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A Study of Professional Burnout in Bay Area Mental Health Agencies

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A Study of Professional Burnout
in Bay Area Mental Health Agencies

A THESIS SUBMITTED

by

Carol L. Kossler

In Partial Fulfillment of the Requirements

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in Bay Area Mental Health Agencies

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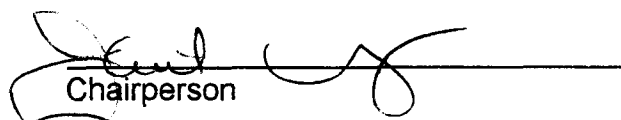
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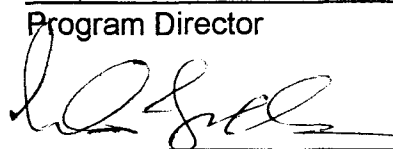
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ABSTRACT

This study broadened the focus of staff burnout research by analyzing organizational perspectives to augment the staff perspectives presented in current research. Managers of mental health organizations in the Bay Area were surveyed for their perceptions of stress in their agencies, for their perceptions of the acceptable level of burnout among staff, and for their reports on the status of actual working conditions and benefits.

Using discriminant function analysis, this study showed a statistically significant difference for two agency characteristics—annual budget level and turnover rate—when analyzed in conjunction with managers' perceptions of the acceptable level of burnout. This study found that managers at mental health organizations perceived stress in their agencies as relating to organizational and external environment factors, such as uncertainty of funding, lack of leadership, and poor job design. Managers were aware of the impact that management and outside resources have on the levels of stress experienced in their agencies. This study also found that the majority of managers were interested in reducing burnout at their agencies. This study was unable to discover any distinction between existing agency "coping mechanisms" and managers' perceptions of the acceptable level of burnout in their agencies.

Based on these findings, implications for organizational response to staff burnout and suggestions for future research are discussed.

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CHAPTER ONE

Introduction

<u>Background of the Problem</u>

Professional burnout is a recognized phenomenon that can adversely affect workers, the organizations that employ them, and the clients they attempt to serve. Burnout is a psychological response to sustained and extreme stress due to conditions at work, such that the worker has difficulty performing the necessary duties associated with the job. The employee undergoes emotional, physical, and attitudinal stress reactions, e.g., depression, insomnia, and cynicism, which can result in such organizational problems as poor patient/client care, absenteeism, and turnover (Farber, 1983a). The most accepted conceptualization of burnout describes a gradual process in which the employee experiences emotional exhaustion, feelings of depersonalization or dehumanization, and diminished personal accomplishment which can occur most often among individuals who do "people work" (Maslach, 1982a, p.3).

Burnout research originated in social services (also known as "human services") where, due to the client-orientation of the work, burnout was seen as a unique stress reaction. Social service organizations, both public and nonprofit, encompass a wide variety of support systems designed to help people who require assistance to meet basic life needs. Although health care and education are conventionally differentiated from social services, they are all considered

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helping professions. For the purposes of this study they are combined, so that social services include but are not limited to health care, mental health care, financial entitlement services, housing, vocational services, protective services, and education. Most of the research on burnout has focused on these services, because of the high level of direct, frequent, and intense interactions with clients (Cordes & Dougherty, 1993). It is a convention of the literature to describe the people served by these organizations (students, patients, cases, and consumers) as clients.

Research has continued in the social services, focusing on measuring and defining staff response to the established syndrome of burnout. Other than a 1978 study by Pines and Maslach cited by Maslach (1982a), mental health services have been neglected in burnout research. Examining burnout in mental health services presents an interesting perspective, because burnout is a mental health issue. Little research other than that of Shinn and Mørch (1983) has verified that burnout conditions described in subjective staff reports actually exist in their agencies. No study has compared workers' reports of agency response or lack of response to burnout with actual management practices. In addition, research to date has neglected to consider other intervening factors that may cause staff in social services to experience burnout, such as the agency structure in which these individuals work or the influence that government funding cutbacks have on organizational resources.

Burnout as a Stress Reaction

Burnout is a type of occupational stress which workers experience in response to the demands and constraints of work. Stress is defined as "the response to a stressor, a stimulus, or a set of circumstances that induces a change in the individual's ongoing physiological and/or psychological patterns of function" (McLean, 1979a, p.13). Although stress is a product of everyday functioning, "stress presents difficulty when the response is inadequate, inappropriate, or excessive or so prolonged that it exhausts the individual's capacity to respond" (McLean, 1979a, p.13). Freudenberger (1980, p. 13) described burnout as "a state of fatigue or frustration brought about by devotion to a cause, way of life, or relationship that failed to produce the expected reward." This definition of burnout coincides with Cordes and Dougherty's (1993) analysis of the work of McGrath in 1976 and Shuler in 1980, both of whom defined stress as a dynamic condition in which an individual is confronted with a demand while performing a task he or she cares about, the outcome of which is perceived to have importance, but for which resolution remains uncertain.

Since the identification of burnout by Freudenberger (1974) as a stress reaction experienced by social service workers, the concept of burnout has been more clearly defined and measured. However, it is still problematic to identify the prevalence and magnitude of the phenomenon among social service workers, who are the only occupational group confirmed by researchers as experiencing burnout. Researchers have developed tools to identify who is experiencing

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burnout or who is likely to experience burnout in the future, but the tools cannot identify how or why staff members experience burnout or delineate specific steps that will reduce burnout. Burnout is a multidimensional yet uniquely individual response to stress, predominantly experienced by workers involved in social service work (Perlman & Hartman, 1982). Complicating the analysis of the syndrome is the fact that "burnout is a process, not an event" (Farber, 1983a, p. 3) in which the employee experiences a sequence of symptoms including emotional exhaustion, depersonalization, and a diminished sense of personal accomplishment (Cordes & Dougherty, 1993). It is difficult to assess under what conditions employees will experience burnout. For example, cases have been reported in which organizational conditions associated with high burnout (e.g., high caseloads, long hours, difficult clients) have existed without producing measurable signs of burnout among employees (Cherniss & Krantz, 1983). The employees in such situations did not perceive their working conditions as stressful, and therefore did not experience burnout symptoms. In contrast, some organizations may attempt to do everything possible to reduce burnout conditions, and yet some staff may still perceive conditions as stressful and experience burnout.

From an organizational viewpoint, the most troublesome aspect of the problem is that burnout is an individual's perceptual response to conditions at work, and there may be instances in which individual burnout occurs, despite organizational efforts to mitigate conditions (Farber, 1983a; Shinn, 1982).

Agencies may also need to utilize several strategies in response to multiple, different stress experiences among staff, or in response to different stages of stress that staff may experience. The difficulty in assessing who will experience burnout under what conditions is further complicated by individual differences in perceptual responses.

An additional complication in correlating burnout with individual perceptual responses is that managers mistakenly identify individuals as the cause of the problem, when the actual cause is more likely to be a complex interaction among the individual, the clients, the organization, and external influences (Maslach, 1982a). Maslach (1982a) reported that researchers initially attributed the cause of burnout to the intense client orientation in social services. Clients, particularly in mental health services, present problems and unresolved dilemmas that can be depressing and overwhelming to the people who are trying to help them (Maslach, 1982a). Although staff inability to help such clients significantly reduce their suffering may be a major stress factor contributing to burnout, this alone is not a complete explanation (Freudenberger, 1980). Burnout experienced by individual workers is the culmination of problems occurring at other levels within the field they work. The causes or sources of stress reactions to work are multidimensional, involving individual workers, clients, organizations, and other societal forces that interact to produce environments in which workers are more likely to experience burnout (Farber, 1983a).

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Cost of Burnout

Although it may be difficult to assess what can or must be done to alleviate burnout, it is clear that if left unchecked, burnout has individual, organizational, and societal costs (Minnehan & Paine, 1982). Burnout "has important dysfunctional ramifications, implying substantial costs for both organizations and individuals because of, for example, increases in turnover, absenteeism, reduced productivity and human considerations" (Cordes & Dougherty, 1993, p. 621). In 1982 Minnehan and Paine commented that, "at this point the knowledge about all the costs and groups affected is limited, so any specification of the linkage between prevention/intervention actions and types of cost reduction is highly speculative" (p.102). Later burnout researchers acknowledge that specifying these costs has not been a research priority (Shinn & Mørch, 1983; Cordes & Dougherty, 1993). In the area of cost reduction, more research and action to address stress reactions has occurred in the field of occupational stress, where a longer history of tracking physical injury (and more recently, psychological stress) has led to concrete steps in the area of safety and injury prevention to reduce financial risks associated with insurance premiums, litigation costs, and lost productivity (McLean, 1979a; Warshaw, 1979).

Social service organizations often operate on limited and fixed budgets that usually are predetermined by grants or contracts from foundations, government, or other outside sources. A significant portion of these budgets are

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committed to staffing costs. Given that up to 80 % of operating budgets for nonprofit organizations are attributed to salaries (McLaughlin, 1995; Olenick & Olenick, 1991), it is important that the investment in this resource be carefully managed. These organizations cannot afford the potential costs of staff burnout, such as decreased productivity, absenteeism, turnover, workers' compensation or state disability insurance (SDI) claims, and Occupational Safety and Health Administration (OSHA) citations, any or all of which can result in poor patient care, low staff morale, loss of client base, continued staff replacement costs, and litigation costs. Preventing or controlling these potential costs and protecting the financial investment in staff are particularly important to organizations for which funding is critical and additional money is scarce (Minnehan & Paine, 1982).

The cost of burnout is borne not only by the workers and their organizations, but by the clients these organizations serve. The clients are affected by the absence of workers who are unavailable when needed, the turnover of employees with whom clients cannot build rapport, and the lack of sensitivity employees may exhibit toward clients, who may feel estranged and withdraw as a result (Maslach, 1982a; Cordes & Dougherty, 1993).

Conceptual Development

Several theorists have contributed to the conceptualization and measurement of the incidence of burnout among social service workers. Clinical psychologist Freudenberger (1974) first identified the phenomenon of burnout as experienced by alternative health workers. He noted "burned out" as a term used

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to describe the response to drug overuse in the 1960s. He saw similarities in the responses of these workers whom he documented as experiencing fatigue, depression, irritability, boredom, overwork, rigidity, and inflexibility (Perlman & Hartman, 1982, p. 285). To Freudenberger, these workers appeared more tired, depressed, apathetic, and needy than the clients for whom they were ostensibly working (Farber, 1983a, p. 2). Freudenberger believed that burnout was more than depression. He described burnout cases as people who "fail, wear out, and become exhausted because of excessive demands on energy, strength, and resources" required to complete work (Perlman & Hartman, 1982, p. 284).

Freudenberger (1974) described burnout as an individual experience. He recommended alleviating symptoms using individual remedies including rest, vacation, diet, exercise, and other self-help regimens. Freudenberger did not focus on why burnout existed among social services workers or what role the organization played in contributing to these symptoms. He also did not identify organizational remedies to alleviate burnout among staff.

Social psychologist Maslach (1976) expanded Freudenberger's concept of burnout by examining the relationship of the individual worker to the organization, and what role the organization played in the burnout process. Maslach identified the causes of burnout, namely that organizations created work environments in which social service workers could experience burnout. Maslach believed that if organizations were responsible for creating these stressful environments, then they were equally responsible for providing the

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remedies (Maslach, 1976, p. 12). Farber (1983a) notes that Maslach and Pines in 1977 and 1979 documented the presence of three central factors in the burnout syndrome (emotional exhaustion, depersonalization, and diminished personal accomplishment) and also explored the role of social support networks as potential mediators of job stress. Their research examined not only helpers' reaction to their work, but the situational factors that contribute to these reactions. Maslach (1982a) reports that Maslach and Jackson in 1981 developed an instrument to measure the presence and degree of burnout among workers called the Maslach Burnout Inventory or MBI. Freudenberger and Maslach popularized the concept, pioneered its study and legitimized its status as a critical social issue (Farber, 1983a).

Cherniss (1980) expanded Maslach's situational analysis of burnout to include the societal variables that may impact organizations employing social service workers who experience burnout. Cherniss believed that focusing only on the worker and the work setting in analyzing burnout constituted a bias causing larger factors involved in the problem to be overlooked. Cherniss identified political, social, and economic factors on a national scale that have an impact on all social service organizations. Handy (1988) noted that "unfortunately the root causes of both stress and burnout are often far removed from the individual person or job and may be more appropriately conceptualized in societal or organizational terms." Handy cited economic downturns as events that affect individuals (who may or may not understand global economy issues).

Handy believed research was needed to examine the impact of these "higher level" influences, despite the prevailing perception that they were irrelevant to the individual. These factors do have an effect on the resources available to organizations to cope with burnout. Economic downturns, social disinterest, and government cutbacks to social services will affect the clients, workers, and organizations in ways that have been shown to increase burnout.

Finally, in 1993, Cordes and Dougherty proposed that burnout may occur among workers in other occupations such as customer service in private industry. No study has been done to corroborate this theory; however, if supported by research, such findings would have significant implications for further burnout research. Before expanding burnout research to other occupations, however, it is imperative to analyze the potential bias that exists within current burnout research of social services, namely that only the employee perspective is reported. Without examining this potential bias, burnout principles could be inappropriately applied to other occupations.

<u>Statement of the Problem</u>

Current burnout researchers acknowledge burnout as a stress reaction involving the interaction of individual workers with organizational and societal influences. Earlier research frequently focused on perspectives, reactions, responses, or reports of individuals to determine what changes, solutions, preventative measures, or strategies should be utilized by an employer to address the problem of staff burnout. The individual perspective is important,

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because the incidence or alleviation of burnout is dependent upon individual workers perceiving improvement or support in the work environment (Cordes & Dougherty, 1993). However, effective and lasting improvements cannot be made without accurate assessments of the perceived problem or perceived solutions. Accurate assessments cannot be done without a thorough analysis of the environment in which burnout occurs. This requires a balanced view in which all components of the burnout problem are analyzed and reported. Research must expand beyond the individual analysis to examine the agency's perspective as well as societal variables in order to determine the most effective solutions to address staff burnout (Cherniss, 1980; Handy, 1988).

This study will attempt to address this imbalance in current research by analyzing staff burnout from an organizational perspective. Managers' responses regarding their perceptions of stress at their agencies and their reports of actual conditions at their agencies will provide insight into the organizational view of the situation. This study will expand burnout research by focusing on mental health agencies, which have received little attention in other research. Additionally, it will present an interesting perspective of mental health managers' perceptions regarding the mental health issue of burnout among their staff.

The effect of agency characteristics such as size, age, budget, and turnover relative to the incidence of burnout have not been analyzed in the research and may prove enlightening in explaining the phenomenon. Initially this

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study will examine whether agency characteristics have a significant relationship to managerial perception of the acceptable level of burnout in mental health agencies.

Furthermore, this research will examine Maslach's (1982a) finding that managers believe the source of staff burnout rests solely with individual workers. Maslach writes, "Administrators and supervisors are programmed to see the problem in terms of subordinates who are not performing their job adequately, rather than of shortcomings in the operational features of the institution itself" (p.12). Additionally, this study will examine what managers regard as appropriate steps to relieve worker stress, and whether these managers maintain that individuals are responsible for the problem and for its resolution.

Finally, there are few if any studies that link managerial perceptions of acceptable burnout level with actual organizational efforts to address burnout. One of the few studies attempting to link organizational responses to burnout was done by Shinn and Mørch (1983). They developed a tripartite model of coping with burnout which included individual coping mechanisms, coping strategies utilizing coworkers, and coping strategies initiated by the social service organization. Their method of research was indicative of all research on burnout during this period, which focused on individual worker responses to the problem. Therefore, the measurement of burnout and how to remedy or alleviate it is reported from the perspective of individual workers. As part of their study, Shinn and Mørch asked social service workers to identify actual or potential

organizational strategies that could mitigate burnout. Organization managers were not surveyed for a response, nor were workers reports of agency responses verified or analyzed for effectiveness. In an effort to expand research, this study will survey managers of similar organizations to verify what coping mechanisms, both individual and organizational, are actually established at the organizational level, and whether any mechanism appears to have a relationship to managers' reported perceptions of the acceptable level of staff burnout in their agencies.

Shinn and Mørch (1983) indicate that attempting to completely eradicate burnout is not an effective strategy, because burnout will exist at some level despite efforts to the contrary. Maslach (1982a), Cherniss (1982), Farber (1983a and 1983b), and Cordes and Dougherty (1993) emphasize approaching burnout remedies from a systemic point of view that incorporates the effects that individual, organizational, and societal factors may have on the problem. Shinn and Mørch emphasize developing coping mechanisms and social support systems which incorporate individuals, coworkers, and the organization, which can best equip workers and administrators to handle the stress associated with social service work. Their objective is to address and alleviate burnout, not eradicate it.

Managers have more resources available and a larger span of control at an organizational level to help individual employees cope with burnout conditions at work. However, Maslach (1982a) found in her research that

managers in social services organizations perceive burnout as a problem within individual workers. Maslach thought that managers tend to view burnout as a predictable and acceptable individual response to the intense workload and commitment associated with social services, rather than as a symptom of dysfunctional organizational structure (Maslach, 1976; Bramhall & Ezell, 1981). Managers perceived that a finite number of employees were withdrawing from clients, absent often, and reducing productivity. This was perceived to be expected given the nature of the work. Maslach's response cited by Farber (1983a) was that

> burnout's prevalence, and the range of seemingly disparate professionals
> who are affected by it suggest that we should be looking at the 'bad'
> situations in which many good people function rather than trying to
> uncover the 'bad' people who are staffing institutions . . . we have
> reached the point at which the number of rotten apples in the barrel
> warrants examination of the barrel itself. (p.14)

This study will examine whether managers of the mental health agencies surveyed attribute the incidence of burnout to defective individuals or to organizational dysfunction.

This research project will analyze burnout from an organizational perspective among mental health agencies in the San Francisco Bay Area of California, and will assess how these organizations are addressing the problem of burnout. In 1989 there was no burnout research regarding San Francisco Bay

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Area mental health agencies. Results might be generalized to other metropolitan areas. The premise of this study is that managers of mental health organizations may have a different perspective than that described by researchers regarding the staff, the clients, the organization, and the outside societal issues that affect working conditions at these agencies.

This study adds a new perspective to the body of research on staff burnout by analyzing organizational perceptions of and responses to the burnout problem. Managers' reports were utilized to determine if their perception of acceptable burnout level in their agencies is affected by any of the following agency characteristics: public versus nonprofit status, age of organization, funding levels, caseload, caseload ratios, and worker turnover. Secondly, managers were asked whether they viewed stress as an individual or organizational problem, and whether they held the individual or organization responsible for stress relief. A further point of inquiry was to discover whether any coping mechanisms identified in the literature bear any relationship to the managers' perception of acceptable level of burnout in their agencies. By analyzing the organizational perspective on burnout in these ways, this study attempts to add another dimension to burnout research.

<u>Normative Definition of Relevant Variables</u>

Because organizations are the unit of analysis for this study, all variables are defined in reference to organizations. For operationalized definitions of each variable, see "Operational Definition of Relevant Variables" in Chapter Three.

Mental Health Organization

Mental health organizations are nonprofit or public organizations with staff who provide mental health services within the San Francisco Bay Area and are included in the United Way Bay Area Information and Resource Services (BAIRS) mailing list most recent to when the study was conducted in 1990.

Staff

Staff are defined as full-time or part-time workers employed by a mental health organization, who provide direct services to clients. Job classifications could include counselor, social worker, case manager, mental health worker, or therapist.

Manager

In this study a manager is an organizational leader who oversees the staff in the capacity of executive director, program director, clinical director, administrative director, human resources director, or other high ranking supervisor. A manager would have direct access to personnel information and organizational policies.

Burnout

For the purposes of this study burnout will be defined as a specific type of occupational stress social services workers experience in response to stressful conditions at work. The worker experiences three successive stages in this stress reaction: emotional exhaustion, depersonalization, and diminished sense of personal accomplishment.

Sources of Stress

For the purposes of this study potential sources of stress identified by several researchers were broken into five categories: lack of leadership (Golembiewski, 1982; Maslach, 1982a); insufficient or uncertain funding (Cherniss, 1982 ; Farber, 1983a; Soderfeldt, Soderfeldt, & Warg, 1995); poor job design (Golembiewski, 1982; Maslach, 1982a; Shinn & Mørch, 1983); high turnover rates (Farber, 1983a; Cordes & Dougherty, 1993); and identifying individual characteristics (e.g., Type A behavior resulting in excessive work or unrealistic expectations resulting in disillusionment at work) (Farber, 1983a; Cordes & Dougherty, 1993). These identified sources of stress are reflected in the managers' responses to questions regarding sources of stress among staff.

Stress Relief

The literature has established that the sources of stress identified above coincide with the potential sources of stress relief at the agency. For example, if high turnover represents a source of stress, then managers probably can relieve stress by lowering turnover (Cordes & Dougherty, 1993). Therefore, stress relief is defined using the same five categories: improved leadership, stabilized funding sources, improved job design, decreased turnover, and addressing individual characteristics.

Organizational Coping Mechanisms

As introduced by the research of Shinn and Mørch (1983), organizational coping mechanisms are strategies or criteria established by mental health

organizations to provide support, benefits, rewards, or recognition to maintain performance or retain staff. These strategies can provide structure, communication, or direction to facilitate efficient and effective operations at the agencies. This study will look at organizational coping mechanisms provided by the agency, as opposed to individual self-help strategies or coworker support coping mechanisms.

Specification of Research Questions/Hypotheses

This research study examined organizational responses to professional burnout among nonprofit mental health workers utilizing managers' reported perceptions about their organizations. Previous research indicated that managers regarded workers as responsible for the stress symptoms they experienced in relation to their work. This study analyzed factors that managers perceived as sources of stress and what they thought were the most effective ways to alleviate stress. Other research addressed individual employee reports of what agencies can or could be doing to alleviate burnout. This study analyzed what stress-relieving strategies were applied in mental health agencies. This study also examined if in those organizations where organizational relief strategies were applied, managers perceived the incidence of burnout as being at an acceptable level. The following questions and related hypotheses were addressed in this research.

Question 1

Is there a relationship between agency characteristics (e.g., number of clients, years of operation, or annual budget) and the managers' perceptions of acceptable level of burnout at their agencies? If so, what are these agency characteristics?

Hypothesis 1.

a) There will be a difference between nonprofit and public agencies with respect to managers' reports of the acceptable level of burnout at their organizations.

b) There will be a difference between younger and older agencies with respect to managers' reports of the acceptable level of burnout at their organizations.

c) There will be a difference between lower and higher number of clients served annually at the agencies with respect to managers' reports of the acceptable level of burnout at their organizations.

d) There will be a difference between lower and higher staff-to-client ratios with respect to managers' reports of the acceptable level of burnout at their organizations.

e) There will be a difference between smaller and larger annual agency budgets with respect to managers' reports of the acceptable level of burnout at their organizations.

f) There will be a difference between lower and higher levels of staff turnover with respect to the managers' report of the acceptable level of burnout at their organizations.

Question 2

What do managers identify as sources of stress at their agencies?

Hypothesis 2.

Managers will perceive staff or client characteristics as the primary sources of stress at their organizations, rather than perceiving other sources of stress such as organizational structure or lack of government funding.

Question 3

What do managers identify as the most important measure their agencies can take to alleviate stress among staff?

Hypothesis 3.

Managers will favor individually oriented solutions to the problems of stress, as opposed to organizational or societal solutions to these problems.

Question 4

Is there a distinction between an organization's ability to cope with stress and management's perception of the acceptable level of burnout in the organization?

Hypothesis 4.

Managers who perceive burnout as being at an acceptable level are more likely to be found in organizations utilizing more numerous coping mechanisms

designed to relieve stress, as reflected in items in Section 2 and 3 of the survey (Appendix B), than those managers who do not perceive burnout as being at an acceptable level. In addition, any highly successful coping mechanisms will be identified in this analysis.

<div align="center">Significance of the Study</div>

This study of staff burnout in mental health organizations attempts to specify what organizational coping strategies are utilized at mental health organizations to actually or potentially reduce stress among staff. This study will augment other research on this topic by examining the managerial perspective, rather than that of individual employees. This information will provide a better understanding of what coping strategies actually are utilized at mental health agencies and whether these strategies bear any connection to managerial perceptions about the acceptable level of burnout among staff.

Social service organizations require significant numbers of workers to provide assistance to clients or patients. A large proportion of these organizations' financial resources are dedicated to personnel costs. Organizations cannot afford the costs associated with burnout, e.g., turnover, absenteeism, and stress claims. This is particularly important to nonprofit organizations with limited budgets for staffing costs. If this study can suggest concrete methods that can reduce staff burnout, personnel costs of agencies could be reduced. The unanticipated costs of staff burnout are seriously detrimental to an organization's operations.

This study provides comparative information about Bay Area mental health agencies, staff burnout, and organizational responses which may prove useful if shared among the participants and other similar agencies in the area. In some instances the results may be used by other organizations to compare the findings of this study with national studies of staff burnout in other types of social service agencies.

The agencies examined in this study exist to support and improve the mental health of people trying to realize their full potential and lead more productive lives. It is reasonable that organizations should apply this same social ideal to the workers who promote and fulfill the organization's mission. Potentially, organizations can use the findings of this study to better support the work of their staff.

Limitations of the Study

The findings of this study are based on a survey analysis of mental health organizations listed in the United Way Bay Area Information and Resources Social Services mailing list. Managers of these organizations were asked to complete and return a survey. Therefore participants were, in effect, self-selected.

This study was designed to examine managers' perspectives of burnout at an organizational level at a given point in time. Several researchers, such as Cherniss (1980) and Handy (1988) have stated that the study of burnout should include longitudinal analysis and a "higher level" analysis of societal variables, economic conditions, legal issues, government intervention, and cultural values. This study did not incorporate a longitudinal analysis or consider higher level analyses.

CHAPTER TWO

Literature Review

The following literature review on the topic of burnout includes a summary

of key studies of stress and of management theory that describe burnout in a

contextual framework as an occupational stress reaction specific to human

service workers. The conceptual evolution of burnout is explored by examining

the relevant researchers in the field and their assessment of the phenomenon.

Researchers have difficulty proposing general or specific remedies to burnout

due to its multidimensional characteristics. The potential effects, consequences,

and remedies of burnout will be outlined from both individual and organizational

perspectives. Recent research highlights the imbalance these studies have

perpetuated by analyzing individual workers' responses to or perceptions of

burnout while largely disregarding organizational and societal analyses of the

problem.

Background/ Historical Perspective

In this section, the historical development of management theory

(specifically human relations theory) and stress research will be reviewed to

present the historical and theoretical background for the study of burnout. This

review will substantiate Maslach's (1982a) definition of burnout in which human

services employees experience unique stress reactions in response to

conditions at work. Maslach described burnout as a progressive stress reaction

in which the employee experiences emotional exhaustion, depersonalization or dehumanization, and a diminished sense of personal accomplishment. Maslach (1982a) proposed that burnout was a form of stress unique to social service work, due to the stages of stress the human service workers experience as a result of intense client contact. As described later in this review, Cordes and Dougherty (1993) present a theoretical approach to classify burnout as a particular stress reaction; however, they acknowledge that burnout may not be unique to the social service industry. Other researchers from a humanistic or human relations perspective have proposed that burnout arises from informal structures within social service organizations that produce negative impacts on employees (Cherniss, 1982; Handy, 1988; Soderfeldt et al., 1995).

Management Theory and Psychological Response

Researchers have defined burnout as an individual's psychological or perceptual response to conditions at work (Freudenberger, 1974; Farber, 1982a; Cordes & Dougherty, 1993). One of the earliest research projects on workers' psychological and behavioral response to conditions in the work setting was conducted by Roethlisberger and Dickson (1939) involving a longitudinal study from 1927 to 1932 of an industrial environment at the Western Electric Company's Hawthorne Works in Chicago. Roethlisberger and his associates conducted several experiments in worker fatigue at the plant, analyzing what changes in the physical conditions at work could increase productivity. The most often cited experiment studied the effects of increasing and decreasing

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illumination of the assembly process at the plant. Researchers were confounded when productivity increased not as a result of experimental conditions, but because the workers responded positively to their perception that the environment had changed (Homans, 1941/1981). Roethlisberger and Dickson (1939) discovered that the workers were responding more to the attention given by the researchers than to changes in working conditions.

Babbie (1986) writes, "As a result of this phenomenon, often called the "Hawthorne Effect," social researchers have become more sensitive to and cautious about the possible effects of experiments themselves." Researchers of burnout have noted that any interventions must take into account individuals' perceptions of what is stressful and what will relieve that stress (Cherniss, 1980; Maslach, 1982a; Farber, 1982a; Cordes & Dougherty, 1993). The Hawthorne studies are not the only example of management theory combined with psychological research. The research, however, is important in that it established the significance of perceptual responses to interventions and recognized the impact that informal and social structures have within organizations. These results provide an important context for understanding how burnout research has developed so that individual perceptions and responses and the support structures within organizations have become the focus of burnout research.

The Hawthorne studies legitimized the human relations theory of organizational development by establishing empirically that informal or social

organizational structures can have an impact on formal organizational structures (Scott, 1961/1981). Prior to this, classical management theory had focused on formal organization, division of labor, and span of control structures, and had neglected human interactions, individual personality, informal groups, intra-organizational conflicts and decision-making processes (Scott, 1961/1981). The study of burnout has developed in a parallel manner, moving away from the individual worker to look at what impacts underlying organizational and staff dynamics have on burnout (Cordes & Dougherty, 1993).

Shinn & Mørch (1983) were very interested in examining individual and organization support systems. However, human relations theory and most burnout research ignored societal influences on stress in the work setting, which Cherniss (1982) and Handy (1988) maintained completed the larger context in which human service employees experience burnout. Scott described the next development in organizational theory, called modern systems, an approach which recognizes the interactive and integrated components of both the formal and informal organizational structures described by classical and human relations theorists. The current researchers of burnout in human services are beginning to recognize that this approach provides a more complete understanding of burnout. However, research has rarely analyzed the integration of the systems in which burnout occurs (Cordes & Dougherty, 1993; Soderfeldt et al., 1995).

History of Stress Research

Burnout is defined not only as a psychological response to conditions at work, but as a unique stress reaction to these conditions (Cordes & Dougherty, 1993; Hurrell, 1987). Hurrell reported that the earliest research on the effect of general stress on people was done by Cannon in the 1920s and by Selye in the 1930s. Both researchers explored how external stimuli elicited emotional responses that produced bodily changes. Hurrell writes that both researchers conceived of stress as involving physical as well as emotional components. Selye's General Adaptation Syndrome (GAS) and Cannon's concept of "fight or flight," which describe people's response or ability to cope with stress, both contributed to the study of the psychological component of stress.

Warshaw (1979) writes that Selye viewed stress as a necessary part of living which motivates basic bodily functions and responses. Shinn (1982) credited Lazarus and Launier in 1978 with explaining that stress can present difficulty when environmental or internal demands (or both) tax or exceed an individual's adaptive resources. Whether an individual experiences difficulty or modifies behavior in response to a stressor depends on the nature, magnitude, and intensity of the stressor, the vulnerability of the individual to its effects at that time, and the context or circumstances in which the stressor and the vulnerability are interacting (McLean, 1979a). It is important to note that not everyone exposed to the most potent stressors will develop a stress-related

difficulty (McLean, 1979a). Stress is, therefore, a multidimensional concept with varying facets of cause and effect. Similarly, an employee experiencing burnout is responding to multidimensional levels of stress arising from stressful conditions at work (Cordes & Dougherty, 1993). Farber (1982a) noted that the third and last stage of Selye's General Adaptation Syndrome is labeled "exhaustion," in which the cumulative effects of damaging stress in stages one ("alarm reaction") and two ("resistance") have become too severe to allow for adaptation. Farber (1982a) believed "burnout could be regarded as the final step in a series of unsuccessful attempts to cope with a variety of negative stress conditions" (p.15). Maslach's (1982a) definition of burnout also includes emotional exhaustion.

Beehr (1987) credits Kahn and associates with pioneering occupational stress research in 1964. Beehr noted that the Kahn research did not include any reference to Seyle or Cannon, which meant that the study of job stress began and continued to develop independently from other general stress research. Interestingly, the study of burnout has also developed independently from occupational stress literature and some researchers have argued that this is shortsighted (Shinn, 1982; Handy ,1988; Soderfeldt et al., 1995).

Despite Kahn's neglect of the work by Seyle and Cannon, general stress research did provide the basis for the study of occupational stress. Hurrell (1987) writes:

Job stress is viewed as a situation in which some working condition . . .

or combination of conditions interacts with the worker and results in an

acute disruption of the worker's psychological or behavioral homeostasis.

These acute reactions or disruptions, if prolonged, are thought to lead to

a variety of illnesses . . . the most commonly researched of these job

stress-related illnesses have been hypertension, coronary heart disease,

alcoholism, and mental illness. (pp. 32-33)

Shinn (1982) noted that French in 1973 argued that job stress occurs

when the job either poses demands that the worker cannot meet or fails to

provide sufficient resources that the worker needs. Both situations demonstrate

that work conditions truly can have an impact on employee performance. Shinn

(1982) and Cordes and Dougherty (1993) noted numerous studies that have

demonstrated that job stress leads to dissatisfaction and psychological and

somatic strain among workers in a variety of occupations.

Research on job stress was later used to document potential adverse

conditions at work which could cause workers to experience psychological stress

resulting in physiological disabilities (McLean, 1979a). Workers' compensation

laws (enacted in 1917 in California) and the Occupational Safety and Health Act

(OSHA) established federal and state standards for employer liability and

responsibility for providing safe and healthy work environments and for

compensating workers for injuries and disabilities caused by conditions at work.

By 1970 these statutes recognized that job factors could result in psychiatric

disabilities (McLean 1979a; Hurrell, 1987). Organizations would experience increased liability and operational costs if found responsible for any violations of these regulations.

Nearly all psychiatric stress claims result in higher court settlements than those for physical injuries, and the number of stress claims for all industries in California increased five-fold between 1980 and 1986 ("Flood of stress," 1988). Identifying burnout as a job stress reaction, Vallone (1993) stated that the Bureau of Labor and Statistics reported that workers' compensation claims in California rose 700% for stress-related disabilities between 1979 and 1988 and that claims reported in 1991 were double those of 1989. Vallone noted that the employer's cost of resolving a single stress claim averaged between $10,000 and $13,000. Vallone also reported that the California Association of Nonprofits (CAN) believed that nonprofit employers experienced a higher rate of psychiatric stress claims than general business, based upon their review of workers' compensation insurance trends at that time.

Job Stress and the Burnout Connection

In an effort to link research on burnout to previous studies on job stress, Shinn, Rosario, Mørch and Chestnut (1984) conceptualized burnout as psychological strain resulting from the stressful conditions of human service work (the focus of most burnout research). Their use of these terms derives from the occupational stress literature. They cited studies that identify stress as a negative feature of the work environment that impinges on the individual (e.g.,

role conflict, lack of opportunity to participate in decision making), and strain is the psychological or physiological response of the individual (e.g., job dissatisfaction, anxiety, heart rate).

Cordes and Dougherty (1993) analyzed the research regarding occupational stress and burnout to delineate the distinction and connection between the two areas of study. They related that Ganster and Schaubroeck in 1991 had defined burnout as a type of stress, specifically a chronic affective response pattern to stressful work conditions for which there are high levels of interpersonal contact. Cordes and Dougherty (1993) cited stress theorists such as McGrath in 1976 and Schuler in 1980 who had described stress as resulting from demands, constraints, or opportunities presented to employees. Employees experienced the strongest responses (strains) to these demands when they perceived uncertainty about their ability to handle the demands and when the outcomes of handling the demands were important. Burnout is a response to demand stressors, e.g., workload placed upon an employee. Cordes and Dougherty (1993) assert that burnout is distinguishable from other forms of stress because it represents a set of responses to a high level of chronic work demands entailing very important interpersonal obligations and responsibilities.

Cordes and Dougherty (1993) further cited Shirom in 1989, who asserted that burnout is a distinctive aspect of stress because it has been defined and studied primarily as a pattern of responses to stressors at work. Cordes and

Dougherty state that based upon their review of the literature, "[Maslach's] three-component model (emotional exhaustion, depersonalization, and diminished personal accomplishment) that burnout represents is, therefore, unique as a stress phenomenon" (p. 625). Burnout is a unique stress phenomenon because it represents three phases of stress reaction which develop in response to a high level of chronic work demands, entailing interpersonal obligations and responsibilities. Other forms of job stress, according to Cordes and Dougherty's literature review, do not have these components. However, Cordes and Dougherty do propose that burnout may be a unique stress phenomenon, but it may not be unique to social services. The theory that burnout may be experienced by other workers in industries outside social services had not been studied, according to Cordes and Dougherty.

Definition

There are several reviews of burnout that summarize the available research and confirm the construct validity of burnout, among them Beehr and Newman (1978), Cordes and Dougherty (1993), Kilpatrick (1986), and Perlman and Hartman (1982). Most authors cited within these references agree that burnout is a unique psychological stress reaction in response to conditions at human service organizations. As described in the literature, human service organizations are generally understood to include health care, educational, and social service agencies. To summarize the foregoing research, Freudenberger (1974) is credited with introducing the concept of burnout as a stress reaction to

conditions at work. Within the field it is generally accepted that Maslach (1976, 1978, 1982a, 1982b) best defined burnout as a multidimensional concept. Maslach and Jackson are credited with developing in 1981 the Maslach Burnout Inventory (MBI) Scale, an empirical method of identifying those workers who are experiencing burnout. A tool such as the MBI Scale was necessary for the development of research and the legitimization of the burnout concept.

Many researchers comment that burnout is attributed to work in human services "because workers must use themselves as the technology for meeting the needs of clients" (Shinn et al., 1984). As mentioned in Chapter One, human and social service organizations, both public and nonprofit, encompass a wide variety of support systems designed to help people who require assistance to meet basic life needs. Human and social services include but are not limited to health care, mental health care, financial entitlement services, housing, vocational services, protective services, and education. People served by these organizations, variously referred to as students, patients, cases, and consumers, are conventionally described within the burnout literature as clients (Cordes & Dougherty, 1993).

In 1982, less than a decade after Freudenberger's introduction of the topic, Perlman and Hartman reviewed the research and located 50 definitions of burnout. From these, they developed a synthesized definition based on content analysis. Their synthesis of the research supported the view that burnout as experienced by social service workers is a multidimensional construct including

three components: emotional exhaustion, depersonalization, and a diminished

sense of personal accomplishment, confirming Maslach's (1976, 1978) findings

(Perlman & Hartman, 1982).

In 1993, nearly two decades after the introduction of the concept, Cordes

and Dougherty summarized the research since Perlman and Hartman's (1982)

review. They concluded that Maslach's concept of burnout as a three-component

process continued to be the most accepted definition of burnout. Cordes and

Dougherty (1993) described Maslach's burnout construct as experienced by

social service workers in this way:

> One component of burnout, emotional exhaustion, is characterized by a
>
> lack of energy and a feeling that one's emotional resources are used up.
>
> This "compassion fatigue" may coexist with feelings of frustration and
>
> tension as workers realize they cannot continue to give of themselves or
>
> be as responsible for clients as they have been in the past. A common
>
> symptom is dread at the prospect of returning to work for another day.
>
> Another component, depersonalization or dehumanization, is marked by
>
> the treatment of clients as objects rather than people, usually in a cynical,
>
> dehumanizing, and negative manner. Workers may display a detached
>
> and an emotional callousness, and they may be cynical toward
>
> coworkers, clients, and the organization. Visible symptoms include the
>
> use of derogatory or abstract language (e.g., the "kidney" in room 212),
>
> strict compartmentalization of professional lives, intellectualization of the

situation, withdrawal through longer breaks or extended conversations with coworkers, and extensive use of jargon. The final component, diminished personal accomplishment, is characterized by a tendency to evaluate oneself negatively. Individuals experience a decline in feelings of job competency and successful achievement in their work or interactions with people. Frequently there is the perception of a lack of progress or even lost ground. (pp. 623-624)

Maslach (1982a) delineated the stages of burnout as a progression starting with emotional exhaustion due to stressful conditions at work where depersonalization is incorporated as a defensive coping response when other coping resources are not available. Cordes and Dougherty (1993) noted that depersonalization is a learned response that is also professionally acceptable because human service personnel are trained to remain emotionally detached. Ironically, this detachment is advocated to prevent the over-involvement or over-identification which can lead to burnout. High levels of depersonalization will cause workers to alter their attitudes toward and interaction with clients, other coworkers, and the organization in ways that interfere with or inhibit the perception of effective performance, resulting in feelings of diminished personal accomplishment (Cordes & Dougherty, 1993, p. 647).

A few researchers have challenged the assumption that burnout occurs only in social service organizations. They propose that the definition can be applied to other occupations, particularly consumer service-oriented fields, in

which workers may experience burnout as well (Cordes & Dougherty, 1993; Golembiewski, 1982; Handy, 1988). Soderfeldt et al. (1995) and Cordes and Dougherty (1993) reported that no research existed exploring the incidence of burnout in industries other than human services and recommended further study in this area.

Measures

What complicates the measurement and the definition of stress and burnout is that individual perception of and reaction to stress is a subjective response which can vary significantly from person to person. Farber (1983a) writes that "the idea that an individual can react dysfunctionally to the mere perception of stress, regardless of its objective existence, is generally agreed upon by researchers" (p.4). Cognitive appraisal of stress involves a two-part sequence. Primary appraisal determines whether an event is stressful, and secondary appraisal is applied to reduce or eliminate what is perceived as stressful (Farber, 1983a; Hurrell, 1987).

Beehr and Newman (1978), Shinn (1982), and Cordes and Dougherty (1993) identify the Maslach Burnout Inventory Scale (MBI) as the most widely used measure in burnout research. The MBI utilizes individual responses to a 22 item survey to assess whether the individual is experiencing burnout or not, depending on scores in the three component aspects of burnout. A description of the scale follows.

The MBI is a scale of 22 items that measure three components of burnout: emotional exhaustion (e.g., "I feel emotionally drained from my work"), depersonalization (e.g., "I've become more callous toward people since I took this job"), and personal accomplishment (e.g., "I deal very effectively with the problems of my recipients") (Maslach, 1982a; Shinn, 1982). Respondents indicate the frequency with which each item is experienced ranging from 1 ("a few times a year") to 6 ("every day"). Cordes and Dougherty (1993) state that

"The instrument [MBI] does not measure the presence or absence of burnout per se. Rather, experienced levels of burnout fall on a continuum. For instance, high scores on emotional exhaustion and depersonalization . . . and low scores on personal accomplishment . . . reflect high levels of burnout and vice versa. No predictions are made concerning critical threshold levels. (p. 626)

The MBI as a static measure has been useful in making distinctions between groups as to who will more likely experience burnout. For example, married people are less like to experience burnout than single people; however, the measure offers no explanation for these distinctions (Cordes & Dougherty, 1993). Cordes and Dougherty (1993) comment that the MBI scale cannot be used to explain why these distinctions occur, and no other research has been published that offers an explanation.

The MBI scale of the three components measured separately is more accurate than a sum total of the scales (Maslach, 1982a). A total burnout score

would be misleading and would not provide accurate information about the problem. Research has determined that some variables (e.g., age of worker, workload, or job challenge) are differentially correlated or uncorrelated to each of the three components (Cordes and Dougherty, 1993). Consequently, Cordes and Dougherty concluded that "if other variables are differentially associated with burnout components, then it is plausible that intervention strategies would also be differentially effective" (p. 628). Therefore, as a static measure with three differentially correlated components, the individual scores of the MBI do not provide sufficient information for direct problem solving to reduce the incidence of burnout at social service agencies (Cordes & Dougherty, 1993). The MBI provides a snapshot that identifies an employee experiencing burnout.

Cordes and Dougherty (1993) and Shinn (1982) noted that the MBI does not assess burnout as a process over time but rather as an end state. An MBI score indicating burnout is a static measure and does not explain how the individual entered this state or how long the individual may remain in burnout. Cordes and Dougherty (1993), Handy (1988), and Shinn (1982) cited only one longitudinal study, that of Cherniss (1980), which dealt with the problem of static measure by interviewing workers at several points in time and using the results of the interviews to rate workers' attitudes toward their jobs and their clients. Those workers who showed the most negative changes in attitudes were identified as experiencing a higher level of burnout (Cordes & Dougherty, 1993).

The MBI measures attitudes, and the optimum way to assess attitudes is by surveying people (Shinn, 1982). However, many researchers and administrators are interested not in attitudes, but in behavior such as absenteeism, turnover, or performance. Maslach (1982b) and Shinn (1982) believed that existing research relied too heavily on self-report measures, and that a more precise source of data would be objective information, such as program attendance records, ratings from coworkers, or actual observations of employee behavior. Maslach (1976, 1978, 1982a), while developing the measure of individual burnout, related burnout to organizational factors that may contribute to the individual's stress reaction and suggested that measures beyond individual experience were needed.

Researchers in the field usually define and measure burnout in terms of individual psychological responses. Administrators, on the other hand, are concerned with possible organizational consequences of burnout, particularly poor client care, increased liability costs, and increased staffing costs. Most theorists and practitioners are more concerned with the causes of burnout and with how to address the problem (Shinn, 1982). The MBI can verify the conceptual framework by identifying who is experiencing burnout; however, the MBI cannot provide context, causation, or solutions to the problem. Therefore, MBI measures of individual perspectives provide only partial information about employees' experiences of burnout. Current research requires a broader context

to better define the causation factors in burnout (Cherniss, 1982; Cordes & Dougherty, 1993; Handy, 1988; Shinn, 1982).

Shinn (1982) attempted to expand the focus on individuals by examining stressors and coping strategies within the workplace which might reduce the effects of burnout from an organizational perspective (Shinn, 1982). "The problem is not with the specification of these stressors, most of which are well defined, but with the fact that they are interdependent, making patterns of causality difficult to determine" (Shinn, 1982, p. 69). After summarizing the research of Cherniss (1980), Golembiewski (1982), and Kafry and Pines in 1981, Shinn (1982) concluded that many aspects of the work environment could contribute to burnout. This conclusion however provides little guidance to administrators who are willing to make changes within the agencies to reduce burnout, but are uncertain of how to direct this effort (Shinn, 1982). There is little research on the effect of changing any work environment factors to alleviate burnout. Golembiewski (1982) pointed out that valid data are necessary to effectively evaluate any proposed solutions to the problem of burnout. It is important to begin building a body of information at an agency level that moves beyond the study of individual responses that has dominated the literature to date (Shinn, 1982).

Individual and Organizational Factors and Consequences

In order to understand the interdependent variables contributing to the employee's experience of burnout, it is necessary to define the individual and

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organizational factors involved and to identify the consequences of their dynamic interaction before proposed remedies can be analyzed.

In this discussion of individual and organizational factors and consequences, the first section examines individual factors, and the second section addresses organizational factors. In the third section the individual and organizational consequences of burnout are discussed. The fourth section addresses individual remedies that have been reported or proposed. The final section examines organizational remedies.

All research described in these sections refers to studies of burnout in social service or human service organizations. Within the research there is only one early study (by Maslach and Pine in 1978) which refined the definition of burnout by examining mental health workers. Otherwise there are no other reports specifically identifying mental health workers or agencies. However, under the title of social services or in studies of social workers, mental health organizations may have been included. Further, some researchers (Cordes & Dougherty, 1993; Handy, 1988) are proposing that burnout possibly applies to other industries. This review focuses on burnout research within social services or human services only.

Individual Factors in Burnout

Certain personal demographic characteristics can contribute to an explanation of why some individuals experience burnout, while others do not. In addition employees whose expectations their skill level or ability to affect client

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recovery are higher than their experience of work in social services report higher levels of burnout. Finally one's lack of career progress may contribute to the experience of burnout (Cordes & Dougherty, 1993).

Demographics.

In their review of the literature, Cordes and Dougherty (1993) cited several studies which used the MBI measure to identify demographic distinctions. In these studies men and women reported differences in their experience of the three levels of burnout, but there is mixed evidence as to which gender experiences more. Younger individuals consistently report higher levels of burnout; more experienced employees reported lower levels of burnout than less experienced employees; married individuals experience lower levels of burnout than unmarried employees; and individuals with children consistently report lower levels of burnout. Cordes and Dougherty stated, "The moderating effects of these variables have either not been studied, or their results were not significant and thus not reported" (p. 633).

Individuals who are prone to burnout have been described as empathic, overly sensitive, idealistic, and "people oriented," and also perhaps anxious, introverted, obsessed, over-enthusiastic and susceptible to over-identification with others (Cherniss, 1980; Freudenberger 1980; Maslach, 1982a). Farber (1982a) identifies the "Type A workaholic" person as particularly prone to stress reactions due to over- involvement in work. A predilection toward any of these characteristics does not automatically result in burnout. In fact, personality

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theorists argue that personality traits such as empathy or idealism are not predictive of particular outcomes, because behavior depends not so much on personality traits as on the interaction between people and their environments (Shinn, 1982). An individual's perceptions and assessment of that interaction are also critical to the resulting response.

Expectations.

Individual variables that do contribute to stress often involve expectations and styles of appraising or interpreting the environment (Shinn, 1982). Cherniss (1980) proposes that employees' expectations about the profession, the organization, and personal efficacy can make a significant contribution to burnout and represent a source of demands placed upon themselves in their work. Cherniss (1980) proposes that an employee's loss of commitment to the work as a result of a schism between expectations and the reality encountered is central to predicting an employee's potential to experience burnout.

Cordes and Dougherty (1993) summarized the research and concluded that many of these expectations are shaped by an individual's most recent training environment or are shaped by recruiters interested in selling the organization to applicants. Unrealistically high expectations, unmet expectations, or shifts in expectations may contribute to burnout. Demographic studies reveal that older, more experienced workers tend to experience lower levels of burnout than do younger employees (Cordes & Dougherty, 1993). O'Neill in 1983 (as cited by Cordes & Dougherty, 1993) proposed that the reason for the

discrepancy might be because older employees have actually shifted their expectations to fit reality based on their experiences, for example by shifting their earlier high expectations for client progress to their own current competencies (Cordes & Dougherty, 1993). Cherniss (1980) also noted that newer professionals may have high expectations to change the circumstances their clients are in. The disillusionment that sets in after the exhaustion of being unable to significantly alter circumstances can easily lead to burnout. Cherniss (1980) further explained that a "professional mystique" may develop, particularly among licensed professionals, such that they feel obliged to protect the stature of the position and therefore cannot publicly reveal their lack of ability or the vulnerability they may personally experience. Again, Cordes and Dougherty (1993) reported that there is no significant research explaining reasons for these differences in expectations.

Career Progress.

Cordes and Dougherty (1993) proposed that individual career progress can also play a mitigating factor in all three levels of burnout identified by Maslach (1982a). They noted that promotion within the field usually results in a reduction of client contact. "This change reduces an individual's susceptibility to emotional exhaustion resulting from the demands of client interaction" (Cordes & Dougherty, 1993, p. 637). Promotion also represents positive feedback regarding performance, which contributes to a higher sense of personal accomplishment. "Individuals who have had reasonable career progress are

more likely to believe that the organization is supportive, and that its policies regarding promotion are fair and equitable," Cordes and Dougherty write. "An environment that is perceived as predictable in this way is likely to minimize the employee's experiencing learned helplessness which is so often accompanied by depersonalization" (p. 637). Cordes and Dougherty (1993) note that despite the theoretical merit of this variable, career progress has not, in their review of the burnout literature, received attention.

It should be noted that all the individual variables that may contribute to burnout will not necessarily lead an employee to experience burnout, unless the employee perceives the work environment to be stressful (Cherniss, 1980). Demographics illustrate characteristics that shape a person's perception of life. Age, sex, marital status, and parenthood will influence a person's world view. Expectations and career progress may also influence whether an employee will experience burnout or not (Cordes & Dougherty, 1993).

In conclusion, the overriding individual factor that can contribute to an employee's experience of professional burnout is the individual's perception that conditions at work are stressful. Cordes and Dougherty (1993) emphasize that the moderating effects of other personal and demographic characteristics have not been adequately explored. The following section reviews the organizational factors or conditions that employees may perceive as stress- inducing.

Organizational and Work Related Factors in Burnout

Perlman and Hartman (1982) reviewed approximately 50 studies of burnout and concluded that the majority of studies identified social service organizations (as opposed to individual workers) as the cause and the source of solutions to the stress of burnout. They confirmed Maslach's (1978) theory that job demands and work environments were the sources of stress, not an employee's inability to cope with work. Later researchers documented that various job conditions can produce psychological, physiological, and behavioral reactions in workers (Hurrell, 1987). Organizational factors are acknowledged and recognized politically (workers' compensation laws), economically (legal fees and insurance premiums), and socially (in terms of lack of personal support) as contributing to stress at work (Bramhall & Ezell, 1981; Cherniss & Krantz, 1983; Cordes & Dougherty, 1993; Maslach 1982a; Shinn & Mørch, 1983).

There are several identified work environment factors at social service organizations that possibly can contribute to burnout. Again the catalyst to the experience of burnout is the worker's perception that conditions at work are stressful. Researchers have identified what conditions are generally acknowledged to contribute to the perception of stressful conditions at work. Delineating the potential work-related conditions contributing to burnout, Hurrell (1987) classified them into three broad categories including job/task demands, organizational factors, and physical conditions. Golembiewski (1982), addressing organizational development strategies, outlined three broad

categories of possible work-site stressors as organizational communication, structure, and policies. In their review of the literature, Cordes and Dougherty (1993) categorized two probable work-related factors into job or role characteristics and organizational characteristics. Cordes and Dougherty (1993) were very specific about their divisions because "even though many researchers have investigated how variables associated directly with the job or role characteristics contribute to burnout, the question of how variables associated with the organization itself and its policies may be related to burnout has received comparatively little attention" (pp. 631-32). Cordes and Dougherty (1993) identified contingency and noncontingency awards and job context as organizational factors potentially contributing to professional burnout.

The overall consensus is that there is a distinction between job or task characteristics and the overall organization operations or policies that can contribute to burnout (Cordes & Dougherty, 1993; Golembiewski, 1982, Hurrell, 1987). Although many researchers have used the job or task situation to describe how employees experience burnout, many times this has led to a discussion of clients and the intensity and frequency of client contact required for the job (Maslach 1978, 1982a). Burnout is not solely the result of high levels of client contact and the stress of this interaction. Burnout is as much the result of how the organizational structure of delivering these services contributes to the level of stress among staff (Maslach, 1982a).

Specific work-related conditions mentioned by researchers have included role ambiguity, lack of or unclear policies and procedures, extraordinary caseloads, unclear job tasks, noncontingent rewards and recognition, low salary, poor supervision, bureaucratic and rigid structures, autocratic decision-making structures, imbalance of authority versus responsibility level, lack of leadership, scarce resources, lack of funding, inadequate benefits, and interpersonal and intra-agency communication problems (Cordes & Dougherty, 1993; Golembiewski 1982; Maslach, 1982a). Several of these conditions are discussed in more detail in the following section.

Caseload.

Cordes and Dougherty (1993) cited Jackson and colleagues in 1986 as suggesting that caseload can be divided into quantitative and qualitative dimensions, both of which can lead to stressful conditions in different ways. The quantitative dimensions include frequency of contact, duration of contact, number of interactions, and percentage of time spent with clients (Cordes & Dougherty, 1993). Cordes and Dougherty define qualitative dimensions of client caseload involving interpersonal distance (e.g., phone contact versus face to face contact), intensity of contact, and client characteristics (e.g., chronic versus acute, child versus teenager). In many cases there may be a lack of obvious change or improvement in the situation of a large proportion of the clients as a result of the services rendered. When successful service is defined as helping a person in distress, and clients return only if the problems continue to recur,

seeing the same clients return again and again can leave the employee feeling that he or she does not possess the capabilities to perform effectively (Maslach, 1982a). As a defense mechanism against feelings of ineffectiveness, employees may depersonalize and withdraw from client contact. Large caseloads (quantitative) or problematic client caseloads (qualitative) are described by Maslach (1978) as contributing to all of the three stages of burnout: emotional exhaustion as a result of an overload of cases; depersonalization as a result of overload and ineffectiveness; and a sense of diminished personal accomplishment as a result of perceptions of ineffectiveness or incompetence. Caseload is discussed as an organizational factor, because ultimately the agency controls the number and type of clients staff serve at the agency.

Contingency and noncontingency rewards.

Contingency and noncontingency rewards are associated with rewards and punishment related to performance variables (contingent) or rewards and punishment not connected to performance (noncontingent). Stress can result when there is no reward for performance, so that consequences appear indiscriminate and disassociated from performance (Cordes & Dougherty, 1993). Cordes and Dougherty (1993) explain that

> Because receipt of rewards is often the only way in which employees can gauge their performance and what others think of their work, and employees expect organizations to recognize and reward good performance, a lack of contingent rewards can cause employees to feel

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that their performance does not warrant rewards or that their efforts are not noticed or appreciated. (p. 647)

Rewards are particularly difficult to bestow in social services such as mental health, in which performance is not measured by problem resolution because clients are often in need of long-term assistance. Performance is more often measured by the amount of time spent with clients, or how many hours were billed to a funding source as proof of service.

Role conflict and ambiguity.

Role conflict occurs when there is incompatibility or incongruity with expectations from different sources, e.g., supervisors' directions and clients' demands. Attempts to reconcile conflicting demands may be frustrating and emotionally exhausting. Role ambiguity is defined as a lack of clarity regarding proper procedures for performing job tasks or the criteria for performance evaluations. The confusion or uncertainty of not understanding job expectations can be stressful. Golembiewski (1982) described roles that create mismatches between work demands and individual skills or attitudes, or that create sharp inconsistencies between authority and responsibility, as potential job stressors. Organizations can exert a measure of control over ambiguity by providing detailed job descriptions, criteria for evaluations, orientations, and procedural manuals, which can greatly reduce ambiguity and potential role conflict (Cordes & Dougherty, 1993). Shinn (1982) reported that job design factors, such as role

clarity and autonomy, are consistently related to turnover, which has been identified as a potential negative cost of burnout (Minnehan & Paine, 1982).

Role overload.

Role overload is defined by qualitative or quantitative factors. In qualitative overload an employee feels he or she lacks the basic skills or talents necessary to complete assigned tasks effectively. This perception could result from lack of training for the role or negative personal assessment of his or her abilities. In contrast, quantitative overload refers to an individual's perception that the work cannot be done in the allotted time (Kahn, 1978). In this situation the individual may believe he or she has the skills to do the job, but simply cannot serve the number of clients requiring attention. Jackson in 1984 (cited by Cordes & Dougherty, 1993) related that in many organizations quantitative overload may come about because of resource scarcity and the continual threat of cutbacks. Role overload has been consistently linked to the emotional exhaustion component of burnout (Cordes & Dougherty, 1993).

Communication.

Cordes and Dougherty (1993) and Golembiewski (1982) identified communication within the organizational structure as a critical factor that underlies issues with caseload, role conflict or ambiguity, contingent and noncontingent rewards, and role overload. Lack of communication, withholding of information, unclear communication of role expectations, and confusing communication regarding timing of awards or reprimands, all contribute to

employees feeling a lack of control over critical aspects or demands of their work. McGrath in 1976 cited lack of control as heightening the perception of stress (Cordes & Dougherty, 1993). Warshaw (1979) noted how stressful change can be when communication about organizational change is made arbitrarily without participation by staff and with no clear guidelines for how to accomplish the change or what is expected as a result. Maslach (1978) noted that stress is inherent in human service agencies when feedback from either the client or the organization is either nonexistent or usually negative. Golembiewski (1982, p. 264) highlights the problems that result when ineffective feedback and information dissemination between staff creates "low-quality data that induce decisions which create new problems while seeking to solve the old." Pfifferling and Eckel (1982) listed potential workplace conditions for burnout which included communication factors such as encouragement of hierarchical staff interaction, discouragement of mutual participation in work, minimal emphasis on positive feedback, and policy changes that are too frequent to be evaluated. This latter point relates to Warshaw's (1979) comment on how change can create stress.

Soderfeldt et al. (1995) emphasized that the work situation for social workers should receive closer analysis to discover what factors in the workplace contribute to burnout. Soderfeldt and colleagues acknowledged that different aspects of the work organization could be related to burnout, but noted that there are few studies verifying this relationship. They advocated cross research

between organizational development and burnout research. These fields focus on structural stress analyses utilizing a medical model versus psychological behavioral analyses from a sociological perspective, respectively.

Individual and Organizational Consequences

Cordes and Dougherty (1993) summarize the research linking workers' physical, mental, interpersonal, attitudinal, and behavioral reactions to burnout. Researchers reporting on burnout note that the consequences are debilitating to workers, detrimental to clients, and costly to agencies (Shinn et al., 1984). McLean (1979b) and Minnehan and Paine (1982) deal specifically with organizational consequences. Several of the identified individual and organizational consequences are listed below.

Physical and mental health problems.

The burnout components of emotional exhaustion, depersonalization, and diminished personal accomplishment have been linked with a variety of mental and physical health problems. Beehr and Newman (1978) reviewed literature that showed consistent replication of findings that perceived stress on the job is related to employee health and well-being. Deterioration of mental health is characterized by feelings of decreased self-esteem, depression, irritability, helplessness, or anxiety. Physical health problems include fatigue, insomnia, headaches, and gastrointestinal disturbances (Cordes & Dougherty, 1993). Warshaw (1979) and McLean (1979a) presented extreme examples of stress reactions in which employees suffered heart attacks and death. These cases

were used to establish case law for psychological stress claims. Cordes and Dougherty (1993) explained that:

> In a study of supervisors and managers from a public welfare agency, Lee and Ashforth (1990) found psychological and physiological strain and helplessness to be associated with higher levels of emotional exhaustion and depersonalization. Burke and Deszcar (1986) assessed how often respondents experienced 18 physical conditions, including poor appetite, headaches and chest pains, and found that this measure of psychosomatic symptoms was positively related to the burnout components. Similarly, on the basis of self-reports and reports of spouses, Jackson and Maslach (1982) reported that police workers who experienced significant levels of burnout components returned home from work tense and anxious. (p.638)

The consequences to organizations with staff experiencing these ailments include higher absenteeism, potential turnover, and increases in workers' compensation and disability claims (Cordes & Dougherty, 1993; McLean, 1984; Minnehan & Paine, 1982).

Interpersonal consequences.

Jackson and Schuler in 1983 (cited by Cordes & Dougherty, 1993) reported that interpersonal consequences included changes in the nature and frequency of interactions with clients and coworkers. In studies conducted at day-care centers, child care workers who experienced higher levels of burnout

components experienced greater impatience and moodiness and less tolerance. They also reported withdrawing more from clients, either by talking with other staff more or by taking longer breaks and lunch (Cordes & Dougherty, 1993). In their study of public-contact workers, Maslach and Jackson in 1985 (cited by Cordes & Dougherty, 1993) also found support for the link between the burnout components and the desire to spend less time with the public, as well as a link between the burnout components and poor relations with coworkers (Cordes & Dougherty, 1993).

These interpersonal difficulties could be very problematic to an organization reliant on staff interdependency to serve the public. Poor quality of service or care and staff conflict can have a very serious and negative impact on an agency.

Attitudinal consequences.

Kahill in 1988 (cited by Cordes & Dougherty, 1993) reported that attitudinal consequences involve the development of negative attitudes toward clients, the job, the organization, or oneself. In studies by Jackson and Maslach in 1982 and by Maslach and Jackson in 1985 (cited by Cordes & Dougherty, 1993), employees experiencing burnout reported higher levels of job dissatisfaction. The burnout components of emotional exhaustion, depersonalization, and diminished personal accomplishment have been linked to lower levels of organizational commitment by Jackson et al. in 1987 and by Leiter and Maslach in 1988 (cited by Cordes & Dougherty, 1993). Minnehan and

Paine (1982) identify potential loss of client referrals due to these attitudinal consequences as a further hidden cost to the organization.

When an individual perceives environmental conditions as being random or uncontrollable, as for example after receiving a noncontingent punishment, a feeling of helplessness or uncertainty ensues (Cherniss, 1980). In order to cope with the situation, individuals will mechanize, or depersonalize, their relationships with coworkers, clients, or the organization. Thus, impersonal, dehumanizing, organizational cultures can lead to employees' use of impersonal, dehumanizing styles with their clients (Cordes & Dougherty, 1993, p. 645). Attitudinal effects of burnout can be most deleterious to organizations as the cynicism among staff who experience the depersonalization and emotional exhaustion of burnout is communicated to and adopted by other staff members. Client care, decision-making, and communication are all seriously affected by debilitating staff attitudes (Cordes & Dougherty, 1993).

Behavioral consequences.

Behavioral consequences of burnout include organization-related behaviors and individual consumptive behaviors. Organization behaviors include turnover, absenteeism, and decreases in the quality and quantity of services. Consumptive behaviors include smoking and drug and alcohol use. Maslach (1978) indicates that consumptive behaviors are a "self-help" method employees often use to cope with the stress of work. Shinn and Mørch (1983) defined consumptive behavior as an "emotion-focused" strategy employees use to

reduce or cope with job stress. Shinn and Mørch suggested that emotion-focused strategies were ineffective in reducing stress. Cordes and Dougherty (1993) summarized studies in which individuals who reported higher levels of burnout also reported higher levels of substance abuse and were more likely to leave their jobs.

Certainly turnover is a greater problem for the human services than for other professions. According to Shinn (1982),

> Professionals in social work and rehabilitation services leave their jobs at about twice the rate per year (25-30%) of professionals in nonservice fields (8-15%) (see Katzell, Korman, & Levine, 1971). Turnover for any reason is costly to the agency which has lost an investment in the skills of exiting worker and must reinvest in the training of the new worker. (p.62)

Cordes and Dougherty (1993) noted that Firth and Britton in 1989 reported that absenteeism was higher for nurses who experienced higher levels of emotional exhaustion. Cordes and Dougherty (1993) further noted a study by Maslach and Jackson in 1985 showing that among public-contact employees in a social service agency, burnout was linked with employees who were less prepared for job tasks.

The consequences of burnout have some very real physical emotional, interpersonal, and behavioral implications. Not only does the individual suffer, but the organization and the people with whom the employee interacts during the

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work day all bear the costs of this organizational problem (Cordes & Dougherty, 1993).

Specific organizational costs.

As noted in the earlier section on organizational factors, the legal system—beginning with workers' compensation statutes and more recently augmented by the Occupational Safety and Health Act (OSHA) of 1970—deals directly with the operational costs and organizational consequences of occupational stress reactions. The OSHA statute contains a specific directive mandating the study of psychologically stressful factors in the work environment (McLean, 1979b). Employers are responsible for creating and maintaining a physical, emotional, and social environment that will preserve and enhance the health and well-being of workers, or at least avoid impairment. McLean (1979 b, p. 8) writes, "failure to do so will result in worker discontent and illness, which are expressed in absenteeism, high turnover, low productivity, poor work quality, and even deliberate sabotage."

Organizations experience the cost of burnout in economic terms with workers' compensation claims, legal fees to defend against employee legal actions, increased health care costs, and employee costs associated with turnover and absenteeism. Minnehan and Paine (1982) noted that the drop in productivity due to emotional exhaustion, depersonalization, and diminished personal accomplishment results in the potential loss of clients and referrals, and additional coworker stress in reaction to the affected staff members'

absences, departure, or inability to complete work. Employers may be unaware of the hidden costs that burnout can have as the quality of services and the reputation of the organization are affected by staff experiencing burnout (Minnehan & Paine, 1982).

<u>Individual Remedies</u>

Earlier studies on burnout focused on individual remedies to the problems of burnout. Freudenburger (1980) focused on self-help regimens that included relaxation, breaks, exercise, and professional detachment. Later studies found that social support appears to have a positive effect on individuals' well-being (Cherniss, 1980). More recently, support has been identified as a buffer or moderator between job-related stress and the negative effects of stressful events. This buffering may occur in one of two ways. Social support can help individuals to reevaluate the potential stress in a situation by talking to someone else, or it can enhance their belief that they can cope with the situation, because they perceive that others will provide the necessary resources (Cordes & Dougherty, 1993).

Cordes and Dougherty (1993) identify personal resources (e.g., marriage, family, and job experience) that can provide support enhancing a worker's ability to cope with the demands of the work environment. They note that demographics have shown that married employees and employees with families experience a lower incidence of burnout. Maslach (1982a) reports that family life, a personal situation which may focus attention outside the job, can moderate the

experiences of emotional exhaustion, depersonalization, and diminished personal accomplishment associated with burnout. Cordes and Dougherty (1993) noted that Cohen and Willis in 1985 acknowledged that families can be a source of role conflict, thereby causing individual stress, but they also may be a source of emotional support and comfort which acts as a buffer to work stressors.

In general, however, individual coping techniques are not viewed as effective long-term strategies and do not diminish the sources of the stress in the work environment. Shinn and Mørch (1983) and Hurrell (1987) refer to a study on individual coping strategy by Pearlin and Schooler in 1978, who conducted a survey study of the effectiveness of coping in four domains: marriage, parenting, household economics, and jobs. Pearlin and Schooler found that personal coping strategies used to reduce stress are effective in the first three areas but have little impact on stress associated with jobs. Hurrell (1987) suggested that the effectiveness of individual coping strategies seemed to be related to an individual's ability to control the stressor. Individual coping strategies would be ineffective in a situation beyond an individual's control. Shinn et al. (1984, p. 866) noted that in 1981 Pines and Aronson "found that most individual coping strategies used by human service professionals had either no association or positive association with burnout," which means that individual strategies did not effectively address work stress. Shinn and Mørch (1983) and Hurrell (1987) believe that the workplace involves many stressors beyond the individual's

control and that individual coping strategies are not as effective at reducing stress in the workplace as what Shinn (1982, p.228) defined as "higher-level" coping strategies involving groups of workers or entire organizations.

Organizational Remedies

Focusing on organizational responses does not diminish the personal experience of burnout. Rather, it acknowledges an individual's experience of stress as a symptom of a larger problem within an organization, and this puts the onus on the organization to address burnout at its source, which is in the work environment (Veninga & Spradley, 1981). Individual coping techniques may create short-term remedies for those who experience burnout, but improvements in the work place may have a more lasting impact on lowering the incidence of staff burnout (Maslach, 1982a). Many researchers note a lack of studies examining organizational responses to burnout (Cherniss, 1980; Cordes & Dougherty, 1993; Farber, 1982a; Golembiewski, 1982; Hurrell, 1987; Maslach, 1982a; Minnehan & Paine, 1982; Shinn, 1982; Shinn & Mørch, 1983; Soderfeldt et al., 1995). Several have reviewed the research available and concluded that there are many recommendations for organizational remedies, but very little research on the effectiveness of these remedies (Cherniss, 1980; Cordes & Dougherty, 1993; Farber, 1983a; Golembiewski, 1982; Hurrell, 1987; Minnehan & Paine, 1982; Shinn, 1982; Shinn & Mørch, 1983). Some authors note that organizational remedies require careful consideration because the possible remedies, such as addressing turnover, creating contingent rewards, or

organizing group coping strategies, are so interdependent that the effectiveness of any one technique is difficult to assess. Further, it can be costly for organizations to implement such strategies without foreknowledge of their probable effectiveness (Cordes & Dougherty, 1993; Handy, 1988; Hurrell, 1987; Minnehan & Paine, 1982; Shinn, 1982).

Minnehan and Paine (1982) emphasized the need to address the economic costs of burnout at an organizational level in the areas of absenteeism, turnover, and injury or termination litigation, and the need to assure better levels of program services. In general a nonprofit human service agency will invest approximately 60% to 80% (McLaughlin, 1995, p.169) or 70% to 80% (Olenick & Olenick, 1991, p. 67) of its limited or fixed budget in staffing costs. The more costs involved in maintaining agency personnel, the less funding is available for program services. Cost reductions in absenteeism, turnover, and injury or termination litigation lead to increased organizational effectiveness and better utilization of agency resources (Pecora & Austin, 1987).

A previous section of this review discussed several organizational factors that potentially contribute to burnout, such as caseload, rewards, role definition, role overload, and communication. These are the same factors that researchers have proposed to relieve staff burnout, thereby increasing organizational effectiveness. Organizational structure and policies can be used to support and motivate workers rather than thwart and discourage staff efforts. Shinn et al. (1984) noted that Newman and Beehr in 1979 outlined measures by which

agencies could reduce stress, such as better job design, reward systems, role clarification, career opportunities, and benefits. For example, if noncontingent rewards are an organizational demotivator that result in a sense of diminished personal accomplishment, then staff may be motivated by making rewards contingent on relevant performance issues emphasizing positive progress, thereby increasing the sense of personal accomplishment among staff workers (Cordes & Dougherty, 1993). Shinn et al. (1984, p. 866) emphasized that "very little research has been conducted on these organizational coping strategies."

Cordes and Dougherty (1993) propose that the availability of coping resources, in the forms of group and organizational support, can moderate the burnout process at each stage. They noted that training or skills development as a form of organizational support can increase employees' abilities to handle job tasks and the stress of completing them, and that these improvements may increase their sense of personal accomplishment (Cordes & Dougherty, 1993). The possibility of progressive promotion through the organization, as mentioned earlier, can also foster a sense of personal accomplishment. Shinn and Mørch (1983) concluded that workers are committed to and satisfied with agencies that they believe are supportive and committed to them. Cherniss and Krantz (1983) emphasized that a sense of commitment to the agency on the part of the workers is critical to the reduction of burnout. They noted that in some human service organizations working conditions were demanding, uncomfortable and garnered little reward; yet despite these conditions there was no evidence of burnout

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among the staff. Workers in these cases were committed to their organizations, and therefore did not perceive stressful environments. Cherniss and Krantz (1983) believe that the loss of worker commitment can initiate the burnout process among the staff of an organization.

Shinn (1982) noted that efforts to cope with burnout usually focus on individual coping strategies, when organizational coping strategies could be more effective. As noted earlier, other studies have shown that individual coping strategies are relatively ineffective in reducing job stress (Hurrell, 1987; Pines, 1982; Shinn et al., 1984). Mechanic in 1974 (cited by Shinn, 1982) argued that many of the problems with which people must cope are too large and complex to yield to individual efforts, but that these problems may be addressed more effectively by organized, cooperative efforts at a group or organizational level. Shinn and Mørch (1983, p. 227) reiterated that "just as burnout is more than an individual problem, coping can and should occur at more than just the individual level."

Shinn (1982) and Shinn and Mørch (1983) questioned why most research focused on individual responses to burnout, and they addressed this imbalance by examining organizational responses to burnout. Their approach included asking individual workers what their agencies could do or were doing to relieve burnout in the workplace.

Shinn and Mørch's (1983) approach, however, was interesting in that rather than addressing individual and organizational sources of burnout, they

analyzed what support mechanisms or coping strategies were perceived by staff to be useful in reducing work stress that could lead to burnout. Shinn and Mørch defined coping as efforts to reduce stress and strain. They conceptualized coping as occurring at three levels: strategies used by individual workers, strategies used by groups of workers to aid one another, and strategies initiated by human service agencies (Shinn & Mørch, p.227). In their study, they surveyed workers to identify organizational capacity to support employees through improved job design, offers to participate in decision-making, appropriate supervision and training, improved communication systems, and emotional support and recognition. Surveyed workers also identified other non-job-related, yet organizational-level coping strategies, such as giving breaks and encouraging recreational activity. "Fostering instrumental support among coworkers is also important" wrote Shinn and Mørch. "It is especially needed at the group and agency levels where, despite its effectiveness, it is often lacking" (Shinn & Mørch, p. 239). Shinn and Mørch concluded from their research that workers surveyed in their study believed agency coping mechanisms could be effective in reducing burnout. However, most of the staff suggestions for agency coping mechanisms were only suggestions; few of the ideas were actually practiced in the workplace.

Interestingly, during the Hawthorne studies in the 1930s, Homans (1941/1981) identified the value of a social support network that had developed among workers in the experimental setting, which was encouraged by their

supervisors, and which previously had been prohibited in the regular work setting. Homans noted that productivity increased in this organizationally initiated, socially supportive environment. Homans observed that even when one worker was experiencing low productivity, the rest of the group, aware of the individual's problem, sympathetically increased their productivity to maintain quotas for the group. This example and others appear to be overlooked in any current research of (organizationally fostered) social support in social service settings.

Minnehan and Paine (1982, p.102) acknowledged that information about "all the costs and groups affected by burnout is limited, so any specification of the linkage between prevention or intervention actions and types of cost reduction is highly speculative." It is important for future researchers to attempt to identify the specific aspects of organizational support that either contribute to or result in a reduction of burnout (Cordes & Dougherty, 1993).

The Bigger Picture

Most researchers have confirmed that job and organization characteristics can contribute to the development of burnout among staff, which leads researchers to suggest that organizational responses can help to alleviate burnout. However, Cordes and Dougherty (1993), Cherniss (1982), and Handy (1988) emphasize that there are external environmental factors, such as public opinion or economic downturns, that have an impact on burnout within the organization, and there is little research regarding these socioeconomic factors.

This was recognized by Homans (1941/1981) in the Hawthorne study in the 1930s, although he did not fully comprehend the impact of the economic and social environment on that study. Homans noted that only when the economic and social effects of the Depression were felt by the average worker at the factory in the early 1930s did the researchers track a decline in performance at the factory. All other variables examined in the study remained constant.

Farber (1983a) commented that historical developments in the field of human services—which include professionalization, government funding of social services, social awareness and criticism, political focus on client populations, and the bureaucratization associated with growth—have led to a situation in which professionals in the human services field have developed unrealistic expectations and have failed to develop organizational supports to cope with the disillusionment, depersonalization, and diminished personal accomplishment that can result in burnout.

Cherniss (1980) and Handy (1988) are two of the few researchers who have identified the potential environmental, political, economic, and societal influences that may contribute to conditions associated with burnout. In an analysis of the Great Society programs of the 1960s, Cherniss and Krantz (1983) emphasized that the development and interaction of economic, political, and social influences constitute the larger framework in which organizations operate. The social value accorded to the human services also shapes the worker's experience. Cherniss and Krantz presented the example of the Great

Society programs and their failure to achieve their stated goal of eradicating poverty. The social response to this failure was to devalue social services, demand more accountability in light of this apparent failure, and require better certification of social service workers. Cherniss and Krantz commented that within this larger framework, workers responded by devaluing their work and experienced burnout as a result of their inability to accomplish the impossible goal of eradicating poverty among their clients. Cherniss and Krantz believe that failure to analyze the larger social framework and higher level influences in the problems of burnout can lead to ineffective and perhaps costly responses.

Handy (1988, p. 366) believes that "the superficial analyses and intervention strategies proposed by many stress or burnout researchers may simply divert attention from more fundamental issues [within the societal context] and help perpetuate the very problems they are designed to solve." Analysis of burnout at a systemic level is rarely acknowledged, and this is equally true of research into organizational development and occupational stress. Scott (1961/ 1981) noted that little or no treatment of social systems is addressed in conventional organizational theory research, and Beehr and Newman (1978) noted the same absence in the literature on occupational stress. Neglect of the larger influences that have an impact on professional burnout is prevalent in organizational and occupational stress research. Handy (1988) believes that the conceptual development of burnout should proceed by focusing on political, economic, and societal explanations for individuals' experiences of stress. Staff

burnout may eventually come to be regarded as a product of political, economic, or societal developments.

<p style="text-align:center">Conclusion</p>

This study was designed to augment the research of burnout in human service agencies, specifically mental health agencies, by examining the issue from an organizational perspective. The literature review conducted for this study has revealed that burnout research has focused almost exclusively on the responses of individual workers. Several researchers cited have indicated the need for organizational responses to mitigate the effects of burnout on staff. Cordes and Dougherty (1993) highlighted several areas for future research and Cherniss (1980) and Handy (1988) have emphasized the need to analyze societal impacts on the problem of burnout to effectively address the issue. Soderfeldt et al. (1995) commented on the lack of longitudinal research on burnout. Maslach (1982a) clearly identifies the difficulties of conducting organizational research, stating:

> Very few, if any, of these proposed [organizational] changes have actually been tested to determine how truly effective they are. The reason for this lack of testing is not a lack of interest in finding out what works best. Rather, it is because the proper evaluation is extremely difficult to do—it is costly, it is time consuming, and it requires extensive cooperation from the participating organizations and their employees (which is not always readily forthcoming). The need for more of these evaluations is great.

<p style="text-align:center">70</p>

Without them, our knowledge of effective changes is limited, and our

recommendations remain best guesses rather than established fact.

(p.119)

Shinn (1982), Shinn and Mørch (1983), and Shinn et al. (1984) attempted

to evaluate the organizational response to burnout and emphasized that rather

than eradicating burnout (which may be a goal impossible to fulfill), they were

interested in identifying coping mechanisms which could alleviate burnout. By

surveying a group of mental health service managers, this study attempts a next

step in the research of Shinn et al. (1984) by balancing the human service

workers' reports of organizational coping mechanisms with managers' reports

and perspectives.

CHAPTER THREE

Methodology

This study examined organizational responses to staff burnout as described by higher-level managers of mental health service organizations. Previous studies have considered organizational responses from staff perspectives and reports. This research study examined:

1. Whether specific demographic variables (such as nonprofit versus public affiliation, age of organization, funding levels, caseload, caseload ratios, and turnover) were related to managers' perceptions of the acceptable level of burnout in their agencies;

2. What managers view as the sources of stress at their agencies;

3. What methods, in managers' views, would relieve stress at their agencies; and

4. Whether managers' reports of organizational coping mechanisms, as described by Shinn et al. (1984) and utilized by their agencies, have any relationship to managers' perceptions of whether the level of burnout was acceptable at their agencies.

To expand upon current burnout research, this study examined the mental health field of social services, an area that had not been fully explored in burnout research. Mental health services represented an interesting field to study because burnout itself is a mental health issue. To examine mental health

organizational responses to burnout, the San Francisco Bay Area (Bay Area) was chosen as a representative metropolitan area to survey. The Bay Area, comprising the five counties of San Francisco, Alameda, Marin, San Mateo, and Contra Costa, has historically supported innovative mental health services.

Subjects and Sampling

The subjects of this study are nonprofit and public mental health service organizations in the Bay Area which were selected as a subset category from a mailing list of health and human service agencies compiled by the United Way of the Bay Area. The sample consisted of all 441 organizations which are self-identified as mental health service providers in the Bay Area. The mailing list sample was reduced to 299 agencies when self-help groups (organized to help members help each other with mental health issues), voluntary organizations (organized to volunteer service to others), and clearly identified city and county administrative departments were eliminated from the list. The study was designed to examine nonprofit organizations that employed paid staff to work with mental health consumers. It was assumed that self-help and voluntary organizations, such as Compassionate Friends chapters and Debtors Anonymous, in general did not employ paid staff. City and county departments, as public entities, operate under different constraints than those of nonprofit organizations. Public agencies which provided direct services to clients and employed staff were included in the study. Using these criteria the total sample size was 299 organizations.

In general the mailing list obtained from the United Way of the Bay Area identified a person to contact for each organization. The study was designed to examine the organizational or management view of burnout rather than the staff view. Therefore, the person to contact was asked in an introductory letter (Appendix A) to identify the most qualified administrator to participate in the study. The 299 organizations each were sent one survey questionnaire to avoid duplication and multiple responses from the same agency.

Because the research design contained a specific geographic sample there is a potential for a Bay Area bias. However, previous studies on burnout have been generalized to other metropolitan areas. Certainly any information generated would be worth consideration and could potentially prove very useful to other mental health agencies outside the Bay Area.

<u>Instrumentation</u>

This study investigated the managers' perspective of staff burnout at mental health agencies in the Bay Area. The survey method, utilizing a self-administered questionnaire, was selected as the most efficient means of collecting data from 299 potential respondents. The survey instrument (Appendix B) was developed based upon a review of current research and information required to formulate a management perspective of staff burnout. The survey was divided into four sections, each section having 14 to 23 questions or statements. Each of the four sections covered one side of a single page, to form a two page, double-sided questionnaire.

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The following is a summary of each survey section and the question design used for analysis. Section 1 asked the managers to provide descriptive or demographic information about their agencies which was used in the analysis of Hypothesis 1. The managers recorded information in a series of one-word or numeric responses, e.g., year agency was founded, or fiscal year budget amount. Section 1 also included questions 15 and 16, which were open-ended questions asking managers to identify sources of stress in their agencies and possible sources of stress relief. These responses were used in analyzing Hypotheses 2 and 3. The responses to open-ended questions 15 and 16 in Section 1 were subjected to a content analysis during data entry.

Sections 2 and 3 of the survey each listed potential staff benefits (e.g., health insurance and vacation) and organizational support components (e.g., job description and personnel policies) agencies may provide their staffs, and which are identified in the literature as potential support or coping mechanisms. These data were used in the analysis of Hypothesis 4. All of these questions required a closed-ended response of yes or no, with the exception of providing the number of days of vacation and sick leave offered. In completing these questions managers identified the existence (yes) or absence (no) of these benefits in their organizations.

In Section 4 of the survey, managers were asked to report staff turnover information, and then to respond to a series of statements regarding their perceptions of the effects burnout may have on their agencies, their interest in

learning more about staff burnout, and their perceptions of the acceptable level of burnout in their agencies. Information from Section 4 of the survey, specifically managers' perceptions of whether the level of burnout was acceptable in their agencies, was used in the analysis of Hypotheses 1 and 4. In Section 4 statements were presented which predominantly utilized a five-point Likert Scale (1=strongly disagree to 5=strongly agree).

The survey was pretested with five nonprofit mental health managers (not included in the actual survey mailing) who assessed the relevance and clarity of the survey. The survey was timed at 15 minutes for completion in the pretest, and this time was mentioned in the cover letter to potential respondents.

The two-page, double-sided survey was sent with an introductory cover letter (Appendix A) explaining the study and requesting participation, to the reduced sample of 299 mental health organizations listed on the United Way's mailing list. The letter was addressed to a specific contact person at each agency rather than to a position, title, or department. The letter emphasized the importance of the study and provided assurance of anonymity and confidentiality as well as an offer to share the results of the study as an inducement to respond. Respondents were asked to return the enclosed survey within three weeks. The package of the survey and cover letter included a self addressed, postage-paid return envelope.

Procedures

The researcher purchased the mailing list labels of the subset of 440 mental health organizations from the United Way of the Bay Area. Two of the criteria of the study in examining mental health agencies were that the agencies provide direct services to clients and employ paid staff. Using these criteria the mailing list for the self-administered survey comprised 299 organizations. Where the mailing list was missing a contact person, the agency was telephoned and asked for an appropriate contact person. The researcher purchased the postage for sending and return of the survey. The initial packet, which contained the cover letter, survey, and self-addressed, return stamped envelope, was mailed to the managers in July 1990. The managers were asked to respond in three weeks.

A reminder card (Appendix C) with an offer of a duplicate packet was sent to the entire mailing list two weeks after the first mailing. Surveys were numbered as they were returned and answers were coded for analysis at this time.

Operational Definitions and Relevant Variables

The variables defined in Chapter One were operationalized as follows:

Bay Area Mental Health Organization

A nonprofit or public agency providing direct mental health services to mental health consumers which employed at least one paid staff member and was listed on the Bay Area United Way Health and Human Services mailing list

in July 1990. The organization was located in any of the five counties (Alameda, Contra Costa, Marin, San Francisco, and San Mateo) otherwise known as the "Bay Area."

Manager

A manager was defined as a high-level supervisory or administrative employee who oversaw or was directly involved in personnel decisions at any of the agencies surveyed. Managers included such job titles as executive directors, deputy directors, personnel managers, administrators, clinical directors, program directors, or unit supervisors. The manager was assumed to be knowledgeable about agency policies and procedures and what response, if any, the agency has had to staff burnout.

Burnout

For the purposes of this study burnout was defined from an organizational perspective as a manager's report of the acceptable level of burnout among staff at his or her mental health agency.

Sources of Stress

Managers were asked to identify sources of stress at their agencies. Five categories were used to assign various sources of stress at their agencies.

Job Design

This term applies to the structure of job tasks and how they are accomplished. A manager's comments that staff experienced stress due to confusion regarding responsibilities, constant client contact, inability to

document work in a timely manner, and other quantity or quality factors associated with job tasks were attributed to job design as a source of stress at the agency.

Funding Sources

Funding sources were defined as government agencies that provide financial support in exchange for services from the survey participant. A manager's comments that staff experienced stress because of understaffing, lack of referral sources, documentation requirement objectives, inadequate facility space, or other problems of limited resources were attributed to the funding source as a source of stress at the agency.

Leadership

Persons occupying top management levels within a nonprofit agency were defined as the agency leadership. A manager's comments that staff experienced stress due to lack of authority to accomplish work, nonparticipatory decision-making, hierarchical management structures, or lack of adequate planning at the agency were attributed to leadership as a source of stress at the agency.

Turnover

The percentage of employees who terminated their employment at an agency each year was defined as the turnover factor. A manager's comments that staff experienced stress due to the number of employees who left the

agency each year were attributed to turnover as a source of stress at the agency.

<u>Personal</u>

A manager's comments that staff experienced stress because they were perceived as having unrealistic expectations of the job or clients, or who were over-committed to work, were attributed as sources of stress at the agency arising from personal reasons.

<u>Coping Mechanism</u>

Coping mechanisms were defined as the support systems, actions, events, or items employed by the agency or believed to be useful in reducing stress among staff. Coping mechanisms in this study were analyzed utilizing two methods. In the first method managers were asked to identify what in their opinion or perception would alleviate the stress they identified at the agency (Section 1 of the survey). A content analysis was performed on the written responses they provided. The five categories to delineate these coping mechanisms, which are described below, were based upon review of the literature and correspond to the sources of stress identified above.

The five categories used in Section 1 to delineate various methods for coping with stress were:

Job Design

Responses relating to clarifying job descriptions, conducting regular performance reviews, and increasing or decreasing the degree of autonomy were defined as elements of job design.

Funding Source

Factors including higher salaries, more staff, lower caseloads, better facilities, more referral sources, and more government support or intervention were assigned to the category of funding source.

Leadership

Factors related to better organization and planning, more staff participation in decision making, better utilization of funds or more diversification of funding sources were categorized as elements of leadership.

Turnover

Actions resulting in reducing the percentage of staff departures each year were assigned to the turnover category.

Personal

Management recommendations that staff alleviate stress by reducing their over-commitment to the agency or over-identification with the clients were assigned to the personal category of stress-reduction measures.

In Sections 2 and 3 of the survey, the second method for identifying stress alleviation measures was used. Managers were asked to identify what coping mechanisms or benefits were in place to alleviate stress in their agencies.

Definitions utilized in the second method are defined below:

Benefits

Organizational support systems for individual workers including health insurance, leave time, staff training, staff participation in agency planning, agency-sponsored social events, child care, and retirement benefits were classified as benefits.

Descriptive Information

Demographic variables such as the organizational age, level of funding, total number of clients served, number of programs, number of program sites, and ratio of staff to clients, which were useful in comparing organizations or identifying potential indicators of managers' perceptions of the acceptable level of burnout among staff, were categorized as descriptive information.

Treatment of the Data

The Statview software package was utilized in the statistical analysis of the data collected. The returned questionnaires were analyzed by applying descriptive and inferential statistics.

Frequency distributions were first calculated for all variables. If variables showed a large proportion or unexpected occurrence of missing values, the

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original surveys were consulted. Values coded as "other" were subjected to a content analysis and coded.

Open-ended questions regarding sources of stress at the agency (Survey Section 1, question 15) and alleviation of stress (Survey Section 1, question 16) were subjected to a content analysis and coded into the five discreet categories previously described (job design, funding, leadership, turnover, and personal) for each cause or alleviation of stress. This was done to render analysis more manageable.

For each hypothesis, an appropriate test of significance (correlation or t test) was conducted to explore the relationship of each variable to the managers' perceptions of the acceptable level of burnout in their agencies. The results were presented in tables as well as in narrative discussion.

In Hypothesis One, six agency characteristics (nonprofit versus public status, years of operation, number of clients, staff-to-client ratios, funding levels, and turnover rates) were the independent variables which were compared with the dependent variable of the managers' perceptions regarding the acceptable level of burnout at their agencies. The t test for independent samples was applied to analyze whether these descriptive characteristics were statistically significant. In Hypotheses 2 and 3, frequency distributions were prepared based upon content analysis of identified sources of stress and stress alleviation in the agencies. In Hypothesis 4, grouped frequency distributions were utilized to determine the difference in coping mechanisms available in agencies, in relation

to managerial perceptions of the acceptable level of burnout in their agencies.

This treatment of the data analyzed the differences, if any, between the

presence of individual and organizational support coping mechanisms described

in Survey Sections 2 and 3 (Appendix B) and managers' perceptions of the

acceptable level of burnout in their agencies.

Chapter Four describes the results obtained from the analysis of each

hypothesis.

CHAPTER FOUR

Results

Introduction

In earlier chapters, the importance of broadening the scope of burnout research in social services to include viewpoints of managers in addition to those of social service workers was established. Research has moved beyond identifying the individual as the problem or reason for burnout, although some researchers find managers of human service organizations still focusing on the individual employee (Maslach, 1982a). There is no definitive research identifying whether any organizational factors, such as age of organization, caseload, level of funding, job design, or benefits have any effect on the incidence of staff burnout in social service organizations. Several researchers have indicated that more coping mechanisms or social support at the organizational level could prove useful in reducing burnout at social service agencies (Cherniss & Krantz, 1983; Cordes & Dougherty; 1993; Shinn & Mørch, 1983). However, research in the area of coping or support has concentrated on analyzing responses of individual staff workers. Research provided little guidance as to what organizations could do to reduce or prevent burnout or how to assess what methods might be working, yet researchers clearly recognized that the consequences of staff burnout would adversely affect agencies' operations and ability to serve clients (Cordes & Dougherty, 1993; Farber, 1983a).

This study expanded the scope of burnout research by attempting to verify workers' reports of agencies' responses to burnout and by investigating managers' perspectives on the issue. In this study, a comparison was done to see if any agency characteristics (e.g., funding) had any relationship to managers' perceptions about the acceptable level of burnout. This study examined managers' reports about sources of stress and what measures might reduce stress in their agencies. The research literature identifies some organizational mechanisms (such as benefits, job design, communication systems, and procedural manuals) that could potentially provide support to employees. This study examined several of these organizational mechanisms to see if their presence was related to managers' perceptions of the acceptable level of burnout at their agencies.

To examine managers' responses, a survey instrument (Appendix B) was sent to 299 Bay Area mental health organizations described in Chapter Three. Respondents totaled 95, a 32% response rate. Later three respondents were deleted when it was determined they did not employ staff. This reduced the response rate to 31%. Chapter Three presented the statistical techniques and precisely identified the variables assessed in the analysis. Chapter Four presents the results of this analysis. Section 1 of this chapter describes characteristics of the survey respondents; Section 2 presents results obtained that were outside the parameters of the stated hypotheses. In Section 3,

Discussion of the Hypothesis Analysis Results, the results obtained for the original four hypotheses are presented.

<u>Respondent Characteristics</u>

The tables in this section report the frequency distribution of descriptive agency statistics for Section 1, Questions 1-14 of the survey instrument. In Question 1 respondents were asked to identify their position within the agency. The survey had asked that a top administrator or personnel manager respond to the survey. It was thought that top administrators would provide agency perspectives on a broader level than individual supervisors or line staff. Executive directors or other high level administrators comprised 66% of the respondents to the survey (see Table 1).

Table 1

Frequency Distribution of Respondents' Job Titles

Job title	Number	Percentage
Executive director	39	42.3
Administrator	22	23.9
Supervisor/assistant	31	33.7
Totals	92	100.0

In Questions 4 and 5 respondents identified how many full-time and part-time employees were at the agency. Combining the two responses reveals an average of 38 employees per organization, which is more than double the average of 16 employees reported by the USF study California Nonprofit Organizations (1995) regarding information collected in 1992 for Bay Area social service agencies. Table 2 shows that 75% of the agencies employed fewer than 45 full- and part-time employees. While the staff average of 38 employees is higher than that reported in the 1995 USF study, on the whole the sample does represent average Bay Area agencies.

Table 2

Frequency Distribution of Staff

Full- & part-time staff	Number	Percentage
0 - 14	34	37.0
15 - 29	26	28.3
30 - 44	9	9.8
45 - 59	4	4.3
60 - 74	4	4.3
> 75	15	16.3
Totals	92	100.0

In Table 3, 76% of the respondents to question 7 utilized fewer than 20 interns or volunteers, and nearly half utilized four or fewer interns and volunteers. The USF study did not comment on number of volunteers for a comparison.

Table 3

Frequency Table of Volunteers, Interns, and Students

Number of volunteers, interns, and students	Number	Percentage
0-4	44	48.4
5-9	10	11.0
10-14	12	13.2
15-19	5	5.5
20-24	5	5.5
>25	15	16.5
Totals	91	100

In Table 4 responses to Questions 10, 13 and 14 also indicated the smaller size of the study sample organizations, in that 54% had three or fewer programs, 64% were operating at one or two sites, and 52% had annual budgets less than $750,000. The USF study California Nonprofit Organizations (1995)

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reported that in 1992 the average annual budget for Bay Area nonprofit social service organizations was $659,562. On the whole, the survey respondents appear have been representative of other average Bay Area nonprofit social service organizations in 1990 when the data were collected. Other respondent characteristics are examined in Section 4 of this chapter discussing results of Hypothesis 1.

Table 4

Frequency Distribution of Programs, Sites, and Budgets

Programs	Number	Percentage
1	25	27.8
2	13	14.4
3	11	12.2
4	6	6.7
5	13	14.4
>6	22	24.4
Totals	90	100.0

Program sites		
1	43	46.7
2	16	17.4
3	8	8.7
4	5	5.4
5	4	4.3
>6	16	17.4
Totals	92	100.0

Annual budget		
$1-$249,000	14	16.3
$250,000-499,999	23	26.7
$500,000-749,999	8	9.3
$750,000-999,999	11	12.8
$1,000,000-1,249,999	5	5.8
$1,250,000-1,499,999	3	3.5
$1,500,000-1,749,999	4	4.7
$1,750,000-1,999,999	1	1.2
>$2,000,000	17	19.8
Totals	86	100.0

<u>Discussion of Results Outside the Parameters of Stated Hypotheses</u>

The following is a discussion of notable results found in analyzing

responses to the survey that were not addressed in the original research

hypotheses. In the last section of the survey, Section 4, managers were asked to

respond to several statements using a Likert scale regarding their perception of

issues related to burnout. For example, Questions 8 and 9 asked whether, in the

manager's opinion, there were adequate ways for employees to give feedback

regarding stress at the agency and did employees utilize them. In analyzing

Section 4, five questions (7, 8, 9, 12, and 13) eliciting managers' perceptions

and opinions about burnout were compared to the managers' assessments of

the acceptable level of burnout among staff in their agencies (Question 14). The

purpose of this analysis was to discover whether any relationship existed

between the managers' perceptions of the acceptable level of burnout and their

other responses regarding burnout issues. This analysis was conducted by

using the Pearson product-moment correlation presented in Table 5. For each

statement, managers were asked to respond using a Likert scale of one to five

(1= strongly disagree to 5= strongly agree). These independent variables were

then correlated with the dependent variable, from (Question 14, Section 4)

regarding managers' perceptions about the acceptable level of burnout among

staff, using the same one-to-five Likert scale.

Table 5

Pearson Product-Moment Correlation of Managers' Perceptions of Burnout Factors

Questions	r	d.f.	p
Burnout has a financial impact	-.667	37	<.01
Adequate system for staff feedback	.449	37	<.01
Staff are familiar with and use feedback system	.480	37	<.01
Would like to obtain more info on burnout	-.409	37	<.05
Would like to take steps to reduce stress at agency within 6 months	-.454	37	<.01

Note. Questions were correlated to managers' responses concerning the acceptable level of burnout at their agencies.

The correlation of Question 14 with Questions 7, 8, 9, 12, and 13 proved significant as presented in Table 5. Analysis of the managers' responses reveals that:

- Managers' assessments of the acceptable level of burnout is inversely related to the financial impact of burnout on their agencies (r=-.667, p<.01).

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- Managers' assessments of the acceptable level of burnout are directly related to the existence of adequate staff feedback mechanisms (r=.449, p<.01).

- Managers' assessments of the acceptable level of burnout are directly related to staff familiarity with and use of these communication systems (r=.480, p<.01).

- Managers' assessments of the acceptable level of burnout are inversely related to managers' interest in learning how other organizations are addressing burnout (r=-.409, p<.05).

- Managers' assessments of the acceptable level of burnout are inversely related to managers' action plans to reduce stress in their agencies within six months (r=-.454, p<.01).

The frequency distribution of the responses to Questions 7, 8, 9, 12, and 13 is presented in Table 6, further elucidating the significant findings in Table 5 and highlighting that the majority of managers indicated taking a proactive stance on the issue of burnout at their agencies. In Table 6 the responses "strongly disagree" and "disagree" are combined under "disagree," and "strongly agree" and "agree" are combined under "agree."

Table 6

Frequency Distribution of Managers' Interest in Burnout

Questions	Disagree		Neutral		Agree	
	No.	%	No.	%	No.	%
Burnout has a financial impact	21	30	12	13	57	63
Adequate system for staff feedback	16	17	15	16	61	66
Staff are familiar with and use feedback system	15	16	15	16	62	67
Would like to obtain more info on burnout	13	14	18	20	61	66
Would like to take steps to reduce stress at agency within 6 months	15	16	25	27	52	57

Discussion of Hypothesis Analysis Results

The following results are presented in order of the hypotheses outlined in

Chapter One.

Question 1

Is there a relationship between agency characteristics and managers'

perceptions of the acceptable level of burnout at their agencies? What are these

agency characteristics?

Section 1 of the survey (Appendix B) analyzed several agency

characteristics as reported by each manager participant. Hypothesis 1

specifically looked at six agency characteristics: nonprofit versus public status; age of the organization; number of clients served; staff-to-client ratios; level of funding; and turnover rates. A Likert scale was used to determine whether any of these factors were related to managers' perceptions of the acceptable level of burnout. In order to conduct an analysis on each of these demographic variables, the agencies were divided into two groups based upon the median of each variable. For example the median of the variable "annual budget" was $675,000 and agencies were divided into two groups based upon this median. This method of analysis was developed for Hypothesis 1 to test the differences between different types of organizations rather than to establish trends of each agency characteristic with respect to the manager's report of the acceptable level of burnout. Each variable, divided into the two groups, was then compared to the managers' Likert scale responses to the survey question "Burnout is at an acceptable level at my agency" (1=strongly disagree to 5= strongly agree). For each comparison a t test for independent samples was performed to test for any relationship between the characteristic and the managers' perceptions of the acceptable level of burnout. The results for each characteristic are described below.

Hypothesis 1a.

There will be a difference between nonprofit and public agencies with respect to the managers' reports of the acceptable level of burnout at their organizations. The research literature made no distinction between public and

nonprofit agencies and did not address whether there would be a difference between the groups. Differences in funding sources suggested there may be differences in how managers perceive burnout in their agencies. Public organizations are funded directly by government agencies, whereas nonprofit organizations usually subcontract with these public organizations to provide services. Nonprofit organizations are one step further removed from government funding sources and negotiate with public organizations for contracts.

For this analysis, agencies were divided into two groups. One group consisted of public agencies and the second group consisted of nonprofit agencies. Table 7 presents the t test analysis of the managers' reports of the acceptable level of burnout among staff, comparing nonprofit and public agencies.

There was no significant difference between nonprofit and public organizations and managers' perceptions of the acceptable level of burnout in their agencies. Based on these findings, Hypothesis 1a was rejected (t (88)=-.592, p=.555).

The finding that there is no difference between nonprofit and public managers' perceptions of the acceptable level of burnout at their agencies supports the decision made during data collection to include in this study, for comparative purposes, public agencies offering similar services to those of the nonprofit organizations surveyed.

Results of this study show that managers of public and nonprofit agencies have similar perceptions about the acceptable level of burnout at their agencies. This finding is presented in Table 7.

Table 7

Nonprofit and Public Managers' Perceptions of Acceptable Level of Burnout

	Nonprofit	Public
N	67	23
Mean	2.821	3.00
S.D.	1.266	1.206

Note. t=-.592 d.f.=88 p=.555 n.s.

Hypothesis 1b.

There will be a difference between younger and older agencies with respect to managers' reports of the acceptable level of burnout at their organizations. The relevant research literature indicates that agencies which have been in operation longer are likely to have more experience and systems in place to support staff.

For this analysis agencies were divided into two groups based upon the median number of years of operation (Survey Section 1, question 3). The median number of years was 19. The first group consisted of those agencies in

operation 0 to 18 years, and the second group consisted of agencies in operation 19 years or longer. As shown in Table 8, there was no significant difference between managers' perceptions of the acceptable level of burnout and the organizations' age. Consequently, Hypothesis 1b) was rejected (t (87)=1.155, p=.251).

Table 8

Relationship Between Managers' Perceptions of Acceptable Level of Burnout and Years of Operation

	<19 years	≥19 years
N	42	47
Mean	3.048	2.745
S.D.	1.259	1.259

Note. t=1.155   d.f.=87   p=.251   n.s.

Hypothesis 1c.

There will be a difference between lower and higher number of clients served annually at agencies with respect to managers' reports of the acceptable level of burnout at their organizations. The literature review noted that staff obliged to serve a large number of clients are susceptible to higher levels of burnout. In this analysis, the agencies were divided into two groups based upon the median number of clients served annually (Survey Section 1, Question 8).

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The median number of clients served annually was 700; therefore, the first group

consisted of agencies serving 699 or fewer clients per year, and group two

consisted of those serving 700 or more clients per year. Table 9 presents the t

test analysis of managers' reports of the acceptable level of burnout among staff

(Survey Section 4, Question 14) for the two groups. The number of clients

served did not appear to have an effect on manager's perceptions of acceptable

levels of burnout. (t (88)= -.226, p=.822) Based on these findings, Hypothesis 1c

was rejected.

Table 9

Relationship Between Managers' Perceptions of Acceptable Level of Burnout
and Number of Clients Served Annually

	<700 Clients	≥700 Clients
N	50	40
Mean	2.840	2.900
S.D.	1.251	1.257

Note. t=-0.226   d.f.=88   p=.822   n.s.

Hypothesis 1d.

There will be a difference between lower and higher staff-to-client ratios

with respect to managers' reports of the acceptable levels of burnout at their

organizations. This hypothesis was supported in the literature, which suggested that caseload had an effect on staff who cannot meet the administrative and emotional demands of working with higher caseload numbers.

For this analysis, the agencies were divided into two groups based upon the median staff-to-client ratio (Survey Section 1, Question 9). The median staff-to-client ratio was 1 to 10. The first group consisted of agencies reporting their staff-to-client ratio of one staff member for 9 or fewer clients, and the second group consisted of agencies reporting a ratio of one staff member for 10 or more clients. Table 10 presents the t test analysis of managers' reports of the acceptable level of burnout among staff for the two groups. High client caseload did not appear to have an effect on the managers' perception of the level of burnout among staff ($t(62)=.176$, $p=.861$). Based on these findings, Hypothesis 1d was rejected.

Table 10

Relationship Between Managers' Perceptions of Acceptable Level of Burnout
and Staff-to-Client Ratio

	1 staff for <10 clients	1 staff for $\geq$ 10 clients
N	25	39
Mean	2.840	2.897
S.D.	1.281	1.273

Note. t=-.176 d.f.=62 p=.861 n.s.

Hypothesis 1e.

There will be a difference between smaller and larger annual agency
budgets with respect to managers' reports of the acceptable level of burnout at
their organizations. The literature suggested that agencies with higher funding
levels will have more acceptable levels of burnout than those agencies with
lower levels of funding. Researchers have indicated that low funding will result in
low salaries and fewer resources available to work with clients, which may lead
to lowered staff morale and greater turnover. In this analysis the agencies were
split into two groups based upon the median funding level (Survey Section 1,
Question 14) which was $675,000. Group one consisted of those agencies
reporting budgets of less than $675,000 per year, and the second group

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consisted of those agencies reporting budgets of $675,000 or more. Table 11

presents the $\underline{t}$ test of managers' reports of the acceptable levels of burnout

among staff for the two groups. The agency characteristic of funding level

theorized in Hypothesis 1e did prove significant (t(82)=2.24, p=.028) compared

to the managers' perceptions of the acceptable level of burnout, and therefore

Hypothesis 1e was accepted. However, the significance shows that managers

who perceive burnout to be at unacceptable levels are associated with agencies

having higher budgets, $675,000 or more. The results of this analysis were

unexpected based upon previous research. The results are particularly

surprising given the responses of managers regarding sources of stress

(presented later in Hypothesis 2) which suggested that low funding would be

related to unacceptable level of burnout.

Table 11

Relationship Between Managers' Perceptions of Acceptable Level of Burnout
and Annual Budget

	<$675,000	$\geq$ $675,000
N	42	42
Mean	3.143	2.548
S.D.	1.280	1.152

Note: t=2.24   d.f.=82   p=.028   significant

<u>Hypothesis 1f</u>.

There will be a difference between lower and higher levels of staff

turnover with respect to managers' reports of the acceptable level of burnout at

their organizations. Turnover has been repeatedly identified as an indicator of

burnout by several researchers, including Maslach (1982a), Shinn (1982), and

Cordes and Dougherty (1993).

In this analysis of annual turnover percentage reported by managers

(Survey Section 4, Question 1) responses were divided into two groups based

upon the median turnover of 20%. The agency characteristic of turnover

theorized in Hypothesis 1f did show a significant difference (t(88)=2.03, p=.045),

as shown in Table 12. Based on these findings, Hypothesis 1f was accepted.

Table 12

Relationship Between Managers' Perceptions of Acceptable Level of Burnout
and Annual Turnover Percentage

	<20% turnover	>20% turnover
N	42	47
Mean	3.119	2.596
S.D.	1.310	1.116

<u>Note</u>. t=2.03 d.f.=89   p=.045 significant

<u>Question 2</u>

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What do managers identify as sources of stress at their agencies?

Hypothesis 2.

Managers will perceive staff or client characteristics as sources of stress more than they will other sources such as poor organizational structure or inadequate funding.

Responses to the open-ended Question 15, in Section 1, "Based on your knowledge and feedback from staff, what are the possible sources of stress in your organization, (e.g., high caseloads, low salary, etc.)?" were distilled into five distinct categories. The five sources of stress were identified as "Job Design," "Leadership," "Turnover," "Personal," and "Funding Sources." The first three categories were created based on research conducted by Shinn and Mørch (1983) and Shinn et al. (1984) in which staff were asked to identify what their agencies could do to address staff burnout. Shinn and Mørch (1983) and Shinn et al. (1984) cited several studies that identified potential stressors associated with human service work, including poor job design, poor leadership, and high turnover. Maslach (1978) indicated that managers would identify staff over-commitment or over-identification as a personal (or personality-related) source of stress at the agencies. The literature did not identify low funding as a source of stress specifically (although low salaries and lack of resources were mentioned). However, so many managers identified lack of funding or government funding requirements as a source of stress that this was noted as a separate category in coding the content analysis of Question 15. Two raters

coded the responses separately based upon these categories, and then they compared results to make a final decision for data entry.

Managers were asked to identify multiple sources of stress and could identify multiple items within the same category. For example, lack of space and low salaries were coded as "funding source" issues. In this case answers were counted as single responses for the identified category. Alternatively, managers may have noted more than one category, e.g., funding and turnover, and these responses were scored as a single response to each of the five appropriate categories. This analysis resulted in responses totaling more than the number of agencies responding.

Table 13 presents the frequency distribution of the five categories identified as sources of stress by the managers surveyed.

Table 13

Frequency Distribution of Sources of Agency Stress

Source	Number of responses	Percentage
Job design	74	46.5
Funding	65	40.9
Leadership	14	8.8
High turnover	3	1.9
Personal	3	1.9
Total responses	159	100.0

Note. Respondents could identify more than one source, and therefore, totals

are greater than the 92 surveys.

In this analysis responses in the turnover and personal categories were

defined as employee-identified causes of burnout. As Table 13 dramatically

highlights, managers overwhelmingly (153 out of 159 responses) identified job

design, leadership problems, and funding as sources of stress. In this case

Hypothesis 2 is rejected. Managers' comments accompanying their reports of

stress included "low salaries and benefits," "stressful cases," "amount of

documentation required," "role confusion and inappropriate

communication/behavior," "lack of higher level management support," and

"hierarchical structure which leaves little room for line workers to have much control." It is possible that previous research utilizing employee perspectives may have overlooked indications of managerial awareness of sources of stress that could lead to staff burnout.

<u>Question 3</u>

What do managers identify as the most important step the agencies can take to alleviate stress among staff?

<u>Hypothesis 3.</u>

Managers will identify individually-oriented solutions to stress at their agencies as opposed to posing organizational or societal solutions to the problem.

Responses to Section 1, Question 16, "What do you think would be the most important step your agency could take to alleviate stress among staff?" were divided into the same five distinct categories as previously defined in Hypothesis 2. The sources of stress relief were identified as better job design, funding source, leadership, turnover and personal. These categories were developed similarly to those applied to Hypothesis 2. Shinn and Mørch (1983) and Shinn et al. (1984) identified job design, leadership and turnover, and Maslach (1978) had identified personal factors. Managers' comments about funding were also incorporated into the content analysis. As was done for the coding of Hypothesis 2, two raters separately coded the data for Hypothesis 3 and then compared results to finalize data entry. Managers were asked to

identify one source of stress relief, although many made several suggestions.

Therefore, the multiple answers were coded similarly to Hypothesis 2, with two

or more items within the same category coded as a single response for the

identified category, and with answers coded to more than one category scored

as single responses in each of the five appropriate categories. The results are

presented in Table 14.

Table 14

Frequency Distribution of Alleviation of Agency Stress

Source	Number of responses	Percentage
Job design	43	35.5
Funding	61	50.4
Leadership	14	11.6
Lower turnover	1	0.8
Personal	2	1.6
Total responses	121	100.0

Note. Respondents did identify more than one source, and therefore, totals are

greater than the 92 surveys.

In this analysis responses assigned to the turnover and personal

categories were defined as employee self-help remedies to stress. By an

overwhelming margin (118 out of 121 suggestions) managers identified

organizational factors (job design and leadership) and external factors (funding)

as the most likely sources of potential stress relief in their agencies. Therefore,

Hypothesis 3 must be rejected. Suggestions made by managers regarding job

design and funding included, "achieve a financial position where money does

not drive decision making," "higher salaries," "rotate cases that are very hard to

treat among staff," and "more clinical staff to reduce caseload and wait list."

Interestingly, outside funding was more heavily weighted in this analysis,

whereas in Hypothesis 2 job design was the most frequently identified source of

stress. The rejection of Hypothesis 3 is significant because the literature

reviewed in Chapter Two indicated the opposite result would be obtained. These

results appear to support Handy (1988) and Cherniss (1980) who suggested that

the reduction of burnout among staff required a systemic understanding of the

problem. The source of relief according to these researchers was at a higher

level than individual employee self-help methods. The managers in this survey

appear to grasp the larger context of burnout.

Question 4

Is there a relationship between organizations' ability to cope with stress

and managers' perceptions of the acceptable level of burnout?

<u>Hypothesis 4.</u>

Managers who perceive burnout as being at an acceptable level will utilize more numerous coping mechanisms designed to relieve stress, such as those identified in the survey (Appendix B, Section 2—Benefits and Section 3— Organizational Support Components), than managers who make less use of such mechanisms.

This analysis compared managers' agreement or disagreement that burnout is at an acceptable level to the frequency distribution of affirmative responses concerning the existence of benefits and support components at their organizations. The analysis will show whether there are numerous coping mechanisms utilized by the agencies, and the difference, if any, in whether the managers who utilize them perceive acceptable levels of burnout at their agencies.

Managers' perceptions of the acceptable level burnout were coded on a five-point Likert scale in Section 4, Question 14. To conduct this analysis, the 92 responses to Question 14 were recoded from five Likert scale categories, i.e., strongly disagree, disagree, neutral, agree, and strongly agree, into two categories, agree and disagree, in order to create more discrete categories. Those respondents (43) who disagreed or strongly disagreed that burnout was at an acceptable level at their agency were coded as Group 2. Those respondents (34) who agreed or strongly agreed that burnout was at an acceptable level at their agency formed Group 1. Respondents (15) who had a

neutral opinion on the topic were also deleted from this analysis in order to create more discrete categories. Group 1 and Group 2 then were compared utilizing all positive responses to questions in Sections 2 and 3 related to agency support components which researchers have identified as potential coping mechanisms for staff.

Table 15

Frequency Table of Organizational Benefits Reported in Survey Section 2

Group 1 agree burnout is at acceptable level N=34		Group 2 disagree burnout is at acceptable level N=43		Benefits offered by respondent agencies
No.	%	No.	%	
33	97.1	43	100.0	Paid vacation days
32	94.1	41	95.3	Paid sick days
25	73.5	33	76.7	Salary differentials/step increases
8	23.5	7	16.3	Bonus payments
32	94.1	42	97.7	Health insurance
32	94.1	32	74.4	Mental health coverage within health insurance
29	85.3	31	72.1	Retirement plan
24	70.6	18	41.9	Agency contributes to retirement plan
19	55.9	28	65.1	Direct payroll deposit
26	76.5	37	86.0	Maternity/paternity leave
13	38.2	17	39.5	Agency contributes to dependent insurance
31	91.2	42	97.7	In-service training or other training opportunities
18	52.9	21	48.8	Staff retreats
17	50.0	28	65.1	Agency newsletter
8	23.5	15	34.9	Staff are audience for newsletter
23	67.6	29	67.4	Staff social events
8	23.5	7	16.3	Discounts for gym or exercise clubs
5	14.7	5	11.6	Child care benefits
23	67.6	30	69.8	Unpaid leave or sabbaticals
15	44.1	18	41.9	Other benefits(e.g. dental, vision, life insurance)
21	61.9	26	60.9	Average positive responses for Section 2

Table 16

Frequency Table of Organizational Support Components Reported in Survey Section 3

Group 1 agree burnout is at acceptable level N=34		Group 2 disagree burnout is at acceptable level N=43		Support components
No.	%	No.	%	
34	100.0	42	97.7	Written mission statement
23	67.6	27	62.8	Documented strategic plan
14	41.2	16	37.2	Personnel department
31	91.2	38	88.4	Published personnel manual
30	88.2	38	88.4	Written job description
32	94.1	40	93.0	Probationary/introductory period
30	88.2	32	74.4	Formal orientation process
32	94.1	37	86.0	Formal performance evaluation system
32	94.1	38	88.4	Annual evaluation
24	70.6	37	86.0	Procedure manuals for program operations
19	55.9	20	46.5	Staff reward/recognition events or awards
10	29.4	11	25.6	Employee assistance program
23	67.6	29	67.4	In-service/training budget
24	70.6	31	72.1	Employees participate in standing committees
26	75.2	31	72.4	Average positive responses for Section 3

The frequency with which each group responded affirmatively to the existence of any coping mechanism was then analyzed. The hypothesis tested was whether Group 1 would more often utilize coping mechanisms than Group 2. Theoretically, utilizing numerous coping mechanisms, identified as potentially reducing stress, would lead to more acceptable levels of burnout (Shinn & Mørch, 1983).

The frequency distributions of the number of positive responses from each group are presented in Tables 15 and 16. Table 15 depicts organizational benefits and Table 16 depicts organizational support components.

Section 2 surveyed employee benefits (such as health benefits and leave time) and Section 3 identified organizational components relating to employee support (such as job design and strategic planning). The results presented in Tables 15 and 16 show very little distinction between managers' perceptions of the acceptable level of burnout and what benefits or support components were offered.

On the whole, managers in Group 1 and Group 2 reported similar offerings of benefits and organizational support components. As shown in Table 15, Group 1 managers reported that on average 62% offered the identified benefits and Group 2 managers reported that on average 61% offered the identified benefits. As Table 16 shows, Group 1 managers reported that on average their agencies offer 75% of the identified organizational support

components, while Group 2 managers reported 72%. For the majority of items

identified individually in Tables 15 and 16, there was no distinct difference

between the two groups. However, there are two exceptions to this

generalization found in the frequencies reported in Table 15. The first exception

is that agencies in Group 1 offered mental health benefits as part of the

employee health plan (Section 2, Question 8) 20% more often than those

agencies in which managers disagreed that burnout was at an acceptable level

(Group 2). The second exception is that agencies in Group 1 offered and

contributed to a retirement plan (Section 2, Question 10) 29% more often than

those agencies in Group 2, in which managers disagreed that burnout was at an

acceptable level. Although these exceptions are interesting, they do not

constitute "numerous" benefits that managers reporting acceptable levels of

burnout use in comparison to those managers who report unacceptable levels of

burnout. Based upon this analysis, Hypothesis 4 must be rejected. Managers

who perceive burnout to be at an acceptable level in their agencies do not

appear to utilize more numerous coping mechanisms than those who do not

perceive burnout to be at an acceptable level in their agencies.

A discussion of these results is presented in Chapter Five.

CHAPTER FIVE

Summary and Conclusions

Review of the Problem

Staff burnout can have a severe impact on the fiscal health and service delivery system of any social service organization. Furthermore, researchers have confirmed that stressful work conditions in social service agencies can contribute to staff burnout. Burnout is clearly a management concern, because the organization controls the work environment that can create stressful conditions, and because the potential consequences of burnout put agency operations at risk.

Farber (1983a) believes that the introduction of the concept of burnout had a profound effect on how the public viewed human service work. Farber (1983a) writes that "this concept has made its way into the popular vocabulary and dramatically changed the ways in which human service professionals and the general public have thought about human service work" (p. ix). Burnout has been clearly distinguished both conceptually and empirically from other forms of occupational stress. Burnout can be measured in a reliable and valid fashion. Literature on burnout within social services has clarified the position of burnout in a network of variables related to the study of organizational behavior and occupational stress (Cordes & Dougherty, 1993; Hurrell, 1987).

Researchers can identify who is experiencing burnout as well as individual and organizational characteristics that possibly contribute to the problem; however, there is little research that explains what organizations can do to relieve or prevent burnout among staff. Most research has focused on individual workers' responses or reports about the issue, and few have validated these responses by analyzing organizational responses or by analyzing the working environment.

This study attempted to augment existing research by surveying managers of mental health agencies, as a subset of social service organizations, to substantiate managerial reports of burnout. The survey method was utilized to collect descriptive data to determine which if any agency characteristics (e.g., budget, size, age) related significantly to managers' perceptions that burnout was at an acceptable level in their agencies. The study attempted to verify research that suggested managers would attribute stress at the agency to staff and advocate self-help methods or individual coping strategies to relieve the stress. In the survey, managers were asked to identify what they perceived to be the sources of stress at their agencies, and what they would suggest as the best strategies to relieve it. The agency descriptive data also included a survey of organizational "coping mechanisms" (such as documented job expectations, job training, and staff benefits) that have been identified by several researchers as potentially contributing to a reduction in burnout. Managers' responses indicating the existence of these support mechanisms in their agencies were

compared to managers' assessments of the acceptable level of burnout at their agencies.

Discussion of the Findings

The findings in this study were affirming, enlightening, encouraging, and perplexing. Some results were consistent with the research on burnout in human service organizations. Other results suggested that contrary to the literature reports, managers tended to identify organizational and external influences rather than individual workers as sources of the burnout problem. This study did discover two descriptive agency characteristics (budget level and turnover) that showed a significant relationship to managers' perceptions of the acceptable level of burnout. Turnover had been noted in the literature as potentially related, but was not verified until this study, and budget levels had not been mentioned specifically until this study. The budget and turnover findings are perplexing for two reasons. First, the budget finding revealed that managers with lower budget levels agree that burnout is at an acceptable level more than those managers who have larger budgets. The second perplexing result is that this study was unable to discover any relationship among "coping mechanisms" or agency structural support components corresponding to managers' perceptions of the acceptable level of burnout. The following sections review the results in order of respondent characteristics, notable results, the hypotheses analyzed, and conclusions. Finally, future recommendations are discussed.

Respondent Characteristics

The descriptive agency statistics collected in the study's survey indicate that the study sample of mental health agencies was representative of average Bay Area social service organizations. These mental health agencies are similar to social service agencies described by the University of San Francisco study titled California Nonprofit Organizations (1995). The sample organizations were those operating on budgets of less than $750,000, offering a maximum of three programs at one or two sites, and employing an average of 38 staff. Based upon this comparison with the USF study, it is reasonable to assume that the results of this study can be utilized by other Bay Area social service organizations. This study is noteworthy as the first to analyze mental health agencies as a research group.

Notable Results Outside the Stated Hypotheses

Findings discovered outside of the stated hypotheses were supportive of findings in Hypotheses 2 and 3, which showed that managers reported that organizational and external factors were the source and relief of agency stress. Significant differences were found when variables managers reported regarding burnout issues, such as the fiscal impact of burnout, desire for more information about burnout, and intention to reduce stress in six months, were compared with the managers' perceptions of the acceptable level of burnout at their agencies. These significant results showed that if managers agreed burnout had a fiscal impact on their agencies, wanted to obtain more information about burnout, and

intended action to reduce stress at their agencies in the next six months, then these managers disagreed that burnout was at an acceptable level in their agencies. Conversely, managers who agreed that the level of burnout was at an acceptable level, also reported that there were adequate ways for staff to give feedback about the agency, and that staff were familiar with and used these communication systems. These results disputed research that had stated that managers regard burnout in social services agencies as a natural and unavoidable consequence of work with clients, like a cost of doing business (Maslach, 1982a). The results of this analysis suggest that managers in mental health agencies are more insightful and proactive than earlier research had depicted them to be. These results also support results in the analyses of Hypotheses 2 and 3 which found that managers do not identify staff or clients as the source of or relief for stress at the agency.

Discussion of Hypotheses

Hypothesis 1

In Hypothesis 1, six agency characteristics were examined: nonprofit versus public status, age of organization, number of clients served, staff-to-client ratio, budget level, and turnover rates. Two of the characteristics, budget level and turnover, did prove significant in analyzing the managers' perceptions about the acceptable level of burnout.

Although budget level is not specifically mentioned in the literature regarding burnout, lack of funding does have an impact on operations, resulting

in reduced staffing levels, lower salaries, minimal training budgets, and fewer benefits. All of these factors have been mentioned in the literature as being associated with staff burnout in social service agencies. This study, however, did not find a significant relationship between higher budget levels and the managers' perceptions that burnout was at an acceptable level in their agencies. This conclusion suggests that lower funding, although perhaps raising organizational financial issues, does not relate to managers' perceptions of the acceptable level of burnout. Another possibility is that the lower funded agencies are younger organizations, so there has not been enough time for staff burnout to develop. Organizations with lower funding are generally thought of as small agencies "operating on a shoestring," making do with what they have. Perhaps despite lower funding, there is a higher level of commitment by the staff to the cause of mental health, similar to Cherniss' (1980) description of the zeal social workers had in the Great Society programs of the 1960s. Cherniss suggests that burnout begins with the loss of commitment, and this may relate to the results of this study's analysis of funding and burnout. This study found that managers do understand the operational consequences of burnout. However, these administrators may perceive stress at the agency as requiring a higher level response, e.g., more government funding, whereas they perceive solutions to staff burnout as requiring a lower level response, e.g., organizational strategies. However, these proposed explanations are incomplete and require further research.

Turnover is mentioned continually in the literature as a factor related to burnout. Turnover is described as a multidimensional variable with analysis problems similar to that of burnout. This study found a significant relationship between low turnover and managers' agreement that burnout was at an acceptable level in their agencies. Turnover has been associated with financial costs, loss of client base, personal changes (e.g., education, relocation, career advancement) that are not necessarily related to employee burnout. Therefore, reducing turnover, through whatever means, would not necessarily reduce the incidence of burnout (Shinn & Mørch, 1983). Results of this study, however, indicate that there may be a perceptual relationship between lower turnover levels and managers' perceptions of the acceptable levels of burnout. Managers may perceive that lower turnover is related to acceptable levels of burnout, yet there may be other possible explanations for why staff do not leave which are not related to managers' agreement that burnout is at an acceptable level. For example, in an economic downturn, staff are satisfied to be employed and do not leave their positions, particularly if other agencies are reducing staff. The analysis of turnover needs to be refined to specify how it relates to staff burnout.

<u>Hypotheses 2 and 3</u>

The results of this study indicate a major shift in managerial response to burnout originally reported in the literature. The change is apparent in Table 6 (analyzing responses to Survey Section 4) which shows that the majority of managers in this study agreed that there were adequate mechanisms in use for

staff to communicate to the organization about work stress (66% in Question 8), and that staff were familiar with these communication systems (67% in Question 9). Of further note, 66% of these managers affirmed that they were seeking to be better informed about burnout (Question 12); many of them (57%) agreed they wanted to reduce burnout in the next 6 months (Question 13); and the majority (63%) agreed that burnout had a financial impact on their agencies (Question 7). These responses supported the findings in Hypotheses 2 and 3 that managers were aware of the impact that management policies and outside resources have on the experience of stress in their agencies.

Hypothesis 2 was rejected because overall these managers did not focus on individual workers or clients as the sources of stress in their agencies, but clearly identified problems with job design, lack of leadership, lack of resources, and funding issues as the sources of stress in their agencies.

Hypothesis 3 was also rejected because the managers in this study did not report individual self-help or other personal methods of adjustment as their preferred remedies for reducing stress in their agencies. Overwhelmingly the managers in this studied indicated that management methods or funding sources were better approaches to relieving stress in their agencies.

The rejection of Hypotheses 2 and 3, however, has a positive alternative. The results of Hypotheses 2 and 3, combined with the managers' interest in addressing the problem, do indicate that managers in this study have more awareness of the burnout problem than previous researchers have credited them

with. There are several possible explanations for this. First, the managers in this study direct mental health organizations, and therefore may have a better understanding of the mental health issues of their employees than do managers of other types of human service organizations. Because mental health agencies have rarely been studied, this potential bias would not necessarily have been examined in earlier research. Second, it may be the case that managers have increased their knowledge of burnout since earlier research was published, and this acquired knowledge was reflected in this study. Third, the failure of earlier studies to examine managers' perceptions in conjunction with employees' perceptions may have created a research bias regarding managerial awareness of the problem. Perhaps managers have been aware of the problem from the beginning, and this study highlights their desire for more knowledge.

With managers focusing on the larger aspects of the problem, e.g., organizational and governmental influences, it is logical to assume that more systemic solutions will be analyzed to address burnout. Cordes and Dougherty (1993, p. 621) were very clear that "the effective implementation of individual, managerial, and organizational practices to deal with burnout critically depends on managers' clear and accurate understanding of the construct."

It is interesting to note that in response to questions included in Hypotheses 2 and 3, managers rarely mentioned (4 out of 280 responses) the incidence or reduction of turnover as a way to identify or alleviate agency stress. This is perplexing because prior research supporting Hypothesis 1 clearly

identified turnover as an agency characteristic having a relationship to managers' reports of the acceptable level of burnout. As mentioned before, however, managers do not appear to connect turnover as a source of stress or stress relief. Managers in this study may perceive turnover as a result of stress rather than a source or alleviation of stress. Although the findings in Hypothesis 1 relate lower turnover to an acceptable level of burnout, perhaps managers do not view turnover as a means of addressing stress in their agencies. Turnover, similar to burnout, may be a result of the organizational and external influences managers identified as sources of stress and stress relief.

It is interesting that both funding and turnover have had opposite effects in this study. In Hypothesis 2 funding is related to managers' reports of agency stress, but in Hypothesis 1 higher funding levels are not connected to managers' reports of the acceptable level of burnout among staff. Research had indicated that if managers perceived low funding as a source of stress, they would also view low funding as related to unacceptable levels of burnout in their agencies, which was not the result of this study. In Hypothesis 1 turnover is related to the managers' perceptions regarding acceptable level of burnout, but in Hypothesis 3, turnover is not identified as a remarkable source of stress relief. Again, research had indicated that if low turnover was related to managers' perceptions of acceptable burnout, then lower turnover should also have been identified as a remarkable stress relief, which was not the result of this study. Similar to the discussion of Hypothesis 1, managers may perceive funding and agency stress

as higher level issues requiring external attention, whereas staff burnout and turnover are considered lower level organizational issues which can be addressed with internal resources. The results in Hypotheses 2 and 3, revealing a low number of reports of turnover as a source of stress relief, highlight the need for a more refined analysis of turnover in relationship to burnout, particularly as it relates to the perception of stress and burnout.

Hypothesis 4

In rejecting Hypothesis 4, many organizational structures and support mechanisms were found to have no discernible distinction regarding managerial perception of the acceptable level of burnout. Certainly more organizational structures could have been added to the analysis; however, the most probable explanation may be that more informal support mechanisms need to be verified and analyzed. Cordes and Dougherty (1993, p. 635) emphasized the need for future researchers to identify the specific aspects of support that either contribute to or reduce burnout. In addition, Shinn (1982, p. 79) described a theoretical model for future research with the hypothesis that group (social support) and organizational coping mechanisms (e.g., leadership, mission, rewards, and recognition) would be more effective in addressing burnout than individual coping mechanisms (e.g., vacation, relaxation techniques, or substance abuse). This study was unable to identify organizational support or coping mechanisms, singly or in combination, which would support Shinn's proposed model. Shinn's model indicated that there would be a difference,

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because the model proposes that organizational supports will reduce staff burnout. The organizational supports presented in this study did not show this distinction when compared to managers' perceptions of the acceptable level of burnout in their agencies. This study did not examine more intangible organizational supports such as peer review, quality circles, or professional practice committees. Further study in these alternative support systems may prove more productive than those utilized in this study. Hypothesis 4 was rejected because the existence of benefits or support components that the literature suggests will reduce stress bore no connection to managers' perceptions of the acceptable level of burnout. Based on Shinn and Mørch's (1983) work, however, it may be that more research is needed to elucidate what effect coping and support have on burnout, rather than to reject the idea based only upon the results of this analysis.

<div align="center">Conclusion</div>

This study expanded upon current burnout research by incorporating managerial perspectives and reports of staff burnout in mental health agencies to test and balance the currently documented workers' perspectives. By analyzing reports of managers at mental health agencies in the Bay Area, this study found turnover and budget have an effect on managerial perceptions of the acceptable level of burnout. Other researchers have reported this as well (Cordes & Dougherty, 1993; Maslach, 1982; Shinn & Mørch, 1983). Surprisingly, lower budget levels were associated with managers' perceptions of acceptable

level of burnout. Secondly, as opposed to the conculsion Maslach (1982a) reported, this study found that managers do not identify the shortcomings of workers as a source of agency stress. The managers in this study overwhelmingly regard agency stress as being related to organizational and external environment influences, which Cherniss (1982), Handy (1988), and Soderfeldt et al. (1995) have suggested is the case. It is encouraging to have managers in this study report higher-level insights and proactive responses to burnout at their agencies.

The perplexing problem remains that in this study, no specific recommendations for administrative action to address burnout are shown to be effective (as measured by managers' perception of the acceptable level of burnout). Coping mechanisms and organizational support measures which had been proposed by several researchers (Cordes & Dougherty, 1993; Handy, 1988; Shinn & Mørch, 1983) as mediating the effects of burnout had no distinguishable effects on managers' perceptions of burnout. This finding, however, does not diminish the observation that mental health managers in this study do understand the larger issues surrounding burnout and want to address it from an organizational perspective. This study did succeed in presenting a more balanced view of burnout research by incorporating the managerial perspective on the issue.

Recommendations for Future Research

Hypothesis 1

Analysis of organizational characteristics that might contribute to a managerial perception that burnout was at an acceptable level in an agency showed that low turnover and lower budgets are factors bearing significant relationship. This finding, however, was based on the managers' perceptions. It would be interesting to know if the managers' perceptions regarding turnover are supported by objective documentation. This question could be researched by measuring the incidence of burnout using the Maslach Burnout Inventory (MBI), comparing those scores to the actual turnover rate, and including interviews of exiting employees detailing their reasons for leaving. Secondly, it would be interesting to explore why managers of agencies with lower budgets perceive burnout to be at an acceptable level. The majority (63%) of managers in this study (see Table 6) agreed that burnout had a financial impact on the agency, yet they did not perceive lower funding to be associated with unacceptable burnout levels. Survey questions regarding such variables as salary levels, training budgets, and promotional opportunities could provide useful information in determining how agencies with lower budgets are managing their available funds. In addition, analyzing the number of workers' compensation stress claims at these agencies would provide concrete information about stress experienced by staff at these agencies. Further refined analysis regarding budget levels is required to elucidate the findings in this study.

This study attempted to present managers' perspectives on staff burnout, but in this study managers may have perceived a difference between agency stress and staff burnout. More study is needed to examine the distinction managers appear to make regarding agency stress and staff burnout. For example, why do managers perceive lower turnover rates as associated with acceptable level of staff burnout, but do not perceive lower turnover as a source of agency stress relief? Further study is needed to confirm whether measurements of managerial perceptions are an adequate or accurate means to gauge staff burnout, especially considering that most current burnout research is based on measurement of staff perceptions. Cordes and Dougherty (1993) suggest that

> . . . qualitative research also could be valuable in the study of burnout, particularly in capturing richer descriptions of contextual factors and personal meanings surrounding burnout processes. In-depth interviews may be optimal for discovery of personal meaning, whereas observation might be more effective for understanding everyday actions, organizing structures and contexts. (p. 650)

Handy's assessment highlights the need for more varied research methods to assess the interdependent and interactive nature of burnout factors.

It is important to note that most of the research to date has established the construct validity of burnout and has involved correlational analyses. No research definitively states what percentage of social service workers are

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experiencing burnout. This makes it difficult for the future researcher to report on whether burnout incidence has decreased or not. A tabulated analysis through continued MBI evaluations and case studies involving different points in time would be useful in creating a longitudinal assessment of the burnout problem. Further study is needed to assess the mediating effects that organizational demographic variables may have on the experience of staff burnout.

Hypotheses 2 and 3

Managers reported organizational and external factors as the predominant sources of agency stress and of agency stress relief. Future burnout research must expand to include the impact of other systems on the problem, e.g., political and societal issues. Cherniss (1982) and Handy (1988) emphasized the need to examine societal, political, and economic systems that have a relevant impact on the incidence of burnout.

Expanding upon this systems viewpoint, Shinn and Mørch (1983) and Cordes and Dougherty (1993) further note that the concept of human services staff experiencing burnout can be applied to workers in other service industries. Burnout, in their opinion, is actually an organizational phenomenon not limited to human services, but applicable to other "people oriented" occupational fields such as dentistry, telecommunications, and customer service (Cordes & Dougherty, 1993, pp. 629, 643).

Future research could examine the applicability of burnout to various customer service organizations including for-profit corporations using research

tools such as the Maslach Burnout Inventory (MBI) already developed by researchers in social services. Corporate involvement in the issue could be beneficial because the indications for future research include long-term longitudinal studies, which corporations can financially support. This cross-sector research could be beneficial to nonprofit organizations in ways similar to that in which the Hawthorne studies of the 1930s benefited psychological and organizational theory.

An economical approach to future qualitative research might be to develop a longitudinal study utilizing a replication design of this study, sending the same questionnaire to the same or similar agencies and evaluating the results longitudinally. Such follow-up could strengthen this study by adding an interview component involving a sample of respondents for a greater contextual breadth and incorporating interviews with key players in political or funding roles whose decisions affect the agencies surveyed. This multidimensional approach is what Cherniss (1982), Cordes and Dougherty (1993), Handy (1988), and Shinn and Mørch (1983) advocated in the models and proposals they described.

Hypothesis 4

The findings in Hypothesis 4 were perplexing because many researchers had advocated study of coping mechanisms and organizational support as potential remedies for burnout. This study found no distinguishable differences (except for mental health benefits) between managers who agreed or disagreed that burnout was at an acceptable level and the utilization of 36 potential coping

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mechanisms. Greater utilization of coping mechanisms by managers who agreed burnout was at acceptable level could indicate that these support mechanisms were useful burnout mediators, as the literature suggested. It may be that these mechanisms have become so commonly offered, that no distinction between organizations reporting acceptable versus unacceptable level of burnout can be measured for these mechanisms. The support mechanisms noted in this study may have become such accepted practices that a benefit such as health insurance is now perceived as an entitlement rather than as a coping mechanism. Perhaps more intangible support mechanisms that are not as widely utilized could be studied, such as quality circles, peer reviews, professional practice committees, employee review of leadership objectives, critical incident debriefing to address emotional consequences of work, and participation in the direction of the agency. Shinn and Mørch (1983), Handy (1988), and Cordes and Dougherty (1993) believe that such a systemic approach to examining informal systems will prove important in discovering mitigating factors that alleviate burnout.

This study succeeded in expanding burnout research by developing more information about managerial perceptions and the formal components of organizational efforts. Much of the research reviewed in this study suggests that informal structures for stress reduction, and particularly how these structures are perceived by managers and staff, are important areas for future research.

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APPENDIX A

Survey Cover Letter Example

July 28, 1990

Pamela Cooper White
Mid-Peninsula Support Network
222 D View Street
Mountain View, CA 94041

Dear Ms. Cooper White:

I am working towards my Master's Degree in Nonprofit Administration and in partial fulfillment of my degree, I am conducting a directed research project on professional burnout among Bay Area mental health organizations. I am interested in looking at staff burnout from an organizational standpoint, and I have chosen to survey managers and directors who can best articulate the agency's perspective and response to professional burnout among their staff.

I am sending the enclosed survey to you with the assumption that you are the most knowledgeable person concerning the personnel policies and procedures at your agency. If you are not the best resource at your organization for this purpose, I would appreciate you giving this survey to the person whom you consider most qualified.

The survey requires approximately fifteen minutes to complete. The information recorded on the survey is confidential and will only be used for my research. After completing the survey, please return it using the enclosed postage paid envelope. If possible I would like to begin analyzing the responses by August 17th, and therefore, I would appreciate your prompt reply.

I do believe the information gathered from this research will be useful in determining how other Bay Area mental health organizations address professional burnout among their staff members. I intend to have the results of this study compiled by the end of August. If you have any questions about the survey or would like to discuss the results with me in September, please call me at my work phone number 415-864-7833.

As a fellow administrator, I truly appreciate your time and effort in promptly completing this survey and assisting me in my research.

Sincerely,

Carol Kossler

enc.

APPENDIX B

Survey Instrument

SURVEY ON ORGANIZATIONAL RESPONSE TO PROFESSIONAL BURNOUT

Please note that all information recorded in this survey is confidential and will be used only in connection with this study. The research project concerns organizational perspectives and responses to professional burnout among mental health organizations. If you have any questions or concerns in completing this questionnaire, please call me at 415-864-7833. Please mail the survey to Carol Kossler, 149 Ninth Street, San Francisco 94103 by August 17, 1990. Thank you.

Section 1

Please fill in the following descriptive information.

1. Your title or position at your organization_____

2. Is your organization/program nonprofit or public? _____

3. In what year was the organization /program founded? _____

4. How many full-time employees are currently employed?_____

5. How many part-time employees are currently employed?_____

6. What percentage of these employees are clinical staff?_____

7. How many volunteers or interns/students work at the agency?_____

8. What is the average number of clients annually served?_____

9. What is the average staff/client ratio? 1 staff person for clients.

10. How many programs are operating at your organization?_____

11. Do they all provide mental health services? _____Yes or _____No

12. If no, how many provide other services?_____program(s)

13. How many different program sites are there? _____ site(s)

14. What is your 1990 fiscal year budget? $_____

15. Based on your knowledge and feedback from staff, what are the possible sources of stress in your organization, (e.g. high caseloads, low salary, etc.)?

16. What do you think would be the most important step your agency could take to alleviate stress among staff?

Section 2

Please identify all the applicable benefits offered by your organization to all <u>full time</u> employees.

1. Does the agency provide paid vacation days?   YES   NO

2. If yes, how many days per year? _____days per year

3. Does the agency provide paid sick leave?   YES   NO

4. If yes, how many days per year? _____days per year

5. Are there salary differentials or step increases?   YES   NO

6. Does the staff ever earn bonus payments apart from raises?   YES   NO

7. Does the agency provide health insurance?   YES   NO

8. If yes, does the plan provide for mental health coverage?   YES   NO

9. Does the agency provide for staff retirement in the form of a tax deferred annuity plan, 403 b plan, or something comparable?   YES   NO

10. If yes, does the agency contribute money to the plan?   YES   NO

11. Does the agency provide for direct payroll deposit?   YES   NO

12. Does the agency provide for maternity/paternity leave?   YES   NO

13. Does the agency contribute to dependent health insurance?   YES   NO

14. Does the agency provide staff in-service training or other training opportunities?   YES   NO

15. Do program staff have regular staff retreats?   YES   NO

16. Is there an agency newsletter?   YES   NO

17. If yes, is the staff considered the audience for the letter?   YES   NO

18. Does the agency sponsor staff social events?   YES   NO

19. Does the agency offer discounts at gyms or exercise clubs?   YES   NO

20. Does the agency offer child care benefits?   YES   NO

21. Does the agency offer unpaid sabbaticals or other leave?   YES   NO

22. Are there other benefits offered not mentioned in this list?   YES   NO

23. If yes, please list them.

_____

Section 3

Please identify all organizational components applicable to your organization.

1. Is there a written mission statement for the organization?		YES	NO
2. Does the agency have a documented strategic plan?		YES	NO
3. Is there a Personnel Department or Personnel Manager, where this is his/her sole function?		YES	NO
4. Does the agency have a published personnel manual?		YES	NO
5. Does each employee receive a written job description?		YES	NO
6. Is there a probation/introductory period for new employees?		YES	NO
7. Is there a formal orientation process for new employees?		YES	NO
8. Does the agency have a formal performance evaluation system?		YES	NO
9. If yes, are employees evaluated annually?		YES	NO
10. Are there procedure manuals for program operations?		YES	NO
11. Are there staff reward/recognition events or awards?		YES	NO
12. Does the agency have an employee assistance program?		YES	NO
13. Does the agency have an established in-service/training budget?		YES	NO
14. Do employees participate in any standing committees?		YES	NO

15 . Which of the following best describes the service(s) of the organization? Rank in order of importance, 1 being high.

_____residential treatment   _____individual counseling

_____independent living   _____referral network/hotline

_____outpatient treatment   _____case management

_____day treatment   _____other _____

16. Are these services primarily for_____children,_____ adults, or _____the elderly?

17. What special segment of this population does your agency serve (e.g., homeless, AIDS, abused children, etc.)?

Section 4

Some of the following questions refer to a scale of 1 2 3 4 5. The scale should be interpreted as follows:

1= strongly disagree   2=disagree   3=neutral   4=agree   5=strongly agree

1. What was the agency's approximate turnover rate in 1989?

_____0-10%   _____11-20%   _____21-30% _____31-40%_____41-50%_____over 50%

2. I believe this was an acceptable level of turnover.   1 2 3 4 5

3. The average length of employment for full time employees is _____years.

4. What is the most common reason employees give for leaving?
Rank in order of importance, 1 being highest.

_____salary   _____stress of work   _____advancement   _____education

_____advancement _____role clarity   _____career change _____other

5. I believe these are their true reasons for leaving.   1 2 3 4 5

6. I believe absenteeism is high at my agency.   1 2 3 4 5

7. I believe that burnout has a financial impact on the agency.   1 2 3 4 5

8. In my opinion, there are adequate ways for staff to feedback their thoughts
and feelings about stress at work.   1 2 3 4 5

9. Staff are familiar with and use these feedback communication systems.   1 2 3 4 5

10. I am aware of other organizations which are successfully addressing
professional burnout among employees.   1 2 3 4 5

11. I know how to get information about organizations that
successfully address stress and job burnout.   1 2 3 4 5

12. I would like to obtain information about organizations
with ideas about addressing employee stress and burnout.   1 2 3 4 5

13. I would like to take steps to reduce stress at this organization
within the next six months.   1 2 3 4 5

14. Employee burnout is at an acceptable level at my agency.   1 2 3 4 5

APPENDIX C

Reminder Card

Dear Administrator:

Approximately 2 weeks ago I sent you a survey regarding professional burnout among staff. If you have completed the survey and returned it or found that it did not apply to your organization, please ignore this reminder, and thank you for your help. If you have not returned the survey, please do so—remember it only takes 15 minutes to complete! If you have any questions about how to complete the survey, please call me at 415-864-7833 during the week.

Thank you.

Carol Kossler