

# **A Study of Summer Camp Staff Who Support People with Developmental Disabilities in Ontario**

## **The Experience of Client Aggression and its Emotional Impact on Staff**

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## The Purpose of this Report

The amount of client aggression witnessed and experienced by staff who support individuals with developmental disabilities (DD) in institutions and community residential settings has been well documented. Furthermore, there is evidence that exposure to aggression is negatively associated with staff psychological well-being. There is a gap, however, in the study of client aggression in other, more temporary settings - like the summer camp environment. In this study, we were interested in learning about whether camp staff in Ontario who support individuals with DD experienced client aggression, and the types of aggression encountered, as well as whether staff reported symptoms of burnout. Finally, we wanted to know whether there was a relationship between aggression and burnout in these staff.

*Disclaimer: Participation in this study was voluntary and anonymous and the opinions of the survey respondents may not necessarily reflect the entire population of summer camp staff in the province of Ontario. Results here are not broken down by camp types but rather reported as overall trends. Finally, this study is cross-sectional and any relationships reported herein are associations only and do not infer causality.*

## Review of Methods and Data Collection

Ontario summer camps that serve people with DD were invited to participate in this study. When a director/program coordinator of a summer camp agreed, they were provided with the link to the anonymous online survey and asked to direct their staff to complete it. Hard copies of the survey with a return mail address were provided if requested. This survey collected data on the frequency and severity of client aggression experienced, the impact of aggression on work, and rates of burnout. To measure burnout we used the well validated Maslach Burnout Inventory (MBI) which assesses the three dimensions of burnout: emotional exhaustion, depersonalization and a decreased sense of personal accomplishment. In addition, the survey examined positive contributions staff got from supporting people with DD and adherence to workplace policies at the camps.

The findings reported are based on 169 staff from 16 camps. Of those camps, 5 were residential or overnight camps, 10 were day camps, and 1 had both residential and day locations. Six camps served individuals with and without disabilities, 9 camps were exclusively for people with DD, and 1 had both inclusive and specialized locations.

## Description of Staff

- The majority of staff were women (72%) with a mean age of 21 years.
- Ninety-one percent were single, 2% were married, and 7% were cohabiting.
- About half (49%) of the staff had less than 2 years, 37% had 2-5 years, and 14% had more than 5 years of experience working in the area of DD.
- All staff were working more than 30 hours per week.

## Key Findings

- Staff were experiencing frequent client aggression of all types (see Figures 1-4).
- Forty percent of staff were experiencing aggression almost every day, and an additional 40% were experiencing aggression at least once or twice a week.
- More than half (54%) of the staff experienced subjective emotional difficulties related to their experience of aggression.
- Fifty-eight percent of staff reported that they required extra effort to perform their work at their usual standard.
- Three percent of staff missed work because of physical injury due to client aggression.
- Forty-one percent of staff reported a high level of emotional exhaustion at camp. More severe aggression was associated with higher emotional exhaustion.
- Nearly all staff (99%) reported at least some positive contributions from their work with campers with DD. For 64% of those staff, those positive contributions were really high.
- Those who reported greater positive contributions also scored higher in the personal accomplishment domain of the MBI.
- Two percent of staff said their camp did not have policies that addressed aggression and 23% were unsure.
- Of staff who were aware of camp policies, most staff usually (29%) or always (62%) followed them.
- Compared to the study of Ontario community direct care staff (Hensel, Lunskey, & Dewa, 2011), summer camp staff reported more frequent client aggression, but comparable severity. Summer camp staff scored higher on all three dimensions of burnout measured in the study.

## Figures

Figure 1. Percent of staff experiencing client aggression directed towards themselves, the staff member.

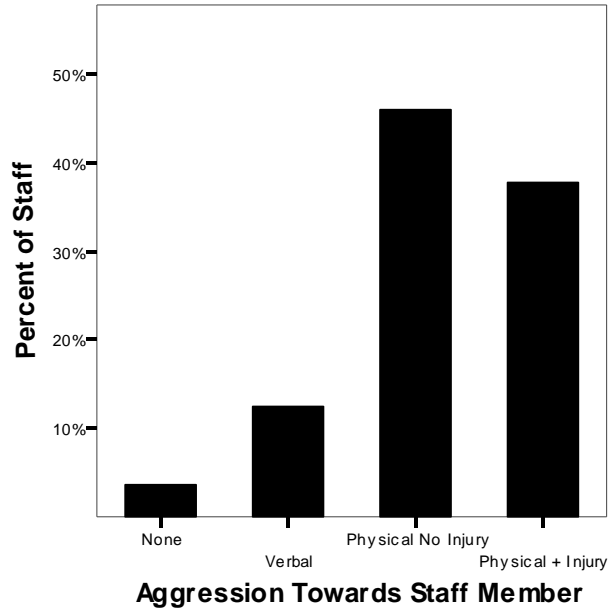


Figure 2. Percent of staff witnessing client aggression directed towards others (i.e. staff or co-clients, etc.)

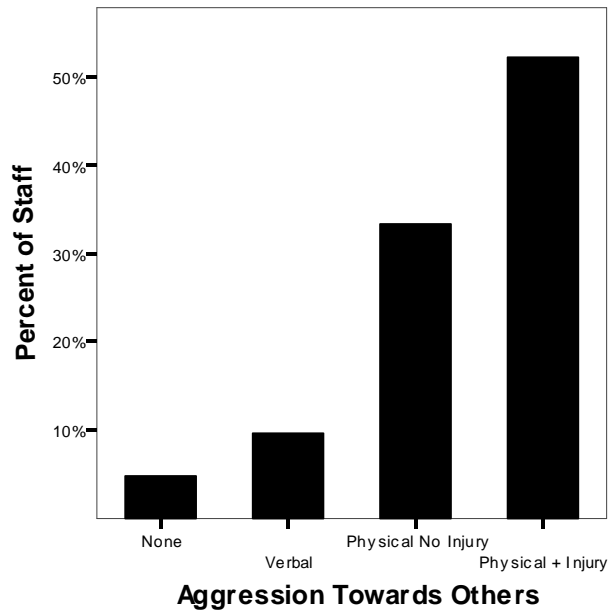
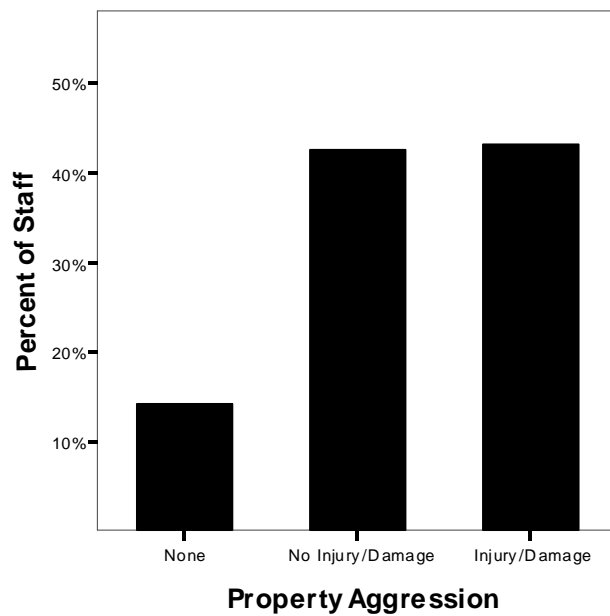


Figure 3. Percent of staff witnessing client self-injurious behaviour



Figure 4. Percent of staff witnessing property aggression



## Summary

Almost all camp staff in this study reported feeling a sense of personal accomplishment from their work with people with DD. This work, however, can have its challenges. Aggression was reported by staff at summer camps in this project as often or even more often than staff reported aggression in a larger study of staff in community residential and day program settings. About forty percent of staff scored high in emotional exhaustion, suggesting possible clinical burnout or a high risk of progression toward burnout.

Not all staff who witness or experience aggression report symptoms of burnout but we did find a relationship between these two variables in that staff who reported more severe aggression also reported being more emotionally exhausted.

These findings have important implications for camp settings. First, camps need to recognize that their staff, many of whom do not have that much experience with people with disabilities, are likely to encounter some aggression as part of their job. With some staff in particular, this aggression can emotionally impact them. Training for staff needs to focus not only on ways to prevent aggression and manage it, but also ways for staff to recognize and manage its emotional impact on themselves. There is much to learn about the experience of summer camp staff and what employers can do to best support them.

## References

Hensel J. M., Lunskey Y., & Dewa C. S. (2011). A provincial study of direct support staff who work with adults with developmental disabilities in Ontario: The experience of client aggression and its emotional impact on staff. Centre for Addiction and Mental Health, Toronto.

Available at:

[https://knowledgex.camh.net/researchers/areas/work\\_wellbeing/Documents/DDStaff\\_report\\_fin\\_032111.pdf](https://knowledgex.camh.net/researchers/areas/work_wellbeing/Documents/DDStaff_report_fin_032111.pdf)

# Who We Are ...

The Center for Addiction and Mental Health (CAMH) is Canada's leading Addiction and Mental Health teaching and research hospital, fully affiliated with the University of Toronto. CAMH succeeds in transforming the lives of people affected by addiction and mental illness, by applying the latest in scientific advances, through integrated and compassionate clinical practice, health promotion, education and research.

The Center for Research on Employment and Workplace Health at the Centre for Addiction and Mental Health is built around four research streams: epidemiology; prevention and promotion; diagnosis and treatment; and disability management of mental disorders at the workplace. It has a strong emphasis on applied research including evaluating the effectiveness and cost-effectiveness of workplace interventions and policies that affect the workplace and workers. Program scientists are also involved in projects that examine the impact of work on people with mental illness as well as work's impact on mental health.

The program also seeks to build research capacity in this area. As such, training and mentoring students from a variety of disciplines are also program missions. The program recognizes the contribution of work and the workplace to quality of life, and understands the importance of knowledge exchange. We are committed to collaborating in partnerships with stakeholders in different sectors and to sharing information with these stakeholder groups. Many projects are partnerships with community partners including employers, unions, workers, occupational health, clinicians, providers and insurers.

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