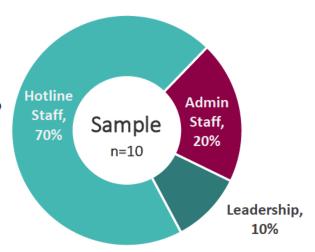
# **Staff Needs Report**

January 2023 | https://providecare.org/

# Background

In partnership with \_\_\_\_\_\_, Provide conducted a needs assessment among \_\_\_\_\_\_ staff to measure burnout, abortion stigma, and training needs. The goals of this collaboration are to (1) collect data to inform \_\_\_\_\_\_ about staff needs and offer technical assistance in finding improvement strategies, and (2) to inform the development of training that Provide will offer to staff to best meet their needs in the most responsive way. The below report reviews the findings from the staff survey and focus group conducted in November 2022.



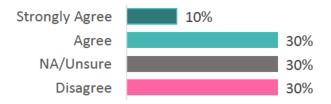
# Abortion Stigma:

The degree to which staff were experiencing abortion stigma was assessed using an adapted version of the Provider Abortion Stigma Scale Because the scale was amended to be appropriate to the context of staff, there is no scoring of this scale, and findings are based on each item (below). Overall, staff reported mixed experiences of abortion stigma, with high levels of pride in the work, feeling supported by friends and family in their work, and few experiences of threatening or violent attacks due to their work in abortion. At the same time, 50% worried about telling people about their work, 40% felt that society did not value them in their role, and 40% were fearful of putting themselves or their families at risk of violence. Given these findings, there may be opportunities for staff development work around navigating disclosing work in abortion access, how to protect themselves and their families, and feeling valued for their work.

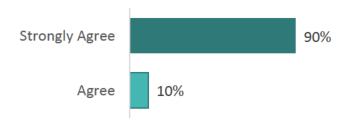
"I worry about telling people I work in abortion access"



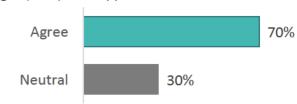
"I feel like society (the general public) does not value me as an abortion worker"



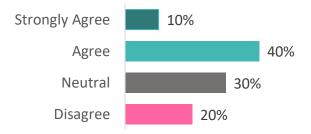
"I am proud that I work in abortion access"



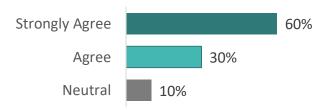
"I feel that when I disclose my abortion work to strangers, they are supportive of me"



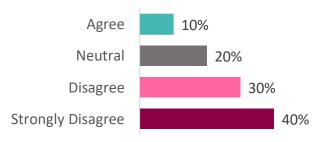
"I am afraid that if I tell people I work in abortion access I will put myself, or my loved ones, at risk of violence"



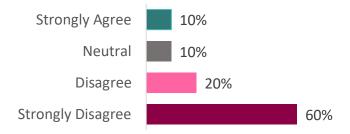
"I feel that when I disclose my abortion work to strangers, they are supportive of me"



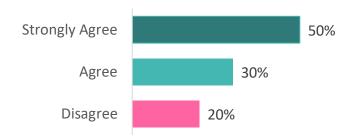
"I feel that my clients use me as an emotional punching bag."



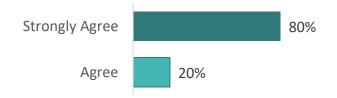
"I have been verbally threatened or attacked as a result of working in abortion access"



"I talk openly with my family about my work in abortion access"



"I talk openly with my friends about my work in abortion access"

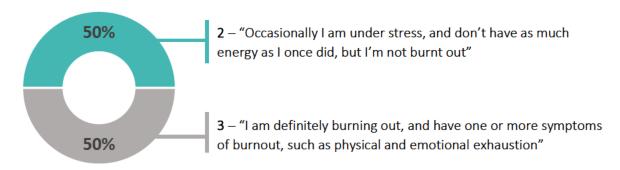


### Burnout

Burnout was assessed using 3 validated scales – the Single Item Burnout Scale (CITE), the Oldengburg Burnout Inventory (CITE), and the Professional Fulfillment Index (Trockel et. Al, 2018). Burnout among abortion workers is an important issue, especially in this current moment, and directly influences the ability to provide high-quality services to abortion seekers. This is true for abortion fund workers as much as it is for anyone in the field. Leadership is motivated to identify continued resources and improvement promising practices to support their staff, and this data directly informs training program development that will be delivered by Provide.

Overall, the survey findings paint a picture of staff who are under stress or on the path to burnout, although no staff identified themselves as being currently burnt out. At the same time, staff indicated high fulfilment in their work, feeling more engaged and energized by their job. Many of the key areas of burnout seem to be related to emotional taxation, difficulty setting boundaries for themselves, capacity, political hostility to the work, and general life circumstances and influences. Importantly, 30% of respondents said they struggled to make ends meet either almost every month, every month or more, and 60% worked 41-50 hours or more than 50 hours per week (including other jobs). This highlights that a portion of staff are giving a lot of themselves while at the same time struggling or overworking, and these circumstances should be considered.

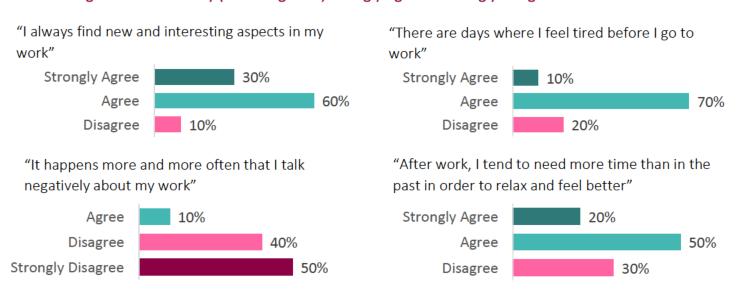
# Single-Item Burnout Scale (1 to 5):

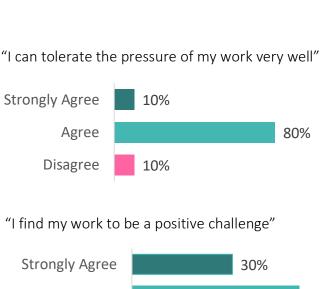


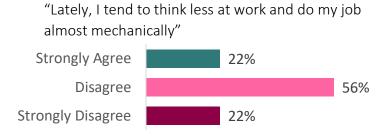
## Self-identified cause attributed to above level of burnout:

- " Flexing my empathy muscles while problem solving
- This position is a new work experience for me in Reproductive health. I have experienced burnout in previous positions.
- 4 8-hour days, emotional taxation from interactions with callers, workplace conflict, having to supplement wages with part time work to support family, school enrollment
- Wanting to be able to do it all, exceed expectations, not let down my coworkers or have them work any more than I do. Other orgs not doing their best in collaborating, unclear sense of direction (feeling like a lot of things are "up in the air" without solidifying), feeling like I am not doing enough to fully support callers and staff
- A lot of the stress feels related to capacity -- we are a small team doing a great deal of work under an increasingly hostile political environment, so I worry a lot about how we handle what needs to get done and how we take care of ourselves in the midst of all that.
- Legal landscape of abortion access and lack of preparation for this moment both as an organization with status, but also as a movement as it relates to strategy that meets to moment.
- Over working myself and not delegating tasks to other staff
- It's not because of this particular role, more so that I have been in abortion field for the past four years. It can get tiring without you realizing the impact of all the patients you speak to. It adds up. There's also not many avenues to decompress the stories you have because it's hard for people who aren't in this field to understand without asking a lot of questions which also get tiring to answer.

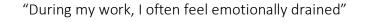
# Oldenburg Burnout Inventory (1-4 rating scale, Strongly Agree to Strongly Disagree:





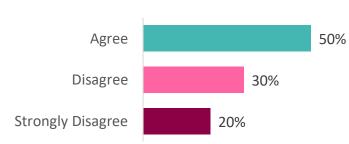




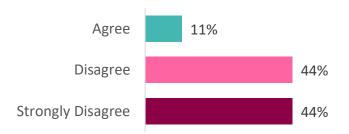




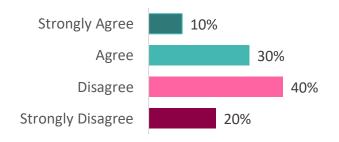
"After work, I have enough time for my leisure activities"



"Sometimes I feel sickened by my work tasks."



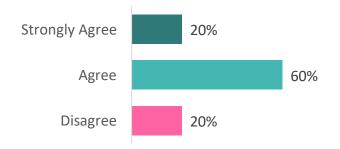
"After work, I usually feel worn out and weary"



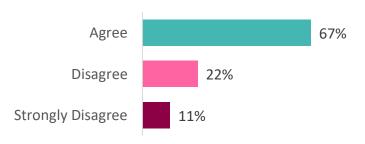
"This is the only kind of work I can see myself doing"

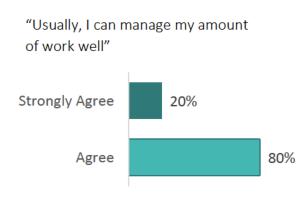


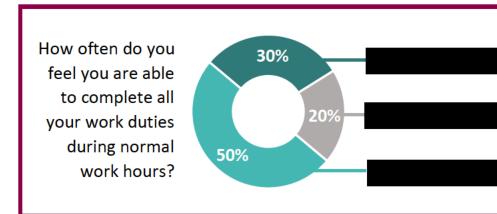
"I feel more and more engaged in my work"



"When I work, I usually feel energized"



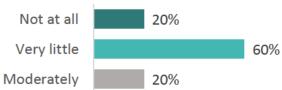




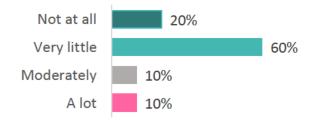
# Personal Fulfilment Scale (1-5 scale, not at all to extremely)

## During the past 2 weeks, I have felt:

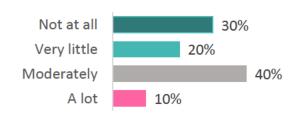
"A sense of dread when I think about the work I have to do"



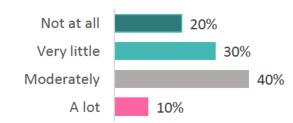
"Lacking in enthusiasm at work"



"Physically exhausted at work"

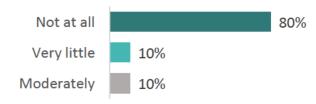


"Emotionally exhausted at work"

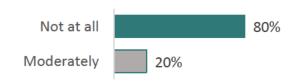


# During the past 2 weeks, my job has contributed to me feeling:

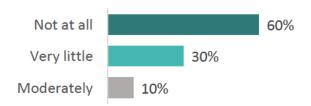
"Less empathetic with my clients"



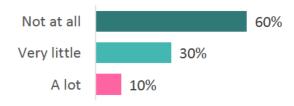
"Less empathetic with my colleagues"



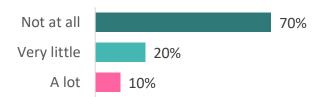
"Less sensitive to others' feelings/emotions"



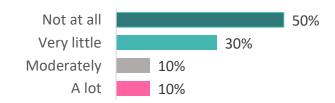
"Less interested in talking with my clients"



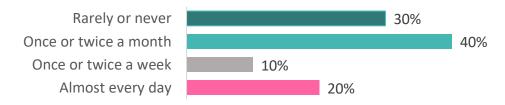
"Less connected with my clients"



## "Lacking in enthusiasm at work"



"How often do you experience a client interaction that is emotionally draining, difficult, or triggering?



# What types of supports do you get in the workplace that help you process, cope, or deal with a negative encounter?

- I like the morning check ins. Any chance to chit chat with colleagues makes working better
- I am not aware of this type of support being available.
- " general encouragement to take space after calls of that nature
- support from my coworkers, the ease of knowing they will support me if I need some time away
- Our staff can be very supportive in processing difficult client conversations and situations. For me, at least, it's helpful to be able to send a direct message to a coworker if I feel challenged by or uncertain about a situation.
- " Speaking about it to other staff, being able to take time for myself after difficult calls.
- We get a wellness stipend! Which is nice. I just need to use it on things that promote wellness sustainably. I don't know that a massage every few months will be what I need.
- I know I can at any time step away and ask for a break. I also know I have people I can turn to if I want to discuss a difficult client/encounter that will help me with processing the situation.

## What are some things that ARC-SE does really well to support you, in general?

- " allows for space to ask for help
- " Flexible time off. Office closed days.
- Check ins, Staff meetings and a weekly one on one with my managers.
- for providing material resources for wellness, institutional rest days
- Flexibility in every aspect- time off, 4 day work week
- We have an open PTO policy which is helpful for mental health breaks; we also use a 4 day work week, which helps with not feeling so overwhelmed with daily tasks. We receive a quarterly wellness stipend, which is also a nice support.
- Flexibility with time off, respecting off work status, emotional space and staff check-in and staff meeting, intentional space created for wellness
- Wellness Stipend
- Tell us to take our breaks, wellness stipends, wellness days, 4 day work week is instrumental in me being able to do my job right now. Even though I am tired, I am still able to function because of the days off we do have.

The daily check-ins and individual check-ins support me. I do find myself missing the feeling of other's working next to me, so when I can, I try to schedule office days. I find that seeing anyone from the team always lifts my spirits and strengthens my connection to our values and mission.

Are there any tools, resources, trainings, or other support that you want/need for your work that you have inadequate or no access to?

- " nope!
- "I'm not sure about specific training or resources, but feeling more connected to intersectional political movements across our region would be helpful -- especially now, finding the spaces that support abortion access and finding ways to tap into work that is already aligned with ours.
- " N/A
- " No
- " maybe a set time for everyone to explore our health insurance page together. I was trying to look for appropriate therapists and wanted to throw my laptop off a cliff within 15 minutes, health insurance is so difficult for no reason.
- Emotional support toolkit for callers. Emotions aren't the easiest for me to deal with in my own personal life so I sometimes have difficulty fully showing up for my callers when they are in an emotional state during the call. I am empathetic and have open ears but I wish I knew actually practices to incorporate during calls to soothe the caller.

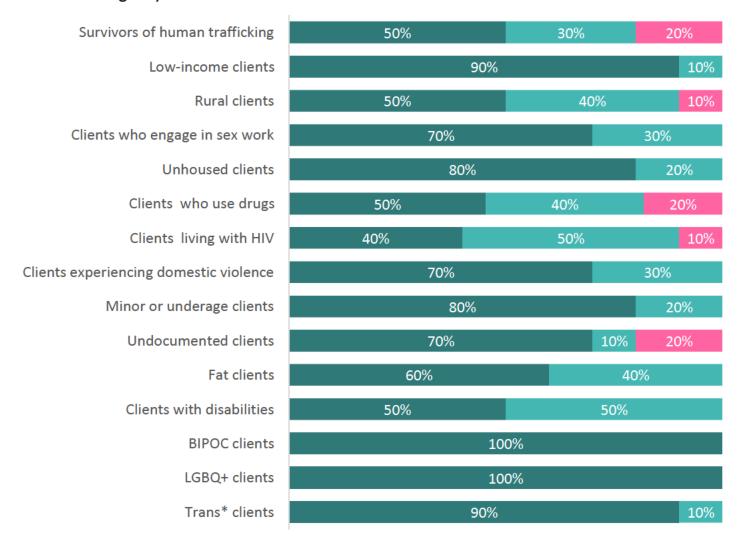
If you could make recommendations about how to help reduce staff burnout, what would they be?

- "This topic should be open for discussion and visited often.
- " higher wages, fewer hours
- " Have sessions to talk about what we are feeling and collaborate on solutions
- More avenues or opportunities to discuss the effect the work has on us; more spaces like the Staff Wellness Day that are focused opportunities to release the stress of our work together.
- " Holding spaces to talk about it
- " a field day actually would be nice
- more group outings:) and as of recent, i do like the idea of the 5k for those who are interested. It would be nice to know I am training alongside my peers. anything that fosters more in-person connection of the team.

How would you describe your ability to answer client questions about reproductive health and the abortion process?



How confident are you in your ability to fully support clients who experience or identify in the following ways?



# **ARC-SE Staff Focus Group Analysis**

What Nourishes you about the Work?

#### **Team Support**

The strongest theme that arose from what participants felt nourished by was the strength and support of the staff team at \_\_\_\_\_\_. There was a substantial amount of agreement with this point, and some staff indicated that it was the first positive team experience or the best team they had been a part of compared to prior work. Check-ins and time when staff get to connect was mentioned as an important part of this. Staff expressed that being part of a good team helped them feel connected to the work, and less siloed.

- This is like, the first team that I felt like that has actually felt like a team and the ways that we support each other and the ways that we communicate with each other, the systems that we have in place to make sure that we know what each part of the team is doing. And I feel like we do that in a way that I haven't seen anywhere else.
- "The thing about is I wake up every morning, I'm like, I love my job, and I didn't have that before in any other places. And I think a large part of that is the kind of camaraderie that we've built within the team.

So, like, other staff members help nourish me - just hearing about each other's day and our quirks...our personalities come out through our check ins, so those are always great.

## **Providing support to callers**

Participants also highlighted how the value of doing the work and accompanying callers in their process to help meet their needs for abortion care was one of the top things that nourished them about the job.

- I think when I first started working here (and still now) the thing that nourishes me most is being able to meet at least part of a material need for folks as they are traversing this hell of a landscape trying to get reproductive care.
- It feels like your cup is being replenished when callers have that sigh of release like, okay, I have this taken care of. Even if we don't get the full balance down, it always feels nice to know that there's one less bill to worry about or the bill is a little bit lower. I would also say each other.

#### What Exhausts You?

## **Post Roe Challenges:**

Participants expressed that before Roe fell, there was no cap on case loads for staff, and the increased number of calls along with increased complexity made this very challenging. implemented some improvements to reduce the burden of call volume on staff, which some expressed was helpful. Both the call volume and emotional labor was mentioned as a major cause of stress, and the efforts that implemented to improve workload as well as reduced call volume were recognized by staff. While many indicated it was much better now than immediately post-Roe, some things persisted that made the job stress higher for staff, such as more emotional distress among clients and more complex logistical work for providing practical support.

- "...from January when I started here up until, like, summertime, our call volume was ridiculous. It was madness. Call volume was super high. And as time progressed, I would engage with more people who are... emotionally distraught, which still happens, but to a lesser extent now that we have fewer calls coming in. And then particularly when... everybody was trying to figure out what life was after they overturned Roe vs Wade.
- Trying to figure out what the right information is and then communicating it with callers and having to be the first person to tell them[is difficult]. Like, 'I know you have an appointment here, but you're probably not going to be able to be seen because they banned this'. [Staff] were, like, having to hear people processing that in real time.
- I have fears about practical support. I don't know why. I've done it before and it's pretty much half of our job now after Roe fell. But just... thinking about the logistics or -- not even thinking, I'm like pre thinking, pre gaming. I have to think about...how to problem solve, getting someone to their appointment. It makes me not want to call people. But we implemented a two practical support case person thing and that's been really helpful.
- I think the situation is much better now than it was before the summertime. And I think that was another thing that was kind of adding to my stresses, just like not feeling like the help were able to provide was adequate. But now...there are just more resources in the ecosystem, period. And as things are changing and as different organizations are able to provide full funding for procedures and stuff, we're able to focus more on the practical support pieces.
- I want to treat everyone like they're individuals and their cases or situations are very unique and deserve my full, unbridled attention ... also when we had like, 50 calls in the quick chat that was really hard to do. It's better now, but it's still a problem for me personally."

## **Emotional labor and Empathy Overload:**

The challenge of being present for callers who are distressed and emotional was mentioned by many participants. On the subject of things that led to symptoms of burnout, this was mentioned frequently. When participants shared the challenges that come with managing emotions, there was a good deal of agreement in the room.

- So many people have... broken down on the phone, and it's always just a lot. Like, crying is always very jarring for me, and especially, like, crying for sad reasons. And also these **people are obviously in a very tender moment in a tender time and you want to do everything you can for them** in the moment. But sometimes it's like oh, this is not what I signed up for today.
- "...personally, it's having to exercise my empathy muscle all the time is just something that makes it harder for me to treat each person as an individual. Like, sometimes it blurs together or someone's freaking out and I'm like, I just need your call details right now. I don't need anything else. So it makes me feel less human when I'm tired because I don't want to interact. Like, I don't want to treat everyone like they're the same.

#### **Personal and Professional Boundaries**

A number of staff indicated that setting and upholding boundaries was an important factor that led to feelings of exhaustion at work. Related to the above theme of emotional labor and empathy overload, participants expressed limited knowledge of or ability to maintain personal boundaries in matters such as transference or regulating the effect of emotional labor on their own mental wellbeing. Multiple participants expressed feeling the need to 'turn it all off' or be in quiet, dark spaces after speaking with callers all day.

" ... being on my voice all day long is effing exhausting. Literally, I will sit in silent for the rest of the day because so much talking happens.

Participants also expressed struggles upholding professional boundaries, and understanding when to transition out of 'work mode', working too late, or placing undue burden on themselves to perform in their role. Some of this was expressed as fear of letting down their team – in this way, the strong camaraderie and mutual respect was a source of stress for those who did not have training or skills in identifying the boundary of how much of themselves they should be offering in their labor.

- "...just putting a lot of pressure on myself to exceed my own expectations... I feel like I push myself to standards that leave me at the end of the day, wanting to just turn all the lights off and be in a room with no sound or anything. I feel like sometimes I'm... my worst enemy.
- "It's just that I pushed myself to this extent where it's like, if I don't prepare this and that for my team or ... call back all of the callers that I was supposed to call back within a week or things like that, sometimes I feel like it's myself that puts those things on me. And then sometimes I'm like, am I doing enough? And that causes me to stress out. [there was nodding among most participants to this]
- "...I have a lot of self blame that, oh, I'm not doing enough for this organization, I'm not doing enough for my team.
- "I allow [thinking about work] to carry out into the rest of my day and into the night when I could put a stop to it at five.

Some supervisory staff indicated challenges guiding their staff, indicating some possible need for support in role definition. These conversations also highlighted the camaraderie and egalitarian nature of the staff making it difficult at times for some supervisors to help staff course-correct or improve their work.

I have a very big issue with telling people what to do. To me, everybody is like, we're all team members. I don't want to be like, hey, do this, because I feel like it's not my job to do that.

#### Client flow and work flow:

One theme that appeared when trying to identify pain points that may be alleviated to improve staff satisfaction was that client flow was, in some ways, nebulous to staff. This appeared to be due to a number of factors, one of which being that the needs of callers varies considerably, as do the actions that staff must take to serve callers. Beyond the core of what staff indicated was the typical work flow around serving clients, there appeared to be a good amount of work that required active decision-making from caller initiation to exit.

So either a caller can call the healthline directly or they can fill out a support request online. What happens is we get forwarded the support request, we upload it to salesforce, we call them and if they don't pick up, we email them. And some callers prefer email, so then we'll just correspond that way. But sometimes, often times people prefer to also be on the phone. I think sometimes they fill out our website form because they think it will be quicker response.

In addition to the high cognitive load required for decision-making throughout the day with caller work flow and case management, participants highlighted some specific pain-points related to the workflow.

- Also, since Roe fell, a pain point for me has been calling those, because people going to clinics we don't fund fill out our form and then I have to tell them we don't fund that clinic.
- ...if the voicemail is very hard to hear already, I'm like, I don't want to call these people back. .... A lot of times I can't understand a g\*\*\*\*\*\* thing they're saying. So those types of things...I wish I could just email these people instead of having to do the phone calls.
- [Discussing follow-up and avoiding unnecessary calls] ...sometimes I'll say can I email you. And if they say no, then I say, do you want a phone call? And I'll call them. But I kind of reserve calls for people who are really distraught or maybe enthusiastic sometimes about their calls. But I remember when I first started working here, the caseload for follow up was out of control because it was almost all calls. So instead of just doing one call for intake, you had to do three calls, because if they don't pick up the first time on the follow up, you have to call them back. And so it's a lot.
- "Trying to figure out what the right information is and then communicating it with callers and having to be the first person to tell them.

The current procedure by where case load gets divided seems to be a source of stress and potential overwork. Participants indicated that there is no active case management based on staff's case load, their unique skills, or any other criteria. Currently, staff assign themselves to callers as they come, which is intended to go in alphabetical order (which participants hinted at not always happening). This lends itself to some staff over-working themselves — which some participants expressed. Transcribing voicemails was also highlighted as a significant area where staff spend their work time.

- "I'm really bad at this because I don't feel like asking what the assignment list is. So we're supposed to assign it evenly so we don't get over a load of cases. But sometimes I don't ask, what's the assignment like, is it an alphabetical order? Who's working today? So I don't even bother sometimes. And I'll just put my name beside.
- And I will say there's a way that it's supposed to be technically ...alphabetical order, starting from the first one. And there are people who are assigned each day, technically, at 09:00 A.m., you're supposed to start transcribing.

# Recommendations

Based on the Staff Survey and Focus Group results, Provide has developed the following recommendations for consideration by to continue supporting staff in new and meaningful ways. It should be emphasized that staff shared a lot of strategies that currently uses to support them, and leadership may consider reviewing this

positive feedback and continuing those practices. These recommendations are focused on internal work and are in addition to the trainings developed by Provide to reduce and prevent staff burnout.

Based on the findings, 3 areas of focus were identified to inform burnout prevention at



- 1. Trauma-Informed Care
- 2. Boundary setting
- 3. Workflow enhancements

Following this, an initial list of more specific recommendations that ARC-SE leadership can investigate for possible integration into their policies, procedures, and practices were developed:

- → Encouragement by leadership for staff to set boundaries for work/life balance
- → More frequent in-service staff days focused on wellness and mental health. Explore bringing in outside speakers/professionals to facilitate conversation related to stress relief.
- → More frequent (quarterly, bi-annually) social/group outings
- → Scheduled times to discuss current strategies, current stressors, new needs related to stress/burnout
- → Process and workflow improvements to maximize efficiency/reduce unnecessary work among staff
  - o Improvements in data collection systems where needed/possible, identifying specific pain points or significant time sinks identified by staff
  - Staff retreat focused on exploring and developing new workflows to help with efficiency/load burnout/better client experience
- → Ongoing needs assessment (client and staff)
- → Peer mentoring program aimed at pairing staff with peer mentors in other organizations or fields
- → Utilizing external resources such as Impact Visionary (https://impactvisionary.com)