

ARTÍCULOS CIENTÍFICOS

# A pilot study on compassion fatigue and hazards among practitioners in public child welfare and juvenile justice systems in Chile and the United States

Um estudo piloto sobre fadiga de compaixão e riscos entre profissionais de sistemas públicos de bem-estar infantil e justiça juvenil no Chile e nos Estados Unidos

Un estudio piloto sobre la fatiga por compasión y los peligros entre los profesionales en los sistemas públicos de bienestar infantil y justicia juvenil en Chile y los Estados Unidos

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## Abstract

The pilot study measures compassion fatigue experienced by social workers in the United States and Chile who work in public child welfare and juvenile justice systems. While public child welfare systems differ in legislative and organizational structures in these two countries, the study uncovers what types of compassion fatigue participants experienced and what they saw as supports and organizational practices that increase or decrease levels of compassion fatigue. Qualtrics survey

tools were used to deliver an online survey to potential participants in both countries with two instruments: the Professional Quality of Life Scale V version and the Mindful Attention Awareness Scale. The survey also asked open-ended questions for participants to identify supports received from their work sites that address compassion fatigue and challenges in their work environments. Workers in both countries have similar challenges and needs related to addressing compassion fatigue and hazards. The overall compassion fatigue reported by participants in both countries was relatively high and not directly linked to the perceived level of organizational supports in their work settings. One area of difference is that participants in the U.S. experienced significantly more compassion satisfaction than did the participants from Chile. There also was a significant difference in the responses from participants in Chile related to experiencing more secondary traumatic stress than U.S. participants. This study is the first step in working to determine best practices when addressing compassion fatigue and the hazards of working in high demand public child-serving systems. Further research is necessary to further study compassion fatigue among social workers in child welfare systems in both countries.

**Keywords:** *Compassion fatigue, burnout, hazard, social workers, child services, child welfare.*

### Resumen

El estudio piloto mide la fatiga por compasión experimentada por los profesionales en los Estados Unidos y Chile que trabajan en los sistemas públicos de bienestar infantil y justicia juvenil. Si bien los sistemas públicos de bienestar infantil difieren en las estructuras legislativas y organizativas en estos dos países, el estudio revela qué tipos de fatiga por compasión experimentaron los participantes y qué vieron como apoyos y prácticas organizativas que aumentan o disminuyen los niveles de fatiga por compasión. Las herramientas de encuesta de Qualtrics se utilizaron para entregar una encuesta en línea a los posibles participantes en ambos países con dos instrumentos: la versión V de la escala de calidad de vida profesional y la escala de conciencia de atención plena. La encuesta también hizo preguntas abiertas para que los participantes identificaran los apoyos recibidos de sus lugares de trabajo que abordan la fatiga por compasión y los desafíos en sus entornos laborales. Los trabajadores de ambos países tienen desafíos y necesidades similares relacionados con el abordaje de la fatiga y los peligros de la compasión. La fatiga general por compasión informada por los participantes en ambos países fue relativamente alta y no estuvo directamente relacionada con el nivel percibido de apoyo organizacional en sus entornos laborales. Un área de diferencia es que los participantes en los EE. UU. experimentaron significativamente más satisfacción por la compasión que los participantes de Chile. También hubo una diferencia significativa en las respuestas de los participantes en Chile relacionadas con experimentar más estrés traumático secundario que los participantes de EE. UU. Este estudio es el primer paso para trabajar para determinar las mejores prácticas al abordar la fatiga por compasión y los peligros de trabajar en sistemas públicos de atención infantil de alta demanda. Se necesitan más investigaciones para estudiar más a fondo la fatiga por compasión entre los trabajadores sociales en los sistemas de bienestar infantil en ambos países.

**Palabras clave:** *fatiga por compasión, agotamiento, riesgos, trabajadores sociales, servicios bienestar infantojuvenil.*

### Resumo

O estudo piloto mede a fadiga da compaixão experimentada por profissionais nos Estados Unidos e no Chile que trabalham em sistemas públicos de bem-estar infantil e justiça juvenil. Enquanto os sistemas públicos de bem-estar infantil diferem nas estruturas legislativas e organizacionais nesses dois países, o estudo revela quais tipos de fadiga da compaixão os participantes experimentaram e o que eles viram como apoios e práticas organizacionais que aumentam ou diminuem os níveis de fadiga da compaixão. As ferramentas de pesquisa Qualtrics foram usadas para entregar uma pesquisa online a potenciais participantes em ambos os países com dois instrumentos: a versão da Escala de Qualidade de Vida Profissional V e a Escala de Conscientização de Atenção Consciente. A pesquisa também fez perguntas abertas aos participantes para identificar os apoios recebidos de seus locais de trabalho que abordam a fadiga da compaixão e os desafios em seus ambientes de trabalho. Trabalhadores em ambos os países têm desafios e necessidades semelhantes relacionados ao tratamento da fadiga e dos perigos da compaixão. A fadiga geral da compaixão relatada pelos

participantes em ambos os países foi relativamente alta e não está diretamente ligada ao nível percebido de suporte organizacional em seus ambientes de trabalho. Uma área de diferença é que os participantes nos EUA experimentaram significativamente mais satisfação de compaixão do que os participantes do Chile. Também houve uma diferença significativa nas respostas dos participantes no Chile relacionadas a experimentar mais estresse traumático secundário do que os participantes dos Estados Unidos. Este estudo é a primeira etapa no trabalho para determinar as melhores práticas ao abordar a fadiga da compaixão e os perigos de trabalhar em sistemas públicos de atendimento à criança de alta demanda. Mais pesquisas são necessárias para estudar mais a fadiga da compaixão entre assistentes sociais em sistemas de bem-estar infantil em ambos os países.

**Palavras-chave:** *Fadiga da compaixão, burnout, riesgo, asistentes sociales, servicios infantiles, bem-estar infantil.*

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## Introduction

### Background

Social work students and professionals are taught to use empathy as a tool to engage with clients who are emotionally disturbed and traumatized (Wagaman, Geiger, Shockley & Segal, 2015; Mullins, 2011). However, there has been a lack of adequate coaching regarding coping methods for inherent hazards resulting from social workers' practice of empathy (Courtois, 2002; Dunkley & Whelan, 2006; Figley, 2015; Nelson-Gardell & Harris, 2003; Rothschild & Rand, 2006; Salloum, Kondrat, Johnco, & Olson, 2015). These hazards may lead to conditions of compassion fatigue, which is also known as secondary traumatic stress or vicarious traumatization, and professional burnout (Figley, 2015; Maslach & Leiter, 2016).

In recent decades, many studies from western countries have indicated both internal and external variables that put practitioners at risk of exposures to vicarious trauma. Geoffrion, Morselli, and Guay (2015) found that the worker's subjective perspective and coping mechanisms when addressing work-related stressors, and over-all psychological well-being - affects social workers' reactions to situations that lead to compassion fatigue. In Spain, a cross-sectional study conducted by Sánchez-Moreno et al. (2014), shows a positive correlation between psychological distress and burnout in social workers and a negative correlation between informal social support and distress. Another study conducted in Spain by Jenaro et al. (2007) showed high job and salary satisfaction along with effective coping methods are essential for social work practitioners' sense of personal accomplishment.

On an individual level, personal experience, cultural background, age, and perception of organizational conditions contribute to professional hazards (Boyas, Wind & Kang, 2012; Dick, 2000; Lérias & Byre 2003; Dunkley & Whelan, 2006; Gardell & Harris, 2003; Newell & MacNeil, 2010). It is documented that the emotional challenges social work practitioners experience in their jobs - places heavy levels of stress on them (Bride, 2007). On an organizational level, high caseloads, a lack of peer support, opportunities for promotions, ambiguous role definition, and autonomy lead to worker burnouts (Barak, Nissly, & Levin, 2001; Craig & Sprang 2010; Font, 2012; Maslach & Leiter, 2016; Lloyd et al., 2002; Strolin-Goltzman, 2010). The Organizational Social Context (OSC) assessment used in child welfare and juvenile justice settings shows a positive association of workers' "job satisfaction and organizational commitment," "high engagement, and functionality" with the organizational culture and climate profile (Glisson et al., 2012, p. 622).

The severe emotional and physical effects of compassion fatigue and burnout on social work practitioners are reflected in high turnover rates in child welfare professions (Barak et al., 2001). Moreover, a high level of staff turnover rate causes soaring financial costs in agencies (Graef & Hill, 2000). A growing recognition is emerging in the profession that highlights the importance of self care practices to assist social work practitioners in coping with job stress as well as the need for more research to explore how compassion fatigue impacts the workers and the organizations- (Rothschild & Rand, 2006; Salloum, et al., 2015; Sprang, Craig & Clark, 2011; Van Hook & Rothenberg, 2009).

### ***Compassion fatigue and hazards***

Compassion fatigue has been identified as a condition that distresses professionals whose work serves individuals who have experienced trauma (Figley, 2015). In this pilot study, compassion fatigue, which is an alternative term for vicarious trauma and secondary trauma, indicates “work-related, secondary exposure to extremely stressful events [...] that have occurred to others” (Stamm, 2005, p. 5). Compassion satisfaction refers to the fulfilling feelings received after helping individuals who are traumatized and “being able to do one’s work well” (Stamm, 2005, p. 5). It is the positive emotion associated with an affirmation of the significance and value of the practitioners’ work (Figley, 2015). Studies have shown the negative correlation between compassion fatigue and compassion satisfaction (Conrad & Kellar-Guenther, 2006; Figley, 2015; Van Hook & Rothenberg, 2009).

In this study, the word hazard is used interchangeably with burnout, which is “a syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment that can occur among individuals who do ‘people work’ of some kind” (Maslach, 1982, p.3). Burnout can potentially be harmful to professionals (McCormack, MacIntyre, O’Shea, Herring & Campbell, 2018). As Salloum et al. (2015) summarize, it impairs practitioners’ decision making ability of child risk, reduces job satisfaction (Ogresta, Rusac, & Zorec, 2008.), increases their absenteeism, and escalates turnover rate (Cahalane & Sites, 2008; Barak et al., 2001; Strolin-Goltzman, 2010; Zlotnik et al., 2005).

### **Purpose of the study**

While the nature of the social work profession demands social workers to actively listen and empathize with clients (Wagaman, et al., 2015; Mullins, 2011), research indicates that social workers whose work involves direct practice are more likely to experience compassion fatigue (Bride, Jones & Macmaster, 2007; Slattery & Goodman, 2009; Cuartero & Campos-Vidal, 2018).

The literature on compassion fatigue and its impact on both individual and organizational levels raise concerns for social work practitioners around the world. However, there is a lack of research conducted in cross-cultural settings. Hence, it is not clear whether different cultural contexts would lead to varying levels of resilience and social worker well-being. Then this pilot study focuses on exploring

how social workers in Chile and in the United States address, experience, and cope with compassion fatigue when working in public child welfare and child mental health settings. In both countries, child-serving organizations report a high turnover rate of social workers, and burnout or compassion fatigue is often identified as one of the reasons for this high turnover rate (Meyers & Cornelli, 2002; Barria, 2002).

The primary purpose of this pilot study is to measure the compassion fatigue experienced by workers in both countries and to learn about the current organizational practices in place at these locations to assist workers who experience compassion fatigue. The pilot study explores if compassion fatigue is experienced in similar ways by social workers in Chile and the U.S. even though the organizational practices are different. Moreover this research identifies what actions are implemented by organizations and individuals to address this issue.

### ***The Chilean context***

In Chile, the state regulates child welfare by the National Service of Minors (Sename). This state/government organization offers guidelines to private and public agencies to work with children, their families, and juvenile offenders. The guidelines define the caseload and the role of the professionals. Chile is a sovereign state that is represented by one centralized government. Its administration gives unified guidelines about Child protection policies to the entire country. In 2005, the National Congress passed the Law 20,032, which regulates the care system for childhood and adolescence through the Sename partnership network and subsidy regime. The new subsidy regime calls for private and non-profit organizations to apply for state grant funds to finance programs to assist vulnerable children and adolescents. Sename is also responsible to generating the technical guidelines and standards of care for children and adolescents. Once the non-profit organization has received funding and Sename’s approval to operate, Sename regularly monitors the organizations to verify their accomplishments with the required standards. Sename’s mission is to guarantee the welfare of the children. It is important to note that the system is not family-oriented but child-oriented. In January 2021, it was passed the Law 21,302, which creates a new service that will be in charge of the child welfare, and Sename is responsible only for juvenile offenders. Nevertheless, this law has not been implemented yet.

Unfortunately, the fulfillment of Sename's mission has been sharply criticized in recent years, due to the public abuses and complaints suffered by children in social welfare programs (Jeldres & Bascañan, 2013; Report of the Commission on Family from House of Representatives, 2013). Not only do children suffer through abuses, social workers and the professional teams are also affected by a lack of resources to carry out tasks and organizational violence (Instituto Nacional de Derechos Humanos, 2017). Moreover, in Chile, the labor law defines that full-time workers must work 44 hours per week rather than 40 hours as in the U.S., and most Chilean social workers are hired for full-time jobs.

### **The U.S. context**

In the case of the United States, "Child Protective Services" (CPS) is the state agency that handles reports of child abuse or neglect. Laws that define abuse and neglect, reporting protocols, procedures, instructions, and penalties for child abusers vary from states to states, yet all state agencies receive guidance from Children's Bureau, the national agency (Petersen et al., 2014).

The Children's Bureau has partnerships with public child welfare departments and schools of social work (Scannapieco et al., 2012). Child welfare placements continue having the highest amount of social work students (CESW, 2016). According to the NASW Standards for Social Work Practice in Child Welfare from the National Association of Social Work (2013):

Although hiring requirements for social workers in child welfare vary across the country, the knowledge requirements considered fundamental to all social work practice, which are met by completion of BSW [Bachelors in Social Work] and MSW [Masters in Social Work] programs within colleges and universities and accredited by CSWE, much include knowledge about the history and development of social work, including child welfare (p. 13).

Although the purpose of child welfare agencies is to bring protections to the rights of children, media and public reviews in the United States have characterized child welfare systems as the sources of oppression (Burbank & Achen, 2015). Besides the regulations from governmental institutions, child welfare systems in the United States are also under constant examination from the American Civil Liberties Union

(ACLU). ACLU seeks to bring protection to children's rights. It continues carrying cases against child welfare agencies "all over the country on behalf of children who, due to neglect, lack of funding and broken systems, were left to languish indefinitely in institutions" (ACLU, 2018, para. 3).

In both Chile and the United States, the state or national organization set standards of care, but their implementations of these standards have been challenged due to the abuse of children noted within current organizational practices. Workers in both Chile and the U.S. receive limited training for working with these high-risk child or adolescent cases and little training on how to effectively work with parents/caregivers. In Chile, in Chile, the social work degree is developed in undergraduate and lasts 4 and a half to 5 years. Meanwhile, in the USA the career takes 3 years at the undergraduate level, and 2 years at graduate level.

### **Methodology**

This pilot study used an online survey methodology process to capture the perspectives of social work field instructors in Chile and the U.S. who worked in child welfare settings. The web-based survey was in Spanish or English and was anonymous, so once the participant opened the link, the individual is giving consent to participate in the pilot study. The research's design was one-shot, nonexperimental. The study was determined to be exempt by the University of Michigan Health Sciences and Behavioral Sciences Institute Review Board, HUM00107362. The anonymity and voluntariness of the participants was protected. The respondents signed an informed consent to answer the survey.

### **Sampling**

The participants in this evaluation survey study are voluntary and worked as social workers in the child welfare and juvenile justice systems in the countries. Participants were invited to participate in the anonymous survey through email. The list of potential participants was drawn from field instructors who are linked to a major university social work program in Santiago, Chile and from a large university social work program located in the State of Michigan. The field instructors in both countries supervise social work students in public child welfare, juvenile justice and child-serving systems. They carry supervi-

sion and direct service responsibilities with staff and families in their own organizations.

### Data collection

The initial list of potential participants was drawn from the active lists of field instructors from the two large universities who worked in these settings. Qualtrics survey tools were used to deliver the online survey to potential participants. Outreach by email to participants was initially done by email with an online link to the anonymous Qualtrics survey. Email reminders that invited participants to complete the survey were sent three days, one week, and 14 days after the initial email communication. The email (in the primary language of the participant) explained the purpose of the evaluation and invited their participation.

The web-based survey measured compassion fatigue experienced by the field instructors and their perceptions of organizational supports to address compassion fatigue in the workplace and recommendations for change. The pilot study used the Professional Quality of Life Scale (PROQOL) developed by Beth Stamm (2009-2012) and the Mindful Attention Awareness Scale (MAAS) developed by Ruth Baer to capture compassion fatigue. The instruments are in English and Spanish translation. The survey also asked open-ended questions about supports that participants identify at their work sites that help them to address compassion fatigue and challenges in their current work environments.

The online survey consisted of three measures and was given in Spanish to participants from Chile and in English to participants from the United States. The first measure was the Mindfulness Scale (MAAS). This scale is a unidimensional measure constructed from 15 items measuring the trait of consciousness (Brown & Ryan, 2003). MAAS shows strong psychometric properties with adequacy and validity, and it has been demonstrated as a reliable and valid scale for utilizing in general adult populations (Brown & Ryan, 2003). The MAAS measures participants' attention to events and their responsiveness to the experience. Each item has a scale ranging from 1 "almost always" to 6 "almost never" where higher total scores indicate a higher state of consciousness. Applying a confirmatory analysis by ACP, showing a structure of a dimension with a variance explained 53% (Eigenvalue = 7.99) and Cronbach alpha of 0.92, which implies high reliability of the resulting scale for the current sample.

The second measure was the Professional Quality of Life (ProQOL-V) scale (Stamm, 2010). The ProQOL-V is the most frequently used scale that measures both the positive and negative effect on helping professions such as social work. According to *The Concise ProQOL Manual* (Stamm, 2010), the scale has a good validity with more than 200 published papers. It is used in over 100,000 articles online, and about half of the 100 published research articles on compassion fatigue and associated topics used the ProQOL-V or its previous version. This measure captures worker compassion fatigue and satisfaction. The questionnaire included 30 questions that measured three primary constructs: compassion satisfaction, secondary traumatic stress, and burnout. Each item in the response categories ranged from 1 "never" to 5 "very often". After calculating the individual final score in each dimension, a simple sum of the responses is generated.

The final measure involved open-ended questions about supports that participants identify in their workplaces that can help them cope with compassion fatigue and challenges in the workplace related to organizational supports for assisting workers to cope on a day to day basis.

### Data analysis

The data collected from the first two measures were analyzed using descriptive statistical analysis procedures including t-tests of difference, using the software Statistical Package for the Social Sciences (SPSS) version 24. The open-ended questions were analyzed by looking at themes that emerged within each country and across countries. It was done in two different stages according to Creswell (2007)'s general guidelines. This process consisted of a thematic analysis of common themes across participants. The second stage consisted of content analysis, following Paillé (2006)'s recommendations. Two independent raters reviewed the qualitative data independently, discussed themes that emerged from the independent reviews, and confirmed themes.

## Results

### Demographics

A total of 115 online surveys were completed by social work field instructors who work in child welfare and juvenile justice systems in Chile and the United

States between December 2015 and January 2016. The response rate was over 70% for each country. Fifty of the participants who completed the survey were from Chile, and 65 were from the United States. Over 75% of the Chile respondents identified as female and 50 % had worked at the organization for over two years. The U.S. respondents were primarily female (85%), and 80% had worked at the organization for over two years.

### MAAS results

The analysis involved a comparison of the two measures (MAAS and ProQOL) by country of origin, which are summarized in Tables 1 and 2.

The mean response of the total sample in the MAAS scale is 4.18, with a standard deviation of less than one point from this value. There is no statistically significant difference from the average by country at the 95% confidence level on this measure. Both sets of participants reported rather high levels of mindfulness in their day to day work. The participants on average experience a high level of awareness/minfulness.

TABLE 1. MINDFULNESS SCALE (MASS).

Scales	Mean	S.D.	N	NS at 95% level
United States	4.12	.82	61	
Chile	4.24	1.12	50	

### ProQOL-V results

When examining compassion fatigue using the Professional Quality of Life Scale (ProQOL), the results between countries differ based on the dimensions measured. The mean score for the Compassion Satisfaction Scale, the Secondary Traumatic Stress Sub Scale and the Burnout Sub Scale was average for participants from the United States and Chile, which indicates that on average respondents derive a moderate level of satisfaction for their work, experience moderate levels of traumatic stress from the job, and have some level of burnout. Statistically significant differences at the  $p < .001$  level between respondents from Chile and the U.S. emerged on the Compassion Satisfaction Sub Scale and the Secondary Traumatic Stress Sub Scale. Respondents in the U.S. experienced more compassion satisfaction than did the participants from Chile but both were in the average range for this scale. Respondents in Chile experienced more secondary traumatic stress

than did participants from the U.S. This finding while significant reflects that participants from Chile were in the average range, but the U.S. participants were closer to the low-stress range than the Chile participants. The following table presents ProQOL's three subscales, and compares both countries' results (Table 2).

TABLE 2. PROFESSIONAL QUALITY OF LIFE SCALE (PROQOL-V).

Scale	Mean	S.D.	N
<b>USA</b>			
Compassion Satisfaction Sub Scale	40.56	5.18	64
Secondary Traumatic Stress Sub Scale	22.45	5.1	62
Burnout Sub Scale	22.03	5.19	61
<b>Chile</b>			
Compassion Satisfaction Sub Scale	35.6	4.6	47
Secondary Traumatic Stress Sub Scale	26.87	4.21	46
Burnout Sub Scale	23.53	4.96	47

When examining turn-over rates, respondents were asked if they view their organization as having a high turnover rate defined as workers leaving positions within a couple of years of employment at the organization. There was a statistically significant difference at the  $p < .001$  level between the countries. The respondents from the United States (27%) reported that the organization experiences a high turnover rate and another 43% indicated that maybe the organization has a high turnover rate. The respondents from Chile (64%) reported a high rate of turnover, and 28% indicated that the organization may have a high rate of turnover.

### The Impact of organizational support

In the review of the qualitative data, several themes emerged that capture the contextual elements that may contribute to this difference. The respondents from the U.S. identified more organizational supports than did the respondents from Chile. When they are asked to identify current organizational supports, both countries have participants remarked flexible schedules, good pay, supervision supports, training, and some level of self-care supports in their agencies. Besides, the U.S. participants reported relational supports with colleagues, reduced workload options,

healthy boundaries, and education on burnout or fatigue. Despite of these positive organizational supports, the challenges experienced by respondents in both countries is the lack of organization support addressed by heavy workload, inadequate peer supports, and low pay rates for the amount of time spent at the job. The participants from Chile also reported poor working conditions, policy issues that interfered with the work, and difficulty staying healthy.

### **Impact from self-care**

While respondents in both countries indicated that there are some organizational supports for self-care, they also shared that finding a balance between personal and professional life was difficult. The participants from the U.S. recommended that more attention by organizations need to be given to reducing caseloads, raising salaries, more flexibility in working hours, more professional training, and stronger support systems. The respondents from Chile identified these same recommendations as the U.S. respondents but also wanted more time off, more team building, and a better overall work environment. These findings are consistent with the literature reviewed.

## **Discussion**

### **Summary of the results**

Social workers in both countries, who work in child welfare and juvenile crime, are facing emotional stress, including moderate compassion fatigue and burnout. However, statistical significant differences between respondents from Chile and the U.S. emerged on the Compassion Satisfaction Sub Scale and the Secondary Traumatic Stress Sub Scale. Chilean practitioners showed lower levels of compassion on Compassion Satisfaction than U.S. workers, and the highest levels on Secondary Traumatic Stress when compared to the U.S. respondents. This last finding implies that Chilean practitioners may have been exposed more to stressful events in their work with vulnerable children, adolescents and their families than the U.S. respondents.

This pilot study captures some of the differences that exist in the ways that organizations in both countries support workers and how workers from each country experience compassion fatigue and burnout. These findings are consistent with previous

studies in the United States (Barak et al., 2001; Font, 2012; Maslach & Leiter, 2016; Strolin-Goltzman, 2010). While the sample was focused on social workers who have direct practice responsibilities, the findings are helpful to understanding compassion fatigue and hazards experienced by general social work practitioners who work in Child Welfare Settings and Juvenile Justice.

The pilot study findings highlight that organizational supports can make a difference in how workers experience compassion fatigue and hazards. With high levels of turnover in the workforce in Chile, this study raises questions about types of organizational supports social work practitioners might need to have in place to support workers better in their day-to-day jobs. This pilot study respondents in both countries suggest peer supports, reducing caseload sizes, and helping workers to maintain a better personal and professional life balance would improve their job satisfaction and help them in coping with fatigue. These are areas to explore further. While the policies in both countries differ, this pilot study results reveal that social workers, in both Chile and the U.S., experience compassion fatigue and hazards. The respondents highlighted the lack of organizational supports to social workers in both countries.

### **Limitation of the study**

With 50 participants from Chile and 65 participants from the U.S., this study is limited by the sample size and the number of organizations participating. A logical next step will involve examining the larger and more diverse populations of the general workforce in both countries using a similar survey and key informant interviews. Furthermore, additional studies need to address education and support for social workers across settings and countries. The universal experience of compassion fatigue and hazards raises awareness of the need for preparing social workers for these challenges.

### **Implications for Social Work Practice**

While this was a pilot study, the examination of compassion fatigue experienced by social workers in Chile and the U.S. illustrates common issues that surface when working in high demand settings as it relates to compassion fatigue and hazards in different countries. It also shows that sufficient organizational supports, development of worker protection policies,



and adequate professional training may reduce the physical and mental stress on these social work practitioners.

As literature points out a high turnover rate of social work practitioners in child protection and juvenile justice adversely affects the work environment and this high turnover affects development for children and youth who receive services (Strolin, McCarthy & Caringi, 2006; Strolin-Goltzman, 2010; Surji, 2013). While the pilot study was not a representative sample, the concerns raised by these social work professionals reinforce earlier studies of compassion fatigue. Development of organizational policies that address the issue of compassion fatigue emerges as a critical need. Currently, the Chilean public policies that regulate social programs for vulnerable families does not address the need to prevent social workers' compassion fatigue. As noted by the participants, some suggested that providing more organizational self-care workshops and reducing weekly work hours to 40 hours could help with these challenges.

Finally, the pilot study calls for more studies on compassion fatigue in social work education programs to better support social work students at both undergraduate and graduate levels. Social work educational programs may offer engaged learning opportunities such as simulations, case studies, and online modules to address strategies to handle feelings of compassion fatigue and hazards.

## Conclusion

This pilot study highlights how when working in public child welfare systems in the U.S. or Chile, social workers experience similar levels of compassion fatigue. While the sample was limited, the questions raised by this study require one to examine how social workers can be better supported in these high-stress jobs. While the U.S. participants indicated more organizational supports than did the participants from Chile, these supports did not seem adequate to meet the needs of the social workers. These findings encourage further research that would allow social workers to improve organization settings. Also, our findings should urge graduate and undergraduate schools to develop curricula that promote burnout and compassion fatigue prevention. Social work education needs to address in the core curriculum compassion fatigue and explore

ways to increase coping mechanisms when compassion fatigue emerges.

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