Embracing Data Analytics & Big Data in Human Services: Tools to help create transformative change

The Value of Research-Practice

Who Cares for the Caregiver

Issues in Human Services

The impact of job burnout on human service professionals

Would You Hire You?

Thoughts on Advocacy from NOHS
While the academic year is getting into full swing again, I sincerely hope that students and faculty alike got some needed R&R during the summer. I can assure you that NOHS took no breaks! Since last year’s Annual Conference, with the assistance of our new management company we have been busy rebuilding our infrastructure and putting plans into action.

You will note that the website is easier to navigate and issues with access to the Members Only section are corrected. Membership categories are clarified and information throughout is up-to-date and easy to navigate. Coming soon to the website are cutting-edge webinars for CEU’s. While a nominal fee will be charged to nonmembers, these webinars will be FREE to members! Be on the lookout for information advertising these professional development opportunities. This fall NOHS will also be starting a member listserv from the website for engaging in dialogue related to the field. The listserv will be a great way to connect to your colleagues, discuss contemporary issues in human services, share resources, ask questions and receive feedback. We will also be working hard to establish an Ethics Discussion Board on the website to allow for the processing of ethical dilemmas. No formal legal advice will be provided, but it will be a space for obtaining peer input and support pertaining to ethical dilemmas encountered in human services practice. You are encouraged to check out our new and improved NOHS Facebook Page as well! If you haven’t “liked” and “followed” us yet, please do so: https://www.facebook.com/NationalHumanServices/.

I must also thank the conference organizers and volunteers for incredibly successful Regional Conferences this past spring. These conferences provided members with an opportunity for professional development and networking in person at wonderful locations. We are extremely excited for the additional opportunities the Annual National Conference will provide in Philadelphia, PA this October 24-27! Please be sure to register NOW for this important event! All necessary information is available on the website: http://www.nationalhumanservices.org/nationalconference-2018-philadelphia. Please also consider sponsorship for the conference, webinars, and/or website. We offer excellent opportunities to advertise your agency, organization or institution. See the website for details.

Additional initiatives your hard-working NOHS Board are addressing include a review and modification of our Bylaws and expansion of the human services credential. More information about these exciting endeavors will follow! Please be reminded that we need YOU to help us be a successful national organization. As human services professionals, it is essential that we value our profession enough to take responsibility for contributing to its growth and viability. Your efforts through NOHS service can help us achieve these goals. Please reach out and ask how you can be of service! And I’ll see YOU in Philly!

Sincerely,
Tammi Dice, NOHS President
If you are a human services educator wanting to help students engage in critical thinking with respect to case scenarios, then this is the workbook to use. Child Welfare Case Scenarios is helpful as a tool for students working in groups or individually. Instructors can also use the book as a resource when helping students visualize scenarios they are likely to become involved in during their internships, or when they are actually working in the field as professionals. Regardless of the human services subject matter, the material in the workbook can be used to help students relate and develop critical thinking skills.

The book can be purchased from any one of the major retailers such as: Amazon, Barnes and Noble, Goodreads.com, etc.
Embracing Data Analytics & Big Data in Human Services: Tools to help create transformative change
Dr. Paige Krabill & Dr. Dinah Manns
Capella University

Introduction

Human services practitioners and agencies are committed to helping people and communities reach their potential through empowering change and transformation. To achieve these outcomes, human services professionals rely on a diverse set of skills that focus on a broad understanding of human behavior, behavioral trends and complex social issues. Human services professionals are tasked to adapt these skills to assist with limited resources and decreasing service options to meet the diverse needs of those they serve. As human services professionals continue to look for ways to work more effectively, they often don’t consider how emerging technologies and big data could impact their work. According to Goldsmith (2014), emerging technologies and the use of data in helping fields has the ability to create three formative changes (1) improve the ease by which people can access services (2) facilitate immediate, real-time problem-solving in the field and (3) produce a foundation for answering predictive questions about groups, subgroups, and broader communities. In line with other helping fields, the human services profession has an opportunity to rethink how big data, data analytics and emerging technologies are used to move individuals and communities along a trajectory of positive, lasting change.

HS Practitioners

Human services practitioners work to impact change at all levels within the communities where they work. Also, they strive to facilitate long-term, transformative change for those they serve. Although many support service agencies have adapted data management systems and practitioners engage with these systems in their daily work, there is increasing evidence to support that these systems are being underutilized and have not kept up with emerging technologies (Walker & Dovey-Fishman (2015). Walker and Dovey-Fishman (2015) argue that the current implementation of technology in the human services environment has created a “one-size fits all model of intervention. These systems have also contributed to challenges with collaboration and interfere with the ability to provide a comprehensive, holistic level of care. Presently, practitioners engage with data in individual silos. Data is often kept within specific agencies making it hard for data points to connect. As a result, redundancy and repetition in service delivery compromise the effectiveness of recommended interventions.

When used effectively, data has the power to drive change and outcomes in a meaningful way. Accurately collecting, analyzing and engaging with data can help professionals create a robust picture of the needs of those they serve and the opportunities for support. Also, data has the power to show the impact of the work that is done providing evidence of effectiveness and intervention outcomes. Currently, human service professionals are often challenged to understand how the quantitative numbers can be used to make qualitative changes in day to day lives or circumstances of their clients (Walker & Dovey-Fishman, 2015). Engaging with and understanding how to use data will allow practitioners to leverage their understanding of service delivery models and best practices to create more specific and individualized service plans. Emerging technologies allow for data to be used in more immediate and specific terms. In return, practitioners will be better equipped to provide the right service at the right time (Walker & Dovey-Fishman, 2015). Moving data away from a set of individual data points and working to connect these points will allow greater collaboration among service providers and agencies. The most immediate result of this collaborative effort will be the ability to create programming in a specific manner leveraging the unique strengths of different service providers. Thus, creating a more comprehensive support system guided by a consistent set of information about a where a person is coming from, what they need and where they are going.

Agencies

With decreased funding and increased need, helping agencies are tasked to work as effectively and efficiently as possible. A tall task when agencies are asked to navigate large state and federal social support systems, manage intricate processes, and address complex human needs. To increase effectiveness, human services agencies are looking for ways to increase the speed of obtaining services, connecting the right people to the right service, provide services that are individualized and measure outcomes (Kaisler, Armour and Espinoza & Money & 2015; Goldsmith, 2014). When analyzed to its full depth and capacity, data has the power to be a driving force to address these goals. Systematically collecting and analyzing data can help agencies create programs based on need and measure program outcomes to determine effectiveness. Purposeful data analysis can drive a more specific care model allowing agencies to engage in more preventive efforts and prioritize services to have the greatest impact (Kaisler, Armour, Espinoza & Money, 2015). Ultimately, this work creates an overall service delivery model for their agency that aligns with the immediate needs of every facet of the community. All these factors, position agencies to make a strong case for their work, provide evidence that the right people are getting the right services at the right time, and identify trends in their communities to help proactively impact problems before they begin.

Conclusion

Human services practitioners and agencies are committed to helping empower change through their work and seek long-term positive outcomes for both individuals and communities. The current helping environment required that this work take place under more and more constraints. The field of human services has an opportunity to rethink how technology is used and applied to make the helping process more individualized, effective and proactive. Embracing the use of data and emerging technologies to assist in how data is understood has the potential to transform human services practice. It could be argued that applying analytical processes, understanding data, analyzing data and visualizing data are the new set of skills all human services professionals need to have to be transformative in their work and have the greatest impact on those they serve.

References

Introduction

Pressures are increasing on policy and practice to use research to guide improvement. Private and public funders, as well as policy makers, are applying increased pressure to collect and analyze data, incorporate research knowledge, and build evidence of effectiveness (Yates, Nix, Coldon, & Williams). Practitioners, however, may not have the skills or the time to produce, gather, and apply research to meet their improvement goals. The available research may not be useful or credible because researchers are not always focused on answering questions relevant to school districts’ most pressing needs. Too often, research findings aren’t accessible to practitioners or arrive too late to make a difference. Recently, though, there have been concerted efforts to forge new and different kinds of relationships between researchers and practitioners. For example, school districts across the country are developing a new kind of partnership with researchers. These research-practice partnerships are long-term collaborations, which are organized to investigate problems of practice and generate solutions for improving district outcomes. Advocates argue that educators will better understand the research and its implications because they help develop it and have ready access to the researchers.

Partnerships may also produce research and innovations that are more useful to practice because they are rooted in the districts’ needs. District leaders are likely to see the research that partnerships produce as more credible because studies are done with local students and take into account local conditions. All these factors may increase the likelihood that districts will use the research findings and tools produced in the partnerships to support their efforts to improve outcomes for children and youth. The evidence is beginning to accumulate in support of these claims. When research-practice partnerships develop educational innovations, districts adopt these new innovations in ways that can result in changes in teacher and administrator practice and increased student learning. Research-practice partnerships promise in the human services field as well. This article is an overview of how the author has partnered with the County’s Human Services Division as well as other key community organizations to more effectively meet the needs of local children, youth and families.

Example of Research-Practitioner Research

As we know, the outcomes for children living in poverty are dismal. Poverty is considered the single best predictor of child maltreatment, especially child neglect (Sedlak, Merttunburg, Basena, Petra, McPherson, Greene, & Li, 2010). Data compiled by the Third National Incidence Study of Child Abuse and Neglect indicate that children from families with incomes below $15,000 were over 22 times more likely to experience maltreatment than children from families whose income exceeded $30,000. These children were almost 56 times more likely to be educationally neglected and over 22 times more likely to be seriously injured. In the Fourth National Incidence Study, children in low SES households were three times more likely to be abused and approximately seven times as likely to be neglected as children in higher SES households (Sedlak, Merttunburg, Basena, Petra, McPherson & Greene, 2010). Several studies have reported associations between economic factors and maltreatment rates at the neighborhood and community levels (e.g., Freisthler, Merritt & LaScala, 2006; Zaravin, 1989; Paxson & Waldhoff, 2003, Coulton, Korbin, & Chow, 1995). Recently, a retrospective study of children admitted to 38 hospitals between 2000 and 2009 showed that rates of admissions for physical abuse and high-risk traumatic brain injury were significantly related to increases in local mortgage foreclosure and delinquency rates in the associated metropolitan areas (Wood, Medina & Feukner, 2012). While poverty is linked with maltreatment, the relationship is not as simple.

Not all parents who live in poverty abuse their children, and many who do are not poor. The link between child abuse and poverty can be explained in a number of ways. For instance, it is possible that experiencing poverty generates family stress, which in turn, leads to greater likelihood of abuse or neglect. Or perhaps, parents living in poverty do not have access to the resources necessary and are unable to provide appropriate care for children. Or it is possible that other factors like substance abuse make parents vulnerable and more likely to be both poor and abusive or neglectful.

Because of challenges, a small city located in southcentral Pennsylvania encountered in the area of child welfare, the State Office of Children Youth and Families made technical assistance available to the local child welfare organization. To this end, the County Human Services Division has partnered with the School District, a small liberal arts college at which the author teaches, and other local strategic partners such as the Mayor’s Office, the public library system, and health organizations. This group of key stakeholders came together to start discussing how we can all collaboratively work together to start tackling some of the challenges that many of the families and children face.

More on the Community Context

Nearly 10% of the County’s population, 43,859, live in 5.25 square miles of the city. The percentage of White people living in the County is 88.5% in the County compared to 51.2% in the city. Black or African American makes up 28% of the population in the city with 5.6% in the county. The other striking difference is with the Hispanic or Latino population; living in the County is 88.5% in the County compared to 51.2% in the city. Black or African American makes up 28% of the population compared to 4.3% in the city. The city is surrounded by more affluent communities. The city’s median household income of $29,025 is well under that of the county (refer to Table 1). Today, after the cities of Philadelphia and Pittsburgh, the city ranks third in the state in terms of persons living in poverty. Compared to Pennsylvania’s rate of 13.2% persons in poverty and a County level of 10.4%, the city has 37.3% persons in poverty (refer to Table 1). According to a recent report from the Pennsylvania Association of School Business Officials, our city ranks the worst in terms of acute poverty out of 500 Pennsylvania school districts (PASBO, 2017). Acute poverty is defined as a serious shortage of income or access to the range of resources that usually provide the basic necessities for life such as food, shelter, sanitation, clean water, medical care and education. Our city ranks the worst in terms of acute poverty out of 500 Pennsylvania school districts (School District Annual Report, June 2017).

Table 1. Income and Poverty Rates in the City compared to the County and State

<table>
<thead>
<tr>
<th>Income and Poverty</th>
<th>City</th>
<th>County</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Median household income, 2011-15</td>
<td>$29,025</td>
<td>$38,269</td>
<td>$53,599</td>
</tr>
<tr>
<td>Per capita income in past 12 months, 2011-15</td>
<td>$15,096</td>
<td>$28,403</td>
<td>$29,291</td>
</tr>
<tr>
<td>Persons in poverty</td>
<td>37.3%</td>
<td>10.4%</td>
<td>13.2%</td>
</tr>
</tbody>
</table>

Source: Census Data

Table 2. Percentage of Births to Teens, Percentage of Low Birth Weight Babies & Infant Mortality Rates in the City vs. the County

<table>
<thead>
<tr>
<th>% of Births to Teens 19 and Under</th>
<th>City</th>
<th>County</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>12.4</td>
<td>5.7</td>
</tr>
<tr>
<td>2014</td>
<td>10.7</td>
<td>6.3</td>
</tr>
<tr>
<td>2013</td>
<td>14.5</td>
<td>6.9</td>
</tr>
<tr>
<td>2012</td>
<td>14.7</td>
<td>7.5</td>
</tr>
<tr>
<td>2011</td>
<td>17.4</td>
<td>8.2</td>
</tr>
</tbody>
</table>

Source: Pennsylvania Department of Health

Table 3. Percent of Low Birth Weight Babies & Infant Mortality Rates in the City vs. the County

<table>
<thead>
<tr>
<th>% of Low Birth Weight 2011-15</th>
<th>City</th>
<th>County</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 1500 grams</td>
<td>2.3</td>
<td>1.4</td>
</tr>
<tr>
<td>1500-2499 grams</td>
<td>9.2</td>
<td>6.5</td>
</tr>
<tr>
<td>2500+ grams</td>
<td>88.3</td>
<td>92</td>
</tr>
</tbody>
</table>

Source: Pennsylvania Department of Health

Table 4. Infant Mortality (infant deaths per 1000 live births)

<table>
<thead>
<tr>
<th>Infant Mortality (infant deaths per 1000 live births)</th>
<th>City</th>
<th>County</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>12.6</td>
<td>5.9</td>
</tr>
<tr>
<td>2013</td>
<td>12.2</td>
<td>5.4</td>
</tr>
<tr>
<td>2012</td>
<td>8.3</td>
<td>4.2</td>
</tr>
</tbody>
</table>

Source: Pennsylvania Department of Health

The Value of Research-Practice Partnerships

By: Robyn Maitoza
With the rate of poverty as high as it is in the city and all the challenges that brings to families and a community, the number of child welfare referrals for child abuse and neglect is higher than other areas in the county. Unfortunately, the numbers paint a dismal picture. Moreover, despite the efforts of various community organizations, these numbers are not improving. This is the impetus for the community coalition that has been formed. All the partners recognize that maintaining the status quo where everyone works in their respective silos is not working to address the issues in the community.

Strategic Partners

College

The college is a private, coeducational four-year college located in southeastern Pennsylvania that offers more than 50 baccalaureate majors in professional programs, the sciences, and humanities to its 4,600 full-time undergraduate students. With the recent change in administration, there is an increased desire to have faculty and students get more involved in our community. The author, since her recent arrival at the College, has partnered with multiple agencies in which she involves her students in her classes and research projects, drawing upon her expertise in family resilience.

County Human Services Division

The County’s Human Services Division is comprised of the Human Services Department, the Area Agency on Aging, Children, Youth and Families, Youth Development Center, the Mental Health and Intellectual and Developmental Disabilities and Drug and Alcohol Program and the HealthChoices management unit.

The division employs over 450 individuals and oversees services more than $160,000,000. The division delivers many of the publicly funded services through a network of local providers who are contracted for various types of programs in child welfare, mental health, drug and alcohol, aging and homeless services.

City School District

The School District has been in existence since 1847 and has a long rich history. The District has seen substantial change in demographics, socioeconomic status, tax base and overall population over the last 50 years. The 2010 Census stated that there were 47,699 people living within the city. Also in that census, 73.2% are listed as having a high school diploma with 9.6% as being college graduates.

With regards to demographics, the District has a Hispanic population of 46%, an African American population of 34%, a white population of 12% and a multi-racial population of 7.5%. The District currently provides special education services to 21% of students and English language services for 37% of students, which is a 12% increase from the previous year. Moreover, the District has the highest rate of acute poverty, 55%, of any other school district in the commonwealth. Acute poverty is defined as a serious shortage of income or of access to the range of resources that usually provide the necessities for life for humans, such as food, shelter, sanitation, clean water, medical care, and education.

Current Research Plan

Looking at the data the key partners have shared, two neighborhoods where crime, substance abuse, gang activity and domestic violence rates are the highest have been identified. As such, these are the two neighborhoods the coalition would like to first turn their attention. The idea is to create a neighborhood center, or a one-stop shop of services, so to speak, in a K-8 school in each of these neighborhoods. This would involve a coordinated, cross-sector effort among several community organizations who want to improve outcomes for youth and families in the city. With the assistance of the author and other faculty at the College as well as other community partners, an initial research plan which begins with a needs assessment of multiple stakeholders in the area will be the first step. Other community-building efforts (i.e., holding free spaghetti dinners at the school where families can share their thoughts) are also in progress. The coalition realizes that our efforts will take time and energy, yet all the partners are committed to the larger cause. Holding regular meetings with the large group or various subcommittees has improved communication and is leading to the building of trust. After so many years of working individually and in silos, it will take more time to truly build trust.

Value of Research-Practitioner Partnerships

Given the complex system required to support children and families, it is not surprising that research use within child welfare is uneven and even lacking. An array of services is required to promote the well-being of children, youth, and families. This includes child welfare specific services as well as related child and family strengthening services and supports. Services are required to provide in-home family preservation, residential care, physical and mental health care, assistance with housing, child care, and employment and financial benefits. In addition, the organizations delivering these services are complex and involve different organizational structures, governing bodies, and decision-making processes. Furthermore, decision makers have different needs for research and different capacities to access, make sense of, apply, and inform research. These realities make it difficult to know where research sits within the child welfare system and how to integrate it into the day-to-day work.

However, there is a great opportunity for human services scholars to help. Develop partnerships with practitioners and involve them in your research endeavors. Jointly construct agendas that meet both your academic needs and the needs of the local context. Human services scholars can help to bridge the research-practice gap by providing resources to practitioners (i.e., fact sheets, workshops, briefings and trainings) that support them in interpreting findings and making connections to actionable items.

Conclusion

Research-practice partnerships start with a focus on problems relevant to practice. These are issues and questions that practitioners find pressing and important. By starting with a problem of practice, research priorities are set in response to the organization’s needs, rather than to address gaps in existing theory or research. Starting with practitioners’ needs increases the likelihood that practitioners will find research useful and apply it to their ongoing work.

The human connection helps carry one’s work farther and is meaningful. While the daily activities and priorities of human services scholars and practitioners may be different, our ultimate goals are remarkably similar. Both communities are dedicated to investigating tough questions or problems and searching for answers that may improve the lives of children, youth and families. Thus, it is important to establish relationships with practitioners in your community. Moreover, we need to communicate better with one another and learn how to operate within each other’s distinct culture. My hope is that the example of what our community is doing will resonate with you and propel you to improve outcomes in the real world through research-practice partnerships.

References


Who Cares for The Caregiver?

Charles Layell

The term “burnout” was coined by Herbert Freudenberger in 1974. The term is defined as “a debilitating psychological condition brought about by unrelied work stress, resulting in depleted energy and emotional exhaustion, lowered resistance to illness, increased de-personalization in interpersonal relationships, increased dissatisfaction and pessimism, and work inefficiency” (Freudenberger & Richelson, 1981, p. 4). It occurs when professionals are overwhelmed and unable to meet constant demands. As the stress continues, they begin to lose their interest and motivation in the human service profession as caregivers.

The alarm goes off as you fumble for the snooze button, wishing for just one more moment of sleep. It seems as though there is never enough time between the filing and the reports that must be done for a life of your own, and there is no time for that at the office. Because of budget cuts, there are going to be other cases added to the load. There are never enough people or providers to go around, and with changes in government leadership, pay may be going to go down instead of up. It seems as if every other day another practitioner gives up the daily stress of dealing with clients’ needs, regardless of what needs they may have. This is the life they chose, service to others; however, it is becoming harder and harder to recollect why. The constant exposure to the pain and torment of others, trying to stay compassionate yet also insulate and regard oneself from that pain is difficult, more so when there is no buffer.

A quick morning shower, usually deciding to grab something to eat on the way to the office, a quick kiss and goodbye to your spouse and children while you sadly and knowingly lie when you mumble and say you will not be home too late tonight. When you arrive at the office, sure enough there is already a message from your supervisor saying that they have added another county and 20 more clients to your case load. Of course, the supervisor tells you that they’re proud of the job you do – by the way, your reports are two weeks late – thus begins a new day! You scramble to find what little funding is available and to provide it to those that need it the most. Realizing that someone will be shortchanged, you do your best, but clients do not see that. At the end of the day, you have seen too many clients and have had too many no shows. You have been blamed by two of them for not getting them enough help. One client has been rude enough to blame it on the color of your skin.

You have had to go to the hospice center and check on clients there, and the families want to know what you are going to do for their loved one. You smile and try to be respectful and help as much as you can when all you want to do is run and cry yourself. Through all of this, you try and tell yourself that you are making a difference, that you are helping, but you are becoming more and more convinced that it will never end and that there will always be someone crying for help. In the end, who do you cry to?

You cannot talk to a partner. The law will not allow it. Trying to talk to a coworker. Well, they are in the same stress-filled position you are. So, you bottle it up and soldier on, but the weight gets heavier and heavier, which in turn also gets unhealthier and unhealthier until you are almost to the breaking point yourself. You finally leave work at six when you should have been off at five, but you got a call from the hospice center, and one of your clients has passed. The family needs you. You go and you try to be strong as the family grieves. A quick bite to eat, a moment with your own family (once you get home, late, again); then you do some more reports, and finally fall asleep before doing it all again in the morning.

I am sure that this is not the life of every caregiver, but it seems close to how many live. I have never, officially, been a caregiver; however, I have known several, and the overall complaint seems to be lack of support for their own lives. Who can they talk to? Who cares for the caregivers? This seems to be the reason so many leave the profession or become insensitive, uncaring people, completely burnt out by caring. I feel it is time to provide a new type of counselor, one devoted to helping the caregivers, one trained in what these people deal with every day, possibly doing no more than just providing an outlet to talk and relieve the stress that they cannot talk about with anyone else, someone as bound by HIPAA as they are.

We must come up with a strategy to help retain our human service workers. Their experience is too valuable to the future of the helping professions to lose them to burnout. There must be an attempt to lower the caseloads and to provide adequate funding and support for the job to be done. Alleviate mandatory overtime and supply in-house counseling to caregivers. Allow for sufficient time away from work. Provide better pay for the professions and incentivize new people to enter the professions. Lassen the overwhelming student debt associated with entering these professions, thus lowering the stress levels associated with it. Have sufficient staff to limit individual caseloads, which would limit the need for overtime and allow more time to address individual client’s needs. Make sure that there are sufficient funding levels to meet those needs, maybe we can keep on helping others.

There is nothing more frustrating for a caregiver than to know what a client needs but to not have the funds to provide it. The future of the human service field depends on these changes being made. If we can help ourselves, maybe we can keep on helping others.

References


Issues in Human Services

Sally Devine

Generation after generation, domestic violence is still prevalent in our society. You cannot turn on the television or open a newspaper without stumbling upon yet another act of violence against women. Domestic violence is a worldwide epidemic (AHR, 2013). The National Coalition Against Domestic Violence defines domestic violence as “the willful intimidation, physical assault, battery, sexual assault, and/or other abusive behavior as part of a systematic pattern of power and control perpetrated by one intimate partner against another” (NCADV, 2016). Many people believe that physical abuse is the only aspect of domestic violence, when emotional, psychological and sexual abuse are also just as common. Likewise, domestic violence does not cater to one specific race, ethnicity or social class. Daily, Middle-Eastern women are being doused with acid by their husbands and family members, African women are being sexually abused by soldiers in their villages, and American women are marrying rich men who buy them lavish gifts after knocking them out in a drunken rage. Domestic violence is real and still raging in today’s society.

When I was fifteen, my cousin came to stay with my family. I remember the day she moved in clearly; she walked into my home with a black eye, a busted lip and everything she owned shoved into a single trash bag. Before her arrival, my father explained to me that she had to leave her fiancé because he was beating her, but when she finally told me the entire story, there was much more than just physical abuse going on. She revealed to me that her fiancé would force her to perform sexual acts justifying sexual abuse and rape by saying that he owned her and if she loved him, she would make him happy. He would also take her car keys during the day so that she could not leave—she hadn’t driven a car in six months when she came to stay with us. Her fiancé was a misogynistic, manipulative, and violent alcoholic who thrived off controlling women. Even though my cousin finally left him, the emotional and psychological trauma she endured never left her. After hearing my cousin’s story and witnessing its effects first hand, domestic violence seemed so much more real to me. Domestic violence had been something I witnessed during Law and Order: SVU, not in my own family, but I still did not grasp that it could happen to me.

Shortly after my cousin moved in, I began dating a slightly older boy that I met through a mutual friend. This was my first “real” relationship, and I was just thrilled to have a significant other. I was oblivious to his uncontrollable urge for control and his unruly temper because he loved me, and I thought I loved him too. If showing love is cursing and yelling at someone for not texting back within two minutes, then yes, he loved me. I remember meeting his friends for the first time at one of his high school football games; after a few minutes of conversing with his classmates and trying to be sociable, my boyfriend yanked me up and let me know we were leaving with three quarters still left in the game. He then escorted me to his car, gripping my arm so tight it left a bruise in the shape of a handprint and proceeded to slap me across the face for “flirting with his friends” and “being a slut.” I was appalled and frightened by his behavior, yet I stayed in this relationship because I thought I could prove to him that I was worth keeping. He had turned every issue he had with himself into something I had done to make him that way. I was brainwashed. My friends finally got through to me, and I ended our toxic relationship. Hours after breaking up with him, I received picture messages of his torso and wrists adorned with cuts from a razor blade and a text message reading, “This is all your fault.” I called his mother, and he was admitted to a mental institution for a couple of days. The image of his attempted suicide mentally scarred me for life, and I hold the memories of that relationship in the back of my mind to this day.

Too many women base their worth from a man’s opinion, leaving them vulnerable and easy targets for abuse. Domestic violence can be diminished with more education on the subject, as well as an outreach from local communities to help those who are being abused by their spouse. Everyone is worthy of love, but not everyone is capable of displaying it in a healthy way.

References

The impact of job burnout on human service professionals
By: Felicia Wilson, PhD, MSW, MBA, LMSW, CAMS-H\-

Introduction
Human service professionals enter their profession with high optimism. The spark of “I can positively contribute to the world” is glowing. Somewhere around year 5, that glow starts to dim. What happened to the optimistic practitioner who wanted to be a part of the change? In most cases, the harsh reality of helping vulnerable people and the system made its debut. Once this happens, the road to reclaiming one’s optimism is long and somewhat daunting.

Define job burnout
Job burnout is defined as “as a psychological syndrome involving emotional exhaustion, depersonalization, and a diminished sense of personal accomplishment that occurred among various professionals who work with other people in challenging situations” (Poghosyan, Aiken, and Sloane, 2009, p. 895). Human service professionals, due to the nature of their job, are more likely to experience job burnout. In Maslach’s view, burnout undermines the care and professional attention given to clients of human service professionals (Poghosyan et al., 2009, p. 895). For the human service professional, job burnout manifests in three ways: emotional exhaustion, cynicism, and professional inefficacy. In short, the human service professional detaches from the work environment, becomes extremely pessimistic and skeptical and does not believe he/she is capable of effectively doing their job. These manifestations are most troubling for the professional, clients, and human service organizations.

Manifestations of job burnout
Before job burnout manifests, there are clues the work environment is unhealthy. The glaring clues are known as antecedents. For job burnout, there are six antecedents: workload, control, reward, community, fairness, and values. Where there is imbalance or incongruence with the professional and the antecedents, job burnout will begin to develop.

Workload: “When an individual has exceeded their ability to effectively manage job tasks because they are too numerous, the individual will become overextended and exhausted” (Wilson, 2016, p. 32).

Control: When an employee experiences high demands for productivity with low control over how the work is accomplished, the employee begins to feel stressed and exhibit signs of cynicism (Wilson, 2016, p. 33).

Reward: Extrinsic and intrinsic rewards are both positive factors that increase an employee’s job satisfaction and lessen the probability of job burnout” (Wilson, 2016, p. 34).

Community: “A successful team creates a community environment that fosters support, laughter, comfort, praise and respect. The breakdown of community in the workplace causes a decline in teamwork” (Wilson, 2016, p. 34).

Fairness: “When employees perceive that the workplace uses unfair tactics, morale drops, loyalty vanishes, and the cycle of job burnout begins” (Wilson, 2016, p. 35).

Values: “When the employee is conflicted because of competing value systems, stress will manifest and cause the employee to exhibit signs of burnout” (Wilson, 2016, p. 35).

So, how can job burnout be combated to prevent the distressing manifestations? First, human service students must be educated on the likelihood of job burnout. Throughout the educational journey, students should be advised on appropriate ways to engage clients and colleagues utilizing effective interpersonal skills and social/emotional intelligence. Also, they should understand the necessity of self-care. If you have matriculated, it is up to you to seek knowledge and educate yourself on this issue. In the ethical code, standard 35, practitioners are urged to maintain a healthy lifestyle to provide optimal services to clients (Ethical Standards for Human Service Professionals, n.d.). So, prevention is in education. Education is key for practitioners to understand they simply cannot pour from an empty cup. It is critical for organizations to create an ethical culture that is committed to employees so they, in turn, can be committed to and effective for clients.

Ways to identifying if job burnout has manifested?
Take an evaluation of yourself. Has your zeal for helping others diminished? Do you lack empowerment at work? Are there value mismatches with your value system and the workplace value system? Is there a culture of unfairness? Is the workload overwhelming to the point that you simply cannot manage to provide effective treatment for your clients? If you answered yes to any of these questions, you might be experiencing job burnout. If this is you, take a moment to find a trusted individual to speak with about these issues. Then move forward with creating a change plan. This does not necessarily mean leaving the workplace. It could simply mean identifying what’s wrong and creating a plan of action to address that issue. Bottom line, you cannot afford to not address this issue. You are worth it. Your clients are worth it. Remember, you cannot pour from an empty cup.

Conclusion
Addressing job burnout concerns is not optional. Working with vulnerable clients means the practitioner places him/herself in emotional distress on a continuous basis. Working in a positive community while receiving the necessary support along with having autonomy goes a long way in combating job burnout for the human service professional. To keep practitioners emotionally healthy, it is vital that this issue is constantly addressed in a meaningful manner. Education and repetition are essential to addressing and preventing job burnout.

References:


Introduction

On day I saw an advertisement at my university for a workshop offered by career services called Would You Hire You? The title intrigued me, and I began thinking about the professional competencies and qualities that we as human services educators should be emphasizing and developing in the classroom to help our students be employable. Sadly there has been an ever widening gap between what is emphasized in academia and what is expected by industry, and many employers continue to voice their frustration that college graduates are often not prepared for the workplace (Johnson, 2011).

Gatekeeping

Social service and behavioral health agencies have always looked to universities and human services programs to produce competent practitioners ready for direct practice. Obviously there is still a great deal of learning, training and development that occurs beyond graduation, but employers expect their new human services practitioners to already have an established knowledge and skills base (Elpers & FitzGerald, 2013; Evenson & Holloway, 2003).

Within the helping professions there has always been an established practice of what has come to be called gatekeeping. Gatekeeping refers to establishing standards and practices that delineate the requirements for admittance to the profession and how best to determine who should or should not be allowed into the profession. These practices are sometimes very formal, such as admission standards and processes for limited-enrollment social work programs. Even in human services programs, which historically have tended to be open-enrollment, there is still an expectation of some degree of gatekeeping, whether that is at the process of admission, in assessing performance in courses or during field placements, or in graduation requirements (Elpers & FitzGerald, 2013; Miller & Koerin, 2001).

In establishing these standards, human services programs have often focused on two distinct yet interdependent skill sets in their education and training, those being not only technical knowledge and skills but also professional values. This relationship parallels the importance of both content and process in the helping relationship. While content knowledge is easily definable, process-based skills that represent a sense of professionalism are more elusive. Despite being challenging to specify, these professional priorities are often defined as commitments with regards to ethical practice, sharing values consistent with those of the human services profession, and behaving in ways that promote the safety and success of clients specifically, but also of the human services profession generally (Elpers & FitzGerald, 2013; Evenson & Holloway, 2003; Miller & Koerin, 2001).

Making the Less Tangible More Tangible

This principle of professional priorities and behavior is often difficult for human services students to understand. It is important to convey to students that their learning and development is not just about the specific course content they learn or the grade they may get, but that equally important is how they present themselves and how they act. Unfortunately this emphasis on professionalism is often either underemphasized, overlooked, or intentionally left out of human services curricula. In my courses I provide students with a sheet called Would You Hire You, and I discuss how course expectations are connected to and help promote the development of professionalism, including the following:

<table>
<thead>
<tr>
<th>Professional Standard</th>
<th>Academic Expectation</th>
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<tr>
<td>Being consistently present for clients and employers</td>
<td>Show up to class or field placement consistently; show up on time and stay the entire time, and if not able to be present or stay the entire time display responsibility and initiative by communicating and collaborating with professors or field instructors</td>
</tr>
<tr>
<td>Listening to and being present with clients and employers</td>
<td>Pay attention during lectures, meetings and trainings (even, and especially when difficult); participate in class activities and exercises; refrain from texting and other non-academic use of technology during class or field placement</td>
</tr>
<tr>
<td>Ability to follow directions and complete work duties</td>
<td>Complete coursework and duties at field placement as assigned, when assigned and by due date (even, and especially when those might change), if not finishing work early, and if unclear of requirements display responsibility and initiative by communicating and collaborating with professors and field instructors</td>
</tr>
<tr>
<td>Ability to accept direction and feedback from supervisors</td>
<td>Be willing to accept corrective feedback and constructive criticism from professors and field instructors</td>
</tr>
<tr>
<td>Ability to collaborate with colleagues</td>
<td>Interact and work with classmates, professors, and colleagues at field placements in a productive and respectful manner</td>
</tr>
<tr>
<td>Ability to clearly and effectively communicate</td>
<td>How well one clearly and effectively communicates in written work, oral presentations, and in electronic messages to professors or field instructors</td>
</tr>
<tr>
<td>Appropriate boundaries</td>
<td>What to disclose, and not to disclose, either during class or with clients during field placements, as well as the rationale for sharing or not sharing</td>
</tr>
<tr>
<td>Ethical behavior</td>
<td>Not cheating on tests or assignments, not violating agency policies at placements</td>
</tr>
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(continued page 11)
Some students take issue with these standards, insisting that school is not work and that they should only be evaluated on acquired knowledge. They do not see expectations about their behavior and priorities as relevant or appropriate to their education. While post-secondary education in the helping professions is not purely the world of work, it is also not purely school, as it is meant to be a bridge between these two roles of student and human services practitioner.

The Changing Classroom and Challenges to Contemporary Education

Within the past several years the classroom for all college students, including human services, has drastically changed. There has been a proliferation of online degree programs. Many human services students may never sit foot in a traditional classroom, and there is an ever growing desire and demand for increased online education opportunities. While some prospective students prefer technology over the traditional educational environment, often these students are working adults who want online options as they attempt to complete their degree while also still working, either full or part-time, and while maintaining a family (Rehfuss, Kirk-Jenkins, & Milliken, 2015). This ever-changing nature of how education is delivered is forcing all colleges and programs to adapt and to reconsider what they offer and how they offer it.

These developments should be a cause for pause; inherent to any assets are also liabilities. It is a definite necessity that universities and human services programs need to adapt and make education more accessible to an ever expanding broad array of students. It is also necessary for human services educators to make sure that they are offering courses and coursework that are relevant and applicable to contemporary professional practice. Programs must make sure that they are scheduling and offering courses, especially those required for graduation, in a way that not only allows students to graduate in a timely manner, but also in ways that are accessible and accommodate various learning styles and preferences.

While adapting universities generally, and human services programs specifically, still need to ensure that they are maintaining high standards. These transitions over the past several years have seemed to create an unfortunate race to the bottom, as many programs feel increased pressure from either their institution or external sources, such as federal financial aid, to not only make sure that students graduate, but that they graduate within defined timeframes.

The pressure to successfully and timely graduate people, coupled with an expanding competitive variety of online degree options with aggressive marketing campaigns, has seemed to skew expectations about higher education. A current prevailing message seems to be that it does not really matter what degree one obtains or from where they obtain it, only that they complete their degree and in as short of a time as possible. This places an overemphasis on simply obtaining the degree and not the quality of the knowledge or skills that are gained.

This message also communicates to potential students, either bluntly or inadvertently, that they can expect to get an advanced, post-secondary degree in their spare time with little to no disruption to their lives, at a time, place and in a format that is completely convenient to them and meets their preferences, and all with little to no effort or sacrifice on their part. Such messages of convenience sadly prey on desperate, vulnerable adult learners who are not always informed consumers and who are only looking to improve their lives and better their circumstances.

Some advertising slogans for these institutions are not promising credit for life experience, seeming to imply that a college education does not really offer anything new or of value, and that individuals already know what they need. While this is certainly applicable for some professions, it seems misguided for human services and other related helping professions. Some schools have even adopted marketing campaigns that guarantee graduation in four years. While schools need to make sure that their course offerings support the ability of students to graduate in four years and provide quality academic advising that assists students finishing successfully, this marketing tagline removes all accountability from the student and unfortunately conveys the message that as long as one enrolls and follows the defined classes, regardless of performance, that they are guaranteed to graduate.

Post-secondary education, especially development in the human services profession, requires commitment, extensive hard work and personal sacrifice. Expecting people to spend hours on projects and to change their life and work schedules to accommodate classes and field placements is part of the developmental process for becoming a helping professional. I acknowledge that these points are a hard sell in a current culture that demands effortless immediacy. Still I believe to suggest that becoming a human services practitioner is fast and easy does a disservice to students, and more importantly to our profession and the clients we serve. Many students have begun to believe that if they get a specific degree that they are guaranteed a particular job. I try to educate students that having a particular degree does not guarantee a job. Having a particular degree may get them an interview, and ultimately it may initially get them a job, but their knowledge, skills and performance will keep the job, regardless of degree.

Who is the Customer?

Both statements are true—the human services profession has to adapt to accommodate an ever growing and diverse group of non-traditional trainees, and the human services profession needs to maintain high professional performance standards and expectations. Lowering standards for the sake of expanded enrollment and increased graduation rates ultimately poisons the well. Human services educators are in a difficult spot in deciding who their client is because in addition to students they have multiple clients. I often tell students that when I develop my standards I am dedicated to supporting their success, but that I also have to think beyond them to the agencies where they will work, the communities where they will practice, to the profession they will represent, and most importantly to the clients they will serve. Those clients deserve high quality care and services, and it is part of my duty and responsibility as an educator to try and influence training standards in a way that honors this noble commitment.

References


Thoughts on Advocacy from NOHS Membership

Earlier this year I was appointed NOHS Advocacy Chair by our esteemed President Tammi Dice. Feeling a bit overwhelmed at the number of potential issues available for advocacy involvement, I wanted to learn from NOHS members what issues were important to us as a group. To that end, I put out a call, via an email blast and a post on our Facebook page looking for answers. I posed four questions, though responders were not required to respond to all four. I received more than 40 responses and most did respond to all questions presented.

The email referenced our responsibility noted in NOHS Standard 16 that Human Service Professionals “advocate for social justice and seek to eliminate oppression.” (National Organization for Human Services). They raise awareness of underserved populations in their communities and with the legislative system.” The actual questions posed were the following:

- What issues do you find most significant and in need of advocacy?
- How do you, personally, advocate for social justice? (Please be as specific as possible)
- With regard to which issues would you like to see NOHS, as an organization, advocating on behalf of the people we serve?
- What ideas do you have for involvement of NOHS in advocating for social justice?

I was both pleased and surprised at the responses I received, not just in terms of the number of individual who took the time to respond, but also with regard to the thoroughness and thoughtfulness of the responses. I was also surprised and impressed with the amount of advocacy already being undertaken by our membership. In many ways, it appears NOHS, as an organization, is remiss in its lack of involvement regaing these significant advocacy issues in being far less active than its membership.

Issues in Need of Advocacy

Responses were wide ranging and varied in regard to the issues in need of advocacy. Seven members made reference to the numerous issues elevated to the level of urgency due to the current administration. Others referred to concepts such as “the illusory” and failed US economy has further unmasked the existing disparities in income which have directly impacted underserved communities in detrimental ways.” One respondent, apparently overwhelmed at the numerous issues requiring attention, simply responded “All of them!” Nonetheless, there were some issues that seemed more than the minds of our members than others.

Health care was mentioned most frequently as an issue in need of advocacy. Members referred to the need to preserve the Affordable Care Act and also the need to develop affordable universal healthcare. The overwhelming consensus appears to be that our membership sees health care as both a need and a right and is concerned about efforts to repeal the ACA with no adequate replacement. This appears to be an issue that resonates with the greatest number of members.

Homelessness and a lack of affordable housing run a close second in terms of specific issues mentioned requiring advocacy. This included both the number of homeless, limited resources for the homeless population as well as the increasing cost of housing in our country. This last factor appears to lead to additional persons and families becoming homeless in addition to making it more difficult to get back on one’s feet after being homeless.

The third key issue mentioned by the greatest number of respondents was immigration. The concerns here ranged from the Immigration/Muslim ban the current administration attempted to impose to the rescission of DACA, the Deferred Action for Childhood Arrivals Program. Strong opinions were shared about the need for advocacy on behalf of all impacted by these policy changes.

While these issues were the most often mentioned, I don’t mean to imply they were the only issues of concern. Our membership feels passionately about many issues. Others mentioned included the need for advocating for LGBT rights, as well as those of women, people of color and the mentally ill. Criminal justice reform, especially with regard to drug offenses and rights of ex-offenders were mentioned, as were the issues involved with young people aging out of foster care without proper services and support available. Victims of child abuse and neglect, as well as victims of domestic violence were also mentioned by several members. Finally, several simply indicated the existing issues of sexism, racism, poverty and the working poor in their responses.

Individual Advocacy

I must confess I was surprised and pleased at the numbers and types of advocacy in which individual members are already engaged. As a active advocate myself, I was pleased that many, in fact most, respondents indicated numerous activities in which they were already involved. Some of the most commonly mentioned activities included contacting legislators regularly, by telephone and email, as well as testifying at the State Capitol and at hearings as well as speaking at town halls.

Many other members indicated they were active in attending marches and rallies. In fact, everyone who mentioned these activities placed the emphasis, indicating they attended more than one, some regularly attending such events to make their voices heard. In addition, there were many other advocacy activities indicated, some of the most common included volunteering with various agencies and donating to support either causes or agencies providing services to an identified population.

Issues with Which NOHS Should Be Involved

Strong opinions were shared regarding NOHS involvement with causes. Many respondents felt NOHS should take positions on the same issues they identified in response to the first question. Again, some of the issues most commonly listed included, as one might expect affordable housing/homelessness, health care and immigration. In addition, as far as organizational involvement was concerned, rights of the LGBT population was frequently mentioned, as well as rights of women, especially reproductive rights, and rights of people of color.

Suggestions for NOHS Involvement

There were many suggestions for how NOHS could and should be involved with these identified issues. A common suggestion included becoming more involved in the political arena. Several suggestions for this type of involvement included releasing position statements on various issues, endorsing and supporting candidates for office that espouse similar views and being a visible and identified presence at rallies, such as posting a banner or large sign. Actually taking the role of organizing in rallies was another intriguing suggestion, as was an actual advocacy campaign holding events, town hall and fundraisers to increase awareness of the issues. It was also suggested that NOHS take the steps of contacting legislators, both as a national group as well as the various regions, regarding various identified issues.

It appeared that all members responding to my informal survey were of the opinion that NOHS should be more involved than we currently are with regard to these significant social issues. To that end I would like to organize a committee to discuss, plan and carry out various advocacy activities consistent with our mission and ethical code. If you are interested in participating, please contact me at dberry2@kaplan.edu. As was rather eloquently stated by one respondent, “We need to stand for something, not fall for anything!” Are you ready to take a stand? Will you be a voice for the voiceless?

Reference:

Diane M. Berry
Kaplan University
NOHS Advocacy Chair
The 2018 National Organization for Human Services conference will be held in Philadelphia, PA, October 24-27

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Sponsoring at the 2018 NOHS Conference provides a beneficial means of improving your competitive edge by improving your organizations image, credibility, and prestige by supporting events that your target market finds attractive. Event sponsorship in particular can be especially effective as a marketing tool as it can be a means of accessing a wide range of audiences such as decision makers, government entities, and customers. Sign up at https://www.nationalhumanservices.org/sponsorship

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Consider submitting your article for consideration in the Human Services Today publication which is published twice a year. Deadline for consideration for the next publication: 1/31/2019

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