Caring for our frontline child protection workforce

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Frontline child protection work is highly stressful, emotionally taxing and, at times, can result in secondary trauma. Additionally, statutory child protection organisations consistently experience high turnover and staff shortages, creating adverse workplace cultures and extra stress for their workforce. Consequently, there is a growing recognition of the need to develop organisational strategies to foster the wellbeing of the frontline child protection workforce. The aim of this paper is to offer some guidance to the management of child protection and related services by drawing on occupational health literature.

**KEY MESSAGES**

- Occupational health literature is increasingly informed by the positive psychology movement.
- Rather than focusing on deficits, positive psychology focuses on building personal attributes such as hope, optimism and efficacy.
- Three emerging concepts offer guidance for building personal attributes and wellbeing: “work engagement” (i.e., an emotional state of being dedicated to, absorbed in and energised by one’s work); “positive organisational behaviour” (i.e., the positive personal attributes that a person brings to their work); and “psychosocial safety climate” (i.e., employee perceptions of the priority given to psychological health and safety within their organisation).
- The evidence linking these concepts to workforce wellbeing is promising, suggesting the benefit of strengthening the role of positive psychology in the child protection workforce.
- This paper identifies some of the promising strategies for improving psychological wellbeing in the workplace.

**Introduction**

The Australian frontline child protection workforce is fundamental to keeping the most vulnerable children in our society safe from harm. Yet Australian child protection systems, as well as those internationally, are in continuing crisis as they struggle to retain a stable and healthy workforce in the face of large numbers of notifications, inadequate organisational resourcing and the increasingly complex issues facing at-risk children and their families.

Frontline child protection work is emotionally and psychologically demanding, and the associated stress can be compounded by factors within the workplace that are detrimental to worker wellbeing. Media scrutiny, adverse public opinion and judicial inquiries into child protection systems further add to the stress. Yet, more often than not, it is left to the individual worker to navigate the stressors and manage their own wellbeing.

Statutory child protection organisations and the systems in which they operate are difficult to change, and organisational factors such as heavy workloads are not easily addressed in the current climate of large numbers of child protection notifications and limited organisational resources.

However, while organisations and systems may not be easily changed, some aspects of the workplace may be more responsive to intervention.
One approach that shows promise is based in the emerging area of positive psychology in relation to work. Research to understand the factors that contribute to child protection workforce retention has primarily been undertaken in the United States and has, up until recently, focused on the detrimental factors (e.g., adverse culture and climate, work stress, compassion fatigue and burnout) contributing to a high turnover. Arguably, an approach that focuses on deficits contributes to a culture of blaming individuals for impaired workplace wellbeing.

Drawing on the positive psychology movement, the occupational health literature is moving away from a deficit-based perspective towards one of positive wellbeing, with a particular focus on employee work engagement and positive personal capacities.

**What are the key predictors of wellbeing in Australian frontline child protection practitioners?**

New research undertaken by one of the authors of this paper explored the wellbeing of over 660 frontline child protection practitioners in two Australian states. The research looked into a range of positive and negative factors associated with child protection practitioner wellbeing. Using statistical modelling, the research showed that the psychosocial safety climate (i.e., employee perceptions of the priority given to psychological health and safety within their organisation), role clarity, autonomy, hope, optimism and self-efficacy were important factors within the workplace for determining practitioner wellbeing (i.e., work engagement and emotional, psychological and physical wellbeing).

There were also some surprising findings. Some factors that might have been expected to enhance wellbeing did not have an impact, including supervision and support from peers. Similarly, while the psychological and emotional demands of child protection work were expected to have a substantial negative effect on practitioner wellbeing, their effect was very small relative to the organisational factors identified above.

These findings in relation to role clarity, autonomy, supervisor and peer support, and self-efficacy in the Australian child protection context are generally consistent with international research on child protection workforce wellbeing and engagement (Boyas & Wind, 2010; Jayarante, Himle, & Chess, 1991; Lee, Weaver, & Hrostowski, 2011; Lizano & Mor Barak, 2012; Mor Barak, Levin, Nissly, & Lane, 2006; Schwartz, 2007).

The organisational factors influencing Australian child protection practitioner wellbeing are also well supported in the broader workforce wellbeing literature (Avey, Reichard, Luthans, & Mhatre, 2011; Bakker & Demerouti, 2007; Beehr & Glazer, 2005; Dollard, Winefield, & Winefield, 2003; Idris, Dollard, & Tuckey, 2015). Autonomy, in particular, has been shown to be positively related to job involvement, satisfaction and general health and wellbeing, and to counter the stress associated with emotionally and psychologically demanding work (for reviews see Häusser, Mojzisch, Niesel, & Schulz-Hardt, 2010; van der Doef & Maes, 1999).

These findings are important for two reasons. First, they show that factors associated with the psychosocial work environment, rather than the psychological and emotional aspects of child protection work *per se*, exert the biggest influence on practitioner wellbeing. Second, workplace factors are changeable and, therefore, the research provides clear directions for improving practitioner wellbeing.

Three emerging concepts in occupational health literature may offer guidance for child protection managers in promoting workforce wellbeing. These are:

- work engagement (i.e., an emotional state of being dedicated to, absorbed in and energised by one’s work);

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1 For reviews see: DePanfilis & Zlotnik, 2008; Kim & Kao, 2014; Lewig, 2016; McFadden, Campbell, & Taylor, 2014; Mor Barak, Nissly, & Levin, 2001.
- positive organisational behaviour (i.e., the positive personal attributes that a person brings to their work); and

- psychosocial safety climate (i.e., employee perceptions of the priority given to psychological health and safety within their organisation).

Each of these concepts is discussed further in terms of what they are, why they are important and what facilitates them.

Understanding key concepts in occupational health

Work engagement

What is it?

Work engagement is characterised by high levels of energy, a willingness to invest effort in work and to persist in the face of difficulties, deriving inspiration, enthusiasm and a sense of purpose from one’s work and being immersed and happily engrossed in one’s work (Schaufeli & Bakker, 2004). Work engagement has been described as “a positive, fulfilling, affective motivational state of work-related wellbeing” (Bakker, Schaufeli, Leiter, & Taris, 2008, p. 187).

Why is it important?

An engaged employee puts a great amount of personal effort into their work because they feel connected to their work on many levels (Christian, Garza, & Slaughter, 2011). Hence, work engagement is associated with high levels of motivation, employee performance and organisational citizenship. Engaged workers are reported to be more effective in performing the tasks specific to their role and in roles that benefit the organisation more generally (Bakker & Demerouti, 2007; Christian et al., 2011; Halbesleben & Wheeler 2008; Rich, LePine, & Crawford, 2010).

What facilitates it?

In order to experience high levels of engagement, three psychological conditions must be present: psychological meaningfulness, psychological safety and psychological availability (Kahn, 1990). Each of these conditions can be influenced by aspects of the organisation in which a person works (see Box 1).

When these psychological conditions for engagement are met, employees are more likely to extend intrinsic value to their work role and performance; be more authentic in their work role; and believe that they have enough energy and support to engage fully with their work role (Jeung, 2011).

The aspects of an organisation that make the most important contribution to work engagement are the resources available to employees in the course of their work (Bakker & Demerouti, 2007). Organisational resources are defined as “those aspects of the job that help to achieve work goals, reduce job demands, or stimulate personal growth” (Bakker, Demerouti, & Sanz-Vergel, 2014, p. 393).

For example, autonomy, along with social support from co-workers and supervisors, and the provision of appropriate feedback have been shown to cultivate learning, growth and development and to foster a willingness to apply effort and abilities to achieving work goals (Bakker, Hakanen, Demerouti, & Xanthopoulou, 2007; Bakker, van Veldhoven, & Xanthopoulou, 2010; Demerouti & Bakker, 2011).

In contrast, resources that are lacking or are insufficient to cope with excessive job demands can result in reduced motivation and commitment, eventually leading to disengagement and cynicism (Bakker et al., 2007; Bakker & Demerouti, 2007; Demerouti, Bakker, Nachreiner, & Schaufeli, 2001).
Box 1: Psychological factors that contribute to work engagement

*Psychological meaningfulness* is experienced through feeling worthwhile, useful and valuable; it is the belief that one matters and that one’s contribution has meaning. It is facilitated by:
- role clarity around tasks that fit with how one wishes to express oneself;
- extrinsic and intrinsic rewards;
- good working relations; and
- effort and outcome fairness (i.e., rewarding excellence and requiring accountability for poor performance).

*Psychological safety* is experienced through the feeling that one can authentically undertake one’s role without fear of negative consequences to self-image, status or career. It is facilitated by:
- supportive and trusting interpersonal relationships;
- group and intergroup dynamics; and
- management styles that are supportive, resilient and clarifying.

*Psychological availability* is experienced through having the physical, emotional and psychological resources to personally engage at a particular moment. It is facilitated by:
- physical energy
- emotional energy; and
- security about work and status.

Sources: Kahn (1990, 2010)

Access to organisational resources is particularly advantageous when work demands are viewed as challenges rather than hindrances (Crawford, LePine, & Rich, 2010; Van den Broeck, De Cuyper, De Witte, & Vansteenkiste, 2010). Demands that are seen as ‘challenges’ are those that offer the opportunity for reward (e.g., promotion, mastery) even though the effort required (e.g., high workload) may deplete a worker’s physical and emotional resources. When organisational resources are sufficient, job demands perceived as challenges are positively related to worker engagement. In contrast, job “hindrances” (e.g., emotional demands and work–home interference) deplete physical and emotional resources without the opportunity for reward and are associated with burnout.

Organisational resources may be especially beneficial in promoting engagement in the context of highly demanding jobs such as child protection. For example, teachers dealing with challenging student behaviours have been shown to maintain high levels of engagement in the presence of job resources such as a capacity for innovation, appreciation and a positive organisational climate (Hakanen, Bakker, & Schaufeli, 2006). As highlighted earlier, higher levels of work engagement have been associated with higher levels of autonomy in Australian child protection practitioners, and with higher levels of role clarity in Australian and US child protection practitioners.

**Positive organisational behaviour**

**What is it?**

The concept of positive organisational behaviour focuses on the role played by an employee’s positive psychological capacities (e.g., hope, optimism, spirituality, happiness, wisdom, forgiveness and creativity) to maintain performance and wellbeing (Luthans, Avolio, & Youseff, 2007). This approach contrasts with much of the previous research, exploring the negative aspects of the work environment such as job dissatisfaction and burnout.
Positive organisational behaviours are theoretically and empirically supported psychological strengths that are positively related to performance. Importantly, they are capabilities that are amenable to change—as opposed to personality traits such as extraversion, which are thought to be stable over time.

Why is it important?

Positive organisational behaviours have consistently been identified as playing a positive role in workforce wellbeing and retention across a diverse range of professions. Three of the most prominent capacities explored in the literature (Luthans, et al., 2007) have been:

- hope;
- optimism; and
- self-efficacy.

All three capacities (as described in Box 2) are based on the assumption that human behaviour is goal-directed and is influenced by the personal importance of goals and by the expectation that one’s goals are achievable. Importantly, each provides a worker with a means for effectively coping with perceived setbacks that may otherwise result in stress-induced outcomes such as emotional exhaustion, cynicism and turnover intentions (Alarcon, Eschleman, & Bowling, 2009; Avey et al., 2011).

In child protection research, hope has been linked to higher levels of work engagement, less interference with work due to physical and mental ill-health and faster levels of recovery from stressful work events in Australian frontline child protection practitioners. Similarly, optimism has been associated with lower levels of emotional exhaustion in this group of workers (Lewig, 2016). Likewise, self-efficacy has been positively linked to work engagement and lower levels of emotional exhaustion in Australian and US child protection workforces (Lewig, 2016; Schwartz, 2007). A related construct, psychological empowerment (i.e., deriving meaning from work, self-efficacy, self-determination and influence), has also been linked to lower levels of burnout in US child welfare frontline workers (Lee et al., 2011).

In the organisational context hope may be most relevant to employees who have a high degree of autonomy in their work roles. Such employees are likely to believe that they have agency in reaching the goals they have set themselves. However, autonomy may pose specific challenges to those child protection organisations that use structured decision-making in their assessment and decision-making processes. It would also be expected that role clarity would play an important part in the capacity to set goals in the work environment. If employees are unclear about their work roles it would be difficult for them to identify and pursue work-related goals. Having hope is particularly important in child protection work, where families have a complexity of issues that require practitioners to possess problem-solving skills and confidence in reaching goals.

Coping efficacy, in particular, plays a pivotal role in resilience and wellbeing. Individuals who have a strong belief in their ability to cope are more able to regulate their emotional response to setbacks and are therefore likely to experience less stress and anxiety, or be able to bounce back more quickly when faced with threatening or challenging situations (Bandura, 2012). This is especially relevant to frontline child protection work, where coping efficacy may diminish in entry-level workers as they attempt to acquire and master new skills and abilities needed for the challenging work of child protection. It is important that these workers have access to organisational resources such as clinical supervision, professional development opportunities, supervisor feedback, social and emotional support and role clarity, which can support their development of self-efficacy throughout this learning stage. Fostering personal resources (e.g., hope and optimism) that promote coping

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The concept of hope has been expanded to accommodate the fact that individuals can feel altruistic hope for others that they are personally unable to help (Tong, Frederickson, Chang, & Lim, 2010), and to include hope arising from religious faith or in the context of traumatic events.
Box 2: Hope, optimism and self-efficacy

Hope

Hope is believed to be a universal human attribute that is fundamental to overcoming adversity and cultivating resilience (Ong, Edwards, & Bergeman, 2006). Individuals with high hope are reported to perform better than those with low hope in a range of areas including academia, athletics, physical health, psychological adjustment, psychotherapy and positive ageing (Snyder, 2002; Ong et al., 2006).

Through a process of self-reflection about personal goals, and the ability to achieve those goals, hopeful individuals are believed to give meaning to their lives and to experience less stress in the face of setbacks (Snyder, 2002). In contrast, a person low in hope is likely to engage in negative self-talk resulting in negative emotions, and a lack of affective energy in pursing goals (Snyder, 2002).

Optimism

Optimists have positive thoughts and feelings about the future. Pessimists, on the other hand, anticipate the worst when thinking about the future (Peterson, 2000). Optimists have been observed to have higher levels of subjective wellbeing and physical health than their pessimistic counterparts (Carver, Scheier, & Segerstrom, 2010; Rasmussen, Scheier, & Greenhouse, 2009).

Like high-hope individuals, optimists approach life’s challenges with confidence, and will persevere when progress is difficult or slow (Carver & Scheier, 2003). However, unlike hope, the primary driver of goal-directed optimistic behaviour is the level of confidence that the desired outcome will be achieved. No distinction is made as to whether the outcome is achieved through one’s personal effort or through external influences.

Self-efficacy

Self-efficacy reflects the belief in one’s abilities to perform the actions necessary to achieve the desired role- or task-specific outcomes (Bandura, 1997), and has been consistently identified as aiding personal resilience (Garmezy & Rutter, 1983; Luthar, Cicchetti, & Becker, 2000; Masten, 2001; Polk, 1997).

Self-efficacy beliefs are developed through perseverant effort, through observing others with similar capabilities succeed through perseverance, or by being persuaded by others to believe in one’s ability to succeed and to persevere in the face of setbacks (Bandura, 2012).

efficacy, persistence and motivation in goal attainment may be a useful management intervention in the retention of both new and experienced child protection workers.

Child protection organisations with a high turnover, where recruitment of new workers is frequent, may also be interested in research that highlights self-efficacy as an important resource for new employees. A meta-analysis of studies that have examined the adjustment and organisational socialisation of new workers across a range of professions found that self-efficacy together with role clarity and social acceptance emerged as important indicators of performance and intention to remain in the organisation (Bauer, Bodner, Erdogan, Truxillo, & Tucker, 2007).

What facilitates it?

Organisational resources such as autonomy, performance feedback, supervisory help in problem solving, and opportunities for professional development have been shown to stimulate personal resources such as self-efficacy and optimism, leading to greater work engagement and a decreased susceptibility to emotional exhaustion in workforces more generally (Xanthopoulou, Bakker, Demerouti, & Schaufeli, 2007; Xanthopoulou, Bakker, Demerouti, & Schaufeli, 2009). Autonomy and
role clarity have been found to positively influence hope, optimism and self-efficacy in Australian frontline child protection practitioners (Lewig, 2016).

**Psychosocial safety climate**

**What is it?**

The psychosocial safety climate is viewed as a component of the wider organisational climate. It captures employees’ shared understanding of the priority given to employee psychological health and safety within their organisation (Dollard & Bakker, 2010; Hall, Dollard, & Coward, 2010).

Responsibility for the psychosocial safety climate rests primarily with senior management and is evident in the policies, procedures and practices of the organisation (see Box 3). However, the level of the psychosocial safety climate can vary within an organisation at the level of the team or work unit, via the influence of office managers and supervisors.

**Why is it important?**

Failure to provide a psychologically supportive workplace has been identified as a critical point in the prosecution of Australian employers and has been implicated in the majority of psychological injury claims made by Australian employees (Haly, 2009).

Employees who perceive that their organisation places a high value on their emotional and psychological wellbeing are less likely to experience detrimental outcomes such as depression, fatigue and diminished work engagement as a result of highly demanding work (Hall, Dollard, Winefield, Dormann, & Bakker, 2013; Garrick et al., 2014). Through its positive relationship with resources including control and supervisor support, and its negative relationship with workload, emotional and psychological demands and work pressure, the psychosocial safety climate also serves as a protective factor against a range of psychological difficulties in the workplace (e.g., emotional exhaustion, psychological distress) (Dollard & Bakker, 2010; Dollard, et al., 2012; Hall et al., 2013; Law, Dollard, Tuckey, & Dormann, 2011). A strong psychosocial safety climate acts as a safety signal for workers by providing options for workers, via access to resources that can reduce demand-induced anxiety, indecisiveness, and feelings of helplessness (Dollard et al., 2012; Hall et al., 2013).

A supportive psychosocial safety climate communicated throughout the organisation and, in particular, by agency-level management who may have exposure to a poor psychosocial safety climate from higher up, may be especially important in child protection organisations, where workers can be exposed to personal threats of violence and assault, severe maltreatment cases and child deaths.

The psychosocial safety climate has also been shown to positively influence work engagement both directly (Idris et al., 2015; Garrick et al., 2014), through employees perceptions that their organisation places a high priority on their psychological and emotional wellbeing, and indirectly, through the positive relationship that a psychosocial safety climate has with access to organisational resources (i.e., rewards) (Law et al., 2011).

In the study of Australian frontline child protection practitioners, the psychosocial safety climate was positively associated with autonomy, peer support, supervisor support and hope as well as work engagement and emotional, mental and physical health (Lewig, 2016).

**What facilitates it?**

In high psychosocial safety climate organisations, senior managers are committed to employee wellbeing and have in place policies, procedures and practices to ensure that work demands are manageable and employees are not unduly exposed to workplace stressors (Dollard & McTernan, 2011). High psychosocial safety climate organisations ensure employees have access to resources
Box 3: Factors that contribute to positive psychosocial safety climate

An organisation’s psychosocial safety climate is reflected in four evidence-based principles that underpin successful stress prevention interventions. These are:

- senior management involvement and commitment to stress prevention;
- prioritising psychological health and safety above productivity;
- listening to staff contributions involving psychological wellbeing; and
- organisational participation and consultation with unions and occupational health and safety representatives.

Sources: Dollard & Bakker, 2010; Hall, Dollard, & Coward, 2010

such as autonomy over the way they perform their work and opportunities for skill development and professional growth, which serve to motivate them and help promote wellbeing.

Agency level management and supervisors can demonstrate their commitment to staff wellbeing by pro-active involvement in contributing to, supporting, acting on and communicating organisational policies and procedures regarding staff psychological and emotional wellbeing. Providing flexible work arrangements and supporting employee social activities, exercise and creative pursuits outside of work hours, which help to maintain physical, emotional and psychological health, are other ways through which commitment can be demonstrated (Winwood, Bakker, & Winefield, 2007).

Strategies to enhance wellbeing and engagement

This paper has summarised the current evidence around three promising ideas: work engagement, positive organisational behaviour and the psychosocial safety climate.

This section presents some promising interventions that are relevant to child protection agencies. There has been limited exploration of specific strategies to improve work-related positive organisational behaviours such as hope, optimism and self-efficacy. However, the availability of organisational resources has been shown, as discussed above, to have a positive effect on personal resources additional to their well-documented influence on workforce wellbeing. The strategies outlined below are inter-related and focus on enhancing work engagement, worker wellbeing and building a strong psychosocial safety climate. Autonomy and role clarity are specifically highlighted as areas for intervention, as these resources have been identified as potentially important factors in child protection practitioner wellbeing.

Autonomy

Promoting practitioner autonomy presents a unique challenge to statutory child protection managers. In an attempt to manage risk, child protection has been subject to an array of risk management strategies designed to improve practice through standardisation of the service system. Included among these strategies have been case management, prescriptive practice, standardised assessment frameworks, practice targets and performance indicators (Lonne, Parton, Thomson, & Harries, 2008; Munro, 2011). As practice has become more prescribed, the function of professional judgement in child protection decision-making has been eroded over time (Munro, 2011). However, the extent to which adherence to organisational protocols affects autonomy in Australian statutory child protection organisations is unclear.

Weston (2010) has recently addressed the issue of the facilitation of autonomy in nursing practice, a profession requiring similar high standards of expertise and professionalism in decision-making to those of child protection, with the aim of increasing nurse satisfaction and client outcomes.
Several of the strategies identified by Weston that pertain to the enhancement of nurse autonomy can equally be applied to child protection practice. First and foremost among these strategies is building the foundations from which autonomy can be enhanced. This includes: (1) increasing the knowledge and expertise of workers; and (2) clarifying expectations about autonomous decision-making. Strategies pertaining to each of these points in the context of child protection practice are described briefly in Box 4.

The creation of a more flexible work environment can further increase the sense of autonomy by allowing practitioners the flexibility needed to manage their work and personal lives. Recent research shows that frontline employees will commit to improving their organisation if they perceive a high degree of autonomy in their jobs and trust in their leaders (Anand, Chhajed, & Delfin, 2012).

Role clarity

Role clarity is a work environment factor that should be monitored regularly, particularly in statutory child protection organisations that frequently recruit new workers. While lack of role clarity acts as a workplace stressor, ensuring staff have role clarity not only reduces strain but can also act as an organisational resource that together with autonomy stimulates productivity, wellbeing and work engagement. Supervision can be a primary means of establishing and maintaining role clarity, especially for new workers. This can be facilitated through strategies such as discussing with supervisees, on a regular basis, the ethical and professional nuances of child protection practice that arise during the course of their work and supporting the processes of decision-making and casework practice. Having more experienced workers mentoring less experienced workers, particularly those coming straight from university studies, may further help to facilitate role clarity and maintain wellbeing.

Box 4: Developing autonomy

Increasing the knowledge and expertise of workers

Increasing the knowledge and expertise of child protection workers can be facilitated by the creation of a learning environment through strategies such as: formal and informal continuing education, tuition reimbursement; inquiry in everyday practice; sharing of complicated client scenarios that have challenged decision-making to exemplify excellence in practice and receive feedback on how to further enhance client outcomes; identifying and evaluating relevant research and building this into case plans; and developing communication, interdisciplinary team work and negotiation skills.

Establishing clear expectations about autonomous decision-making

Establishing clear expectations about autonomous decision-making in child protection practice requires organisational sanction and support for the application of practitioner knowledge and expertise in child protection work with children and families. This can be facilitated by encouraging decision-making that is informed by research evidence and sound professional judgement. At the same time, it is important to be clear about what the boundaries of an acceptable response might be. This can be reinforced by role modelling and coaching for autonomous practice; addressing behaviours or actions that are not within the range of expected responses; allocating time (e.g., weekly or monthly) within the agency or organisation for problem solving, presenting new ideas or discussing innovative approaches that have brought unexpected success; and enhancing practitioners’ views of the skills and creativity required to perform their work role and their ability to make autonomous decisions.
Job redesign and work changes

These two strategies focus on those aspects of the job that challenge employees (e.g., workload and work requiring mental effort). Job redesign promotes engagement by increasing the organisational resources that offset job demands and that stimulate personal growth, learning and development.

It is thought that work changes such as job rotation, temporary assignment to special projects or job transfers can challenge (as opposed to hinder) employees, and increase motivation, learning and professional development, thereby increasing engagement (Schaufeli & Salanova, 2010).

Personnel assessment and evaluation

The aim of personnel assessment and evaluation is to increase worker identification, motivation and commitment by attaining a good fit between an employee’s values and goals and the values and goals of the organisation. Fit can be established and monitored through (1) assessing an employee’s values, preferences and personal and professional goals; (2) negotiating an Employee Development Agreement that assures the organisational resources needed to achieve meaningful personal goals; and (3) periodically monitoring the written agreement with respect to goal attainment (Schaufeli & Salanova, 2010).

Periodic workforce wellbeing audits

Periodic workforce wellbeing audits are designed to aid in management decision-making around improving workforce wellbeing and to monitor those improvements (Schaufeli & Salanova, 2010; Weinberg, Sutherland, & Cooper, 2014). Wellbeing audits target both organisational and individual employee factors and generally include assessments of (1) job stressors (e.g., work overload, work role conflicts and clarity, emotional demands and work–home interference); (2) job resources (e.g., task variety, feedback, social support, job control and career development); (3) wellbeing (e.g., job satisfaction, organisational commitment, extra-role performance, burnout, depression, stress, absenteeism and turnover intention); and personal resources (e.g., self-efficacy, hope, optimism, mental and emotional competencies).

Box 5: Design team intervention

The design team intervention involved the development of an inter-agency team that comprised employees from various levels and teams within the agency (Caringi et al., 2008; Strolin-Goltzman, 2010; Strolin-Goltzman et al., 2009). The teams worked together with a trained external facilitator to identify and address causes of turnover within the agency. The teams used research, agency data on organisational and supervisory factors influencing worker turnover, and critical thinking. A "specific strength-based, solution-focused logic model" was used to guide a process of problem identification and solution development (Strolin-Goltzman et al., 2009, p. 154), and included the following seven steps: (1) clearly identifying the problem and need; (2) assessing causes of the problem; (3) evaluating its effects on retention and workforce stability; (4) pondering the ideal situation; (5) discussing solutions already in place; (6) developing new feasible solutions; and (7) specifying action steps.

The design team intervention was shown to have a positive effect on perceptions of burnout, role clarity, job satisfaction, agency commitment and a decreased intention to leave (Strolin-Goltzman, 2010). An 8% improvement in turnover rates pre- to post-intervention was also reported, although this did not reach significance (Strolin-Goltzman et al., 2009). Where the intervention was sustained after the departure of the facilitator, improvements in job satisfaction, burnout, intent to leave and actual turnover were noted (Strolin-Goltzman et al., 2009).
Workforce wellbeing audits can be implemented at the level of the organisation or at the agency level. An example of an agency-level wellbeing audit and subsequent intervention is the “design team intervention” implemented in a child welfare agency in the United States to identify and address causes of turnover in the agency (see Box 5).

**Training and career development**

Training and career development strategies focus on building personal resources that enhance engagement as well as develop skills and competencies that increase employability, rather than just providing content-specific training (Schaufeli & Salanova, 2010). One way in which this can be achieved is through employee access to internal or external training/workshops that promote wellbeing by strengthening personal resources such as cognitive, behavioural and social skills and teach strategies such as positive thinking, goal setting, time management and lifestyle improvement. An example is workplace training in resilience, which has been shown to improve personal resilience, mental health, subjective wellbeing (e.g., autonomy, mastery, growth, self-acceptance) psychosocial functioning (e.g., hope, optimism, coping self-efficacy, work–life fit) and performance (e.g., goal attainment, productivity and behaviour) (Robertson, Cooper, Sarkar, & Curran, 2015).

**Transformational leadership**

The type of leadership displayed by supervisors, and middle and upper management can have a significant influence on employee wellbeing. Several empirical studies have identified a direct positive relationship between “transformational leadership” and employee engagement (Hayati, Charkhabi, & Naami, 2014; Salanove, Lorente, Chambel, & Martinez, 2011; Tims, Bakker, & Xanthopoulou, 2011).

Transformational leadership “occurs when leaders broaden and elevate the interests of their employees, when they generate awareness and acceptance of the purposes and mission of the group, and when they stir their employees to look beyond their own self-interest for the good of the group” (Bass, 1990, p. 21). Bass and Avolio (1994) proposed that transformational leadership comprises four interrelated components that include (1) inspirational motivation (communicating a shared vision); (2) intellectual stimulation (encouraging task-focused debate, discussion, creativity and innovation); (3) idealised influence (modelling ethical, group-centred conduct); and (4) individualised consideration (taking account of the needs of the individual team members in job design and execution).

**Improving the psychosocial safety climate**

The research on the psychosocial safety climate indicates that factors such as burnout, depersonalisation, role clarity, job satisfaction and commitment are amenable to organisational interventions that focus on problem identification, participatory decision-making and feedback. However, there have been few interventions to date that have targeted improving the psychosocial safety climate by addressing these factors. One example is an evaluation of an organisational intervention strategy—Availability, Responsiveness and Continuity (ARC)—designed to improve caseworker turnover, climate and culture in child welfare and juvenile justice systems case management teams (see Box 6). An evaluation of the intervention using a pre-post randomised control design reported significantly lower turnover rates and lower levels of depersonalisation, emotional exhaustion, role conflict and role overload in the teams who participated in the intervention when compared to teams that did not (Glisson, Dukes, & Green, 2006).

There were a number of limitations to the intervention, primary among them being the significant time commitment and costs required to implement the ARC intervention. Further, the authors suggest that organisational culture is much slower and more difficult to change than climate, and requires longer intervention periods.
Conclusion

Recent developments in organisational and positive psychology have highlighted the significant role of three aspects of workers' experience: work engagement, psychological capabilities—such as hope, optimism and efficacy—and a climate of psychosocial safety (PSC) in contributing to workforce wellbeing.

The evidence linking these concepts to workforce wellbeing is promising, suggesting a benefit in strengthening the role of positive psychology in the child protection workforce.

An approach that focuses on work engagement, psychological capabilities and a positive psychosocial climate is aligned with the strengths-based approach that has been applied successfully to social work with other client groups. A strengths-based approach should resonate with the values and training of many managers in child protection practice and, as such, holds promise as an approach to supporting the frontline child protection workforce.

References


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