INTRODUCTION

This topical brief provides insight into the lived experiences of Childhelp hotline counselors responding to help seekers during a pandemic.

Background

For more than 60 years, Childhelp has served children, families and those seeking help in the prevention, intervention, and treatment of child abuse and neglect issues. An integral part of Childhelp is their National Child Abuse Hotline, staffed 24/7, 365 days a year by professional, degreed crisis counselors.

In 2019, Childhelp received a grant from the U.S. Department of Health and Human Services to enhance their hotline and be the lead agency for the Prevent Abuse of Children Text and Chat Hotline (PACTECH) Project. Grounded in a crisis intervention model, PACTECH provides professional counselor support through text and chat technologies for help seekers looking for information, support, and resources related to child abuse.

In 2020, the COVID-19 pandemic and onset of mitigation efforts to flatten the curve, coincided with a spike in the number of help seekers and increased job demand for the hotline counselors. Childhelp, as a trauma-informed organization, recognized that their counselors were at a greater risk of facing compassion fatigue and/or secondary trauma and decided to check in with their counselors. As such, Childhelp worked with their project evaluator, the Southwest Interdisciplinary Research Center (SIRC) at Arizona State University to conduct two focus groups, one for counselors, and one for counselors who are also supervisors. The objective was to explore their professional quality of life during a pandemic, including their experience with COVID-related stress at work, and their ability to protect themselves against compassion fatigue.
METHODOLOGY

Qualitative methodologies are suited for research that aims to investigate a particular phenomenon from the perspective of those experiencing it. The theoretical framework for this study is the Professional Quality of Life Theory and Measurement (QOL) developed by Stamm (2010), a commonly used measure of Compassion Fatigue (CF) and Compassion Satisfaction (CS) (see Figure 1).

Focus Groups

The first 90-minute focus group was held on June 15, 2020 from 6:00-7:30 p.m. with four female supervisory counselors. The second 90-minute focus group was held on June 16, 2020 from 6:00-7:30 p.m. with seven counselors, two males and five females. Participants were hotline counselors and supervisors who responded to a notification about the focus group sent by Childhelp. Interested counselors and supervisors contacted SIRC with their intent to join the focus group. A consent form was sent to be signed and returned before the start of the focus group; participants were asked to read and sign the IRB approved consent forms virtually. Once the signed consent form was received, participants were provided a zoom link for the focus group and a copy of their consent form. The focus group discussion was audio-recorded using Zoom audio-recording software which was then stored on an ASU protected drive.

Participants were asked eleven questions that included subparts. The first set of questions asked about the counselors’ compassion satisfaction. The second set of questions asked about their compassion fatigue. The third set of questions inquired about secondary stress and the final questions requested suggestions regarding future trainings.

A thematic analysis (Braun & Clarke, 2006: 79) was used for examining the narratives within the transcripts, which were read and re-read for defining initial codes. Once codes had been ascribed, potential themes were identified, reviewed, and defined.

Figure 1: Diagram of Professional Quality of Life

FINDINGS

The primary aim was to gain a greater understanding of the hotline counselor/supervisor professional quality of life while working with help seekers during the COVID-19 pandemic. The major findings and themes are discussed in two sections, Compassion Satisfaction and Compassion Fatigue. In addition, the participants were asked about training in which many communicated that Childhelp did a good job of training. Suggestions for future trainings included domestic violence, substance abuse, custody and visitation, mental health, technology, and social-cultural issues.
Compassion Satisfaction (CS)
Hotline services are critical in providing care for individuals seeking help. Not only is compassionate care essential for superior outcomes but research has shown that individuals who report higher levels of CS report lower levels of CF and derive a feeling of fulfillment from doing their work well (Ray et al., 2013; Stamm, 2010).

Two prominent themes emerged from the CS discussions, (1) providing a safe space for any age, time, or situation and (2) resilience and empowerment. These are discussed.

1. A Safe Space (any age, time, situation)
“I really enjoy that we are a safe space for people.”

In the positive stories shared about their work, the participants expressed their enjoyment in working for an agency who provides a confidential outlet for help seekers who need to feel heard. The participants made it evident that CS was a vital part of work with help seekers. They found their connections to be rewarding and inspiring, and expressed appreciation to be in a work environment where they can offer their skills to help others.

“Typically, we are the first person that heard them out. That didn’t rush them, gave them the time and space that they needed, and made them feel heard.”

Participants agreed “people just want to be heard” and “we have the opportunity to hold that space for them.” Interestingly, participants expressed an unspoken yet shared tenet among them; they help everyone even if it is unrelated to child abuse. The idea that “we are here for everyone” was clear.

“Grandparents, children, mandated reporters—really helping navigate the ship when they are lost at sea. That is satisfying and fulfilling.”

Also central throughout the conversations was the pattern of listening to distressed help seekers get through a hard time by validating and allowing them to vent, release emotions, and although “you may not solve anything, they walk away feeling better, grounded, and refreshed.” The notion of “just listening” or “making them feel heard” was a simple yet effective tool that the counselors employed to be able to help all different types of help seekers.

“Just letting them know that you’re listening. It is very powerful, positive way to impact. Even if you can’t provide them answers.”

2. Resilience & Empowerment
“Success happens when you help others succeed.”

The participants established that their work has both a positive effect on their professional quality of life and also provides tools of empowerment for difficult decision-making that can strengthen this effect. Empowering the help seekers to be brave, and to reframe the problem with additional affirmations helps them realize how strong they have been for enduring abuse for years and strengthens their ability to develop a plan and take the right steps: “we help them to understand that it's a process, and it takes time.” For those who enjoy their work despite its challenges, this can be attributed to vicarious resilience. Vicarious resilience is a concept that reflects the reality that professionals may experience positive outcomes and find that they gain improved skills to reframe and cope with negative events in the process (Hernandez et al., 2007).
“Empowering them to make a decision whether that is reporting a family member and to let them know what they are going through is really hard and validate their feelings.”

Empowerment and resilience were particularly notable with the supervisors who support their counselors and help-seekers. They spoke about the ability to feel reenergized when providing guidance to help seekers as well as counselors serving help seekers.

“As a supervisor, it compounds because you are helping someone, help someone else.”

Compassion Fatigue (CF)

The work of helping requires the hotline counselors to open their hearts and minds to their help seekers and unfortunately, this very process of empathy is what makes helpers vulnerable to being profoundly affected and even possibly damaged by CF. The pandemic has left counselors experiencing the same problems their help seekers are experiencing—worries about safety, uncertainty, and disrupted routines. For the counselors, they are trying to help make sense of this strange new reality while figuring it out themselves.

“In a matter of days, we are trying to come up with a new MO to give our callers and trying to figure it out ourselves.”

Three prominent themes emerged from the CF discussions and are discussed: (1) help seekers and COVID, (2) counselors and COVID, (3) supervisors and COVID.

1. Help seekers and COVID

Participants stated that COVID is creating more tension and stress for their help seekers and it is having an effect on their ability to respond to help seekers introducing child abuse issues specific to COVID and new to the hotline. Participants mentioned noticeable trends of the following COVID issues that either amplify the existing issue that was there prior to COVID or create another challenge tied to mitigation efforts such as stay-at-home orders and remote learning.

- Legal issues, specifically custody disputes adding questions about social distancing, masks, and stay-at-home orders
- Youth using chat and computer to reach out because parents take phones away and no land lines exist to call for help
- Stress of isolation and the need to help identify or build coping skills that have been impaired by COVID
- Family dynamics that include loss of employment or being stuck together with restricted movement
- Older kids responsible for younger siblings while parents work
- School closures and the loss of trusted adults in children’s lives; no safe place
- Parents afraid to take kids to daycare
- PTSD for college students having to leave their safety net and go back home to abuse or being re-traumatized
- Caseworker in need of resources or temporary foster care for children with COVID sick parents
- Repeat help seekers needing mental health attention
- Devices being monitored by parents; use of screen monitors and spyware
2. Counselors and COVID

“I can’t give a definite answer of what to do, and I’m getting the energy that they’re looking for that and I can’t misguide them in that direction.”

In dealing with these new or evolving issues, the counselors expressed difficulties in meeting the increased volume, but more so facing the challenges of not being able to use a solution that would work prior to COVID. Familiar support systems or tools that were once good suggestions for the next step were no longer available. Thus, the counselors voiced this internal distress and impact on self-confidence was one of the greatest challenges brought on by COVID.

“I would say the most challenging is that piece of trying help them to develop coping skills. Some of them include having a support system that they do not have access to and it can make you feel helpless as well.”

COVID has also brought about “working from home” and that situation has both positive and negative aspects. For the counselors who were more seasoned, they considered working from home a “breath of fresh air” while a recent new hire commented by saying, “I feel engaged with my work, but I feel like I would be double engaged if I was in the office.” While many mentioned the positive of being at home (pets, family, pictures of loved ones, nearby bathroom, medicine cabinet), many agreed that they were still adapting and concerned about the loss of socialization with co-workers and how that is associated with CF.

“There is a lot less collaboration because it is difficult on internal chat, there is a lot less venting, you are not able to verbally vent.”

3. Supervisors and COVID

“There are days that are nonstop.”

The level of CF experienced by the supervisors was much higher than that of the counselors. While all the supervisors expressed some symptom of CF, none of the counselors voiced experiencing any CF. It appeared that the supervisors have been effectively doing a good job of checking in with their counselors.

“Observing as many calls and digital communications as we can so we can better catch when one of the counselors is struggling or has taken a really tough call or text and encouraging them to take some time off.”

The supervisors also conveyed that Childhelp had experienced great growth in the last year. With the pandemic and working remotely, some felt they were juggling more tasks while tackling new challenges.

“I had to become a tech expert and I’m the furthest thing from a tech expert”

Supervisors provide a layer of support for both help seekers and their team members, yet COVID has made that more difficult. Moreover, the supervisors are multitasking on multiple systems, and pulled in many different directions, which can affect their self-confidence and work. A supervisor expressed that due to the pandemic it was hard to make new hires feel part of the team and it also gave them more work to check in on staff thus making it necessary to have a good internal communication system to continue relationship building and co-worker support.
CONCLUSION

PACTECH hotline counselors and supervisors provide crisis and information services to help seekers via chat, text and calls on a 24/7 basis, yet they themselves are experiencing increases in both the aspects of positive compassion satisfaction (CS) and negative compassion fatigue (CF) while helping others during the COVID-19 pandemic. By offering professional help in a confidential environment and in a mode that is comfortable for youth in the target population of ages 13-24, they aim to connect youth to help when child abuse and neglect has already occurred.

In this time of national crisis when hotline counselors’ service is more needed than ever, it is important to recognize the positive (CS) and negative (CF) experiences of helping others. From focus group discussions, two prominent themes emerged around CS: (1) providing a safe space for any age, time, or situation and (2) resilience and empowerment; further, three themes emerged around CF (1) help seekers and COVID, (2) counselors and COVID, (3) supervisors and COVID. Knowing and addressing these aspects raised by counseling professionals can assist them, and importantly the help seekers they serve, in providing the needed information, services and strategies while reducing stress, increasing hopefulness, and connecting youth to supportive information and services.

REFERENCES


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