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## An assessment of supervisory well-being in a statewide guardian ad litem program

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## **Introduction**

Leaders in organizations approach change in ways that can enhance or diminish employee wellbeing. A strategic process of making organizational change, driven by top management, is organizational development. We use a case study to examine the process of an organizational assessment in a state Guardian ad Litem program and examine the findings against a non-equivalent comparison group. The success of any kind of organizational development work is contingent upon many complex factors. When we reflected about the defining feature of this project that led to its success, the quality of leadership stood out.

## **Review of the Literature**

### **Guardian ad Litem Programs**

Guardian ad Litem Programs recruit, train, and supervise volunteers who are court-appointed to represent and advocate for the best interests of children in family court proceedings involving allegations of abuse or neglect. We assessed a program that employed 81 administrative staff members who managed 1,300 volunteers. The volunteers provide services on behalf of abused and neglected children and serve as the voice in court for each individual child within the Child Protective Services system. Given such heavy exposure to children who have experienced abuse and trauma, both volunteers and their supervisors are at increased risk of experiencing vicarious trauma: the impact of witnessing the pain and suffering of others (Jordan, 2010). In addition, the Guardian ad Litem (GALs) and their supervisors observe loss, conflict, and family breakups, which often evoke their own personal grief and loss reactions.

Family court proceedings are often fraught with hostility and conflict, with the GAL caught in the middle. GALs are exposed to the disclosure of family secrets, pathological behaviors, personality disorders, and disintegration of families (Boumil, Frietas & Frietas, 2011).

While the GAL is an advocate for the child and a neutral investigator, individuals and families caught up in proceedings can quickly view the GAL as hostile. The GAL may be a target of family frustration and experience threats, intimidation, and harassment. In extreme cases lawsuits may be filed against the GAL.

As Smith (1989) noted over two decades ago, GALs were—and we believe continue to be—inadequately prepared to manage such complex and difficult work challenges. Some jurisdictions employ GALs with varied backgrounds and diverse skill sets, and offer little training. We assessed supervisors who manage volunteers embedded in such an environment. There is ample evidence of challenges and risks for these volunteers and the supervisors who manage their work.

### **Organizational Development**

Organizational development is an effort to enhance problem solving and foster renewal in an organization by addressing organizational climate and culture. This is accomplished by helping people and groups impact the organization by initiating and managing change through healthy relationships and interactions (DuBrow, Woche, & Austin, 2001). A distinction is made between organizational climate and culture, with the former addressing how employees perceive their work environment and the latter focusing on how things are actually done in an organization (Glisson, 2007).

The importance of case study methodology has been established both in social work research (Campbell, 1979; Gilgun, 1994) and in organizational research (Maanen, 1979; Price, 1968). A quick review of the literature in each discipline will reveal volumes of published studies that use case methodology for describing organizational and individual phenomena. Organizational developers have to form intense relationships with organizations and those who

govern them to impact practice with their inquiry. We suggest that the intensity often derived in single case studies helps elucidate the key processes.

### **The Case**

The Executive Director (ED) was aware of the complex challenges that supervisors faced in the Guardian ad Litem program as she routinely interacted with traumatized supervisors. The Guardian ad Litem program experienced budget cuts from 2001 through 2005. The organization was doing more with less, and in 2007-2008 was facing the prospect of more cuts. This exacerbated anxiety, job strain, and stress. The ED wanted to demonstrate her support of employees and value them in tangible ways. The ED and another top level administrator contemplated working with an Organizational Developer (OD) to support an organizational assessment and intervention.

Serendipitously, the ED and top manager attended social work field instructor training in the fall of 2007 at a University in the Southeast. The GAL program was a placement site for social work interns. As part of the training, the OD presented an overview of indicators of employee and organizational health. The OD encouraged self-care behaviors and challenged supervisors to create a vision for health in their organization. The ED and the manager approached the OD immediately after the training about the content of the presentation. It was clear there was a shared vision and passion about working together. We exchanged contact information and agreed to continue the conversation.

In the fall of 2007, the ED and OD met several times, exchanging ideas and discussing possible ways to assess the organization and what factors would be important to capture. Given the ODs past experience studying risk and protective factors related to the well-being of social workers they wondered how these supervisors would score and differ on these same risk and

protective factors. So they agreed to examine the results against a comparison group of social workers.

In the spring of 2008, the OD and ED administered four measures of employee health (social support, self-esteem, caregiving identity, and distress) in an assessment of the GAL supervisors. University IRB approval was obtained and an online survey was created to capture these factors. The ED invited supervisors to participate in the assessment. The URL to the survey was sent to all the supervisors in an email from the ED.

After the assessment the supervisors were invited to attend a workshop to discuss the results whether they had completed the survey or not. The OD communicated that he was a partner in mutual learning and growing and accessible, not as a “detached” researcher. Prior to disseminating the results the OD presented information on secondary traumatic stress, distress, grief, and turnover, as well as job satisfaction, coping, resilience, effective supervision, and wellness as a way of life.

The results of the assessment of GAL supervisors were compared to a previously collected random sample of social workers in Kentucky. Staff members were invited to ask questions. The day ended with small group activities and the employees were asked to set personal and professional goals around well-being and work effectiveness. They were also asked to identify possible solutions to current workplace and organizational problems. We encouraged solutions that focused on what was within their control.

The next section outlines the findings of the assessment. We present the research methods, how the data were collected, the measures that were used, and results of the supervisor assessment against a comparison group. We also discuss our observations and analyze how the

staff processed the results of the assessment. After the methods and results section, we discuss the salience of leadership and supervisory support.

### **Method**

An anonymous Internet survey was used in a cross sectional non-equivalent comparison group design. The assessment was cross sectional, measuring employees at one point in time, and contextual because the assessment was of one statewide Guardian ad Litem program. The non-equivalent comparison group design allowed us to examine differences with a random sample of social workers in Kentucky (n=203). The social workers in the comparison group worked in diverse setting across the state in urban and rural areas in mental health (31%), with children and families (21%), older adults (13%), and much smaller percentages in private practice, school based services, addictions, and faith based settings.

An e-mail invitation was sent from the executive director's office inviting every supervisor in the Guardian ad litem program to participate in the assessment. The e-mail, including a consent preamble, a brief overview of the assessment process, and the survey link, was sent to 81 supervisors. After 2 weeks, an e-mail reminder was sent out. One month after the first invitation, 57 supervisors (70%) had responded. Examination of the data revealed four unusable surveys. The final response rate of usable surveys was 65%.

The entire data collection package had 58 items, including demographic questions, and measures of self-esteem (internal coping), social support (external coping), caregiver role identity, and distress. With the exception of the demographic questions, all of the items were anchored on a 5-point Likert scale (1 = Never, 2 = Sometimes, 3 = Half the time, 4 = Most of the Time, and 5 = Always). The data were collected online using a secure server and Survey Monkey. The data were analyzed using SPSS 21 and G\*Power 3.1.

## Measures

***Self-esteem.*** The Corporate Behavioral Wellness Screening Inventory (CBWSI) is a self-report instrument developed by organizational social workers to measure strengths of employees in the workplace (Faul, 2002). The complete instrument includes 185 items that assess 28 areas of organizational, personal, and social functioning. Each of the 28 areas can be used independently so that a researcher could develop a unique organizational assessment profile based on which factors are most salient to measure.

We used the self-esteem scale to measure individuals' internal mechanisms that buffer stress, including their feelings of self-worth (e.g., feeling important, special, valued, respected, and needed) and how positive one's outlook and attitude are. Sample items were, "I am important," and "I focus on the positive elements in my circumstances." The internal reliability of this measure was excellent with a Cronbach alpha of .94 (Faul, 2002).

***Social Support.*** Social support was measured with the social support subscale of the CBWSI, which measures whether the respondents perceive they have someone who provides tangible and palpable support, or can be relied upon in a time of need. It is a measure of "external" coping in that having tangible support in times of need helps people cope with stress. Sample items were "I can count on someone when things go wrong," and "I have someone who is a real source of comfort for me." Cronbach alpha was .86 in the validation study (Faul, 2002).

***Caregiver Role Identity.*** The Caregiver Role Identity Scale (Siebert & Siebert, 2005) has been used to measure caregiver role-based identification among samples of social workers (Pooler, 2008). The caregiver role identity scale measures the degree to which social workers' and other helping professionals' identities center on caregiving across domains of life. Social workers who have a strong caregiver role identity remain in the active "helping" mode with

family and friends, suppress other roles, and tend to minimize their own problems. Research has shown that social workers who develop their identity around a caregiving role were vulnerable to depression, impairment, and had difficulty asking for help with substance abuse problems (Siebert, 2005; Siebert & Siebert, 2007). Sample items are “I find it easier to care for others than to care for myself,” and “it is difficult for me to tell a friend or family member that I cannot help them with a problem.” The Cronbach alpha from previous studies ranged from .82 to .84 (Pooler, 2008; Siebert & Siebert, 2005).

***Distress.*** Distress was measured with the K10 Symptom Scale. The K10 measures psychological distress, and was developed through a series of pilot questions administered to a sample of the general population in the United States through mail and telephone surveys in 1992 (see Kessler et al., 2002 for information on the validation process and its psychometric properties). It was used in various national surveys (for example, National Survey on Drug Use and Health (NSDUH), 2012) and with a random sample of social workers (Pooler, 2008).

The K10 measures subjective experiences rather than stressful life events, because people respond to life events and circumstances differently. The K10 is a 10-item short-screening scale that contains statements about feelings of hopelessness, restlessness, nervousness, depression, and worthlessness. Respondents were asked how often they had experienced those feelings over the past 30 days. Sample items were “during the past 30 days about how often did you feel so restless that you could not sit still?” and “during the past 30 days about how often did you feel that everything was an effort?” The alpha coefficient ranges from .82 to .88 in prior research.

We used descriptive statistics and frequencies on demographic variables and descriptive statistics on the four different measures. The comparison group was a previously obtained random sample of 213 licensed social workers from Kentucky (Pooler, 2008). We used the t-test



to determine whether the differences in scores on the measures between the two groups were statistically significant. The t-test is also robust against violations of the assumptions of the test.

### Assessment Results

The staff who supervise the 1,300 volunteers were 79% white, and the other 21% identified themselves as African American. Ninety-six percent were female and were, on average, 50 years old. The average household income was \$69, 960. They had been supervising GALs for an average of six years and reported supervising an average of 19 volunteers.

The Kentucky social workers were 96% white and 85% female and 45.5 years old on average. Their average household income was \$76,824 and had been at their current position for 7.1 years. Most worked in mental health (31%) and with children and families (21%)

On the self-esteem measure the possible range of scores was between 13 and 65 and the mean was 50.11 and median 52. Higher scores indicated higher self-esteem. The Guardian ad Litem staff had slightly lower scores than the social workers in Kentucky on this measure (see Table 1).

**Table 1**

*Self Esteem  $\alpha=.96$*

Range 13-65	Guardian ad Litem Staff	Kentucky Social Workers
Mean	50.11	52.75
Median	52	54
SD	9.2	7.9

On the external coping measure (social support) scores ranged between 6 and 30, with the staff scoring a mean of 25.11 and a median of 26.50. Higher scores indicated higher social support. On this measure the Guardian ad Litem staff had lower scores (see Table 2).

**Table 2**

*Social Support  $\alpha=.95$*

Range 6-30	Guardian ad Litem Staff	Kentucky Social Workers
Mean	25.11	27.71
Median	26.50	30
SD	5.2	3.9

On the caregiving identity measure, scores ranged between 9 and 45, with a mean of 33.85 and a median of 34. Higher scores indicate more identification with the caregiving role. The Guardian ad Litem staff had higher caregiving identity scores (see Table 3).

**Table 3**

*Caregiving Identity  $\alpha=.81$*

Range 6-30	Guardian ad Litem Staff	Kentucky Social Workers
Mean	33.85	29.19
Median	34	30
SD	5.7	6.4

On the K10 scale, a measure of distress, the Guardian ad Litem Staff had a mean of 17.75 and a median of 16. Using a suggested scoring method of placing respondents in three categories, 44% were low, 48% were in the moderate range, and 8% were in the high range.

GALs had higher instances of scores falling in the moderate and high range distress categories than social workers in Kentucky (see Table 4).

**Table 4**

*Distress  $\alpha=.89$*

	Guardian ad Litem Staff (mean=17.75)	Kentucky Social Workers (mean=15.54)
High	8%	2%
Moderate	48%	41%
Low	44%	57%

Almost half of the supervisors scored in the moderate range. People who score in the moderate range are 3 times more likely than the general population to have a current anxiety or depressive disorder. Almost 10% of the supervisors scored in the high range and people in the high range have 10 times the risk of the general population of having a current anxiety or depressive disorder (Kessler et al., 2002).

Using the t-test to look for significant differences between the groups, we found that the differences were statistically significant on all four measures ( $p < .05$ ). We used G\*Power 3.1 to calculate the t-test and to determine effect size (Faul, Erdfelder, Buchner, & Lang, 2009; Faul, Erdfelder, Lang, & Buchner, 2007). The largest effect sizes were found on the caregiving identity measure and social support (see Table 5).

**Table 5***Mean Differences, the T-Test ( $p < 0.05^*$ ) and Effect Size*

Measure	Mean Difference	t value	P value	Effect Size
Self-Esteem	-2.64	2.12	.04*	.31
Social Support	-2.60	4.07	.000*	.57
Caregiving Identity	+4.66	4.88	.000*	.77
Distress	+2.21	2.84	.005*	.41

Because this was an assessment in one organization, it is not generalizable. However, other Guardian ad Litem programs may find the results useful and our findings provide preliminary evidence that supervising volunteers who advocate for traumatized children and their families has an impact on well-being. In the next sections we explore the implications of this research. However, we first discuss the workshop and some of our observations, and provide a discussion of leadership.

### **Discussion of the Workshop**

The supervisors were eager to hear information about how they could focus on wellness. In the large group they reported feeling validated and understood and were mildly surprised that their scores were lower on the protective factor measures and higher on the risk factor measures than the Kentucky social workers. Among the supervisors, there was a palpable commitment to the organization, its mission, the volunteers and the clients. There was a paradoxical aspect to this, however. This commitment led some supervisors to admittedly sacrifice their own health and well-being to serve people, and those supervisors did not find that problematic. There were stories of exhaustion, giving and working until depleted, but they seemed to think it was worth it.

Some supervisors reported enduring extreme stress and physical illness. A culture of self-care was not evident, although many were open to the possibilities of change. It is not obvious if the lack of self-care was a feature of the organization, the type of work they do, or the type of people drawn to this work. Likely it is some combination. As an organization, they did not seem overly troubled by the culture of giving until depleted and some supervisors reported that they did not know how to care for themselves.

Most of the supervisors expressed genuine appreciation that the ED would care for them and help set up the organizational assessment and staff development workshop. There were, however, several supervisors who did not see the value in the assessment or workshop. They appeared to be some of the older supervisors, and presented as observers rather than active participants. Their reticence may have conveyed their skepticism that this staff development workshop would have any impact or benefit.

In the open discussion that ensued with the supervisors, it became clear that one key variable was not measured in the assessment. One of the supervisors in a rural area discussed her social isolation and her lack of social support in the workplace. Other supervisors in rural areas chimed in and talked about how challenging it is to be the only paid person in the office. Supervisors in urban areas had several other supervisors and colleagues in the office with which they could socialize, process, or debrief difficult problems. Since data were not collected on whether they worked in an urban or rural area, these differences were not examined. This highlights why discussion of the assessment was so important. When a key variable does not get measured, it can still be processed through discussion.

In smaller groups, we encouraged the supervisors to set both personal and workplace goals to enhance their well-being. We encouraged the supervisors to not create a false dichotomy

between work and life outside of work. Setting goals and making plans to achieve them seemed to energize the supervisors. From our observations, not all participants appeared engaged in goal setting. On the other hand, we heard many people report new awareness about their well-being and how they might improve that and become more effective leaders and supervisors.

After the workshop we reflected on the many things learned. The importance of developing and maintaining meaningful relationships between OD and key players in the organization became readily apparent throughout the project. From the beginning, as with most acquaintances, the relationship began with mutually shared interests and/or goals. In this case, the shared goal of worker well-being set the stage for partnership. Of course, serendipity also played a role in the way that the key characters were first brought together. It should be noted that interest was sparked because of a sincere and authentic desire to make a positive difference in the lives of the workers and volunteers in this setting. This shared desire to make a difference is often a key ingredient in successful collaboration.

However, it is also important to point out that this shared goal alone cannot guarantee a successful collaboration. There are real and perceived risks in research for social service agencies. In the current evidence informed approach to social service provision, many agencies get nervous at the possibility of “evaluation” of their programs or examining the wellbeing of employees. Identifying common desires and promoting good will develops trust in the process notwithstanding the results of the study.

When we finished this project, we carefully reflected on the process of the Organizational Development intervention. As we considered the initial meeting between the OD and ED, the conversations that ensued which led to the development of the assessment and the development of the workshop with the GAL supervisors, we identified three factors related to the leadership of

the ED that we believe might have mediated the process. We believe that these factors contributed to the success of the project, although we did not measure them or consider them until the workshop was over. In the next section we synthesize some of our insights about how these factors enhanced the process so they can be made more explicit in future research.

### **Awareness**

Any process of planned change requires keen perception of organizational climate and culture (Austin, Regan, Samples, Schwartz, & Carnochan, 2011; DuBrow, Woche, & Austin, 2001; Galambos, Dulmus, & Wodarski, 2005). Leaders with heightened sensitivity are able to read signs of morale and validate employee experiences. Leadership is enhanced when supervisors listen, empathize, and actively work to support employees and volunteers. In order to do this a leader has to develop a way to gather and use feedback. Feedback can be based on observation, asking questions, or a formal assessment. Awareness cannot happen in a relationship vacuum. It requires deep personal engagement with supervisees and colleagues.

One of the ED's strengths was her heightened sensitivity to the organizational climate and her insight that the employees needed to feel more valued. One of the key problems as identified by the ED was that the supervisors seemed to have developed a "victim" mentality over time where workplace change was not managed well and appeared to lead to disempowerment of GAL supervisors. According to the ED this interfered with employees being active agents in their own problem solving.

One of the issues that the ED believed led to the "victim" mentality was the experience of vicarious trauma, and her observation that some of the GAL supervisors were being adversely affected by their work. Rather than having an internal locus of control in which they had leverage over their happiness and well-being, the employees had difficulty managing change and

some felt helpless. The ED's awareness of their reality seemed to validate the experiences of the employees in the organization and created a safer environment for making positive change.

### **Authenticity**

In organizational behavior literature, a theory of authentic leadership emerged at the intersection of the study of positive organizational behavior, leadership, and ethics (Walumbwa, Avolio, Gardner, Wernsing, & Peterson, 2007). An authentic leader is one who is *self-aware*, knowing one's own strengths and weaknesses and having an understanding of how one influences others. An authentic leader is also one who is *relationally transparent*. Such a person builds trust by expressing real thoughts and feelings while trying to minimize displays of inappropriate emotion. This is as opposed to presenting an inaccurate self or false self. Authentic leaders are *balanced processors*, who take in multiple perspectives and objectively analyze information, even when that information challenges firmly held beliefs. Finally, authentic leaders have an *internalized moral perspective*, which means that they possess the capacity to internally self-regulate according to their own sense of what is right or best, as opposed to being influenced by groups or peers or yielding unnecessarily to organizational pressures or constraints.

The capacity to work from a foundation of authentic leadership impacted the supervisors' receptivity to the assessment and willingness to complete the survey and participate in the workshop. Again, most supervisors reported that they felt valued and the fact that the ED had a good relationship with her supervisors was noted at the workshop. The ED's qualities of authentic leadership facilitated trust and provided a safe environment to contemplate change.



### **Supervisory Support**

Landsman (2008) examined the organizational commitment levels of employees in a state child welfare system through the lens of attributed employer responsibility. Organizational commitment is the strength of an employee's ties to the organization through identification and involvement. Supervisor support affected two pathways to organizational commitment. Those pathways were through *job satisfaction* and *perceived organizational support* (POS). While Landsman (2008) examined the impact of many factors on job satisfaction and POS, such as role ambiguity, workload, autonomy, job safety, supervisory support, and communication, it was supervisory support that was present in both pathways.

We clearly saw employees that were committed to the organization and their work. It is likely that the support they received from the ED had some impact on this. Based on her awareness of the needs of her employees and her care, the ED wanted to improve and enhance the well-being of the staff and volunteers and believed that as staff well-being improved, the vulnerable children served by the agency would be positively impacted. The very nature of the assessment and workshop provided a tangible opportunity for employees to experience support while strengthening and enhancing relationships.

### **Limitations and Considerations**

Although the assessment and workshop provided feedback to the Guardian ad Litem supervisors and were designed to be an intervention, we have no follow-up data to examine whether the workshop or the assessment had an impact. We have anecdotal evidence from our observations in the workshop and discussion that some people were open to change. In a follow-up conversation with the ED a year after the workshop she reported that supervisors who were motivated to change were able to use the workshop and appeared to have improved. We have

pointed to some strengths of the ED in this process, but it is not known the extent to which her leadership mitigated or enhanced the well-being of the supervisors or to what extent other factors impacted their scores on the measures. We also do not know to what extent the supervisors' well-being contributed to outcomes in the Guardian ad Litem program (e.g. volunteers being supported). It is possible that some of the supervisors are excellent at what they do even if their own well-being is compromised, or that people with strong self-care are only mediocre in their work.

Future research in this organization could include a follow-up assessment to see if there are any changes in scores on the measures. In addition, it would be important to establish links between supervisory well-being and supervisee experiences with the supervisor. Future research could explore the potential mediators of organizational awareness, authentic leadership, and organizational awareness in organizational interventions. Following individuals in an organization will pose some methodological and ethical obstacles, however.

### **Conclusion**

Supervisors who work in GAL programs face challenges and risks in their work. Compared to a random sample of social workers, the supervisors we assessed had lower self-esteem, lower social support, higher distress, and stronger caregiving identities. GAL supervisors need a supportive work environment to buffer them from the impact of their work. Healthy interactions with colleagues and supervisors are central to these buffers being effective, and organizational development can facilitate healthy relationships.

The nature of the therapeutic relationship with clients is perennially explained in clinical practice, and it may be equally as important to explore the “supervisory” relationship in organizational practice. Strong supervisory relationships, in which there is interest, deep

engagement, and trust, may be a linchpin to employee well-being. Navigating these relationships is not for the naïve or unskilled. Being a strong supervisor necessitates the ability to be highly self-aware, build rapport, communicate effectively, traverse complex challenges, and learn continually.

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