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Addressing Work-related Traumatic Stress

NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES

Several workforce challenges were discussed as opportunities for intervention during the needs assessment process conducted in partnership with the Nebraska Department of Children and Family Services' (DCFS) to address child welfare workforce turnover. Through a series of steps and causal links, a [theory of change](#) provides a roadmap to address the [root causes](#) of an identified workforce problem and describes how and why changes are expected to lead to the desired outcomes. Ultimately, two theories of change were developed to step through the “if, then” logic:

1. building resiliency skills within child welfare workers and supervisors; and
2. implementing a debriefing protocol focused on supporting the workforce after a traumatic event.

Together, these theories of change informed the selection of Nebraska's intervention to address work-related traumatic stress: [CFS Strong](#).

The theory of change development process was informed by Human Resources data, input from the Nebraska Workforce Project [implementation team](#), and relevant research on connections between the identified outcomes. Overall, it was anticipated that by addressing secondary traumatic stress (STS) as an occupational hazard for the child welfare workforce, this would bring forth a series of outcomes, ultimately culminating in improved job satisfaction, enhanced perceptions of organizational support, and an improved ability to manage traumatic stress within the workforce. In turn, these outcomes were anticipated to improve retention.

The following image depicts the theory of change beginning with a problem statement followed by a series of steps that lay out the logic on how that problem will be addressed.

There is no agency-wide protocol or practice for staff to address STS after a traumatic event or build skills for the ongoing mitigation of work-related traumatic stress.

Workers and supervisors engage in an STS intervention

SO THAT

The workforce is provided consistent opportunities to identify, communicate, and process their stress reactions.

SO THAT

1) Stress reactions are validated and normalized, and
2) the workforce feels better supported by DCFS and leadership

SO THAT

The workforce has an enhanced ability to deal with trauma inherent to child welfare work

SO THAT

The workforce is 1) less susceptible to the negative consequences of trauma and 2) perceives enhanced organizational commitment to addressing STS as an occupational hazard

SO THAT

Job satisfaction is improved and traumatic stress is better managed at the individual and agency level

Retention is improved