Center on Child Wellbeing & Trauma is helping support staff, who experience secondary trauma in their everyday work. These resources have helped our staff in taking care of their own needs when exposed to secondary trauma, making them more prepared and available to support individuals coming to our center.”**

– Kena Vescovi  
Executive Director, Valuing Our Children

*The Center on Child Wellbeing & Trauma, a partnership of the Massachusetts Office of the Child Advocate and ForHealth Consulting, a division of UMass Chan Medical School, was launched in 2021. The Center supports child-serving professionals and organizations in becoming trauma-informed and responsive, offering resources, tools, training, and technical assistance. [www.childwellbeingandtrauma.org](http://www.childwellbeingandtrauma.org).*

- 1 Cieslak, R., et al. (2014). A meta-analysis of the relationship between job burnout and secondary traumatic stress among workers with indirect exposure to trauma. *Psychological Services*, 11(1), 75–86. <https://doi.org/10.1037/a0033798>
- 2 Esaki N. & Larkin H. Prevalence of Adverse Childhood Experiences (ACEs) among child service providers. (2013). *Families in Society*, 94(1), 31-37. <https://doi.org/10.1606%2F1044-3894.4257>; Baird, K., & Kracen, A. C. (2006). Vicarious traumatization and secondary traumatic stress: A research synthesis. *Counselling Psychology Quarterly*, 19(2), 181–188. <https://doi.org/10.1080/09515070600811899>
- 3 Bride, B. E. (2004). The impact of providing psychosocial services to traumatized populations. *Stress, Trauma, and Crisis*, 7(1), 29-46. <https://doi.org/10.1080/15434610490281101>.
- 4 Bosk, E. A., Williams-Butler, A., Ruisard, D., & Mackenzie, M. J. (2020). Frontline staff characteristics and capacity for trauma-informed care: Implications for the child welfare workforce. *Child Abuse & Neglect*, 110(3). <https://doi.org/10.1016/j.chiabu.2020.104536>
- 5 Figley, C. R. (Ed.). (1995). *Compassion fatigue: Coping with secondary traumatic stress disorder in those who treat the traumatized*. Routledge.
- 6 Meyer, J. P. et al. (2002). Affective, continuance and normative commitment to the organization: A meta-analysis of antecedents, correlates, and consequences. *Journal of Vocational Behavior*, 61(1), 20-52. <https://doi.org/10.1006/jvbe.2001.1842>; DePanfilis, D. (2006). Compassion fatigue, burnout, and compassion satisfaction: Implications for retention of workers. *Child Abuse & Neglect*, 30(10), 1067-1069. <https://doi.org/10.1016/j.chiabu.2006.08.002>
- 7 Esaki, N. (2020) Trauma-responsive organizational cultures: How safe and supported do employees feel? *Human Service Organizations: Management, Leadership & Governance*, 44(1), 1-8. <https://doi.org/10.1080/23303131.2019.1699218>
- 8 Hales, T. W. et al. (2019). Trauma-informed care outcome study. *Research on Social Work Practice*, 29(5), 529-539. <https://doi.org/10.1177%2F1049731518766618>.
- 9 Senreich, E., Ashenberg Straussner, S. L. & Steen, J. (2020). The work experiences of social workers: Factors impacting compassion satisfaction and workplace stress. *Journal of Social Service Research*, 46(1), 93-109. <https://doi.org/10.1080/01488376.2018.1528491>
- 10 Damian, A.J., Gallo, J., Leaf, P. & Mendelson, T. (2017). Organizational and provider level factors in implementation of trauma-informed care after a city-wide training: An explanatory mixed methods assessment. *BMC Health Service Research*, 17. <https://doi.org/10.1186/s12913-017-2695-0>
- 11 Marmo, S. (2021). Social justice, organizational commitment and job satisfaction for palliative care social workers. *Human Service Organizations: Management, Leadership & Governance*, 45(3), 184-199. <https://doi.org/10.1080/23303131.2021.1875093>; Vincent, D. & Marmo, S. (2018). Commitment to social justice and its influence on job satisfaction and retention of nonprofit middle managers. *Human Service Organizations: Management, Leadership & Governance*, 42(5), 457-473. <https://doi.org/10.1080/23303131.2018.1532370>