

TURNOVER WITHIN THE CHILD WELFARE SYSTEM:

THE POWER BEHIND BURNOUT AND SECONDARY TRAUMA

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Needs & Goal Statement

Child welfare (CW) workers need proactive psychoeducation about the mental health impacts of their role to help mitigate and prevent burnout. This education will also equip child welfare workers with essential tools and strategies to enhance resilience, improve job satisfaction, and increase retention.



Research

-Researchers found a different subsection of trauma titled caseload trauma which contributes to the workers secondary trauma systems while a workers secondary trauma impacts their mental health (Burns et al, 2023, p 194).

-Researchers completed a survey to examine burnout within child welfare workers during COVID 19 and their intentions to stay during this time (Lushin et al, 2023). In the study, three distinct levels of burnout were identified (workplace, personal, and client related)

-Bowman explains the "workplace wellness in child welfare organization" model which follows the belief of how holistic wellness supports can improve burnout within child welfare staff (Bowman, 2022, p.1). Bowman also encourages a health promotion programs such as fitness class, dedicated meditation or prayer area, social support groups, stress management training, and support with case work when there are medical or mental health appointments (Bowman, 2022).



Hope Theory

Hope theory which was developed by Charles Snyder. Snyder (2002) proposes that hope is a cognitive process centered on goal thinking. Being more action oriented, Hope theory allows individuals to place an emphasis on proactive problem solving. This supports people navigate stress and other obstacles.

Intervention

The training will be offered to case-carrying child welfare workers.

Trainers will explain the differences between the different traumas workers can face and burnout. They will also provide information about coping skills and indicators of burnout within child welfare workers.

Trainers will highlight the benefits of mindfulness, breathing techniques and practical strategies for managing stress in high-pressure situations. Trainers will also provide various therapeutic methods to support emotional well-being and resilience.

Outcome & Indicators

Outcome 1: Child Welfare workers will experience reduction in burnout.

·Indicator 1A: Post test surveys will show an increased understanding of the job's mental health impacts and the definitions of the different traumas a CW worker can face

·Indicator 1B: The check-in surveys will show a steady decline in burnout and a steady increase in strategies used

Outcome 2: Child welfare workers will have a better understanding on how to address burnout to support their mental health.

·Indicator 2A: The "check in" survey scores will indicate CW workers increase use or openness of use of different tools to utilize to promote self-care.

Indicator 2B: Pre-test and Post-test scaling questions will indicate an increased understanding of the benefits behind utilizing effective mindfulness strategies when in high-stress situations