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# Burnout and secondary trauma among forensic interviewers

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### Abstract

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Child Advocacy Centers provide a child-friendly environment for the forensic interview and subsequent investigation of child victimization cases. However, very little research has examined the effects of burnout, secondary trauma and organizational stressors on forensic interviewers. The present study examined the following research questions. To what extent do forensic interviewers experience burnout and secondary trauma associated with their profession? How do organizational stressors increase these outcomes among interviewers? Data were collected by conducting an online survey of interviewers working at Child Advocacy Centers across the United States. Results indicate burnout and secondary trauma among interviewers in this sample. Decreased job support, increased funding constraints and heavy agency caseloads all result in burnout and secondary trauma. Policy recommendations include continued training and mental health services for interviewers. Future researchers should conduct qualitative interviews and examine how other factors, such as forensic interviewing protocols, influence interviewers' job experience and mental health.

#### KEYWORDS

burnout, child abuse, forensic interviewers, mental health, secondary trauma

# 1 | INTRODUCTION

Every year, approximately 311,000 children undergo forensic interviews at Child Advocacy Centers (CACs) across the United States (National Children's Alliance, 2014). The forensic interview is an unbiased, structured interview to uncover potential abuse, as part of a criminal investigation. During the forensic interview, the child often reveals a deeply held secret that she/he has been physically, sexually or emotionally abused. Although the forensic interviewing process is designed to avoid revictimization, only a small body of research has examined the effect of these interviews on forensic interviewers (Bonach & Heckert, 2012; Brady, Fansher, & Zedaker, 2019; Fansher, Zedaker, & Brady, 2019; Letson et al., 2019; McDonald, Middleton, Bassett, & Harris, 2017; Perron & Hiltz, 2006).

Although a limited body of research, previous scholars find that forensic interviewers experience an increased risk of secondary trauma (ST) and burnout related to their repeated exposure to cases of child maltreatment (Bonach & Heckert, 2012; Brady et al., 2019; Fansher et al., 2019; McDonald et al., 2017; Perron & Hiltz, 2006). The current study expands on this by directly examining the influence of job support, funding constraints, agency caseloads and the number of conducted forensic interviews on burnout and ST among forensic interviewers. Additionally, the present study adds to the body of literature by using validated and reliable measures of burnout and ST (Bride, Robinson, Yegidis, & Figley, 2004; Demerouti, Mostert, & Bakker, 2010). The use of validated measures is an improvement over previous research, which has primarily utilized the Professional Quality of Life Scale (Brady et al., 2019; Fansher et al., 2019; Letson et al., 2019). As reported in a meta-analysis, the Professional Quality of Life Scale is problematic due to the lack of emphasis on exhaustion symptoms, which are common among forensic interviewers (Cieslak et al., 2014). By better examining the potential causes of burnout and ST, researchers can help ensure that children receive highquality services.

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## 2 | BURNOUT

Burnout refers to the psychological condition caused by a demanding job with a lack of access to resources (Maslach, Schaufeli, & Leiter, 2001). Researchers often operationalize burnout as exhaustion and disengagement (Perron & Hiltz, 2006). Exhaustion is the physical or cognitive strain resulting from prolonged exposure to stress at work, whereas disengagement is distancing oneself from work (Demerouti et al., 2010). Specifically, burnout is likely problematic due to heavy caseloads, often resulting in the need to conduct several interviews in a single day (Fansher et al., 2019). Compoundingly, interviewers may experience a lack of job support from administrators that do not understand the need for continued professional training and mental health services (Fansher et al., 2019). This may create feelings of exhaustion and disengagement commonly associated with burnout (Fansher et al., 2019). Unfortunately, burnout across these two dimensions is linked to depression, anxiety (Siebert, 2004) and even physical complaints (Kim, Ji, & Kao, 2011). Furthermore, increased levels of burnout are associated with high job turnover rates, especially among those in human services (Kim et al., 2011). The literature examining burnout among forensic interviewers is relatively small (Fansher et al., 2019: Letson et al., 2019: Perron & Hiltz, 2006).

Perron and Hiltz (2006) conducted surveys with forensic interviewers working at CACs. They found that burnout measured with the Oldenburg Burnout Inventory was common among interviewers. Although organizational satisfaction was inversely correlated with burnout, neither the number of conducted interviews nor the length of employment affected burnout (Perron & Hiltz, 2006). Fansher et al. (2019) also found high levels of burnout among interviewers. Although there is a lack of evidence directly examining forensic interviewers, burnout is common among correctional officers (Dowden & Tellier, 2004), police officers (Burke, 2016; Griffin & Sun, 2018) and parole/probation officers (Gayman & Bradley, 2013; Lewis, Lewis, & Garby, 2013). However, more research is needed to understand other predictors of burnout, including the effect of job support, funding constraints and heavy caseloads.

#### 3 | SECONDARY TRAUMA

The term secondary trauma refers to the trauma experienced by those in continued and prolonged direct contact with survivors of abuse or trauma (Bride, Jones, & Macmaster, 2007). The symptoms are similar to post-traumatic stress disorder (PTSD), a mental health disorder that may occur as a result of primary trauma (Bride et al., 2007). As such, the adverse effects associated with ST are nearly indistinguishable from exposure to primary trauma (Salloum, Kondrat, Johnco, & Olson, 2015). ST can lead to psychological distress, avoidance behaviours and in severe cases, PTSD (Bride et al., 2004). Furthermore, exposure to ST may have worse outcomes for those dealing with child abuse cases (Bride, 2007; Patterson, 2009). As forensic interviewers are continuously exposed to children disclosing details of graphic abuse, they may easily develop these symptoms of ST or even PTSD (Bonach & Heckert, 2012). The body of research examining ST among forensic interviewers is also limited (Bonach & Heckert, 2012; Brady et al., 2019; Letson et al., 2019; Sprang, Craig, & Clark, 2011).

Bonach and Heckert (2012) utilized the Secondary Traumatic Stress Scale (STSS) to conduct an online survey with forensic interviewers working at CACs in the United States. Specifically, they found that job support was the most important predictor of ST. Others found that although ST was a problem, neither the number of conducted interviews nor the years of experience affected this outcome (Perron & Hiltz, 2006). However, these scholars did not measure agency caseload or funding constraints as potential predictors of ST (Bonach & Heckert, 2012: Perron & Hiltz, 2006).

Researchers find support for ST among social workers, child protective services workers, child welfare workers and child exploitation investigators (Brady, 2017; Bride, 2007; Patterson, 2009; Salloum et al., 2015; Tavormina & Clossey, 2017). Bride (2007), using the STSS, surveyed social workers directly exposed to the traumatic victimization of children at work. Approximately 70.2% of the sample self-reported at least one symptom of ST in the previous week, and 15.2% met the diagnostic criteria for PTSD (Bride, 2007). Relatedly, Salloum et al. (2015) examined 104 child welfare workers and found that almost one-third (28.8%) reported high levels of ST. Although these studies did not directly focus on forensic interviewers, the results suggest that similar ST levels may occur among this population. Also, several scholars have linked years of experience with ST.

Specifically, lower levels of ST have been associated with more experienced social workers, child protective services workers and child welfare workers (Dagan, Ben-Porat, & Itzhaky, 2016; Sprang, Clark, & Whitt-Woosley, 2007). In one study, Dagan et al. (2016) surveyed child protective services workers and found that years of experience were negatively correlated with ST. The researchers hypothesized that child services workers with more experience had developed better coping skills (Dagan et al., 2016).

# 4 | ORGANIZATIONAL STRESSORS

Increased external job support may help forensic interviewers process the continuous exposure to trauma victims, reducing the effects of ST (Bonach & Heckert, 2012). Job support may improve the quality of services provided to victims by reducing ST (Bonach & Heckert, 2012; Fansher et al., 2019). Furthermore, some find support for organizational stressors affecting other professionals; external job support is related to a lower risk of burnout and ST in child protective services workers (Bride et al., 2007; Hamama, 2012), correctional officers (Lambert, Hogan, Barton-Bellessa, & Jiang, 2012; Lambert & Paoline, 2008) and police officers (Thompson, Kirk, & Brown, 2005). Likewise, funding constraints increase the risk of ST among child protective services workers (Tavormina & Clossey, 2017) and burnout among probation/parole officers (Gayman & Bradley, 2013; Slate, Johnson, & Wells, 2000). Finally, heavy agency caseloads increase the rates of burnout and ST among child protective services workers

(Bride et al., 2007), correctional officers (Dowden & Tellier, 2004) and probation/parole officers (Lewis et al., 2013). Regarding organizational factors, the most consistent predictor in reducing burnout and ST among members of the criminal justice system is job support from family, friends, colleagues and supervisors (Bride et al., 2007; Hamama, 2012; Lambert et al., 2012; Lambert & Paoline, 2008). Whether these factors can predict burnout and ST among forensic interviewers is unknown.

# 5 | CURRENT STUDY

The current study examined the impact of burnout, ST and organizational stressors on a sample of forensic interviewers working at CACs in the United States. We assessed the relationship between job support, funding constraints, agency caseloads and the number of conducted forensic interviews on burnout and ST among forensic interviewers. The forensic interviewing process may have detrimental effects on the mental health of interviewers. In a recent study comparing police officers and social workers that investigate cases of child sexual abuse, social workers were more likely to report a feeling of discomfort, including "empathy with the child's plight/condition" (Cheung & Boutte-Queen, 2000). Among forensic interviewers, these feelings may lead to increased burnout and ST, resulting in poor interview practices, which may lead to high levels of internal inconsistencies during the forensic interview (Orbach & Lamb, 2001). Therefore, research examining the mental health of forensic interviewers is vital for both the interviewer and the subsequent criminal investigation.

Also, from a policy perspective understanding, the cause of burnout among forensic interviewers can help reduce the high turnover rate in this profession (Bonach & Heckert, 2012). This research also suggests practical solutions for the issues associated with burnout and ST. Finally, there are implications for the children served at CACs. Addressing the leading causes of burnout and ST among forensic interviewers helps to ensure that child victims receive high-quality care.

The following research questions were addressed. How is job support from family, friends, colleagues and supervisors related to burnout and ST among a sample of forensic interviewers? Do agency caseloads and funding constraints increase the risk of burnout and ST among forensic interviewers?

- **Hypothesis 1.** A higher number of conducted forensic interviews per month, a lower perception of job support, funding constraints and agency caseloads will increase both the prevalence and severity of burnout.
- **Hypothesis 2.** A higher number of conducted forensic interviews per month, a lower perception of job support, funding constraints and agency caseloads will increase the prevalence and severity of ST.

# 6 | DATA AND METHODS

#### 6.1 | Participants

After excluding respondents that spent zero percent of their time conducting forensic interviews, the final sample contained 157 forensic interviewers working at CACs (see Table 1 for sample descriptives). The majority of respondents identified as female (95%) and White (87%). On average, interviewers were 40 years old (SD = 12.21). The sample was drawn from 41 different states. Specifically, most respondents resided in a rural area "small city or town" (46%), urban area "major city with a large population" (29%), suburban area "residential area connected to a large city" (22%) or another area (3%).

#### 6.2 | Survey instrument/procedure

The survey included previously validated and reliable measures of burnout, ST and job support (Bonach & Heckert, 2012; Bride et al., 2004; Demerouti et al., 2010; Horwitz, 2006). The survey contained a total of 71 questions. Interviewers filled out a survey via Qualtrics. First, the original survey instrument was piloted with multiple forensic interviewers from a single CAC. Second, the survey instrument was sent to forensic interviewers through the employment and professional connections of the research team. Third, the researchers performed an internet search for CACs in the United States and subsequently sent recruitment emails to listed forensic interviewers in all 50 states. This process resulted in a response rate of approximately 24.5%.1 The survey was self-administered. Respondents were instructed to answer honestly and told to skip any uncomfortable questions.

#### 6.3 | Dependent variables

#### 6.3.1 | Burnout

The most commonly used instrument for measuring burnout is the general Maslach Burnout Inventory, which includes three dimensions emotional exhaustion, depersonalization and reduced personal accomplishment. However, the Maslach Burnout Inventory is a general measurement scale, and the questions are not as applicable to forensic interviewers. Therefore, burnout in the current study is operationalized with the Oldenburg Burnout Inventory, a 16-item scale that measures burnout across two main dimensions: exhaustion and disengagement (Demerouti et al., 2010). Specifically, eight items measured exhaustion, and eight items measured disengagement. In the current study, this scale was very reliable (overall  $\alpha = 0.87$ , exhaustion  $\alpha = 0.82$  and disengagement  $\alpha = 0.72$ ). Because the scale contains both positively and negatively phrased questions, a total of eight items were reverse coded to ensure that a larger score indicated a higher level of burnout. Each subscale was averaged to develop a

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TABLE 1	Forensic interviewer and Child Advocacy Center
descriptive s	tatistics

	N	Mean or percentage	SD	Range
Age of interviewer	126	40	12.21	23-76
Years of experience	126	6	5.20	0-28
Years at current CAC	126	5	6.00	0-29
Female	123	95%		
Hispanic	16	13%		
Non-Hispanic	110	87%		
Race	127			
White	111	87%		
Black or African American	2	2%		
Asian	2	2%		
American Indian or Alaska Native	1	1%		
Other	11	8%		
Education	129			
Graduate degree	73	57%		
Bachelor's degree	49	38%		
Associate degree	3	2%		
Some college	4	3%		
Age of children most frequently interviewed				
2-5	74	47%		
6-8	109	69%		
9-11	113	71%		
12-14	98	62%		
15-18	65	41%		
Position				
Forensic interviewer	117	74%		
Programme coordinator	22	14%		
Family/child advocate	19	12%		
Executive director	16	10%		
Mental health professional	15	9%		
Law enforcement	3	1%		
Location	129			
Rural	59	46%		
Urban	37	29%		
Suburban	29	22%		
Other	4	3%		
Organization	129			
Nonprofit	116	90%		
Prosecution	5	4%		
Hospital	3	2%		
Law enforcement and other	5	4%		

Abbreviation: CAC, Child Advocacy Center.

score for both exhaustion and disengagement. The two subscales were then averaged to create an overall measure of burnout.

#### 6.3.2 | Secondary trauma

In the current study, ST was operationalized using the STSS (Bonach & Heckert, 2012; Bride, 2007; Bride et al., 2007; Perron & Hiltz, 2006). The scale includes 17 questions which asked respondents to, "Read each statement then indicate how frequently the statement was true for you in the past month by selecting the corresponding number next to the statement from (1) Never, (2) Rarely, (3) Occasionally, (4) Often, (5) Very Often" (Bride et al., 2004). The current study inquired about symptoms in the past month, assuming that some forensic interviewers may not conduct interviews weekly (Bonach & Heckert, 2012). The scale measured ST based on three main symptoms: intrusion, avoidance and arousal (Bride et al., 2004). The overall measure of ST and each subscale was reliable in this study (overall  $\alpha$  = 0.91, intrusion  $\alpha$  = 0.74, avoidance  $\alpha$  = 0.81 and arousal  $\alpha$  = 0.82). Each subscale (intrusion, avoidance and arousal) was summed to create a total ST score. The STSS is also used to determine if participants meet the diagnostic criteria for PTSD (Bride, 2007). Specifically, an individual that scores a 3 or higher on at least one intrusion item, at least three items on the avoidance scale and at least two items on the arousal subscale meet the diagnostic criteria for PTSD (Bride, 2007).

#### 6.4 | Organizational factors

Organizational factors were conceptualized as four independent variables: job support, funding constraints, agency caseloads and the number of conducted forensic interviews per month. Job support was operationalized with a seven-item scale (Demerouti et al., 2010; Horwitz, 2006). Specifically, the scale measured job support from family, friends, supervisors and colleagues. The Cronbach's alpha value for this scale was high ( $\alpha$  = 0.81). However, the job support scale did not include measures of funding constraints or agency caseloads. Thus, two additional independent variables, funding constraints and agency caseloads were also included. The funding constraints variable was operationalized with the following item on the survey, "which of the following is a concern at your CAC? Check all that apply." The responses included having sufficient funding for advocacy and investigations, educational outreach programmes, community outreach programmes, employee salaries, medical exams and fundraising.

The third independent variable, agency caseloads, was operationalized as staffing relative to caseloads. For example, participants were asked, "which statement best describes your CAC?" The potential responses to this question included "my CAC has enough staff to handle the caseload" or "my CAC is severely understaffed." The number of conducted forensic interviews monthly was operationalized with an open-ended question on the survey instrument, recoded as 1 = 0-5 conducted interviews, 2 = 6-10 conducted

interviews, 3 = 11-16 conducted interviews and 4 = 17-25 conducted interviews.

#### 6.5 | Control variables

We controlled for several demographic variables such as race, age, educational level, state of residency, years of experience and years worked at the current CAC. Race was dichotomized into categories of White and non-White respondents. Age of the forensic interviewer was denoted in years and was normally distributed. The interviewer's educational level was operationalized dichotomously as either a graduate degree or less than a graduate degree. The forensic interviewer's state of residence was clustered in the regression model for data analysis. Clustering this variable allowed the researchers to adjust the standard error for forensic interviewers living in the same state. The researchers also individually controlled for overall experience working as a forensic interviewer and the years worked at the current CAC. For data analysis, both variables were log-transformed to approximate a normal distribution.

# 7 | ANALYTIC STRATEGY

The original dataset contained a sample of 163 forensic interviewers working at CACs in the United States. Those interviewers (n = 6) that reported spending zero percent of their time conducting forensic interviews were excluded. The results are based on forensic interviewers that spent at least 25% of their time conducting interviews. Most participants indicated their primary role as a forensic interviewer. Therefore, the final sample size was 157 respondents. Data analysis for this study was completed in three different stages.

First, bivariate correlations were calculated to examine the association between each independent variable (job support, funding constraints, agency caseloads, the number of conducted forensic interviews per month) and the two dependent variables. Second, ordinary least squares (OLS) regression models were utilized to predict burnout. Specifically, OLS regression models were selected because burnout was coded as a continuous scale. To predict burnout, a multistage approach was utilized, resulting in a set of five separate regression models. The final model predicted burnout using all four independent variables plus several control variables (age, race, educational level, state of residency, years of experience and years worked at the current CAC). Third, a multistage approach using OLS regression models were utilized to predict ST. The final regression model predicted ST using all four independent variables, plus the inclusion of control variables.

### 8 | RESULTS

The results indicate moderate levels of burnout (M = 2.09, SD = 0.39) and ST (M = 27, SD = 15.8) among respondents. See Table 2 for the

**TABLE 2** Mean, standard deviations, and alpha reliability estimates for scales

Scale	Ν	Mean	SD	Range	α
Burnout	129	2.09	0.39	1.25-3.31	0.87
Exhaustion	129	2.19	0.45	1.25-3.88	0.82
Disengagement	129	2	0.39	1.25-3.25	0.72
Secondary trauma	157	27	15.8	0-71	0.91
Intrusion	157	7.15	4.29	0-21	0.74
Avoidance	157	11.67	7.08	0-29	0.81
Arousal	157	8.17	5.10	0-21	0.82
Job support	129	3.53	0.39	2.71-4	0.81

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*Note.* Differences in sample size are due to missing values.

complete list of means, standard deviations and alpha reliability estimates for each scale. Approximately (18%) of respondents (n = 28) met the diagnostic criteria for PTSD. Another (11%) of interviewers (n = 18) met five of the six required diagnostic criteria for PTSD. The average participant conducted between two and three forensic interviews daily, between six and 10 interviews weekly and more than 20 interviews monthly (see Table 3 for a complete summary). The sample reported a high level of job support (M = 3.53, SD = 0.39). The vast majority of respondents (84%) reported at least one funding constraint, and more than one-third (36%) reported three or more constraints. Finally, less than half (48%) of the sample reported having enough staff to handle the caseload at their CAC. Bivariate correlations between each of the independent and dependent variables in this sample are presented in Table 4. Job support was significantly and negatively correlated with both burnout (r = -0.36, p < 0.01) and ST (r = -0.25, p < 0.01). The burnout and ST scales were also correlated; however, these scales measure different constructs, each with varying impacts on forensic interviewers and policy implications. Therefore, examining burnout and ST as separate constructs was warranted in this study. The relationship between the independent variables and each outcome was explored using bivariate and multivariate regression models.

#### 8.1 | Burnout regression models

Table 5 presents the results of several regression models predicting burnout. In Model 1, the bivariate regression model using job support as the predictor was significant ( $R^2 = 0.13$ , F(1, 127) = 19.05, p < 0.001). The next model also included the second independent variable, funding constraints. In Model 2, both predictor variables were significant and explained about 23% of the variance in burnout ( $R^2 = 0.23$ , F(2, 126) = 18.44, p < 0.001). The next model introduced agency caseloads as the third independent variable. Model 3 was overall significant and increased the amount of variance explained by the model ( $R^2 = 0.25$ , F(3, 125) = 14.13, p < 0.001). Model 4 examined all four independent variables, including the number of conducted forensic interviews per month. The model was overall significant,

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#### **TABLE 3** Summary statistics for independent variables

	N	Percentage or mean	SD and range
Number of forensic interviews (per day)	148		
0 and 1	45	30%	
2 and 3	82	55%	
4-7	21	14%	
Number of forensic interviews (per week)	144		
0-5	79	55%	
6-10	40	27%	
11-16	22	15%	
17-25	3	2%	
Number of forensic interviews (per month)	143		
1-10	30	20%	
11-19	33	23%	
20-30	50	35%	
31-39	15	11%	
40+	15	11%	
Job support scale	129	3.53	0.39, 2.71-4
Funding constraints			
Employee salaries	76	48%	
Community outreach programmes	63	40%	
Mental health exams	59	38%	
Educational outreach programmes	59	38%	
Advocacy and investigations	54	34%	
Medical exams	26	17%	
Agency caseloads (relative to staffing)			
Enough staff	76	48%	
Slightly understaffed	46	29%	
Moderately understaffed	19	12%	
Severely understaffed	6	4%	

Note. Differences are sample sizes due to missing variables; number of forensic interviews per day and week are not reported in further analysis

although the inclusion of the fourth independent variable did not increase the amount of variance explained by the dependent variable  $(R^2 = 0.25, F(4, 124) = 10.54, p < 0.001)$ . Unsurprisingly, the number of conducted forensic interviews was not significant in this model. However, both job support and funding constraints remained highly significant predictor variables. This suggests that both variables are important predictors of burnout despite the inclusion of multiple independent variables.

Finally, Model 5 included the four independent variables and several control variables (age, race, educational level, state of residency, years of experience and years worked at the current CAC) to predict burnout. The full model was significant and explains the most variance in the dependent variable of any model ( $R^2 = 0.32$ , F(9, 38) = 6.37, p < 0.001). Job support, despite the inclusion of control variables, remained highly significant ( $\beta = -0.32$ , p < 0.001). A one-unit increase in the job support scale, which measures support from family, friends, colleagues and supervisors, resulted in a -0.32 unit decrease in overall burnout, holding all else constant. The effect of increasing job support is the equivalent of almost an entire standard deviation reduction in burnout. The funding constraints variable also remained significant in this model ( $\beta$  = 0.25, p < 0.004). Those interviewers that self-reported three or more serious funding constraints (such as insufficient funding for advocacy and investigations, educational outreach programmes, community outreach programmes, employee salaries, medical exams or fundraising) experienced a 0.25 unit increase in burnout compared with those interviewers that reported two or less funding constraints. The effect of agency caseloads remained significant and increased with the inclusion of the control variables ( $\beta = -0.19$ , p < 0.031). Participants with enough staff to handle the caseload experienced a -0.19 unit decrease in burnout compared with those that reported less than ideal staffing conditions. The fourth independent variable, the number of conducted interviews per month, was not significant in the final regression model.

Race was a significant predictor, where White was the reference category: forensic interviewers that identify as Black. American Indian, Alaska Native or Asian have increased levels of burnout compared with those interviewers that identify as White. The forensic interviewer's age was also highly significant in this model ( $\beta = -0.24$ , p < 0.012). Specifically, for every 1-year increase in age, burnout was reduced by -0.24 in this model. Although for every month working at the current CAC, burnout also increased. Finally, given the results of this final model, the data were supportive of Hypothesis 1 using job support, funding constraints, agency caseloads and the number of conducted interviews to predict burnout.

#### 8.2 ST regression models

Table 6 presents the results of the regression models predicting ST. Model 1 was overall significant using job support as the predictor variable (R<sup>2</sup> = 0.06, F(1, 127) = 8.57, p < 0.004). Model 2 including job support and funding constraints remained significant and increased the amount of variance explained ( $R^2 = 0.12$ , F(2, 126) = 8.31, p < 0.005). The effect of job support was decreased in this model but remained significant at the p < 0.05 level, with the inclusion of the second independent variable. Funding constraints were also highly significant in this model ( $\beta$  = 0.23 p < 0.007). Model 3 using job support, funding constraints and agency caseloads as predictors was also overall significant (R<sup>2</sup> = 0.15, F(3, 125) = 7.54, p < 0.001). The effect of job support increased in this model ( $\beta = -0.25$ , p < 0.004), whereas the effect of funding constraints decreased ( $\beta$  = 0.16, p < 0.066). Agency caseloads were also significant at the p < 0.05 level. Model 4 including job support, funding constraints, agency caseloads and the TABLE 4 Correlations matrix for independent and dependent variables

	1	2	3	4	5	6
1. Number of forensic interviews (per month)	-					
2. Job support	0.04	-				
3. Funding constraints	0.02	-0.16*	-			
4. Agency caseloads	-0.17**	-0.11	-0.25***	-		
5. Burnout	0.07	-0.36***	0.36***	-0.22**	-	
6. Secondary trauma	0.06	-0.25***	0.21***	0.02	0.77***	-

<sup>&</sup>lt;sup>\*</sup> p ≤ 0.10.

<sup>™</sup>p ≤ 0.05.

<sup>\*</sup>p ≤ 0.01.

TABLE 5 Multilevel OLS regression models predicting burnout

	Model 1		Model 2		Model 3		Model 4		Model 5	
	b	SE								
Job support	-0.36***	0.08	-0.31***	0.08	-0.34***	0.08	-0.34***	0.08	-0.32***	0.08
Funding constraints			0.31***	0.06	0.25***	0.07	0.26***	0.07	0.25**	0.07
Agency caseloads					-0.17**	0.06	-0.16*	0.07	-0.19**	0.05
Number of forensic interviews (per month)							0.04	0.03	-0.001	0.02
Non-White									-0.15*	0.10
Age									-0.24**	0.003
Educational level									0.04	0.07
Professional years of experience									-0.02	0.02
Years worked at current CAC									0.19*	0.03

Note. Statistics are standardized coefficients (b) and standard errors (SE). State of residency was clustered for data analysis. Abbreviations: CAC, Child Advocacy Center; OLS, ordinary least squares.

\*\*\**p* ≤ 0.05.

<sup>\*</sup>p ≤ 0.01.

TABLE 6 Multilevel OLS regression models predicting secondary trauma

	Model 1		Model 2		Model 3		Model 4		Model 5	
	b	SE	b	SE	b	SE	b	SE	b	SE
Job support	-0.25***	2.33	-0.21**	2.30	-0.25***	2.29	-0.26***	2.26	-0.26***	2.28
Funding constraints			0.23***	1.84	0.16*	1.93	0.18**	1.92	0.18	2.81
Agency caseloads					-0.20**	1.86	-0.16*	1.87	-0.16	2.00
Number of forensic interviews (per month)							0.14*	0.73	0.11	2.00
Non-White									-0.16*	2.53
Age									-0.22**	0.07
Educational level									-0.54	2.09
Professional years of experience									0.07	0.51
Years worked at current CAC									0.08	0.71

Note. Statistics are standardized coefficients (b), and standard errors (SE). State of Residency was clustered for data analysis.

Abbreviation: CAC, Child Advocacy Center; OLS, ordinary least squares.

<sup>\*</sup>p ≤ 0.10.

 $p^{**} \leq 0.05.$  $p^{***} \leq 0.01.$ 

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<sup>&</sup>lt;sup>\*</sup>p ≤ 0.10.

number of conducted interviews per month remained overall significant ( $R^2 = 0.17$ , F(4, 123) = 6.74, p < 0.001). In this model, job support remained significant at the p < 0.01 level and funding constraints at the p < 0.05 level.

The full model (Model 5) included all four independent variables plus several control variables (race, age, educational level, state of residency, years of experience and years worked at the current CAC). This final model was overall significant and explains about 22% of the variance in the dependent variable ( $R^2 = 0.22$ , F(9, 38) = 5.06, p < 0.001). However, job support was the only predictor that remained significant in this final model, holding other variables constant ( $\beta = -0.26$ , p < 0.005). Specifically, a one-unit increase in job support resulted in a -0.26 unit decrease in ST in this model. Funding constraints, agency caseloads and the number of conducted forensic interviews per month were not significant in this final model. Also, a few control variables are significant in the full model.

According to the model, forensic interviewers that identify as Black, American Indian or Alaska Native or Asian experience increased levels of ST compared with those interviewers that identify as White. The interviewer's age was also a significant predictor of ST ( $\beta = -0.22$ , p < 0.05). For every 1-year increase in age, ST decreased by -0.22 units in this model. This result suggests that older individuals may have better coping skills relative to their younger counterparts. The data, therefore, were only partially supportive of Hypothesis 2, which utilized job support, funding constraints, agency caseloads and the number of conducted forensic interviews per month to predict ST.

#### 9 | DISCUSSION

The goal of this study was to examine burnout and ST among forensic interviewers working at CACs in the United States. We hypothesized that a higher number of conducted forensic interviews, a lower perception of job support, funding constraints and heavy agency caseloads would increase the risk of burnout and ST. Decreased job support, increased funding constraints and heavy agency caseloads predicted burnout, and job support predicted ST among forensic interviewers. Additionally, the current research indicates that PTSD is a potential problem for forensic interviewers; approximately 18% of respondents met all of the diagnostic criteria for PTSD, whereas another 11% met five of the six required diagnostic criteria.

### 9.1 | Burnout findings

Burnout was a common experience, as found in another study examining forensic interviewers (Perron & Hiltz, 2006). Here, the most important predictor of burnout was job support. As job support increased, burnout decreased. This is consistent with the idea that job support mitigates burnout among forensic interviewers (Bonach & Heckert, 2012). Specifically, internal job support, particularly from colleagues and supervisors, most significantly reduced burnout. One possible explanation for this result is that colleagues are more likely to understand the demanding nature of this profession. Furthermore, job support from colleagues provides interviewers with an opportunity to confidentially debrief after stressful interviews.

The vast majority (84%) of interviewers reported at least one major funding constraint. The most frequently reported concerns included insufficient funding for community outreach programmes, employee salaries and mental health exams. Consequently, those interviewers that reported numerous funding constraints experienced higher rates of burnout. As suggested by the current study, CACs often lack the necessary financial resources for advocacy and investigations, contributing to increased stress and burnout among interviewers.

Unsurprisingly, heavy agency caseloads consistently predicted burnout. This is consistent in that agency caseloads increase burnout among other criminal justice workers (Lewis et al., 2013). Consistent with prior work (Perron & Hiltz, 2006), the number of conducted interviews did not predict burnout. Due to variance in the number of conducted forensic interviews each month, the overall agency caseload is seemingly a better predictor.

Race, age and years worked at the current CAC were also significant predictors. Forensic interviewers that identified as non-White experienced greater burnout relative to White interviewers. Racism is one possible explanation, given the potentially greater stress on non-White interviewers. However, it is difficult to generalize this finding given the smaller number of respondents that identify as a minority.

Older forensic interviewers were less likely to experience burnout. This is possibly related to the development of better coping strategies over time (Perron & Hiltz, 2006). Interestingly, only the years worked at the current CAC was a significant predictor of burnout; the total years of experience as a forensic interviewer was not. The result may be explained by differences in internal job support at the agency level, regardless of total working experience as a forensic interviewer.

#### 9.2 | ST findings

Forensic interviewers often reported ST, including intrusive thoughts about the child's disclosure, engaging in avoidance techniques such as avoiding people and places that remind them of work and suffering from psychological arousal, including having trouble sleeping. This finding is consistent with prior work finding that ST was a problem in another sample of interviewers (Perron & Hiltz, 2006). Importantly, ST and PTSD often result in poor mental and physical health outcomes, which decrease the quality of life for forensic interviewers and their ability to provide needed care and support for victimized children.

Job support continually predicted a reduced risk of ST. This finding illustrates the need for forensic interviewers to receive support. The importance of internal job support also suggests a need for continued supervision and the opportunity to debrief without breaking confidentiality with fellow forensic interviewers. Furthermore, external job support was a statistically significant predictor of ST in another study examining forensic interviewers (Brady et al., 2019). Funding constraints were not significantly related to ST in this sample. This finding is contrary to previous research that funding constraints increase the risk of ST among child protective services workers (Tavormina & Clossey, 2017). Also, unsupported by previous scholar-ship agency caseloads did not predict ST in this sample (Bride et al., 2007). This result is potentially due to the importance of job support rather than funding constraints and agency caseloads in predicting the ultimate experience of ST.

The number of conducted interviews was also not related to ST. Post-hoc analysis revealed that forensic interviews conducted daily and weekly were also not related. These results are not surprising, given that previous researchers examining this population also found that the number of conducted interviews was not an important predictor (Perron & Hiltz, 2006). Conceivably, in terms of predicting ST, perhaps the nature of the alleged abuse or the continuous exposure to traumatizing forensic interviews is more important than the number of conducted interviews.

In the full ST regression model, the only significant control variables were the interviewers' race and age. However, it is difficult to generalize this result, given the small number of identified racial minorities in this sample. Also, in agreement with previous scholars, age was inversely related to ST (Bonach & Heckert, 2012). One explanation is that older forensic interviewers have developed better coping skills and internal job support overtime to combat ST.

#### 9.3 | Limitations

Although more extensive than a previous study examining burnout and ST (Bonach & Heckert, 2012), this research did result in a small sample size of interviewers. However, this study used a national data collection methodology that resulted in a sample of interviewers from 41 different states. Also, the exact number of forensic interviewers working within CACs is near impossible to estimate. Furthermore, it is difficult to know if the sample is fundamentally different from those forensic interviewers that chose not to participate in this study in terms of their experiences of burnout and ST. That stated, it is anticipated that those who did not participate might have even higher levels of burnout and ST than those who 'opted-in' to participate in voluntary research.

The use of cross-sectional survey data does present limitations when attempting to conclude the temporal ordering of forensic interviews and the subsequent burnout and ST. The use of a convenience sample also limits the generalizability of the findings to the larger population of forensic interviewers. However, data collection for this project resulted in a multistate sample of forensic interviewers, which increased the external validity of the findings. The sample was 95% female, somewhat limiting the generalizability of the results, although other research in this area also reports a similar percentage of female forensic interviewers (Bonach & Heckert, 2012; Perron & Hiltz, 2006). Finally, the current project did not control for the effect of previous trauma on forensic interviewers, which can be an important predictor of ST (Brady, 2017).

# 9.4 | Implications and future directions

This area of study would benefit from diversity in research methodologies. An interview methodology would allow researchers to gain indepth responses from interviewers regarding experiences. Also, utilizing a longitudinal methodology could eliminate the temporal ordering limitation of the current study. The content of the forensic interview, such as an allegation of sexual abuse, physical abuse or mental abuse, may also impact subsequent experiences of burnout and ST. Finally, future researchers should examine interviewers that have left the field to determine the impact of burnout and ST.

Yet still, the current study provides evidence that forensic interviewers often experience burnout and ST, which can result in decreased physical and mental health outcomes for interviewers. If interviewers are strained, this can impact children who may not receive the necessary mental health and medical services that are needed. The findings concerning forensic interviewers also have broader implications for the criminal justice system. Other workers within the criminal justice system exposed to victimized children may also experience these adverse consequences. Burnout and ST among these and other workers may detrimentally affect public welfare and impede the ability of the criminal justice system to operate as intended.

Accrediting bodies for CACs should be aware of the potential dangers associated with burnout and ST. These bodies should mandate continued education and training for interviewers through policies such as peer evaluations, national conferences, workshops and ongoing supervision (Bonach & Heckert, 2012; Fansher et al., 2019). Furthermore, non-White respondents experience increased burnout and ST compared with White interviewers. As a result, the board of directors should implement cultural competency training. Finally, ongoing mental health services must be available for interviewers.

At the agency level, policies should be implemented to increase job support between supervisors and colleagues. Supervisors should focus on providing adequate supervision and educating interviewers about the risk of burnout and ST. Mandatory regular staff meetings with supervisors and colleagues would provide forensic interviewers with the opportunity to debrief in a safe environment without breaking confidentiality rules. This cost-effective policy would also help build support between staff members and reduce risks. Another costeffective strategy of reducing detrimental outcomes is a mentorship programme between older and younger interviewers. Funding constraints and agency caseloads were also frequently reported by interviewers, and these factors predict burnout. Agencies should use research to advocate for private grants, as well as state and federal funding. Additional funding for employee salaries, community outreach programmes and mental health services will be advantageous for agencies and individual forensic interviewers. Also, increasing funding in these areas of concern most frequently identified by forensic interviewers will help to reduce burnout.

#### ORCID

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#### ENDNOTE

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<sup>1</sup> The response rate was calculated based on 163 returned surveys and 665 recruitment emails. Although, not every recipient of a recruitment email was a forensic interviewer. Recruitment emails were sent to all staff members working at CACs to increase the sample size of forensic interviewers.

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