

# Using Resilience to Reconceptualise Child Protection Workforce Capacity

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## Abstract

*Current approaches to managing and supporting staff and addressing turnover in child protection predominantly rely on deficit-based models that focus on limitations, shortcomings, and psychopathology. This article explores an alternative approach, drawing on models of resilience, which is an emerging field linked to trauma and adversity. To date, the concept of resilience has seen limited application to staff and employment issues. In child protection, staff typically face a range of adverse and traumatic experiences that have flow-on implications, creating difficulties for staff recruitment and retention and reduced service quality. This article commences with discussion of the multifactorial influences of the troubled state of contemporary child protection systems on staffing problems. Links between these and difficulties with the predominant deficit models are then considered. The article concludes with a discussion of the relevance and utility of resilience models in developing alternative approaches to child protection staffing issues.*

*Keywords: Child Protection Workers; Adversity; Resilience; Staff Turnover*

Findings from recent inquiries into statutory child protection services in Australia (e.g., Crime & Misconduct Commission, 2004; Ford, 2007; Wood, 2008) indicated that contemporary approaches to child protection are often unsuccessful in ensuring the safety and wellbeing of vulnerable children and their families. There remains a real sense of crisis in the policy and organisational environments, evidenced by ongoing public scandals and practice failures, relentless media attention, regular public inquiries that continue to highlight chronic organisational failure, and

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continual restructures and reform. In addition, child protection is itself highly contested and politicised, with neo-liberal ideological underpinnings driving increasingly punitive interventions and deficit-oriented approaches (Lonne, Parton, Thomson, & Harries, 2008).

With respect to Australian state and territory jurisdictions, while there are certainly differences across the country there are nevertheless many similarities in the overall legislative, policy, organisational, and practice contexts (Bromfield & Higgins, 2005). Although statutory child protection is inherently difficult, complex, and stressful work, it should be recognised that work stress can be energising and is not always counterproductive to job satisfaction and productivity. However, the work environment of statutory practice is often complicated by high workloads, work stress, and staff turnover, which negatively affects the recruitment and retention of social care professionals (Bednar, 2003; Dollard, Winefield, & Winefield, 2001; Lonne, 2003; Mor Barak, Nissly, & Levin, 2001). Nevertheless, there is considerable evidence from Australia and elsewhere indicating that the child protection workforce is highly committed to children and family wellbeing, and that this is an important factor in helping staff to deal with the attendant difficulties of practice, particularly in these organisations (Bednar, 2003; Dollard et al., 2001; Khoo, Hyvönen, & Nygren, 2002; McLean & Andrew, 2000; Mor Barak et al., 2001; Rycraft, 1994; Weaver, Chang, Clark, & Rhee, 2007; Wood, 2008).

In this article we argue for a rethink of the ways in which the capacities of the child protection workforce are conceived and understood, and call for a focus on staff resilience in workforce planning and management, so that children and parents can have access to high-quality professional help. We commence with a brief exploration of a number of inter-related contextual issues that affect this overall organisational and practice situation. This is followed by an analysis of the continuing application of deficit-based human resources approaches in child protection. The article concludes with a discussion of an alternative model, based on resilience and adversarial growth, and its potential application in child protection contexts.

### **The Context of Child Protection Practice**

The history of child welfare and child protection in Australia and elsewhere is characterised by significant changes. There has been a gradual widening of the definitions of abuse and neglect, reflecting changes in our understanding of harm to children and increased community concern about their welfare (D. Scott, 2006a, 2006b). It is clear that along with greater knowledge within the general and professional communities about the causes, indicators, and consequences of child abuse and neglect, there is now an increased preparedness to support statutory interventions into family privacy, previously regarded as sacrosanct (Lonne et al., 2008). This net widening has contributed to increased notifications of suspected abuse and neglect (Australian Institute of Health & Welfare, 2008; Mansell, 2006a, 2006b).

During the latter part of the last century the broad social policy environment became increasingly driven by economic policy and neo-liberal ideologies, which placed emphasis on curtailing welfare, heightened individual responsibility, and the implementation of blaming and punitive responses to control those groups within the community who were perceived as antisocial, troublesome, and failing to contribute economically (Jones, 2001; McDonald, 2006). Child protection was affected by this context, and abusive parents became the subject of regular media and political vilification, with a child rescue mentality often accepted uncritically as being necessary to protect vulnerable children from “dangerous” parents (e.g., No More Chances, 2008). Within the context of a risk-focused and increasingly anxious society (Webb, 2006), the overall policy and practice framework driving child protection became particularly deficit-oriented, focusing on the limitations and shortcomings of parents, emphasising safety over well being, and actualising an increased social control function despite seemingly contradictory legislative provisions that required parental and child participation in decision making. The advent of mandatory reporting requirements and risk assessment tools which claimed an actuarial objectivity to assessment of the risk to children, for example, helped to operationalise this deficit orientation (Leschied, Chiodo, Whitehead, Hurley, & Marshall, 2003; Pelton, 2008; Shlonsky & Wagner, 2005). Overall, it became progressively more difficult for practitioners to practice in strengths-based ways within this policy, practice, and organisational context. These changes in child protection policy took place despite attempts by many to emphasise the benefits of a strengths approach for working with disadvantaged families and communities (see Scott & O’Neil, 2003).

Furthermore, risk management approaches have increasingly led to risk-averse management and political leadership (McDonald, 2006; Webb, 2006). It is important to recognise that these changing social policy directions were accompanied by rapid change in organisational environments, including the rise of new public management (NPM – more commonly known as managerialism) as well as information and communication technologies that transformed work practices. NPM was very much at the vanguard of public sector reforms, with an ideology and discourse that saw “management becoming powerful and pre-eminent as a knowledge and skill base, largely supplanting professionals as the experts” (Lonne et al., 2008, p. 60). The introduction of entrepreneurial management and the application of a range of market-based approaches (such as strategic planning, enhanced accountability measures, rationing of scarce resources, performance measurement, and tight management of finances and staff) reshaped organisational cultures, priorities, and performance (McDonald, 2006; Tilbury, 2004).

In child protection agencies, these changes were accompanied by the introduction of case management systems, along with sophisticated client information and communication technologies and a raft of policies and procedures that sought to increase practice consistency in line with policy frameworks (Lonne et al., 2008; Parton, 2008). The extent of professional discretion in case management was, if not curtailed, certainly restricted as organisations became increasingly sensitive and

averse to scandals, especially where a child had died (Lonne et al., 2008). It is perhaps ironic that worker autonomy has been consistently identified as a major factor associated with high job satisfaction and lower work stress levels. However, in the same research, child protection work was characterised as having heavy workloads, periods of high stress, and elevated staff turnover (Dollard et al., 2001; Lonne, 2003).

There have been increasing numbers of critiques of the changed relationships evident in child protection practice and, specifically, the consequences of managerialised proceduralism and its consequences for children and families who come into contact with these systems (Dale, 2004; Dumbrill, 2006; Parton, 2008). For example, Ruch (2005) has noted the benefits that arise from a relationship-based approach to child protection practice; some state authorities, such as South Australia's Families SA, have embraced this practice because of its importance in assisting family change processes. Some researchers have called for increased practitioner autonomy and authority in order to address the negative effects of over-proceduralism, which stifles creative and committed professional work with families facing complex issues in their lives (see Cooper, Hetherington, & Katz, 2003; Lonne et al., 2008; Pelton, 2008). Nevertheless, the difficulties inherent in changing organisational culture and practice need to be noted.

As a result of a range of factors, statutory child protection systems in Australia have generally experienced rapid growth in their workloads, budgets, organisational size and complexity, and workforce (Ainsworth & Hansen, 2006). Despite a massive increase in resources, service delivery structures generally remain overloaded, with mandatory reporting contributing to increasing notifications of suspected abuse, and demands for services to meet better the needs of vulnerable children and families (Ainsworth, 2002; Melton, 2005; D. Scott, 2006a; E. Scott, 2006; Wood, 2008). Overall, contemporary child protection systems are crisis-driven and reactive. They primarily operate using neo-liberal approaches that are forensic- and deficit-oriented, as well as being punitive toward service users and staff. While the influence of NPM has contributed to this state of affairs, there have been positive efforts toward change resulting from its management processes, through an emphasis upon strategic review and planning, utilising a range of quality assurance mechanisms, and identifying the importance of collaborative relations with other stakeholders. Where there is a focus on continual reform, there are also opportunities to alter current approaches toward workforce management and practice. Overall, the change context of statutory child protection has sometimes looked like a process of iterative development interspersed with periods of degeneration.

### **The Child Protection Workforce: A Focus on Adversity**

Within crisis-driven and reactive contexts, staff encounter challenges with the potential for significant negative individual and organisational impact. Retention issues are frequently attributed to the adverse experiences of staff. However, adversity, being defined as disruptive events or experiences with the potential to impact

negatively on healthy levels of psychological and physical functioning (Bonanno, 2004, p. 20), is characteristic of child protection work. There are at least four conditions of adversity that research has identified as common experiences in child protection work. These are work stress (Dollard et al., 2001; Lonne, 2003), burnout (Maslach & Leiter, 1997), trauma (Horwitz, 2006; Stanley & Goddard, 2002), and vicarious traumatisation (Conrad & Kellar-Guenther, 2006; Cornille & Meyers, 1999; Dane, 2000; Horwitz, 1998). Research has highlighted the potential for these experiences to have significant adverse impacts for child protection workers (Conrad & Kellar-Guenther, 2006; Cornille & Meyers, 1999; Dollard et al., 2001; Lonne, 2003; Horwitz, 1998) and suggested that these adversities contribute to declining staff well-being (Conrad & Kellar-Guenther, 2006; Cornille & Meyers, 1999; Meldrum, King, & Spooner, 2002) and increased levels of trauma symptomatology and psychological distress (Dunkley & Whelan, 2006; Figley, 1995; Lam, 2002; Miner-Rubino & Cortina, 2004; Pearlman & Saakvitne, 1995; Rothschild & Rand, 2006). This ultimately impacts on organisations by lowering the willingness and ability of individuals to function optimally and to continue working in child protection.

Following on from significant bodies of work on stress, the concept of burnout in human services arose in the 1980s (Maslach & Leiter, 1997). Since that time there has been a proliferation in research considering the distress experienced by human service workers. Although trauma was considered in many work contexts, the recognition of trauma experiences in child protection was slower to emerge (Stanley & Goddard, 2002).

Organisational factors contribute significantly to the development and negative impacts of work stress (Sulsky & Smith, 2005), chronic stress (Sauter & Murphy, 1995), and burnout (Lewandowski, 2003; Maslach & Leiter, 1997) in child protection (Dollard et al., 2001; Forster, 2004; Schaufeli, Maslach, & Marek, 1993). These impacts occur through worker interactions with people in physical and/or psychological pain (Obholzer & Roberts, 1994), dealing with violence, high workloads, limited resources, and poor supervision (Dollard et al., 2001). Resulting impact includes reduced performance, increased absenteeism, mistakes, psychological distress, job dissatisfaction, physical and mental ill health, and symptoms of burnout, which adversely affect client services (Dollard et al., 2001; Schaufeli et al., 1993).

By the 1990s, trauma concepts had been expanded to include vicarious trauma, which was particularly relevant to human service workers, including child protection staff. Vicarious trauma, the “impact of empathic engagement with people who have experienced trauma” (Pearlman & Saakvitne, 1995, p. 279), is recognised as significant for child protection workers (Conrad & Kellar-Guenther, 2006; Cornille & Meyers, 1999; Dane, 2000; Dunkley & Whelan, 2006). There is agreement that individuals who work with traumatised people can suffer similar psychological and emotional distress to their clients (Cunningham, 2003). Research indicates high rates of vicarious traumatisation in child protection workers, with studies indicating that

30–50% have significant levels of symptoms of vicarious traumatisation (Bell, 2003; Conrad & Kellar-Guenther, 2006; Cornille & Meyers, 1999).

While vicarious traumatisation is a significant cause of distress in child protection, workers are also faced with the threat of direct trauma. Child protection workers experience trauma during events such as threats, assaults, and intervention in traumatic incidents (e.g., client self-harm, client deaths) (Littlechild, 2005; Rothschild & Rand, 2006; Smith, Nursten, & McMahon, 2004). These traumatic experiences have the potential to cause psychological distress for the worker (Lam, 2002; Miner-Rubino & Cortina, 2004; Mitchell & Everly, 2001; Schouten, Callahan, & Bryant, 2004), including clinical symptoms of critical incident stress and post traumatic stress disorder. Where the impacts of direct trauma are combined with similar symptoms of vicarious trauma, there is a heightened potential that the worker's capacity to continue their work will decrease (Cunningham, 2003).

In the main, research into conditions of adversity has been quantitative in nature, deficit-based, and developed from the perspective of psychopathology (Adams, Boscarino, & Figley, 2006; Dunkley & Whelan, 2006; Linley & Joseph, 2005). This research has led to broader consideration of the impact on staff through awareness and understanding of the negative consequences of work stress, burnout, and trauma on human service workers (Conrad & Kellar-Guenther, 2006; Cornille & Meyers, 1999; Dane, 2000). It has also, however, contributed to the adoption of psychopathology-based approaches in human services organisations, focusing on support for (and sometimes removal of) non-coping individuals rather than a broader examination of workplace characteristics that affect all workers and may need to be modified.

Unsurprisingly, organisational responses continue to rely predominantly on individual coping through inoculation approaches and personal counselling (Bell, Kulkarni, & Dalton, 2003; Gibbs, 2001). Although these may be supported or provided by the organisation (often in the form of employee assistance services), the responsibility for accessing supports and implementation of change usually remain with the individual. A culture is often evident whereby individuals are seen as “not coping” if they are affected by their work, and there is a need to be seen to “be tough”. In these environments, a blame culture is perpetuated and “not coping” individuals seen to be “at fault”. Unable to “cope” with the stresses of work, they frequently leave the organisation; their own needs are not recognised and retention issues remain largely unaddressed.

Despite this predominant negative focus, researchers have increasingly identified a proportion of child protection workers who continue to function effectively and report high job satisfaction (Conrad & Kellar-Guenther, 2006; Reagh, 1994; Stalker, Mandell, Frensch, Harvey, & Wright, 2007). Further, a closer examination of the research suggests that even where negative indicators are evident, 50–70% of study participants remain without symptoms or dysfunction (Bell, 2003; Conrad & Kellar-Guenther, 2006; Cornille & Meyers, 1999). Thus, while experiences such as vicarious trauma have been argued to be a predictable, normal interaction with

trauma work, it is the minority of child protection staff who report symptoms, and of these not all are at clinical levels. Stress research also argues that stress can have positive and motivating impacts. Therefore, we cannot assume that all child protection workers who experience stress and trauma through work experience psychopathology and are rendered unable to continue effective work.

### **An Alternative Model Based in Strengths and Resilience Approaches**

Given that workers who demonstrate symptoms of psychopathology remain the minority, and that many who display symptoms continue to experience satisfaction and work effectively, we need to consider alternative concepts and models to understand and respond to work stress. Strengths perspectives and resilience models offer potential new insights into child protection staff functioning and retention, and broader approaches to building capacity within individual staff and organisations (Lonergan, O'Hallaran, & Crane, 2004).

Resilience is a concept that has received significant focus in relation to client groups, particularly children from highly disadvantaged backgrounds and/or who suffer abuse and neglect (Rickwood, Roberts, Batten, Marshall, & Massie, 2004). In a field where it has often been suggested that the traumatised reactions of staff reflect those of the highly disadvantaged clients they service (Hart, Blincow, & Thomas, 2007), it seems an obvious gap that resilience has not also been considered in relation to the staff who face significant adversity in supporting and responding to this client group. However, researchers have only recently considered the development of resilience in workers (Bonanno, 2004; Tedeschi & Kilmer, 2005).

Resilience approaches focus on those who manage or overcome adversity, and either avoid negative impacts or identify benefits as a result of these experiences. Some have suggested that resilience is "the ability to maintain relatively stable, healthy levels of psychological and physical functioning", or equilibrium, in the face of adversity (Bonanno, 2004, p. 20). Others have suggested that the concept relates to positive adaptation in the context of adversity (Luthar, Cicchetti, & Becker, 2000); resilience may not preclude initial distress and has links to adversarial growth. Adversarial growth, defined as "growth and positive change, that is, a shift toward more optimal functioning as a result of the adverse experience" (Linley & Joseph, 2005, p. 263), includes the concepts of post traumatic growth (Tedeschi & Calhoun, 1996; Tedeschi & Kilmer, 2005), stress-related growth, thriving, perceived benefits, and positive adjustment.

The processes and experiences that support resilience and growth are not well understood, particularly in work contexts. Resilience theorists postulate that resilience, rather than distress and pathology, is the norm (Bonanno, 2004) and that adversarial growth is also common (Arnold, Calhoun, Tedeschi, & Cann, 2005). The resilience literature has developed from initial concepts based on personality factors such as hardiness and adaptability (Bonanno, 2004; Luthar et al., 2000; Robinson, 2000) and expanded to develop process-based understandings of resilience

(Hart et al., 2007; Jaffee, Caspi, Moffitt, Polo-Tomas, & Taylor, 2007). The development of process-based understandings of resilience, linking individual and context, opens opportunities to explore options for the development and support of resilience in organisational contexts. While this is an emerging field, and the concepts of resilience and adversarial growth have been challenged on the basis of the rigor of the research, measurement, and validity (Luthar et al., 2000; Smith & Cook, 2004; von Eye, 2000), these concepts offer an alternative model worth considering, given the limited success of current approaches in relation to stemming staff turnover.

While deficit models focus narrowly on contributors to stress, Bell (2003) argued that a strengths perspective can inform broader personal and organisational strategies and resources that support resilience. As Linley and Joseph (2005) argued, variables that are protective against distress “do not automatically promote resilience and adversarial growth” (p. 263). Resilience and adversarial growth may occur where there is initial distress and or limited impact but where normal functioning can be retained or regained, with possible subsequent personal growth (Bonanno, 2005). This highlights the need to consider resilience broadly and not just as the flip-side of distress.

A model based on resilience and growth provides the potential to consider not only individual distress but also contributors to positive experiences, job satisfaction, and the capacity and desire to continue in the field of child protection. It also allows for consideration of organisational processes and the implementation of strategies for building organisational resilience.

While options for achieving organisational processes to promote resilience have as yet received relatively little attention from researchers, some contemporary findings suggest directions for the future. Control, commitment, and challenge have been posited as key elements of resilience (Collins, 2008; Maddi & Khoshaba, 2005); Collins (2008) has suggested that all three can be developed at the individual and organisational levels. While further research to identify new ways forward is required, a strengths and resilience-based approach to currently indicated strategies may provide a starting point and support enhancements to workforce development and management.

We suggest that increased use of reflective practice, supervision, ongoing learning, and collaborative peer support may be useful in promoting resilience in child protection staff, by strengthening workers' sense of control, fostering their commitment through valuing client-related work, and helping them to manage challenges successfully.

The provision of supervision as support and for learning, in addition to task management, can enhance worker autonomy and control. Control can be promoted not only in relation to client issues but through participation in organisational development, including contributing to policy and practice development. Increased use of relationship-based approaches to practice also creates opportunities for increased worker autonomy.



Commitment to improving the lives of clients is often seen as central to the motivations of child protection workers. Such commitment may be related to an alignment with organisational values and personal spirituality or mission. As Reagh (1994) suggested, workers who find meaning in their work and feel valued stay in the field. This provides an opportunity for organisations to support the personal commitment which draws workers to, and increases worker satisfaction in, child protection. Commitment may be enhanced through recognition of professional skills and genuine valuing of the work that child protection staff do.

Professional supervision as distinct from managerial and other support strategies can be instrumental in acknowledging the challenges of child protection work, and assisting staff to manage these challenges successfully, thus facilitating understanding of the self in the work environment and ongoing adaptation to the work and context.

The importance of social support and relationships, between staff and client and between staff, has been recognised by many studies in relation to staff stress. Social support can be promoted at an organisational level as well as developed individually. For example, peer support programs have been developed and utilised in emergency service agencies to support workers affected by trauma. This concept has recently been extended to child protection in Queensland, providing a support system against the daily stresses of the role, increased support where specific incidents occur, and promotion of more supportive work environments (Russ & Bennett, 2007). Collaborative approaches also create the potential for support. In highly complex cases, collaborative approaches offer support not only in responding to the client work but in creating a network for the worker. It is increasingly recognised that collaborative approaches offer much when responding to complex cases. Organisations that support collaborative approaches may also be promoting resilience.

### **Conclusion**

It is clear from many inquiry findings and research studies that there are major issues involved in developing and maintaining a quality child protection workforce in current environments. While research into work stress and burnout has informed and improved staff support strategies, broader organisational responses are generally lacking, or achieve limited success.

Individualised, deficit-oriented approaches perpetuate these issues with their focus on negative impacts on individual worker functioning, placing responsibility and, at least implicitly, blame on the individual who is seen as not coping with the pressures of the work. Colleagues in this culture may be reluctant to support fellow workers, and deny or otherwise hide their own stress lest they be also singled out as “non-copers”. Across Australia, large numbers of child protection workers continue to leave the sector, with significant personal and organisational costs. While many workers do stay in child protection long term, with a proportion of these thriving in conditions that others find untenable, the collective perception is increasingly one of inexperienced workers facing insurmountable stress. However, these “war story” scenarios do not do

justice to the realities, lived experiences, and commitment of those child protection practitioners who enjoy the exceptional rewards of this challenging and professionally demanding work.

Systemic responses are needed to address chronic job dissatisfaction and the resultant staff recruitment and retention issues in child protection. A resilience-based approach to child protection workforce development and management has considerable potential to turn around these entrenched patterns. Such an approach would explicitly recognise the nature and potential impacts of child protection work, both negative and positive, and build in systemic support for staff as part of organisational routine and culture. In a context of sensitivity to environmental issues impacting on staff and proactivity in providing appropriate responses, worker stress should elicit responses at organisational as well as personal levels. The focus needs to be on providing the level of support necessary for all staff to do their jobs, rather than viewing a need for support as an individual's failure. There is also much to be learned from workers who thrive in situations that others may find unbearably stressful; understanding those who thrive may well suggest directions for building resilience in others. In the current organisational contexts of this challenging work, rethinking workforce capacity in terms of resilience offers considerable promise for effectively addressing work-related stress and staff turnover.

While concerted efforts will be required to introduce the sorts of approaches advocated here, we are confident that change will occur. In our view, although managerialism dominates these organisations there is also increasing recognition of the unworkability of current forensically-oriented practices in statutory child protection and increasing recognition that fundamental change is required. For example, Families SA has embraced relationship-based practice as fundamental to staff who are to help families care well for their children. Furthermore, most organisations have embraced the need for increased professionalisation of their workforces so that staff have the necessary knowledge, skills, and attitudes to undertake this sort of work successfully. Rather than seeing these organisational systems as resistant to change, we would do better to recognise the impetus within them to continue reform processes, through their committed and talented staff. Changing organisational cultures and building a supportive and worker-friendly environment is essential. Nevertheless, it should be recognised that change is constantly occurring through the vision and persistence of managers and staff who understand the issues and want to do things in different, more productive ways so that children and families are safer and experience improved well-being. There are ways forward, and having a resilient workforce is a critical component of a well-functioning organisation.

In Australia, the identification of issues in child protection systems and practice has primarily occurred in external enquiries, which direct organisational change and recommend increased organisational control and prescribed approaches. These approaches are not working well for children, families, or workers. Given that there continues to be significant staff turnover, the consideration of alternative approaches

is warranted. The development of strategies to build staff and organisational resilience offers one such alternative. The need for the assembly of a body of evidence about resilience in work contexts to guide organisational approaches is evident. Further research into the place of resilience building approaches will offer organisations opportunities to increase their workforce capacity by identifying specific measures to aid staff in dealing positively with the stresses and events that this complex work entails. Early research by the authors into staff resilience in child protection is underway. Given the issues identified and the limited research currently available, further research is warranted to enhance our understanding of resilience in work contexts seen as involving significant adversity, such as child protection. This research needs to consider not only individual but also organisational approaches to resilience. The ongoing reform of child protection systems is dependent upon the active participation of their staff, and reconceptualising workforce capacity in terms of resilience is an important way to further this critical task, and thereby help families and the community to care well for vulnerable children.

### References

- Adams, R.E., Boscarino, J.A., & Figley, C.R. (2006). Compassion fatigue and psychological distress among social workers: A validation study. *American Journal of Orthopsychiatry*, 76 (1), 103–108.
- Ainsworth, F. (2002). Mandatory reporting of child abuse and neglect: Does it really make a difference? *Child and Family Social Work*, 7(1), 57–64.
- Ainsworth, F., & Hansen, P. (2006). Five tumultuous years in Australian child protection: Little progress. *Child and Family Social Work*, 11 (1), 33–41.
- Arnold, D., Calhoun, L., Tedeschi, R., & Cann, A. (2005). Vicarious posttraumatic growth in psychotherapy. *Journal of Humanistic Psychology*, 45(2), 239–263.
- Australian Institute of Health and Welfare. (2008). *Child protection Australia 2006–07*. Canberra: Author.
- Bednar, S.G. (2003). Elements satisfying organisational climates in child welfare agencies. *Families in Society*, 84(1), 7–12.
- Bell, H. (2003). Strengths and secondary trauma in family violence work. *Social Work*, 48 (4), 513–522.
- Bell, H., Kulkarni, S., & Dalton, L. (2003). Organisational prevention of vicarious trauma. *Families in Society: The Journal of Contemporary Human Services*, 84(4), 463–470.
- Bonanno, G.A. (2004). Loss, trauma, and human resilience: Have we underestimated the human capacity to thrive after extremely aversive events? *American Psychologist*, 59(1), 20–28.
- Bonanno, G.A. (2005). Clarifying and extending the construct of adult resilience. *American Psychologist*, 60(3), 265–267.
- Bromfield, L., & Higgins, D. (2005). *National comparisons of child protection systems: Child abuse prevention issues*. Melbourne: National Child Protection Clearing House, Australian Institute of Family Studies.
- Collins, S. (2008). Statutory social workers: Stress, job satisfaction, coping, social support and individual differences. *British Journal of Social Work*, 38, 1173–1193.
- Conrad, D., & Kellar-Guenther, Y. (2006). Compassion fatigue, burnout and compassion satisfaction among Colorado child protection workers. *Child Abuse and Neglect*, 30, 1071–1080.

- Cooper, A., Hetherington, R., & Katz, I. (2003). *The risk factor: Making the child protection system work*. London: Demos Online. Retrieved 23 March 2007 from <http://www.demos.co.uk/publications/riskfactor>
- Cornille, T.A., & Meyers, T. (1999). Secondary traumatic stress among child protective service workers: Prevalence, severity and predictive factors. *Traumatology*, 5(1), 15–31.
- Crime & Misconduct Commission. (2004). *Protecting children: An inquiry into abuse of children in foster care*. Brisbane, Australia: Author.
- Cunningham, M. (2003). Impact of trauma work on social work clinicians: Empirical findings. *Social Work*, 48(4), 451–459.
- Dale, P. (2004). “Like a fish in a bowl”: Parents’ perceptions of child protection services. *Child Abuse Review*, 13(2), 137–157.
- Dane, B. (2000). Child welfare workers: An introductory approach for interacting with secondary trauma. *Journal of Social Work Education*, 36(1), 27–38.
- Dollard, M., Winefield, H., & Winefield, A. (2001). *Occupational strain and efficacy in human service workers*. Dordrecht, the Netherlands: Kluwer Academic.
- Dumbrill, G. (2006). Parental experience of child protection intervention: A qualitative study. *Child Abuse and Neglect*, 30, 27–37.
- Dunkley, J., & Whelan, T. (2006). Vicarious traumatisation: Current status and future directions. *British Journal of Guidance and Counselling*, 34(1), 107–116.
- Figley, C.R.E. (Ed.). (1995). *Compassion fatigue: Coping with secondary traumatic stress disorder in those who treat the traumatized*. London: Brunner-Routledge.
- Ford, P. (2007). *Review of the Department for Community Development: Review report*. Perth: Government of Western Australia.
- Forster, P. (2004). *A blueprint for implementing the recommendations of the January 2004 Crime and Misconduct Commission report “Protecting children: An inquiry into abuse of children in foster care”*. Retrieved 30 June 2007 from <http://www.childsafety.qld.gov.au/publications/blueprint/index.html>
- Gibbs, J.A. (2001). Maintaining front-line workers in child protection: A case for refocusing supervision. *Child Abuse Review*, 10(5), 323–335.
- Hart, A., Blincow, D., & Thomas, H. (2007). *Resilient therapy: Working with children and families*. Hove, UK: Routledge.
- Horwitz, M. (1998). Social worker trauma: Building resilience in child protection social workers. *Smith College Studies in Social Work*, 68(3), 363–377.
- Horwitz, M. (2006). Work-related trauma effects in child protection social workers. *Journal of Social Service Research*, 32(3), 1.
- Jaffee, S.R., Capsi, A., Moffitt, T.E., Polo-Tomas, M., & Taylor, A. (2007). Individual, family and neighbourhood factors distinguish resilient from non-resilient maltreated children: A cumulative stressors model. *Child Abuse and Neglect*, 31(3), 231–253.
- Jones, C. (2001). Voices from the front line: State social workers and New Labour. *British Journal of Social Work*, 31(4), 547–562.
- Khoo, E.G., Hyvönen, U., & Nygren, I. (2002). Child welfare protection: Uncovering Swedish and Canadian orientations to social intervention in child maltreatment. *Qualitative Social Work*, 1(4), 451–471.
- Lam, L.T. (2002). Aggression exposure and mental health among nurses. *Australian e-Journal for the Advancement of Mental Health*, 1(2). Retrieved October 1, 2008, from <http://auseinet.flinders.edu.au/vol1iss2/aejamh-12-full.pdf>
- Leschied, A., Chiodo, D., Whitehead, P., Hurley, D., & Marshall, L. (2003). The empirical basis of risk assessment in child welfare: The accuracy of risk assessment and clinical judgment. *Child Welfare*, 82(5), 527–541.
- Lewandowski, C.A. (2003). Organisational factors contributing to worker frustration: The precursor to burnout. *Journal of Sociology and Social Welfare*, 30(4), 175–186.

- Linley, P.A., & Joseph, S. (2005). The human capacity for growth through adversity. *American Psychologist*, 60(3), 262–264.
- Littlechild, B. (2005). The nature and effects of violence against child-protection social workers: Providing effective support. *British Journal of Social Work*, 35(3), 387–401.
- Lonergan, B.A., O'Halloran, M.S., & Crane, S. (2004). The development of the trauma therapist: A qualitative study of the child therapist's perspectives and experiences. *Brief Treatment and Crisis Intervention*, 4(4), 353–366.
- Lonne, B. (2003). Occupational stress in human services. In M. Dollard, A. Winefield, & H. Winefield (Eds.), *Occupational stress in the service professions* (pp. 281–310). London: Taylor & Francis.
- Lonne, B., Parton, N., Thomson, J., & Harries, M. (2009). *Reforming child protection*. London: Routledge.
- Luthar, S.S., Cicchetti, D., & Becker, B. (2000). The construct of resilience: A critical evaluation and guidelines for future work. *Child Development*, 71(3), 543–562.
- Maddi, S., & Khoshaba, D. (2005). *Resilience at work: How to succeed no matter what life throws at you*. New York: Amacom.
- Mansell, J. (2006a). Stabilisation of the statutory child protection response: Managing to a specified level of risk assurance. *Social Policy Journal of New Zealand*, (28), 77–96.
- Mansell, J. (2006b). The underlying instability in statutory child protection: Understanding the system dynamics driving risk assurance levels. *Social Policy Journal of New Zealand*, (28), 97–132.
- Maslach, C., & Leiter, M. (1997). *The truth about burnout: How organisations cause personal stress and what to do about it*. San Francisco: Jossey-Bass.
- McDonald, C. (2006). *Challenging social work: The context of practice*. Basingstoke, UK: Palgrave Macmillan.
- McLean, J., & Andrew, T. (2000). Commitment, satisfaction, stress and control among social services managers and social workers in the UK. *Administration in Social Work*, 23(4), 93–117.
- Meldrum, L., King, R., & Spooner, D. (2002). Secondary traumatic stress in case managers working in community mental health services. In C.R. Figley (Ed.), *Treating compassion fatigue* (pp. 85–106). New York: Brunner-Routledge.
- Melton, G. (2005). Mandatory reporting: A policy without reason. *Child Abuse and Neglect*, 29(1), 9–18.
- Miner-Rubino, K., & Cortina, L.M. (2004). Working in a context of hostility toward women: Implications for employees' well-being. *Journal of Occupational Health Psychology*, 9(2), 107–122.
- Mitchell, J.T., & Everly, G.S. (2001). *The Basic Critical Incident Stress Management Course: Basic group crisis intervention* (3rd ed.). Ellicott City, MD: International Critical Incident Stress Foundation.
- Mor Barak, M.E., Nissly, J.A., & Levin, A. (2001). Antecedents to retention and turnover among child welfare, social work, and other human service employees: What can we learn from past research? A review and meta-analysis. *The Social Service Review*, 75(4), 625–661.
- No more chances – clean up your act, slack parents told. (2008, February 25). *Courier Mail*.
- Obholzer, A., & Roberts, V.Z.E. (1994). *The unconscious at work: Individual and organisational stress in the human services*. London: Routledge.
- Parton, N. (2008). Changes in the form of knowledge in social work: From the “social” to the “informational”? *British Journal of Social Work*, 38(2), 253–269.
- Pearlman, L.A., & Saakvitne, K.W. (1995). *Trauma and the therapist: Countertransference and vicarious traumatization in psychotherapy with incest survivors*. New York: W.W. Norton.

- Pelton, L.H. (2008). Informing child welfare: The promise and limits of empirical research. In D. Lindsey & A. Schlonsky (Eds.), *Child welfare research* (pp. 25–48). New York: Oxford University Press.
- Reagh, R. (1994). Public child welfare professionals: Those who stay. *Journal of Sociology and Social Welfare*, 21(3), 69–78.
- Rickwood, R.R., Roberts, J., Batten, S., Marshall, A., & Massie, K. (2004). Empowering high-risk clients to attain a better quality of life: A career resiliency framework. *Journal of Employment Counseling*, 41(3), 98–99.
- Robinson, J.L. (2000). Are there implications for prevention research from studies of resilience? *Child Development*, 71(3), 570–572.
- Rothschild, B., & Rand, M. (2006). *Help for the helper: The psychophysiology of compassion fatigue and vicarious trauma*. New York: W.W. Norton.
- Ruch, G. (2005). Relationship based practice and reflective practice: Holistic approaches to contemporary child care social work. *Child and Family Social Work*, 10(2), 111–123.
- Russ, E., & Bennett, S. (2007, October). *Building effective staff support mechanisms: A Queensland case study*. Paper presented to the 11th Australasian Conference on Child Abuse and Neglect (ACCAN 2007), Brisbane. Retrieved 9 November 2008 from [http://www.ccm.com.au/accan/content/papers/wed\\_rm5-ranahanstartbarnardosfarinolajackson.pdf](http://www.ccm.com.au/accan/content/papers/wed_rm5-ranahanstartbarnardosfarinolajackson.pdf)
- Rycraft, J.R. (1994). The party isn't over: The agency role in the retention of public child welfare case workers. *Social Work*, 39(1), 75–80.
- Sauter, S.L., & Murphy, L.R.E. (1995). *Organisational risk factors for job stress*. Washington, DC: American Psychological Association.
- Schaufeli, W., Maslach, C., & Marek, T.E. (1993). *Professional burnout: Recent developments in theory and research*. Washington, DC: Taylor & Francis.
- Schouten, R., Callahan, M., & Bryant, S. (2004). Community response to disaster: The role of the workplace. *Harvard Review of Psychiatry*, 12(4), 229–237.
- Scott, D. (2006a, February). *Sowing the seeds of innovation in child protection*. Keynote presentation at the 10th Australasian Child Abuse and Neglect Conference, Wellington, New Zealand.
- Scott, D. (2006b). Towards a public health model of child protection in Australia. *Communities. Children and Families Australia*, 1(1), 9–16.
- Scott, D., & O'Neil, D. (2003). *Beyond child rescue: Developing family-centered practice at St. Luke's*. Bendigo, Australia: Solutions Press.
- Scott, E. (2006, September). *From family crisis to state crisis: The impact of overload on child protection in New South Wales*. Paper presented to the Children in a Changing World – Getting it Right, 16th ISPCAN International Congress on Child Abuse and Neglect, York, UK.
- Shlonsky, A., & Wagner, D. (2005). The next step: Integrating actuarial risk assessment and clinical judgement into an evidence-based practice framework in CPS case management. *Children and Youth Services Review*, 27(4), 409–427.
- Smith, M., Nursten, J., & McMahon, L. (2004). Social workers' responses to experiences of fear. *British Journal of Social Work*, 34(4), 541–559.
- Smith, S.G., & Cook, S.L. (2004). Are reports of posttraumatic growth positively biased? *Journal of Traumatic Stress*, 17(4), 353–358.
- Stalker, C.A., Mandell, D., Frensch, K.M., Harvey, C., & Wright, M. (2007). Child welfare workers who are exhausted yet satisfied with their jobs: How do they do it? *Child and Family Social Work*, 12(2), 182–191.
- Stanley, J., & Goddard, C. (2002). *In the firing line: Violence and power in child protection work*. New York: Wiley.
- Sulsky, L., & Smith, C. (2005). *Work stress*. Toronto: Thomson Wadsworth.
- Tedeschi, R., & Calhoun, L. (1996). The Posttraumatic Growth Inventory: Measuring the positive legacy of trauma. *Journal of Traumatic Stress*, 9(3), 455–471.

- Tedeschi, R., & Kilmer, R.P. (2005). Assessing strengths, resilience, and growth to guide clinical interventions. *Professional Psychology: Research and Practice*, 36(3), 230–237.
- Tilbury, C. (2004). The influence of performance measurement on child welfare policy and practice. *British Journal of Social Work*, 34(2), 225–241.
- von Eye, A. (2000). The odds of resilience. *Child Development*, 71(3), 563–566.
- Weaver, D., Chang, J., Clark, S., & Rhee, S. (2007). Keeping public child welfare workers on the job. *Administration in Social Work*, 31(2), 5–25.
- Webb, S. (2006). *Social work in a risk society: Social and political perspectives*. Basingstoke, UK: Palgrave Macmillan.
- Wood, J. (2008). *Report of the Special Commission of Inquiry into Child Protection Services in NSW*. Retrieved December 11, 2008, from <http://www.lawlink.nsw.gov.au/cpsinquiry>

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