Factors Affecting Burnout In School Counselors

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FACTORS AFFECTING BURNOUT
IN SCHOOL COUNSELORS

By
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requirements of the Degree of Doctor of Philosophy
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ABSTRACT

FACTORS AFFECTING BURNOUT IN SCHOOL COUNSELORS

This study investigated burnout and its correlates in 247 school counselors in New Jersey. Variables examined were self-efficacy, social support, involvement in school counseling initiatives, and proximity to Ground Zero. Emotional exhaustion was similar to overall norms for the Maslach Burnout Inventory; however, personal accomplishment was significantly higher and depersonalization was significantly lower than overall norms. Nearly 20% reported high emotional exhaustion, and 34% were in the average range. Nearly 90% reported low depersonalization and high personal accomplishment.

Burnout was not significantly related to self-efficacy or proximity to Ground Zero. Principal, supervisor, and teacher support were related to lower emotional exhaustion. Supervisor and counselor support were related to lower depersonalization, and counselor support was related to higher personal accomplishment. Involvement in initiatives predicted burnout only in the subsample identifying themselves as school counselors rather than guidance counselors.

In an exploratory analysis, elementary counselors reported lower depersonalization than high school counselors. Rural counselors experienced higher personal accomplishment than suburban and urban counselors. Subjects describing their professional identity as a counselor working in a school setting reported significantly higher personal accomplishment than subjects describing themselves as educators using counseling skills.

In a supplemental study, as a result of September 11, nearly all participants reported more positive feelings about their work. More than 80% felt affected personally and professionally by September 11. Only 30% felt they were well-prepared to respond to the tragedy. Three-fourths of the counselors feel more fearful, and nearly all continue to think about September 11.
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DEDICATION

To Mom, who showed me that the good life is shared in your kitchen and garden,
that everyone is welcomed into the family
and there is always a place for one more at the table;

To Dad, who showed me that every day is a new adventure,
that music awakens the love in people,
and through sheer determination, you can beat the odds and live life fully;

To Joe and Doris, who show me that family extends beyond physical boundaries,
and that you are never too old to learn something new;

To Chris, Julia, Matt, and Janine, who show me how to be true to yourself,
to enjoy the moment,
and for the sheer delight in sharing in your life;

To Barry, who shows me the boundless potential of love,
the joy of sharing our families, and that
life is all about making a difference.
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For my parents you inspired me by your extraordinary accomplishments, boundless love, and fulfillment working together for fifty-seven years.

My Mother, Clariza (Sherry) Petraglia Webber, gardener and cook par excellence, consummate volunteer and poll worker, square dance caller and Dad’s partner, you guided me by your patience, loyalty, and dedication to family, and your belief in living simply and serving others.

My Dad, Hartwell Keene Webber, Renaissance man, musician, inventor, engineer, square dance caller, and entertainer, you inspired me with your delight in new experiences, your thirst for knowledge, and your devotion to Mom and family. You marveled at each step I took in my career and you inspire me to find the music of life and love in each person.
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Chapter 1

Introduction

Schools are uniquely stressful work environments for counselors who fulfill multiple professional roles for the needs of hundreds of students. As an emerging professional counselor specialization, school counseling addresses the developmental and mental health needs of students. However, without definitive standards and job descriptions, school counselors experience overwhelming job strain from role conflict and role ambiguity. The school counselor’s responsibilities range from selective college admission and high-stakes testing to crisis intervention for drug abuse, suicide, and school violence.

Like other mental health professionals, school counselors often enter the profession passionately committed to helping others. They fulfill multiple, conflicting roles to meet the needs of students and the expectations of parents, teachers, and administrators. Faced with chronic stress, large caseloads, lack of support, and little control over their jobs, school counselors can slowly burn out.

Background

Twenty years ago, Boyer (1983) observed in his study of high schools that “at every school we visited, the counselors were shockingly overloaded” (p. 13). Today, while the recommended ratio is 250:1, school counselor caseloads can be 500:1 and 1500:1 (American School Counselor Association, [ASCA], 2003; L. Reedy, personal communication, September 23, 2003; A. Wallock, personal communication, September...
9, 2002). In addition to the counselor's intervention and crisis roles, the national school counselor standards movement (ASCA, 2003) and state and national school counseling initiatives prioritized an expanded role to lead comprehensive developmental school counseling programs.

In recent years, responses to the tragedies in Oklahoma City, Columbine High School, the Pentagon, and the World Trade Center, have renewed interest in the effects of chronic stress on caregivers (Eidelson, D'Alessio, & Eidelson, 2003; Gentry, 2002). In a world transformed by school shootings and terrorist attacks, the scope of the school counselor's role has vastly expanded. The counselor is one of the few mental health professionals available, and at times, the only professional trained to respond to crises and tragedies that affect students and families (Arman, 2000; Auger, Seymour, & Roberts, 2004, Baker, 2002; Bullock, Esquivel, Keating, & Mazzoni, 2002; Fitzpatrick, 2002; Lockhart & Keys, 1998; Mascari, 2002; Webber Runte, 2002). More than 2 years later, the September 11 disaster and its aftermath continue to affect individuals, including caregivers, who live close to the site of the World Trade Center (Gentry, 2002).

While many school counselors deal with role conflict, large caseloads, and intense student problems, not all suffer from burnout (DeMato, 2001; Stickel, 1988). According to Pines, Aronson, and Kafry (1980), mental health professionals share three common precursors to burnout: emotionally draining work, common personality characteristics with other human service professionals, and a client-centered orientation unique to the human services professions that focuses exclusively on the needs of the individual receiving their help. Skovholt (2001) described the effects of counselor job stress as "exhausted when saying yes, guilty when saying no—it is between giving and taking,
between other-care and self-care" (p. 1). Counselors involved in long-term disaster response experienced the negative effects of client trauma, thus increasing their risk for burnout and secondary traumatic stress (Arman, 2000; McCann & Pearlman, 1990). Gentry (2002) found that crisis response workers in Oklahoma City and New York City experienced long-term effects of trauma similar to that of the victims and families they treated.

School counselors can become emotionally depleted and frustrated when trying to meet the unlimited expectations of students, parents, and administrators. Compared to school social workers, school psychologists, and school nurses who have clearly defined national professional standards, school counselors and their professional associations are just beginning to define roles and standards. Without uniform job descriptions, training, and supervision standards, school counselors will continue to struggle to meet overwhelming job demands and role expectations.

Theoretical Framework

After observing and interviewing human service workers in chronically stressful conditions, Mas'chach and Jackson (1979, 1986) concluded that burnout could be measured on three distinct dimensions of emotional exhaustion, depersonalization, and a reduced sense of personal accomplishment. They defined emotional exhaustion as the feeling of being overextended and emotionally drained by clients' needs. Lack of personal accomplishment was defined as the decline in feelings of success on the job when work has little or no value or effect, and depersonalization was described as a detached, callous, or cynical response to clients. While they considered each dimension a unique
aspect of burnout, Maslach (1982b) emphasized the major role of emotional stress in
burnout. Most researchers agree with Maslach that emotional exhaustion is the core
component of burnout, and that depersonalization and lack of personal accomplishment
follow emotional exhaustion (Pines et al., 1980). Skovholt (2001), for example, found
that when mental health professionals became exhausted from intense, emotionally
depleting relationships, they were no longer able to connect to their clients, and
experienced higher levels of depersonalization.

More recently, Maslach and Leiter (1997) redirected their research from their
earlier emphasis on factors predicting burnout to factors that promote engagement as the
antithesis of burnout. They described burnout as a gradual progression along a continuum
from engagement to disengagement with clients. Depleted of energy, committed
caregivers ultimately become exhausted; their feeling of involvement turns to cynicism,
and their efficacy turns to ineffectiveness. Maslach and Leiter found that social support,
self-efficacy, autonomy, and role clarification ameliorated burnout. They identified six
areas for burnout prevention: sustainable workload, feelings of choice and control,
recognition and reward, a sense of community, fairness, respect, and justice, and
meaningful, valued work. Maslach's and Leiter's engagement model fits a new
professional role for school counselors enhanced by accreditation training standards and
grass roots school counseling initiatives (Runte, Mascari, & Lulach, 1991). With little
job control, support, and affirmation, school counselors are at a high risk for job stress
and burnout. More than a decade ago, Runte et al. exhorted that "guidance counselors in
the nineties move beyond the limitations of their traditional name" (p. 7). The role of the
traditional guidance counselor evolved from a career guidance focus to a school
counselor role with a pivotal developmental and mental health orientation. New Jersey certification (New Jersey Department of Education, NJDOE, 2004) now requires a core counseling preparation according to accreditation standards (Council for the Accreditation of Counseling and Related Education Programs [CACREP], 2001). This professional change has not come without personal and job stress. According to Gysbers (2001),

It could mean unfulfilled expectations. It could mean role conflict for school counselors as they struggle to respond to differing expectations created by different understandings of purposes. It could mean fragmentation as some school counselors attempt to respond to career issues, while others focus on mental health issues, while still others emphasize educational concerns. (p. 101)

Newly certified school counselors can enter work environments led by administrators who are unaware of and unprepared for this new professional role. Without the support of administrators, supervisors, teachers and fellow counselors, novice school counselors could become disillusioned and frustrated, and burn out.

Resources Affecting Burnout

Although relentless job stress can have a progressive, debilitating effect on their health and well-being, not all emotionally exhausted caregivers become burned out. When work demands exceed the coping resources available, caregiver job stress leads to burnout (Lazarus & Folkman, 1984). Paradoxically, Cherniss (1993) found high levels of personal accomplishment and happiness in those who labored day and night to care for handicapped adults. Further, after September 11, crisis response workers maintained high
levels of personal accomplishment despite emotional and physical exhaustion. A study of New York area psychologists showed that nearly all were affected both personally and professionally by September 11 (Eidelson et al., 2003). However, psychologists in the study reported significantly higher levels of positive feelings about their work after September 11.

Hobfoll (2002) attributed this apparent paradox between exhaustion and satisfaction to the reservoir of resources that protect and buffer caregivers from stressful events. According to Hobfoll, self-efficacy, social support, and self-esteem are core, integrated resources that work together to ameliorate burnout. He found that despite frustration and chronic stress, workers with strong self-efficacy, social support, and the motivation to achieve personally meaningful goals, persevered on the job and avoided burnout. Bandura (1986) also discovered that when workers believed they could succeed, they persisted even with high levels of emotional exhaustion.

Research on resources consistently demonstrated the relationship between social support, low burnout, and strong job satisfaction in caregivers (Hobfoll, 2002; Ross, Altmeyer, & Russell, 1989). However, there is little quantitative research on the effects of support and satisfaction in school counselors (O’Connor, 2002; Sutton & Fair, 1995).

Further, recent school counseling initiatives have advocated for greater job control, leadership, and social support as essential resources to reduce school counselor job stress or improve work factors (Borders & Drury, 1992; Campbell & Dahir, 1997; Johnson, 2000; Runte et al., 1991; Sink & MacDonald, 1998). In the New Jersey model, Runte et al. (1991) captured their ideal role that school counselors should “do what they are professionally trained to do...they prevent add-on duties because they follow a clearly
defined counselor role description based upon developmental counseling goals for all students" (p. 6). While the literature on school counselors has been primarily qualitative or anecdotal, it provides a compelling picture of the job stress and role conflict school counselors face.

**Problem Statement**

Burnout is a serious professional liability for counselors working in schools. As a developing profession, school counseling lacks the clear role definition, expectations, and standards, of the school social worker or school psychologist. Thus, school counselors typically face role conflict and ambiguity, increasing the risk for job stress and ultimately burnout. The school counselor is one of few mental health professionals, if not the only specialist, in a school dealing with many intense student problems including abuse, death, academic failure, divorce, bullying, conflict, substance abuse, and violence.

Although researchers have studied job stress and burnout extensively in human services workers including therapists, police officers, social workers, nurses, psychologists, ministers, and teachers (Furber, 1991; Mastuck & Jackson, 1986; Wilson, 2003), most of the literature on stress and burnout in school counselors has been qualitative or anecdotal (Bayerl & MacKenzie, 1981; Kendrick, Chandler, & Hatcher, 1994). The author found few quantitative studies on school counselor stress and burnout (DeMato, 2001; Stickel 1988, 1991; Ward-Allen, 2002) with no studies investigating burnout in school counselors in New Jersey, despite the counselor’s critical mental health role in schools. Similarly, while there is considerable research on resources that reduce burnout in mental health professionals, particularly social support, self-efficacy, and work initiatives (Hobfoll, 2002; Larson & Daniels, 1998; Parker, 1998), the author found no quantitative studies investigating these factors in school counselor burnout.
Research on the impact of September 11 and its aftermath suggests its powerful influence on psychologist and caregiver stress (Feldelson et al., 2003). While there are anecdotal accounts and personal reflections, the author found only two studies on the impact of September 11 upon school counselors in the literature (Auger et al., 2004; Baker, 2002; Gorecki, 2001; Mascari, 2002; Webber Runte, 2002). As the providers of most mental health services in schools, burned-out school counselors could have a deleterious effect on students who need their services. Although school counseling initiatives prioritize the need to reduce job stress and increase role effectiveness (ASCA, 2003; Baker, 2001; Gysbers & Henderson, 1994; Runte et al., 1991) the author found no quantitative studies examining the relationship of national and state school counselor work initiatives to levels of burnout in school counseling professionals.

**Definition of Terms**

**Burnout**

Burnout is a multidimensional syndrome in mental health professionals characterized by emotional exhaustion, depersonalization, and reduced personal accomplishment (Maslach, Jackson, & Leiter, 1996). In this study, burnout is operationally defined by the subscale score for emotional exhaustion, depersonalization, and personal accomplishment on the Maslach Burnout Inventory—Educators Survey. Subscale scores are reported separately and are not summed.

**Emotional Exhaustion**

Emotional exhaustion is one of the three dimensions of the burnout syndrome characterized by feeling emotionally depleted, overextended on the job, and drained by the needs of clients resulting in the counselor feeling unable to give any more on a psychological level (Maslach, Jackson, & Leiter, 1996). In this study, this dimension is measured by the emotional exhaustion subscale score of the Maslach Burnout Inventory—
Educators Survey. A high level of emotional exhaustion is indicated by a score of 27 or higher; a moderate level measured between 17 and 26 inclusive; and a low level is less than 16.

Depersonalization

One of the three dimensions of the burnout syndrome, depersonalization is characterized by an impersonal, callous, detached response to clients (Maslach, Jackson, & Leiter, 1996). In this study, it is measured by the depersonalization subscale score of the Maslach Burnout Inventory—Educators Survey. A score of 14 or higher indicates a high level of depersonalization; a moderate level is between 9 and 13 inclusive; and a low level is eight or less.

Personal Accomplishment

Low personal accomplishment is one of the three dimensions of the burnout syndrome, characterized by a loss of achievement, competence, or self-efficacy from helping others (Maslach, Jackson, & Leiter, 1996). In this study, a high degree of burnout was measured by a low score on the personal accomplishment subscale of the Maslach Burnout Inventory—Educators Survey. A score of 37 or higher indicates a high level of personal accomplishment; a moderate level is between 36 and 31 inclusive; and a low level is between 0 and 30 inclusive.

Proximity to Ground Zero

Proximity to Ground Zero is defined in this study as the distance in miles from the subject’s school to Ground Zero, the World Trade Center site. Proximity was designated by groups according to miles between the school and the site: 0-10, 11-50, 51-100, and more than 100 miles (Eidelson et al., 2003).
Self-Efficacy

Self-efficacy is the degree of confidence and belief in one’s ability to perform a task. Bandura (1986) defined perceived self-efficacy as “people’s judgments of their capabilities to organize and execute courses of action required to attain designated types of performances” (p. 391). Role breadth self-efficacy (RBSE, Parker, 1998) is the perceived degree of confidence in the ability to initiate and perform a wider range of tasks in organizations. Parker defined RBSE as “the extent to which people feel confident that they are able to carry out a broader and more proactive role, beyond traditional prescribed technical requirements” (p. 835). In this study, school counselor self-efficacy is measured by the summed responses to items on the Counselor Self-Efficacy Scale (Sutton & Fair, 1995).

School Counseling Initiative Movement

The school counseling initiative movement is composed of work redesign initiatives led by school counselor associations and state departments of education. The movement has facilitated changes from traditional guidance services to comprehensive developmental school counseling programs designed to meet the needs of all students and to refocus professional roles of school counselors as student advocates. Most initiatives follow a framework of four components: foundation, delivery system, management system, and accountability (ASCA, 2003; Gysbers & Henderson, 1994). Initiatives advocate expanding counseling services and developmental counseling programs for all students and eliminating non-counseling or clerical activities for counselors.
School Counseling initiative (SCI)

The School Counseling Initiative was established in 1990 as the New Jersey Developmental Guidance and Counseling Initiative, a grassroots professional initiative responding to school counselor stress, role conflicts, and role overload (Runte et al., 1991). The Initiative's model program received national recognition in 1991 when the authors received the ASCA Writer/Research of the Year Award. The name was changed in 1992 to the New Jersey Developmental School Counseling Initiative to emphasize the counseling role. In 2000, the New Jersey Department of Education's requirements for school counseling programs stated that districts take into consideration national career standards (NJDOE, 2000). The New Jersey Department of Education (NJDOE, 2000) and the New Jersey School Counselor Association (NJSCA, 2000) then collaborated to offer training, funding, and on-site support to 16 school district pilot teams and developed the School Counselor Initiative Academy to promote self-efficacy as counselors developed and led and local school counseling initiatives. The School Counselor Initiative Academy model used empowerment and work improvement groups to integrate resources of self-efficacy, autonomy, and peer support.

Student Support Services Program Development Initiative (SSSPDI)

The Student Support Services Planning and Development Initiative (NJDOE, 2000), was a collaboration between the New Jersey Department of Education and the New Jersey School Counselor Association. School teams created innovative models of coordinated services. The SSSPDI provided assistance to counselors developing coordinated programs with school psychologists, learning consultants, student assistance
counselors, social workers, and nurses. Through collaboration, peer support, and work improvement groups, the SSSPD1 sought to clarify counselor roles and improve services. Scheduled to begin in September 2001, the SSSPD1 training was delayed for 1 year after the events of September 11th. School counselors participating in the SSSPD1 were invited to participate in the current study.

**School Counselor**

School counselors in this study are professional counselors who hold certificates issued by the State of New Jersey Department of Education. They provide counseling to students, consultation to parents and teachers, and intervention and prevention services in schools. School counselors who received an endorsement for Student Personnel Services prior to recent changes (NJDOE, 2004) completed graduate level credits in prescribed counseling and guidance courses, and many counselors also completed a Master's Degree. Those who will become certified as a school counselor with the recent changes will have completed a Master's Degree program in school counseling accredited by the Council for Accreditation of Counseling and Related Education Programs (CACREP, 2001), or a state-approved, 48-credit master's degree program consistent with CACREP school counseling standards. According to the American School Counselor Association (1997),

Counseling is a process of helping people by assisting them in making decisions and changing behavior. School counselors work with all students, staff, families, and members of the community as an integral part of the education program. School counseling programs promote school success through a focus on academic
achievement, prevention and intervention activities, advocacy, and social/emotional and career development. (p.1)

Social Support

Social support is the provision of concern and care through interpersonal relationships provided by supervisors, peers, family, or friends. (House, 1981; Ross, et al., 1989). In this study, social support is limited to perceived supervisory, or peer support in the work setting. Social support is measured by responses to items on the Counselor Self-Efficacy Scale (Sutton & Fall, 1995) and the demographic survey.

Research Questions

This study investigated factors affecting burnout in school counselors working in New Jersey schools. The following research questions were addressed in the study: Do school counselors in New Jersey have a profile of emotional exhaustion, depersonalization, and personal accomplishment for burnout similar to the profile of other human services professionals? Are higher levels of self-efficacy related to lower levels of burnout in school counselors? Is strong social support related to lower levels of burnout in school counselors? Is involvement in school counseling work initiatives related to lower levels of burnout? Does proximity to Ground Zero affect levels of the dimensions of burnout in school counselors?

Significance of the Study

With their critical roles in providing counseling and crisis intervention for large numbers of students, school counselors are at high risk for burnout. While there is
extensive research on levels of burnout in other human services professions (Maslach, Jackson, & Leiter, 1996), few empirical studies were found addressing burnout in school counselors, and none were found regarding school counselor burnout in New Jersey.

An important goal of this study was to increase the level of knowledge and understanding of school counselor burnout. Knowledge gained from this research can enhance school counselor training, reduce the negative impact of burnout on students, and help establish or improve counselor burnout prevention and intervention programs (Sheridan, 1985; Warmath & Shelton, 1976). If school counselors demonstrate burnout similar to mental health professionals, intervention models can be applied to help them resolve Skovholt’s (2001) dilemma: “How do those in the caring professions, who use their own self as a method of change, prevent burnout and maintain vitality?” (p. x).

While there is considerable literature on stress in school counselors (Hardesty & Dillard, 1994; Moracco, Butcke, & McEwen, 1984), few studies have addressed factors that affect burnout in school counselors (Agnew, 1999; Cummings & Nád, 1983; DeMato, 2001; Stickel, 1988, 1991; Ward-Allen, 2002). While quantitative studies investigated the factors of social support and self-efficacy on burnout in other mental health and educational professions, (Ackerly, Burnell, Holder, & Kunde, 1988; Ross et al., 1989), no similar research was found that studied these factors in school counselors. Therefore, it is important to determine the factors that reduce burnout in school counselors as well as ameliorate the contagion effect of burnout in school environments.

Further, this study sought to determine the effects of September 11 on burnout in school counselors, particularly those who worked in close proximity to the former World Trade Center. Thus, an important goal of this study was to increase knowledge about maintaining and increasing levels of personal accomplishment for school counselors while ameliorating burnout, especially during long-term crisis response.
Limitations of the Study

There are limitations that should be considered in interpreting the results of this study. External threats to validity include the composition of the sample. The participant sample was not selected randomly and was limited to school counselors in New Jersey who volunteered to take part in the study. The study may have different results with a larger random sample of counselors in New Jersey or other states. Thus, generalizations are limited to school counselors in similar roles or school settings, and the ability to generalize the results to school counselors in other geographical locations may be limited.

In addition, internal threats to validity should be considered. The study was limited to the dimensions of burnout described in the Maslach Burnout Inventory-Educators Survey, and burnout levels may be different with other assessment tools. Burnout was also measured at one point in time, and the results could vary at different times during the year. This study did not investigate the developmental stages of burnout, or different points along the burnout continuum from low to high burnout. Other factors affecting burnout such as perfectionism, hardness, depression, helplessness, or coping style were beyond the scope of this study. Further, levels of burnout reported in the literature were not normally distributed in samples (Brewer & Clippard, 2002).

Responses may have been influenced by participants' awareness that their performances were being assessed, and they may have attempted to create a favorable impression when responding to self-report surveys. The procedures used to assure anonymity limited the investigator's control over the testing process. The investigator could not guarantee that items on the surveys were understood or completed accurately. Further, participants may have been influenced by others while completing the surveys.

Self-reported levels of burnout may have been influenced by the time the data was collected within the context of social and political events. Subjects could have responded differently immediately after the tragedy of September 11 or during its aftermath, or at
the time of the first or second anniversary. Further, the levels of burnout, particularly emotional exhaustion, and the need for caregivers and counselors to feel helpful and supportive in the immediate response, may have influenced the level of response to items assessing depersonalization and personal accomplishment. Responses may have also been influenced by trauma experienced personally or vicariously through helping clients that could include deaths of family or friends in September 11 or other trauma that was not a result of the World Trade Center disaster. The effects of continuing fear of terrorism, increased terrorist alerts, and the impact of the wars in Iraq and Afghanistan could also affect responses particularly regarding September 11.

Hypotheses

1. There will be no statistically significant difference in the dimension of emotional exhaustion for burnout, and there will be a statistically significant difference in the dimensions of depersonalization and personal accomplishment between school counselors and human services workers according to the overall norms for the Maslach Burnout Inventory.

2. Among school counselors, there will be a statistically significant negative relationship between counselor self-efficacy and the burnout dimensions of emotional exhaustion, depersonalization, and reduced personal accomplishment.

3. Among school counselors, there will be a statistically significant negative relationship between social support and the burnout dimensions of emotional exhaustion, depersonalization, and reduced personal accomplishment.
4. There will be a statistically significant difference in the burnout dimensions of emotional exhaustion, depersonalization, and personal accomplishment between school counselors who work in school counseling initiative programs and school counselors who do not.

5. Among school counselors, there will be a statistically significant positive relationship between proximity to Ground Zero and emotional exhaustion and high personal accomplishment (reverse scored), and a statistically significant negative relationship between proximity to Ground Zero and depersonalization.

Summary

This study sought to identify self-reported levels of burnout in school counselors working in New Jersey. The study also investigated the relationship between school counselor burnout and self-efficacy, social support, and participation in school counseling initiatives. Further, the study assessed the relationship between burnout in school counselors and proximity to Ground Zero. Stress and burnout in school counselors are important professional concerns, particularly with the impact of terrorist attacks, the war with Iraq, and school violence. While there is a growing body of research regarding burnout in psychologists, nurses, teachers, and principals, few empirical studies have investigated burnout in school counselors, and no research was found studying burnout in school counselors in New Jersey. No studies were found examining the relationship between school counselor burnout and self-efficacy, social support, participation in school counseling initiatives, or the proximity to Ground Zero. Thus, increasing the knowledge about school counselor burnout will help to improve training, increase the effectiveness of counseling programs for students, and aid in the development of effective prevention and support programs to reduce school counselor burnout.
Chapter II
Review of Literature

This chapter presents a review of the relevant literature. First, research on stress in the workplace and its relationship to burnout is reviewed. The development of the burnout construct in human service professionals and specifically in school counselors follows. Research on specific factors affecting burnout in school counselors, in particular, self-efficacy, social support, school counseling work initiatives, and proximity to Ground Zero, is then reviewed.

Stress and Burnout

The constructs of stress and burnout are frequently interchanged in the literature, but they are distinctly different and will be reviewed separately in this chapter. While there are many theories and definitions of stress and burnout, stress is generally accepted as the major cause of emotional exhaustion and burnout. It is also considered the precursor to and a major symptom of burnout. Burnout is generally considered the result of exhaustion from unremitting stress.

Job Stress

Selye's (1976) groundbreaking research established the foundation for a new understanding of human stress as a common response to external demands in the environment. His stress response, the General Adaptation Syndrome, focused upon objective, patterned responses to stressors in three stages. Stage one, the alarm stage, sets off the body's defenses. Stage two, resistance, is characterized by physiological responses as an adaptation to the stress. In stage three, the exhaustion stage, the demand is so great that when adaptation energy is depleted, exhaustion results. For the next 20 years,
researchers developed occupational stress models derived from Selye’s theory that focus on three sources of stressors: external to the person, internal as an individual psychological reaction, and interactional between the person and the environment (Lazarus & Folkman, 1984). In their interactional model, Lazarus and Folkman theorized that stress occurs when the individual perceives that environmental demands exceed the ability to cope. In a review of the literature on occupational stress, Osipow and Spokane (1981) identified three domains of job strain: first, organizational factors such as role ambiguity and overload; second, personal strain including withdrawal, anxiety, and sleep or eating problems; and third, personal resources including coping behaviors and support systems. Hobfoll (2002) showed that resources are integrated into resource reservoirs or resource caravans that work together to help to cope with stressful events.

Occupational factors create both positive stress (eustress) and negative stress (distress). Among positive intrapersonal factors are: self-efficacy, self-awareness, empathy, psychological mindedness, proactive personality, and appreciation for human differences (Farber, 1983b; Pines et al., 1980). Negative intrapersonal factors include: anger, depression, loneliness, isolation, boredom, rigidity, helplessness, over-identification, and emotional and physical exhaustion (Farber, 1983b; Maslach, 1993; Maslach & Jackson, 1986). Positive interpersonal factors center upon heightened relationship, enhanced friendships, compassion satisfaction, and emotional bonding.

These factors contribute to personal accomplishment even when professionals are emotionally or physically exhausted (Cherniss, 1980a; Figley, 1995; Lazarus & Folkman, 1984). Negative interpersonal factors that contribute to distress are: early termination, transference, countertransference, boundary issues, compassion fatigue, openness, absenteeism, demands by family and friends, harassment, and the inability to move out of the therapist role outside of work (Farber, 1983b; Gentry, 2002; Mahoney, 1997; Martin & Schinke, 1998; Maslach, 1976, 1993).
The Burnout Construct

Freudenberger (1974, 1975) first used the term “burnout” to describe the symptoms of caregivers in New York City free clinics. He observed young, enthusiastic mental health workers who slowly became emotionally and physically depleted while striving to reach unrealistic goals and meet job demands. Exhausted and frustrated, they continued to work and help others, and became depressed, apathetic, and “burned out.” Freudenberger’s personal experience led to his conceptualization of burnout. Working more than 20 hours per day in intolerable conditions, he made little impact on clients and became irritable, cold, and exhausted. Thus, Freudenberger also became “burned out.”

 Burnout as an individual problem. Most researchers defined burnout according to its symptoms rather than a theoretical construct. With the influence of Freudenberger’s psychoanalytic and therapeutic orientation, early research studies focused on personal characteristics contributing to burnout in mental health professionals. Freudenberger (1974) emphasized the excessive demands on individual energy and resources resulting in over-commitment to the job, inattention to oneself, and the substitution of work for one’s social life. Burnout, according to Freudenberger, is “an exhaustion born of excessive demands which may be self-imposed, or externally imposed by families, jobs, friends, others, value systems, or society which depletes one’s energy, coping mechanisms, and internal resources” (p. 159). Freudenberger and Richelson (1980) defined burnout in terms of individual stress and emotional depletion, “to exhaust one’s physical and mental resources, to wear oneself out by excessively striving to reach some unrealistic expectations imposed by oneself or by the values of society” (p. 14).

Farber (1991) emphasized disillusionment and frustration and described burnout as “a work-related syndrome that stems from an individual’s perception of a significant discrepancy between effort (input) and reward (output), the perception being influenced by individual, organization, and societal factors” (p. 24). Pines et al. (1980) emphasized the “progressive loss of idealism, energy, purpose, and concern as a result of conditions
of work...accompanied by physical depletion, feelings of helplessness and hopelessness, emotional drain, and the development of negative self-concept and negative attitudes" (pp. 14-15). Cherniss (1980a) focused on stress resulting in burned-out negative attitudes toward clients. He defined burnout as "a process in which a previously committed professional disengages from his or her work in response to stress and strain experienced on the job" (p. 13). Like Farber, Pines (1993) emphasized the existential aspect theorizing that burnout was the result of the failure to find meaning in work. Pines and Aronson (1988) proposed that the cause of burnout "lies in our existential need to believe that our lives are meaningful, that the things we do are useful, important, and even 'heroic'" (p. 11).

Stress and burnout have deleterious effects on caring and empathy, two essential interpersonal factors in the counselor-client relationship. The intense process of empathic attachment, involvement, and separation can result in renewed energy and commitment for some counselors. However, others feel emotionally depleted and unable to engage with clients. Skovholt (2001) built upon the early work of Cherniss (1980a) and focused on caring burnout as a natural result of the therapeutic relationship. He defined burnout as "the result of a decreased ability to professionally attach with the next client, student, or patient because of the cumulative depletion and negative energy generated over many previous episodes of work between the practitioner and the client, student, or patient" (p. 113).

Burnout as a situational problem. Maslach (1976, 1978a) pioneered burnout research from a social psychological point of view. She observed and interviewed child care and human service workers and focused on a cluster of symptoms in three dimensions that resulted from relentless job stress (p. 114). Maslach and Jackson (1979) shifted burnout research "away from the unending cycle of identifying the bad people and toward uncovering the operational and structural characteristics in the bad situations where many good people function" (p. 14). They defined emotional exhaustion as the
feeling of being emotionally depleted, overextended, and drained by clients' needs. A reduced sense of personal accomplishment was characterized by negative self-evaluation, dissatisfaction, and a decline in feelings of competence and success in the job. Depersonalization was defined as a very detached, dehumanized, or negative response to clients leading to callous or cynical treatment such as believing clients deserved their problems.

Although Maslach and Jackson (1981) found that the three dimensions were not a consequence of one another, they emphasized emotional exhaustion as the core component in the multidimensional construct. Maslach concluded that "the professional who burns out is unable to successfully deal with the overwhelming emotional stress on the job" (1982b, p. 32). Of the three dimensions of burnout, researchers generally agreed with Maslach and Jackson that emotional exhaustion is the core component of burnout, as both as a symptom and a result (Perlman & Hartman, 1982). In a review of burnout literature in the seventies, Perlman and Hartman identified approximately 50 definitions of burnout that concurred with the three-dimensional construct (Maslach & Jackson, 1986).

**Development of burnout assessments.** Maslach and Jackson (1979) pioneered the empirical study of burnout as a psychological phenomenon. Using surveys and questionnaires, they observed and interviewed professionals suffering from chronic stress and began an empirical study of symptoms experienced by mental health workers. Maslach conducted her initial study of social workers in a city welfare agency and collaborated with Pines, combining the results with a survey of mental health workers. The results of their survey were used to develop the 45 items of the initial Maslach Burnout inventory (MBI, Maslach & Jackson, 1986). Their preliminary MBI was administered to 605 persons in service and health professions with high potential for burnout including police officers, nurses, agency administrators, teachers, counselors, social workers, probation officers, mental health workers, physicians, psychologists and
psychiatrists, and attorneys. Initial items were rated for frequency and intensity, and, after factor analysis, 10 factors accounted for three fourths (75%) of the variance. Maslach and Jackson (1986) retained 25 items, eliminating those with a high percentage of never responses and then administered the 25-item survey to 420 subjects. With results similar to those in the first sample, Maslach and Jackson combined the two samples in the next factor analysis. Of the four factors found, three factors were identified as emotional exhaustion, depersonalization, and personal accomplishment. Each dimension is reported separately, and a total unidimensional burnout score is not reported to maintain the distinct contribution of each dimension to the burnout construct (Maslach, Jackson, & Leiter, 1996).

Following the pioneering work of Maslach and Jackson, Jones (1980) developed the Staff Burnout Scale (SBS). Although two thirds of the 30-item scale are consistent with Maslach's and Jackson's operational definition of burnout, the scope of the Staff Burnout Scale is broader than the affective experience found in the Maslach Burnout Inventory and includes negative physiological, cognitive and psychological dimensions (Arbital, 1990). The scale addressed burnout in health professionals and used the term “patient” in the items. Items assessed dissatisfaction with work, psychological and interpersonal tension, physical illness and distress, and unprofessional patient relationships comprise the total score.

Pines developed the Tedium Scale (Pines et al., 1980) applying a much broader definition of stress and burnout than in the Maslach Burnout Inventory. The dimension of tedium includes general satisfaction with life, and the scale measures chronic stress and pressure resulting in physical, emotional, and mental exhaustion in the overall workforce. According to Pines et al.,

Tedium can be the result of any prolonged chronic pressures (mental, physical, and emotional); burnout is the result of constant or repeated emotional pressure
associated with an intense involvement with people over long periods of time... It should be clear that the experience of tedium is almost always a part and parcel of the burnout syndrome. (p. 15)

The Maslach Burnout Inventory (MBI) is the most widely used measure of burnout, providing three distinct sub-scores for emotional exhaustion, depersonalization, and personal accomplishment. Maslach and Jackson (1986) replicated their three-factor construct upon the items of the second edition of the Maslach Burnout Inventory with similar results. The third edition provided norms for 11,067 subjects in caregiver professions. Norms were reported for each occupation including mental health, social services, medicine, and education (Maslach, Jackson, & Leiter, 1996).

The Maslach Burnout Inventory--HS and the Maslach Burnout Inventory--ES are identical 22-item surveys except for the terms client in the former and student in the latter to reflect a mental health setting or educational setting, respectively. A third survey, the Maslach Burnout Inventory--General Survey (MBI--GS) assesses burnout in the general public on three scales: exhaustion, cynicism, and professional efficacy (Schaufeli, Leiter, Maslach, & Jackson, 1996). In the MBI--GS, exhaustion measures the level of work fatigue; cynicism measures the feeling of indifference or distance to work; and professional efficacy measure the belief or expectation of one's effectiveness on the job.

The Semantic Differential (SD) has also been used to assess burnout (Osgood, Suci & Tannenbaum, 1957). While the Maslach Burnout Inventory uses a Likert-type format, the Semantic Differential pairs bipolar adjectives to measure feelings about burnout through psychological distance from the middle of the scale (0) outward to each bipolar adjective. Although Semantic Differential Scales do not have normative data, they serve as a cost-effective and easily administered tool that measures burnout along three dimensions of evaluation, potency, and activity (Osgood et al.). Three studies
relevant to school counselor burnout utilized Semiotic Differential Scales and are
described in this chapter (Agnew, 1999; Cummings & Nall, 1983).

Burnout as a human services phenomenon. Extensive research supports burnout
as a multi-dimensional phenomenon found in a wide range of human services
professionals including nurses, day care workers, psychologists, therapists, school
psychologists, counselors, and teachers (Ackerly et al., 1988; Cherniss, 1980a, 1980b,
1992, 1995; Cooper, 1986; Farber, 1983a, 1983b, 1983c, 1984, 1990; Farber, & Heifetz,
1982; Farber & Miller, 1981; Freudenberger, 1974, 1975, 1983; Friedman, 1995;
Golembiewski & Munzenreider, 1988; Grosb & Olsen, 1994, Horner, 1993; Jackson,
Schwab, & Schuler, 1986; Lee, & Ashforth, 1996; Leiter, 1993; Maslach, 1978a, 1978b,
1983b, 1982a, 1993; Maslach & Jackson, 1979, 1986; Maslach & Pines, 1977; Schaufeli,
& Janzcur, 1994; Schwab, & Iwanicki, 1982a, 1982b; Skorina, 1982; Skovholt, 2001;
Soderfeldt, Soderfeldt, & Warg, 1995; Stickel, 1991; Van Yperen, Buunk, & Schaufeli,

Pines et al. (1980) found three common antecedents of burnout in human services
professionals. First, human services workers do emotionally draining work; second, they
share similar personality characteristics that led them to service professions; and third,
they have a client-centered orientation. As a unique characteristic of human service
professionals, the client-centered orientation increases vulnerability to job strain. How
counselors perceive personal accomplishment despite intense stress and burnout may be
the decisive difference between an exhausted, but satisfied counselor, or an impaired
counselor whose negative attitude and behavior adversely affect the therapeutic
relationship and ultimately the client’s well-being. Over-involvement and intense focus
on client needs also lead to a loss of personal satisfaction and depersonalization of the
clients they serve. Skovholt (2001) reported that “educators also experience versions of
this vicarious stress when they interact with struggling students unable to learn and with
little family support” (p. 101-102). With large caseloads of students assigned to
counselors, the number of stressful client events addressed by school counselors could be much higher than what therapists in private practice or agencies experience. School counselors often work with several students each hour, and in crisis response, counselors work with large numbers of students continuously (Baker, 2001; L. Cox-Reedy, personal communication, September 9, 2002; Webber Reute, 2002). The counselor is one of few mental health professionals in the school, and, at times, the only professional available to respond to crises or tragedies. Further, in elementary schools, especially in underserved or in rural areas, only one counselor is assigned to several schools L. Cox-Reedy, personal communication, September 9, 2002; Sticke, 1988).

Since few studies of burnout have been conducted with samples of school counselors, a review of research on burnout in human services professionals can provide insights into common characteristics shared by caregivers and school counselors. Studies of psychologists, psychotherapists, and ministers can provide a broad overview of factors that affect human services professionals who perform duties or work in settings with similar characteristics to schools.

Burnout and professional impairment. Counselor impairment may be viewed as a symptom of stress and burnout or as the result of stress and burnout. The author found little research regarding impairment in counselors; however, the literature on therapists and psychologists provides common symptoms and effects as well as a framework for understanding impairment. Counselors with high burnout may report symptoms and behaviors similar to other mental health professionals. Among the common symptoms are inattention, fatigue, critical attitude toward clients, impatience, and irritability (Deutsch, 1984; Emerson & Markos, 1996; Groch & Olsen, 1994; Jupp & Shad, 1991; Kilburg, Kaslew & VandenBos, 1988; Renjilian, Baum, & Landry, 1998; Ross et al., 1989; Thoreson, 1998). In their study of psychotherapists' problems and impairment, Prochaska and Norcross (1983) concluded that relationship and occupational problems were the major stressors reported. They defined impairment as "the subjective experience of
discontent that may arise from various factors and that may be manifested in anxious moods, somatic complaints, lowered self-esteem, and feelings of confusion, and helplessness about their problem" (p. 644).

To investigate therapist stress, Guy, Polestra, and Stark (1989) surveyed a random sample of members of the Clinical, Psychotherapy, and Independent Practitioners Divisions of the American Psychological Association (Divisions 12, 29, and 42). Of the 318 subjects, nearly three-fourths (74.3%) indicated that they experienced personal stress in the previous 3 years. Of this group indicating personal stress, nearly one-third (32.9%) reported that the most frequently reported type of stress was job-related stress. Slightly more than one-third (36.7%) responded positively to the question, "Did the personal distress decrease the quality of patient care provided?" and 4.6% responded that "the distress was serious enough to result in inadequate patient care" (p.48). While Guy et al. did not find a pattern of characteristics in therapists who reported an impact of their impairment on patients, significant differences were found. Therapists reporting marital or job stress were more likely to deny reducing quality of patient care ($p < .01$). Further, therapists who reported the impact of distress on patients worked more hours ($p < .05$). Older therapists reported that their distress had no impact on patients more frequently than younger therapists ($p < .01$). While these studies did not investigate causes, they provided a picture of impaired symptoms including therapist's ranking of symptoms. The studies were limited to psychologists and their self-reported perceptions of stress. Patient rating of the effects of therapist stress and an external observation and rating of stress level or impact were not part of the research design.

In a similar study, Sherman and Tiegen (1998) investigated the effects of stressful life events, work factors, distress, impairment, and prevention in psychologists. Of 1000 practicing psychologists who were members of the American Psychological Association, 522 returned surveys with a return rate of 52.2%. Subjects completed the Satisfaction with Life Scale (SWLS) and recorded their experience with eight work factors and 14 life
event; in the last year, the level of distress with each event, and their perceived level of impairment which the authors defined as “the amount of interference in their ability to practice therapy resulting from the life event or work factor” (p. 3). The mean number of life events reported was 2.10 (SD = 1.68) and the mean number of work factors affecting burnout was 7.02 (SD = 3.32).

A majority of the psychologists cited the following work factors: difficult clients (73%), too much paperwork (58%), inadequate time for all obligations (67%), or managed care restrictions (67%). The highest levels of distress experienced were associated with malpractice claims (M = 4.27), changed work situations (M = 4.22), inadequate time for all obligations (M = 4.18), office politics (M = 4.15), conflicts in colleague relationships (M = 4.14), insufficient income (M = 4.10), managed care restrictions (M = 4.09), and too much paperwork (M = 3.92). The highest levels of impairment were related to malpractice claims (M = 3.42), managed care restrictions (M = 3.38), changed work situations (M = 2.82), conflicts in colleague relationships (M = 2.79), office politics (M = 2.68), inadequate time for all obligations (M = 2.65), and too much paperwork (M = 2.60). Although psychologists reported work with difficult clients as the most frequent factor, the mean level of distress was moderate (M = 3.46), and level of impairment was low (M = 2.27). Sherman and Thelen found very high positive correlations between total work distress and total work impairment (r = .87, p < .0001), total work factor occurrence and total work distress (r = .78, p < .0001), total life distress and number of stressful life events (r = .91, p < .0001), and total life distress and total life impairment (r = .90, p < .0001). Personal and professional satisfaction was assessed with the Satisfaction with Life Scale (SWLS), and a significant negative relationship was found between personal satisfaction and stressful life events (p < .0001), and also between professional satisfaction and all stressful work factors (p < .0001). In addition, stressful work factors were significantly positively related to observations of impaired behaviors (p < .0001). Consistent with the results of most studies of stress and burnout,
work factors were inversely related to both age and years of experience at the \( p < .0001 \) level. Women reported a significantly higher number of stressful work factors \((M = 7.56, SD = 3.41)\) than men \((M = 6.47, SD = 3.13)\).

Furthermore, women reported greater total work impairment \((M = 18.63, SD = 13.37)\) than men \((M = 15.50, SD = 11.10)\), \( t(491) = -2.77, p < .006 \). Women also reported a higher level of total work distress \((M = 27.73, SD = 16.32)\) than men \((M = 22.08, SD = 13.37)\), \( t(495) = -4.22, p < .001 \). Although the number of client hours per week was not related to any work factors, the highest levels of distress for stressful life events were reported for relationship problems \((M = 5.14)\) and major personal illness \((M = 5.94)\).

These two events also showed the highest correlations with levels of impairment (major personal illness/injury \((M = 4.0)\) and relationship problems \((M = 2.98)\). Although prevalence of divorce was only 2%, the distress \((M = 5.62)\) and impairment \((M = 3.36)\) ratings for divorce were very high. Thus, while the incidence of divorce was very low, respondents experienced very high levels of distress and impairment. Psychologists reported symptoms of impairment, canceled or missed sessions, or sessions began late. Thus, higher perceived distress and impairment related to work factors such as conflicts in client relationships and the work environment suggested the unavailability of social support in the workplace or the contagion effect of burnout. Sherman and Thelen (1998) concluded that “some distress and impairment should be expected when a therapist is experiencing stressful major life events or work factors, and some accommodations should be made” (p. 6).

The results of this study have relevance to counselors as mental health professionals. Recipients of counseling services could also be impacted when their counselors become distressed or impaired. More importantly, issues of counselor inattentiveness, abandonment, unavailability, or discontinuity of counseling services could have a deleterious effect on students, particularly on minors who may not be able to articulate or act on their disappointment or dissatisfaction.
Perceptions of burnout by students. What impact could impaired or burned out counselors have on student clients? Renjianian et al. (1998) investigated the perceptions and effects of therapist burnout on 131 undergraduates. Students viewed a videotaped therapy session conducted by an actor portraying a therapist either with or without burnout symptoms. The burnout therapist portrayed symptoms of impatience, inattention, and irritability by watching the clock, becoming annoyed with the client, not paying attention to the client, and showing relief at the end of the session. Subjects rated the therapist on attentiveness, empathy, liking, and comfort using the therapist again or referring another student to the therapist. A significant relationship was found for therapist attentiveness, liking the therapist and comfort using or referring another student to the therapist (p < .05). Students rated the therapist with burnout symptoms more negatively than the therapist without burnout symptoms. Further, students who took more psychology courses rated both therapists more negatively on liking and empathy. No significant differences were found for empathy, sex, age, and years of study.

To assure that the two videotapes depicted burnout symptoms, graduate psychology students (N = 26) rated the therapist according to a list of burnout symptoms on a 7-point Likert scale. The therapist with burnout symptoms was rated higher (M = 6.69, SD = 0.55) than the control therapist (M = 3.50, SD = 1.24). Paired t tests showed a significant difference between student perceptions of therapists (p < .01). Renjianian et al. concluded that undergraduate students could be very sensitive to behavioral symptoms of burnout in therapists.

In a similar study, Renjianian and Stiles (2002) investigated the reactions of 147 undergraduates to a videotaped therapy session conducted by an actor demonstrating burnout symptoms of yawning, fatigue, clockwatching, and inattention. Students with previous therapy experience rated the burned-out therapist significantly lower than students without therapy experience on liking, dedication, competence, concern for his client, and willingness to continue working with the therapist (p < .01). In a validation
procedure similar to the previous study, graduate students viewed the videotapes and
trated the burned-out therapist higher on a list of burnout symptoms on a Likert scale (\(M = 3.27, SD = 1.35\)) than the therapist without burnout symptoms (\(M = 1.67, SD = .82\)). Unpaired t tests showed a significant difference between the perceptions of the two therapist behaviors, \(t(34) = 4.14, p < .05\).

While the threshold for burnout symptoms affecting the quality of the therapy process was not quantitatively determined, the two studies of undergraduate perceptions of therapist burnout suggested that college students were affected by therapist burnout. Check-watching, yawning, pleasure at the conclusion of a session, and inattention can be potent negative factors in the therapeutic process. Although using actors was ethically appropriate, simulated sessions may not have depicted actual burnout symptoms. Further, subjects with therapy experience, experience in psychology classes, or enrollment in a psychology major, may be more likely to volunteer for the study or provide responses that are socially acceptable.

In summary, compared with psychologists working in agencies, psychologists in private practice were older, spent more hours in direct service, experienced feelings of support more frequently, and feelings of lack of control less frequently. Therapists working in agency settings reported higher levels of emotional exhaustion and lower levels of personal accomplishment than those working in private practice. Size of caseload was positively associated with personal satisfaction, but it was not in itself a predictor of burnout. However, dissatisfaction with caseload size was a significant predictor of higher levels of emotional exhaustion and lower levels of personal accomplishment. Theoretical orientation and participation in personal therapy were not related to burnout.

College students rated a therapist with burnout more negatively than a therapist without burnout symptoms. These results suggest that younger students in high schools, middle schools, and elementary schools may be able to discern differences between
counselors with and without burnout. Thus, school-aged children could be highly vulnerable to the effects of burned-out counselors in schools. Exacerbated by the large numbers of students counseled each day in schools and caseloads larger than agency professionals, school counselors could be more vulnerable to burnout.

**Burnout Dimensions and Factors**

According to the *Maslach Burnout Inventory Manual* (Maslach, Jackson, & Leiter, 1996), burnout is a continuous variable and each subscale is reported as a unique dimension of burnout. However, emotional exhaustion has been generally accepted as the core dimension of burnout (Maslach & Jackson, 1986). Researchers generally consider burnout as a multidimensional process with a slow progression in severity of symptoms and phases (Farber, 1983b; Gotzbiewski & Munzerreider, 1988; Maslach & Jackson, 1981). Maslach and Jackson (1981) suggested that emotional exhaustion appeared first, leading to depersonalization, and then to reduced personal accomplishment, agreeing that “a key aspect of the burnout syndrome is increased feelings of emotional exhaustion” (p. 99). Other researchers theorized that burnout was a unidimensional or two-dimensional construct (Freudenberger & Richelson, 1980; Pines et al., 1980). Cherniss (1980b) proposed that the final stage of burnout is detachment, a withdrawal from the commitment to help others and a result of work stress and emotional and physical exhaustion. Lee and Ashforth (1996) theorized that emotional exhaustion and depersonalization are the two core components of burnout. Although Demerouti, Bakker, Nachreiner, and Schaufeli (2001) concurred, they found that emotional exhaustion and depersonalization were strongly correlated with low personal accomplishment, and concluded that personal accomplishment was the result of the first two dimensions.

While many researchers adopted the three-dimensional burnout construct, others emphasized only one aspect or subscale of the syndrome. Garden (1987) focused upon depersonalization, and Pines emphasized emotional exhaustion in the TEDSS Measure.
which she later called the Burnout Measure (Pines at al., 1980). Ackerly et al. (1988) developed the Psychologist’s Burnout Inventory, and Stamm and Figley (1996) created the Compassion Satisfaction and Fatigue Test of which burnout is a component.

More recently, Maslach and Leiter (1997) revised the burnout construct, proposing a lack of fit between the person and the job. They identified six mismatches leading to burnout that develop along a continuum from burned out to fully engaged: work overload, lack of control, insufficient reward, breakdown in support, inequity, and conflict in value. The burnout construct was also expanded into stages (Freudenberger & North, 1985; Golenbiewski & Menzemeider, 1988). Freudenberger and North theorized that emotional and physical exhaustion resulted from 12 steps involving aspects of personality including over-involvement, time urgency, achievement striving, distortion of perceptions and values, denial of personal needs, increased use of inadequate coping behaviors, withdrawal, depersonalization, and depression.

Several personal factors have been studied in relation to stress and burnout. Control, hardiness, and loss of control were related to stress resiliency and levels of burnout. In a meta-analysis of the dimensions of burnout, Lee and Ashforth (1996) found relationships between control coping and organizational commitment. Maddi, Kahn, and Maddi (1998) suggested that hardiness buffered the effect of stressful events through commitment, control, and challenge. In a study of health care workers, Iverson, Olekains, and Erwin (1988) found that negative affect was significantly related to lower social support and job satisfaction and higher levels of emotional exhaustion, depersonalization, and workload, and positive affect was positively related to autonomy.

In a study of 116 ministers in the Middle Atlantic Region of the Church of Christ Wilson (2003) investigated the relationship between burnout and emotional labor. He found that burned-out ministers did not have healthy levels of detachment to prevent emotional over-involvement. Thus, burned-out ministers were “unable to maintain sufficient psychological distance between emotional requirements of the job and sense of
self" (p. 8). Wilson identified two types of emotional labor that affected burnout in ministers. Surface actors were able to separate and thus reported lower burnout. On the opposite end of the continuum, deep actors could not separate as needed. Overinvolvement and lack of boundaries in deep actors led to higher burnout. Wilson also found no statistically significant relationships between age, years of experience, and levels of education and burnout or emotional labor.

Scores for emotional exhaustion were distributed across the three ranges. The sample mean ($M = 17.03, SD = 9.33$) was lower than overall norms, teaching norms, and social services norms for the MBI–HS (1996) and higher than mental health norms. Depersonalization scores were concentrated in the low range ($M = 4.90, SD = 6.57$), and lower than all normative means. Personal accomplishment scores were concentrated in the high range (low burnout) ($M = 6.70, SD = 1.29$) and were higher than all normative means.

Although the sample was comprised of ministers, the study provided a relevant comparison to school counselors. The elementary or middle school counselor often serves as one of the few mental health professionals, or, at times, as the only mental health professional, in a school. Serving students, families, and staff parallels the minister's service to the congregation. The large caseload of a school counselor parallels the congregation, and both groups served presented with a wide variety of problems. Thus, the study provided a profile of burnout in highly stressed committed service professionals who serve families with personal, social, and emotional problems. Further, the survey was conducted in the fall which Wilson cited as a very stressful time for ministers. Similarly, the fall is the most stressful time for school counselors who deal with the opening of the school year, new enrollments, transfer students, and student and teacher adjustment. A limitation of the study could be the self-selection of ministers who choose to continue to work. They may be more satisfied and less burned out than those who make the choice to leave the profession.
The perception of being dissatisfied with caseload was a predictor of burnout in a study by Raquepaw and Miller (1989). Using the MBI, Raquepaw and Miller investigated burnout in 68 psychologists who were psychotherapists in Texas. The researchers found lower levels of burnout than the norm for the MBI (Maslach & Jackson, 1986). When means were compared to overall human service norms for the MBI, the sample had moderate emotional exhaustion, low depersonalization, and high personal accomplishment. Demographic variables did not predict burnout (gender, marital status, ethnicity, age, or educational level, years of experience, number of groups, theoretical orientation). However, therapists working in agency settings (M = 21.0, SD = 9.9) reported significantly higher levels of emotional exhaustion than private practitioners (M = 16.2, SD = 8.6), F (2,65) = 2.91, p < .06. Agency workers reported lower personal accomplishment (M = 41.3, SD = 3.5) than those in private practice (M = 44.1, SD = 3.5), F (2,65) = 4.42, p < .05. While caseload size did not predict burnout, satisfaction with size of caseload was a significant predictor of burnout, F(1,66) = 29.8, p < .001.

Raquepaw and Miller found that psychotherapists with larger caseloads had significantly higher levels of personal accomplishment. The actual caseload size predicted burnout only when the therapist was dissatisfied with the size of the caseload, thus reflecting the therapist’s perception of caseload. Psychotherapists who indicated that their ideal caseload would be smaller than their real caseload reported higher levels of emotional exhaustion and lower levels of personal accomplishment. Raquepaw and Miller concluded that “burnout may depend on an individual’s idiosyncratic judgment of his or her professional routine, but when it occurs, it may be costly: those who work in bureaucracies should take care” (p. 34).

A limitation of the study is the small size of the sample even with a 45% return rate. However, dividing the study between doctoral or master’s level psychologists, provided a better comparison to the current study of counselors. Most school counselors have completed a master’s degree or graduate credits rather than a doctoral degree.
Maslach and Jackson (1982) investigated the relationship between burnout and workload which they defined as providing services to more than 40 persons per day. They found that work overload was positively correlated with emotional exhaustion and depersonalization, and negatively correlated with personal accomplishment. Thus, while professionals experienced high levels of emotional exhaustion and the stressful effects of negative work factors, results suggested that they were satisfied with their work. Maslach’s and Jackson’s concept of work overload reflects the daily workload of middle and high school counselors who respond to walk-in students and parents frequently in addition to their scheduled individual appointments and groups.

Skorupa and Agresti (1993) studied psychologists’ ethical beliefs about burned-out psychologists who practice. Psychologists who believed that it is unethical to practice psychotherapy while impaired reported lower levels of emotional exhaustion, worked fewer client contact hours, and demonstrated greater knowledge about burnout prevention. In an earlier study of 225 psychologists, Skorupa and Agresti found a significant correlation at the $p < .01$ level between the level of emotional exhaustion and the number of weekly client contact hours. Psychologists with higher levels of personal accomplishment reported more contact hours per week with clients. However, psychologists who had greater numbers of clients with difficult behaviors reported higher levels of depersonalization.

In a national study of 562 psychologists, Ackerly et al. (1988) explored burnout and related factors in depth. Their research is valuable to the current study because of its comprehensive investigation of personal and work factors that affect burnout. Surveys were randomly mailed to 1,589 doctoral level members in the 1985 APA membership directory who worked as full-time licensed psychologists providing direct mental health services in a human service setting. Of the sample, 562 responded (35.37%) from 45 states and the District of Columbia, with about 10% from New York (8.20%) and from California (12.59%). Three fifths (60%) were private practitioners, 23% were staff
members, and 15% were supervisors and administrators. Participants completed the MBI and the Psychologist's Burnout Inventory (PBI), a 15-item survey developed by the authors about personal problems, attitudes toward therapy and self-care. Items included: “I find myself feeling responsible for my client’s well-being,” “I have control over what I do and when I do it during the work day,” “I take work home,” and “I receive constructive feedback from coworkers or supervisors.” Factor analysis yielded loadings of .46 or higher on an negative clientele, personal control, support, and client over-involvement. Participants responded to items on a 7-point Likert scale used in the Maslach Burnout Inventory.

The highest loading items reported by non-doctoral therapists were size or severity of caseload (48.2%), emotional exhaustion and irritability (46.5%), intimate relationships (41.2%), therapeutic effectiveness (40.7%), insufficient or unsatisfactory sleep (39.5%), chronic fatigue (37.2%), isolation or loneliness (33.7%), anxiety (31.8%), disillusionment about work (27.1%), depression (24.3%), and headaches (20.9%).

Results showed that burnout was significantly related to age, income, control and involvement, and work setting. Ackerley et al. (1988) found that younger psychologists reported significantly higher levels of emotional exhaustion. Lack of personal control and over-involvement were highly related to emotional exhaustion. Compared to the norms reported in the Maslach Burnout Inventory Manual (Maslach, Jackson, & Leiter, 1996), one third (32.7%) fell in the moderate range for emotional exhaustion and two fifths (39.9%) were in the high range. One fourth of the subjects (24.7%) were in the moderate range for depersonalization, and slightly more than one third (34.3%) were in the high range. Very few respondents fell into the moderate range (3.8%) or high range (0.9%) for reduced personal accomplishment (high burnout). The researchers found sample means significantly higher than mental health norms for emotional exhaustion, depersonalization, and personal accomplishment, t(1290) = 4.91, 2.32, 37.50, p < .05. Over-involvement and low control were strongly related to emotional exhaustion and
depersonalization, and low control was also negatively related to personal accomplishment (p < .01), accounting for 18% and 2% of the variance respectively. No correlation was found between burnout and relationship status, gender, theoretical orientation, types of therapeutic issues, or involvement in personal therapy. Their findings were consistent with other studies that found theoretical orientation or involvement in personal therapy not significantly related to burnout (Farber, 1983b; Farber & Heifetz, 1982).

Noting the large sample size, Ackerly et al. (1988) only identified correlations greater than 0.23 that explained 5% of the variance. Over-involvement, low control, medical issues, sexual abuse, and sexual dysfunction accounted for nearly one third of the variance for emotional exhaustion. Accounting for slightly more than one fifth of the variance for depersonalization were younger age, over-involvements, low control, negative clientele, and issues of sexual abuse/rape, psychotic behavior, self-growth, and legal issues. Accounting for two fifths of the variance for personal accomplishment were high income, more direct service hours, high control, high support, few diagnostic assessments, less consultation and administration, and group therapy.

Low support was significantly related to low personal accomplishment (p < .01) and high emotional exhaustion (p < .05). Negative client behaviors, income, percentage of time with individual clients and couples, and private practice were positively related to personal accomplishment. Percentage of time with individual clients was positively related to personal accomplishment (p < .01), but not to emotional exhaustion or depersonalization. Consistent with other burnout research, age was negatively related to emotional exhaustion and depersonalization (p < .01). Thus, older psychologists experienced lower levels of burnout than younger psychologists. In addition, while number of years in practice was negatively related to emotional exhaustion and depersonalization, 21.0% reported they would choose another career that was not in the area of psychology if they had the opportunity to choose again. Three fourths (73.49%) of
the respondents stated they would choose the same field in psychology, and 4.45% would choose another field in psychology.

The study added considerable knowledge to the field of burnout and provided a comprehensive analysis of the relationship of several variables mentioned in the literature. The careful selection of participant criteria added to the validity of the study. Further, the authors' development of an additional assessment tool, the Psychologist's Burnout Inventory, provided a valuable tool for further research. While the results showed significant differences between private practice and agency settings, 60% of the sample worked in private practice, limiting generalizations to the current study.

In a study of 219 supervisors working in a public welfare agency, Lee and Ashforth (1996) analyzed the relationship between stress, coping, and work adjustment and burnout using the MBI-HS and measures of strain, escape from stress, helplessness, and self-appraisal of performance. Helplessness was strongly related to emotional exhaustion (r = .53) and weakly related to depersonalization (r = .10). Personal accomplishment was related to perceived performance and control. Control over stressful events was strongly related to depersonalization (r = .59) and moderately related to exhaustion (r = -.39). Self-evaluation of work performance was strongly related to depersonalization (r = .72) and moderately related to emotional exhaustion (r = -.45). Job strain, both psychological and physiological, showed a stronger relationship to emotional exhaustion (r = .94, r = .56) than depersonalization (r = .15, r = .33). Thus, the Lee and Ashforth study provides a picture of burnout in a larger institutional setting that has parallels to school institutions. The level and intensity of client activity and the potential for stress are very high in both settings. The role of supervisors in a public welfare agency has similarities to that of school counselors who often act as case managers for students with multiple problems. A limitation of the study is that only supervisors were surveyed. Differences between supervisors and agency professionals would provide further insight into burnout in the setting.
School Counselor Burnout

The school counselor literature suggested that school counselors share a profile of stress and burnout with other mental health professionals. Their work is emotionally demanding, their orientation is client-centered, and they have similar reasons for choosing their profession. The literature reviewed in this section does not reflect the possible impact of revised preparation and certification requirements for school counselors in New Jersey (NJDOE, 2004).

School Counselor Stressors

Maslach, Jackson, and Leiter (1996) identified several major variables related to stress and burnout in educators: low social support and autonomy, role ambiguity, inadequate resources, role conflict, and lack of participation in decision-making. Unfortunately, much of the literature on school counselor stress is anecdotal or descriptive, and several studies lacked adequate research design. Few quantitative studies were found that provided insight into role conflict and role ambiguity for school counselors (Coll & Freeman, 1997; Freeman & Coll, 1997; Hardesty & Dillard, 1994). Freeman and Coll investigated role ambiguity and role conflict in a national sample of high school counselors. Using the Role Questionnaire, they found that in addition to role ambiguity, the role conflict factor yielded a third factor of role incongruity for school counselors. However, since only high school counselors were surveyed, the authors recommended comparing counselors in elementary, middle, and high school work settings to explore further the role incongruity factor. In a second study, Coll and Freeman studied role conflict in counselors in all three school levels. They found that role conflict was significantly related to each school level, with the elementary school level reporting the highest role conflict. Perhaps because of multiple expectations.
Role conflict is a source of unremitting stress for school counselors. While there is considerable anecdotal literature, there is a lack of both qualitative and quantitative research on school counselor stress (Olson & Díley, 1988). In a review of counselor literature, Ross et al. (1989) concluded that "studies do not identify the events that counselors perceive as stressful in their work environment, nor do they investigate the relationship between stressful events and burnout" (p. 464).

DeMato (2001) examined job satisfaction in 339 members of the Virginia School Counselor Association who worked as elementary school counselors, replicating previous studies by Kirk (1988) and L. Murray (1995). Thus, the three studies provided a longitudinal analysis of elementary school counselor job satisfaction in Virginia for 13 years just prior to the implementation of its elementary counselor mandate to just after the mandate became optional. In an earlier study, L. Murray examined the relationship between job stress and supervision in 487 elementary school counselors in Virginia using the Minnesota Satisfaction Questionnaire. Most counselors reported being satisfied with their jobs, although nearly all (90%) of the school counselors did not receive supervision.

In her study, DeMato (2001) chronicled the impact of Commonwealth laws and increases in student violence and school shootings on counselor satisfaction and job roles. Participants completed an Individual Information Form and a modified Minnesota Satisfaction Questionnaire (MSQ) consisting of 20 work environment scales related to psychological needs. Responses on the MSQ ranged from (1) very dissatisfied to (5) very satisfied with five responses per scale.

Slightly more than three fourths (76.35%) of the counselors solicited returned the surveys. Nearly all (94.61%) were female, European American (89.93%), married (80.87%), with a master's degree (92.31%). The average number of years of experience as an elementary counselor was 9.81 years. Most counselors (81.34%) had teaching experience and 29% reported counseling experience other than in elementary settings. Nearly all the counselors (88.85%) worked in only one school. Half (50%) reported
caseloads between 301 and 500 students and almost one third (30%) between 501 and 700. Nearly all counselors (92.25%) intended to remain in the profession and planned to remain in their current job (87.63%). Less than one fifth (16.67%) reported receiving clinical supervision. A majority indicated their job satisfaction was negatively affected by not having the state mandate (58.30%) and by the passage of the Standards of Learning assessments (65.2%). In addition, three fifths (60.0%) reported that their role changed with increased awareness of school violence. Of this group, nearly three fourths (74.58%) indicated increased direct services in violence prevention with 40.58% providing more anger management and conflict resolution skills and 34.06% teaching violence and bullying prevention lessons.

More than half (56.99%) reported major obstacles to their preferred way of carrying out their roles and functions. Of this group, slightly more than half (57.14%) cited “taking on more roles that detract from counseling” (p. 93); however, nearly all reported being satisfied (51.88%) or very satisfied (38.9%) with their jobs. Two demographic variables were significantly related to overall job satisfaction and accounted for 5.2% of the variance. These significant variables were counselors’ intent to remain in the job position, \( r (178) = -2.226, p = .027 \), and degree status, \( r (178) = 2.094, p = .038 \). Results of the Minnesota Satisfaction Inventory (MSQ) found that nearly all respondents were satisfied or very satisfied (78.45%, satisfied; 12.46%, very satisfied).

Of the 20 scales reflecting work environment, only compensation (\( M = 11.83 \)) fell below the mean of 12.51 for general satisfaction; however, advancement opportunities (\( M = 13.11 \)) and company policies (\( M = 12.68 \)) were closely ranked to compensation. The highest scale in the study, as well as in the 1988 and 1995 studies, was Social Service (\( M = 18.12, SD = 2.35 \), reflecting the role of the school counselor. Other highly ranked scales were: Moral Values (\( M = 17.54, SD = 2.25 \), Creativity (\( M = 17.43, SD = 3.65 \), Activity (\( M = 17.27, SD = 2.92 \), Variety (\( M = 17.09, SD = 2.14 \), and Ability Utilization (\( M = 17.09, SD = 2.90 \). Compensation was also the only scale below the mean for
general satisfaction in the L. Murray (1995) study, while all scores in the Kirk (1988) study were in the general satisfaction range.

No significant differences were found among the means of the three studies, $F(2, 57) = .24$. Further, although no significant relationships were found in the overall level of job satisfaction between the three survey results and the frequency of responses, the percentage of counselors who reported being very dissatisfied and dissatisfied with their job increased from 3.7% in 1988 to 6.6% in 1995, and to 9.1% in 2001. The median age was slightly higher and reported social status also improved; therefore, reported satisfaction would more likely be higher. Thus, the increase in dissatisfaction may be a result of political and social factors rather than personal or demographic differences.

DeMato’s (2001) replication study was conducted in the year after the law mandating elementary school counselors was changed to a local district choice. Forty percent of the participants reported feeling threatened by the lack of a state mandate and 40% felt not valued as staff members. With the implementation of the Virginia Standards of Learning as a statewide mandatory student assessment, two-thirds of the counselors in the study felt they were affected by the testing mandate and nearly one third felt more pressure.

The recent increase in school violence may also have affected the increase in dissatisfaction. More than half reported that their job roles were altered by responding to violence prevention, with 40% conducting anger management and conflict resolution programs and 33% involved in bullying and other violence prevention programs.

Further, in the 1995 and 2001 studies, elementary school counselors were satisfied in 19 of the 20 areas, while in the 1988 study counselors were satisfied in all 20 areas. The areas in which they were least satisfied were compensation, company policies, advancement, and security. The fifth area found in 2001 was the technical quality of supervision, perhaps because of increased roles responding to school violence. Also, counselors reported spending more time in tasks that were not important to them, perhaps because of increased non-counseling duties assigned to them by supervisors or changes in
working conditions. DeMato (2001) concluded that "an array of social, cultural, and political changes during the last two decades has presented new challenges to the profession of school counseling" (p. 104).

**Measurement of Burnout in School Counselors**

Although considerable anecdotal and qualitative literature was found (Kessler, 1990), the empirical literature on school counselor burnout was limited. Studies used the Maslach Burnout Inventory or Semantic Differential Scales to measure burnout (Agnew, 1999; Cummings & Nall, 1983; Davis, Savicki, Cooley, & Firth, 1989; Sickel, 1991; Ward-Allen, 2002). It is important to consider to which subgroup school counselors belong. Do school counselors belong with teacher norms since their work is in schools? Or, should they be compared to mental health workers because their primary role is therapeutic and developmental? For the purposes of this study, overall human services norms were used; however, collected sample means were also compared with teaching norms and mental health norms.

Maslach, Jackson, and Leiter (1996) reported norms for the MBI using a sample of 11,057 human services workers and norms for occupational subgroups. While the teaching subgroup is the largest (N = 4,163), counselors by profession fit into the mental health subgroup (N = 730) composed of "psychologists, psychotherapists, counselors, mental hospital staff, psychiatrists" (p. 5). Other subgroups included: postsecondary education (N = 635); social services (N = 1,538); medicine (N = 1,104); and other (N = 2,897) composed of "legal aid employees, attorneys, police officers, probation officers, ministers, librarians, and agency administrators" (p. 6). Although the mental health subgroup reported the lowest level of emotional exhaustion (M = 16.89, SD = 8.90) and
the second lowest level of depersonalization ($M = 5.72, SD = 4.62$), the subgroup also reported the lowest level of personal accomplishment ($M = 30.87, SD = 6.37$) which indicated the highest level of burnout for this dimension.

Cummings and Niall (1983) utilized Semantic Differential Scales, a self-reported burnout measure, and the School Leadership Inventory to study the relationship between supervisory leadership style and burnout in a random sample of 31 school counselors in Iowa. Forty counselors were solicited with a usable return rate of 77.5%. The sample was predominantly male ($N = 24, 71.4\%$). Self-reported burnout level was determined on a 9-point Likert scale from 1, Functioning at the peak of your capacity, to 9, Severely burned out. Burnout was measured on the evaluation (good—bad) and potency (strong—weak) factors of three concepts: self, clients, and job. Counselors responded to three stems: “My job as a school counselor is,” “I am,” and “My clients are” by rating their response on a 9-point line between two polar adjectives. Of the 12 adjective pairs (two sets of six different pairs), Cummings and Niall found 11 pairs significantly related to levels of burnout ($r = .657$ to $.837$). The potency factor of self concept was not significantly related ($r = .481$). A $t$ test was conducted between the means of low burnout and high burnout. After conducting $t$ tests between the means of leadership styles and SDS, they found a significant positive relationship between higher burnout in school counselors whose principal had an authoritarian style of supervision and lower burnout in counselors whose principals had a participatory style of supervision.

Davis et al. (1989) investigated the relationship between the levels of burnout and satisfaction with supervision in a study of members of the Oregon Personnel and Guidance Association. Of the 500 counselors solicited, 120 surveys were usable (24.8%).
The majority of the sample was female, and nearly half were school counselors with 41% as school counselors, 27% as mental health counselors, and 13% working in community colleges. Since nearly half of the participants were school counselors, the results of the study were relevant to the current study. Levels of burnout were measured with the MBI using both frequency and intensity of each burnout dimension. Satisfaction with supervision was surveyed using the Counselor Supervision Inventory. This instrument assessed the actual and the ideal dimensions of three subscales of supervision roles: counseling, consultation, and teaching. The ideal dimension was defined as how much the counselor believes that the item should be provided while the actual dimension indicates how much the counselor believes the item has been provided. The investigators found a significant relationship between dissatisfaction with supervision and greater frequency of reduced personal accomplishment ($r = -0.26, p < 0.01$), greater frequency of emotional exhaustion ($r = 0.23, p < 0.01$), higher intensity of emotional exhaustion ($r = 0.20, p < 0.05$) and higher intensity of depersonalization ($r = 0.18, p < 0.05$). Hours of supervision per week were significantly related to intensity of depersonalization ($r = 0.24, p < 0.05$).

Comments by subjects pointed to the impact of the lack of supervision on burnout as well as the lack of support by administrators who did not have a counseling background. According to one participant,

I became extremely burned out at my previous job where I worked for over 2 years. There, my supervision was totally inadequate, just about nonexistent. That made the job very difficult. My present job includes supervision by my team leader and by my clinical supervisor. I have appreciated the skills of both people tremendously. (p. 239)
The authors noted that since the magnitude of the correlations was modest, accounting for less than 10% of the variance in each burnout dimension, other factors should be considered including the work setting and the clientele. While the response rate was also small (24.8%), the results are consistent with other studies examined in this chapter, but were not divided into school levels. The study also used the state professional counseling association whose members may be more likely to return surveys than non-members. Further, members of the association may be less burned out or more satisfied by the nature of their professional involvement.

Agnew (1999) studied burnout in 13 elementary school counselors in an evaluation of the Getz-Roanoke Count Peer Group Clinical Supervision Program (GPGCS). Counselors completed the Semantic Differential Scales adapted from Cummings and Nall (1983), the Job Satisfaction Blank, and qualitative surveys. Three measures of self, client, and job were evaluated on two dimensions: evaluative and potency. Adjective pairs of the semantic differential were: meaningful—meaningless, tough—fragile, influential—uninfluential, potent—impotent, important—unimportant, free—constrained, pleasurable—painful, expanded—contracted, successful—unsuccessful, deep—shallow, attracting—repelling, and tenacious—yielding. Semantic Differential means indicated low burnout and were lower than the means of the Cummings and Nall (1983) study. Cummings and Nall established the neutral range between 3.1 and 5.1 with mean scores below 3.1 rated as low burnout and scores about 5.1 rated as high burnout. The mean burnout for all scores was 2.55 (SD = 1.41) in the neutral range with a Range of 1-6. Counselors (Job and Self, N = 13; Client, N = 12) reported significantly lower burnout in Self than the counselors in the low burnout group (n = 20; Evaluative: M = 1.77
compared with $M = 2.41$, $p < .01$; Potency: $M = 2.53$ compared with $M = 3.18$, $p < .05$)

and in Client (Evaluative: $M = 2.43$ compared with $M = 3.22$, $p < .01$; Potency: $M = 4.01$

compared with $M = 4.61$, $p < .05$). Job satisfaction was high and also higher than means

reported in the previous study by Crutchfield and Borders (1997).

Stickel (1988, 1991) investigated burnout, role perceptions, and perceived
effectiveness in school counselors working as the sole counselor in a rural school in the
west. The MBI Form Ed, the Minnesota Satisfaction Questionnaire, Short Form, and the
Counselor Role Inventory were mailed to 214 principal-counselor pairs in rural schools
in Montana, Nebraska, and Wyoming with a 68.6% return rate ($N = 147$). Of these, 105
counselor-principal pairs (49%) completed all required data to be usable in the study.

Stickel developed the Counselor Role Inventory to measure counselor-principal role
perceptions. Sample means were interpreted as moderate emotional exhaustion ($M =
20.91, SD = 10.25$) and depersonalization ($M = 5.57, SD = 4.69$), and high personal
accomplishment ($M = 40.46, SD = 5.24$). Principals showed low emotional exhaustion
($M = 17.49, SD = 8.69$), low depersonalization ($M = 6.85, SD = 4.63$), and high personal
accomplishment ($M = 39.29, SD = 6.55$), and t tests revealed significantly higher
emotional exhaustion for school counselors than principals ($p < .05$). However, Stickel
(1988) cautioned about "the lack of knowledge concerning the levels at which burnout is
productive or unproductive for the individual and/or the organization" (p. 96).

Counselors reported lower job satisfaction scores than norms, with all relationships in the
moderate range. There was a significant negative correlation between job satisfaction and
both emotional exhaustion and depersonalization, and a significant positive correlation
between job satisfaction and personal satisfaction. Of importance, however, is the
congruence between principals and counselors regarding ideal roles for prevention, remediation and commitment despite other incongruities about real roles. These results supported the early research by Cherniss (1980a, 1980b) who found that emotionally depleted mental health professionals often have stronger feelings of personal accomplishment. They presaged the school counseling initiative movement of the nineties that acted on counselors' needs to control their work environment and reduce job stress. According to Stickel (1988),

"Counselors need not assume misunderstandings nor operate based on perception but act as a result of written plans determined through their professional expertise as well as that of other professionals, including teachers. Counselors alone cannot and do not accomplish all the counseling that takes place in the school setting."

(p. 93)

While the study of burnout was secondary for Stickel (1988) to the primary goal of investigating role perceptions, she expanded the knowledge about burnout with a picture of rural counselor burnout, role perceptions, and job satisfaction. A limitation of the study was the lack of detailed analysis of burnout levels according to range and by demographic variables in order to compare data to other studies and the current study.

Ward-Allen (2002) investigated the relationship between role conflict and burnout in 93 school counselors in the Anne Arundel County Public School System in Virginia. All but 7 of the 100 counselors participating in school counseling meetings in October returned the surveys. Thus, nearly every counselor in the district completed a demographic survey, the Role Questionnaire, and the Maslach Burnout Inventory—ES.
The Role Questionnaire is an eight-item survey that measures role demands, expectations, and conflicting responsibilities.

Of the 93 subjects, 36.56% were elementary counselors, 25.81% were middle school counselors, and 37.63% were high school counselors. The profile of the sample showed a mean age of 43 years with 9.563 years of experience as a counselor and 17 years in education. Fourth fifths of the counselors (80%) were female and the majority (69%) was married. Nearly all (97%) were assigned to one school and earned a master’s degree (91.4%). The average caseload was 409 students, and slightly more than half (54%) were satisfied with their current job.

No significant relationships were found between demographic variables and role conflict or any of the three burnout dimensions. Ward-Allen (2002) found significant differences at the $p < .05$ level between depersonalization and personal accomplishment mean scores and normative mean scores; however, the mean of the emotional exhaustion subscale ($M = 22.16$) and the mean of the teaching subgroup norms ($M = 21.25$) were not significantly different.

The mean score for the total sample ($M = 4.62$) was significantly lower than that of the teaching subgroup norms ($M = 11.00$). A significant difference was also found between the sample mean for personal accomplishment ($M = 42.18$) and the mean for the teaching subgroup norms ($M = 33.54$) at the $p < .05$ level.

Role conflict for the subjects was in the moderate range at all three school levels (Total: $M = 4.072$, $SD = 1.356$; Elementary School: $M = 3.966$, $SD = 1.501$; Middle School: $M = 3.722$, $SD = 1.308$; High School: $M = 4.414$, $SD = 1.900$). Role conflict was
highest at the high school level, but there was no significant difference in role conflict between the high school mean and the elementary mean ($F = 2.057, p = .134$).

Ward-Allen (2002) found a statistically significant relationship between role conflict and burnout for the total sample. Compared with norms (Maslach, Jackson, & Leiter, 1996), the sample reported similar emotional exhaustion; however, the depersonalization mean was lower, and the personal accomplishment mean was higher. Burnout was in the low range for depersonalization ($M = 4.62, SD = 4.79$ compared with teaching subgroup norms; $M = 11.00, SD = 6.19$) and personal accomplishment ($M = 42.18, SD = 4.76$ compared with teaching subgroup norms, $M = 33.54, SD = 6.89$) and in the moderate range for emotional exhaustion ($M = 22.16, SD = 11.69$ compared with teaching subgroup norms, $M = 21.25, SD = 11.01$) at all three school levels. However, more than three fifths of the sample and nearly three fourths of the high school counselors reported emotional exhaustion. More than one third (38.70%) of the subjects reported high emotional exhaustion and nearly one fourth (23.65%) reported moderate level. Further, almost half of the high school counselors (48.57%) reported high emotional exhaustion and nearly one fourth (22.85%) reported a moderate level. When compared with the normative sample, the depersonalization score was significantly lower and personal accomplishment scores were higher in the sample, thus indicating lower burnout on these two dimensions. No significant differences were found for scores between the sample and the norms. High school counselors reported the highest burnout of the three school samples: for emotional exhaustion ($M = 24.51, SD = 10.81$), depersonalization ($M = 6.47, SD = 5.77$), and personal accomplishment ($M = 40.97, SD = 5.60$), with middle school counselors reporting the lowest levels for emotional exhaustion.
(\(M = 18.66, SD = 14.33\)), and depersonalization (\(M = 3.33, SD = 2.26\)). Elementary counselors reported the highest personal accomplishment, and thus the lowest burnout on this dimension (\(M = 43.24, SD = 3.19\)). Elementary and middle counselors traditionally have not had the paperwork, transcripts, college information, and scheduling tasks than high school and more time to conduct individual and group counseling.

Ward-Allen (2002) found a statistically significant difference in depersonalization scores among the three samples (\(F = 4.46, p = 0.014\)). Further, \(t\) tests yielded a significant difference in depersonalization scores (\(p = 0.014\)) between elementary and high school counselors (\(t = -2.25\)) and also a difference (\(p = 0.007\)) between middle and high school counselors (\(t = -2.519\)). While personal accomplishment was high at all school levels (elementary, 87.95%; middle, 87.5%; high, 74.28%), the high school sample reported the lowest personal accomplishment.

Emotional exhaustion and role conflict were significantly related in the total sample (\(r = 0.50, p < .05\)) and at each level (elementary, \(r = 0.45\); middle, \(r = 0.59\); and high school, \(r = 0.43\)). A positive relationship was found between depersonalization and role conflict in the total sample (\(r = 0.35\)) and the middle (\(r = 0.40\)) and high school (\(r = 0.43\)) samples. A negative relationship was found between personal accomplishment and role conflict in the total sample (\(r = -0.27\)) and the high school sample (\(r = -0.34\)). Ward-Allen (2002) also reported a significant negative relationship between depersonalization and personal accomplishment for the total sample (\(r = -0.37, p < .05\)) and the high school sample (\(r = -0.17, p < .05\)).

The Ward-Allen study is particularly relevant to the current study because of the significant relationships found between role conflict. Further all three dimensions of
burnout were related to emotional exhaustion. High school role conflict alone was related to low personal accomplishment. Results showed a significantly lower level of depersonalization and a higher level of personal accomplishment than the normative sample. Thus, high personal accomplishment may be more resistant to stressors in school counselors than in other populations.

In summary, school counselors suffer from job stress because of their client-centered orientation, their emotionally draining work, and personality characteristics similar to other human service professionals. In addition, the personal, interpersonal, and environmental factors that increase occupational stress for counselors in schools are similar to stressors affecting other human services professionals. While there is limited research on school counselor burnout, studies show that school counselors experience higher emotional exhaustion, lower depersonalization and higher personal accomplishment than MBI normative groups.

School Counselor Certification Changes

Recent changes in certification affecting preparation of new school counselors beginning in January of 2004 (NJDOE, 2004) may serve to reduce burnout in the future. The name of the certificate was changed from student personnel services to school counselor to emphasize the significance of the counseling role rather than a guidance and clerical role for the profession.

The New Jersey Department of Education (2004) removed the option to obtain certification without a master's degree or a strong supervised internship in counseling. Further, a teaching certificate and year of teaching experience are no longer required. While the New Jersey Department of Education required a certificate in student personnel services for high school counselors, it was not required for those serving as elementary or middle school counselors, although many practicing elementary or middle school
counselors possess certification (I. Lukach, personal communication, September 23, 2003). In addition, a master’s degree in an approved program is now required with 48 credit hours in core counseling, school counseling specialization, and supervised internship. Graduates of programs accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP, 2001) are now automatically certified. Although the effect of CACREP standards on school counselor stress and burnout was not explored in this study, the increase in the number of core counseling courses, the 600-hour internship and the required standards-based program could have a strengthening effect on the school counselor role.

Self-Efficacy

Thirty years ago, Boyd and Walter (1975) compared the plight of school counselors to the cactus since “both survive on a minimum of nutrients from the environment” (p. 103). Recent research regarding resources confirms the importance of this school counselor metaphor. Hobfoll (2002) found that self-esteem, self-efficacy, and social support are resources that promote well-being and health, and tend to be found in resource reservoirs or caravans. Workers with greater resources were more protected when faced with stressful events. Higher self-efficacy increased the ability to set goals and solve problems when dealing with stressful events. Citing Frankl’s (1959) experiences as a concentration camp survivor, Hobfoll suggested that these resources have long-term effects that outlast the short-term impact of stressful events. He concluded that even with low resource levels “people even in the most stressful of circumstances will seek solutions to the dilemmas that face them” (p. 15). Hobfoll found that high self-efficacy served as a personal resource and support worked as a social-
environmental or ecological resource. Together, self-efficacy and social support form a resource reservoir to address stressful events and reduce burnout.

Hobfoll and Freedy (1993) emphasized the importance of the goal, the level of difficulty of the task, and the evaluation of one's resource reservoir. Thus, people who are goal-focused increase their belief in their ability to use resources to achieve success. For example, Mayer, Butterworth, Komoto, and Benoit (1983) found a significant relationship between the level of the principal's support and counselor self-efficacy and the counselor's ability to effect a change in role.

When Maslach and Leiter (1997) reformulated their conceptualization of burnout, they placed the three dimensions of burnout on a continuum from fully engaged to burned-out. Thus, energy declined to exhaustion; involvement changed to cynicism; and efficacy declined to ineffectiveness. Maslach and Leiter proposed that researchers should identify the effectiveness of opposing factors which promote the absence of burnout. In a study of engagement and positive factors, Radeke and Mahoney (2000) compared life experiences of 146 research psychologists with 130 psychotherapists regarding the rewards of their respective jobs. They found that psychotherapists rated responses to statements that reflected self-esteem and self-efficacy significantly higher. High ranking statements (p < .001) were: "made me a better person" (94%), "made me a wiser person" (92%), "increased my self-awareness" (92%), "appreciation for human relationships" (90%), "accelerated psychological development" (89%), "increased tolerance for ambiguity" (81%), "increased capacity to enjoy life" (75%), "felt like a form of spiritual service" (74%), and "resulted in changes in my value system" (61%) (p. 82). However, therapists also rated emotional exhaustion, anxiety and depression higher (p < .001).
Self-Efficacy Construct

Bandura (1986) conceptualized self-efficacy as perceived confidence to do the job. He found that self-efficacy reduced job strain through the worker’s ability to take active steps to control job demands. Bandura concluded that the feeling of perceived mastery mediated job strain through “judgments of what one can do with whatever skills one possesses” (p. 391). Self-efficacy strength was measured by responses to two questions: first, if the worker can perform a specific task, requesting a “yes” or “no” categorical response; and second, how confident the worker feels about being successful when rated on a continuous scale from total uncertainty to total certainty (Lee & Bokko, 1994).

Bandura (1986, 1997) identified four methods of enhancing self-efficacy: enactive mastery, modeling, verbal persuasion, and judgments of physiological states. He found that enactive mastery or repeated performance success was the strongest facilitator of self-efficacy. As workers initiated changes and achieved success, they became more open and responsive to opportunities that would expand their range of experiences and decision-making. This process encouraged them to continue making changes in their work environment, thus increasing self-efficacy and their resources. When others observed a worker successfully making changes, they vicariously experienced the professional success of the role model and acted on their own beliefs about success. Thus self-efficacy may be an essential resource to preventing burnout.

Self-Efficacy, Stress, and Burnout

Cerniss (1993) identified self-efficacy as “the central factor in burnout” (p. 140). According to Cerniss, self-efficacy helped mental health professionals achieve meaning and purpose in their jobs, especially in environments with high demand and low control. He found that low control did not lead to burnout provided it did not prevent “the attainment of meaningful goals” (p. 140). Self-efficacy, however, was significantly
related to the number of years of professional experience. Cherniss found that novice nurses felt more competent when they had greater structure and less autonomy on the job. As nurses gained experience, they required greater autonomy and did not feel competent when control prevented them from achieving their goals. Thus, Cherniss concluded that professionals with less experience needed increased mentoring and supervision to prevent burnout. Bandura and Wood (1989) found that strong self-efficacy moderated the effects of a negative work environment when the workers perceived they were able to achieve meaningful goals. Thus, he expanded his self-efficacy construct from a focus on beliefs about ability to perform a specific technical task to “people’s beliefs about their capabilities over events that affect their lives” (p. 1175). In a study designed to increase self-efficacy in women learning to defend themselves, Bandura and Wood showed that perceptions of strong self-efficacy were significantly related to lower levels of stress in threatening situations.

Parker (1998) found the traditional concept of self-efficacy concept as too restrictive to describe the construct in integrated work environments that promote empowerment, autonomy, and initiative. Similarly, Cherniss (1993) identified three domains of professional self-efficacy that work together to influence and change the work environment. First, the task domain reflected role self-efficacy and task self-efficacy; second, the interpersonal domain reflected outcome self-efficacy; and third, the organizational domain encompassed initiative and challenge and an internal locus of control that expanded the narrower definition of task self-efficacy. This third domain encouraged initiatives based on self-efficacy. According to Cherniss, those who perceive themselves to be more efficacious will engage in social activism; and, if their efforts to change the environment meet with repeated failure, they will eventually look for better environments in which to work. But those who are low in self-efficacy will tend to react to unresponsive environments with apathy, resignation, and cynicism. (p. 139)
Counselor Self-Efficacy

Crutchfield and Borders (1997) surveyed the effects of two peer supervision models on job satisfaction and counseling effectiveness using several measures including the Counseling Self-Esteem Inventory (COSE), a survey of counselor self-efficacy. For 9 weeks, 29 school counselors in rural North Carolina were assigned to two experimental groups or a control group. Eight counselors were exposed to the Structured Peer Consultation Model (SPCM-SC) in which counselors met in dyads every other week; 10 counselors were assigned to the Systematic Peer Group Supervision model (SPGS), in which counselors met with a trained supervisor who facilitated training for self-monitoring; and 11 counselors were in an unstructured control group. Counselors completed the Counseling Self-Esteem Inventory, Index ofResponding Empathy Scale and Teacher Report Form, Counselor Behavior Analysis Scale, measures of counseling effectiveness, and an adaptation of the Job Satisfaction Blank. An adaptation of the Client Post-Session (a measure of supervision session helpfulness) also measured the helpfulness of the supervision session. The Counseling Self-Esteem Inventory is a 37-item survey using a 6-point Likert-type rating scale. Counselors rated their belief in their ability to perform in counseling situations on a 6-point Likert-type rating scale from 1 (strongly disagree) to 6 (strongly agree). Total scores were used as pretest and posttest comparisons. Factor analysis for the Counseling Self-Esteem Inventory yielded five factors: Microskills, Process, Difficult Client Behaviors, Cultural Competence, and Awareness of Values. Internal consistency was computed at α = .93. Test-retest reliability for a short form of the Counseling Self-Esteem Inventory yielded coefficients ranging from .68 to .87 (Larson et al., 1992). Posttest scores for the COSE (M = 172.3, SD =
16.8) were slightly higher than pretest scores ($M = 168.1, SD = 22.8$), but the results were not significant $F(2,25) = 0.11, p = 0.8953$. The dyadic model showed the greatest increase in the means ($M = 152.62$ to $M = 164.75$) compared with the peer-group model ($M = 171.64$ to $M = 174.27$) and the control group ($M = 176.26$ to $M = 176.09$).

While significant increases were not found in the four self-efficacy variables of counseling effectiveness, job satisfaction, and supervision session helpfulness, results of qualitative analysis showed increases in constructive feedback in the SPGS group and professional support in the SPCM-SC. Thus, while participants felt the sessions were valuable, the treatment time of nine sessions may not have been sufficient for significant changes in scores. In addition, the small sample size, use of self-report instruments, and lack of training prior to the sessions could limit the effectiveness of the study. Crutfield and Borders (1997) also suggested that the assessment measure may not have been appropriate for the sample of school counselors or may not have measured changes specific to school counselors such as case conceptualization. The COSE was used in the pilot study of the current investigation with similar results. Feedback from the participants in the pilot study indicated that the questions were not relevant.

Counselor Self-Efficacy Scale. Sutton and Fall (1995) investigated the relationship between school climate and self-efficacy in 316 school counselors working in Maine. All public school counselors in Maine ($N = 383$) received a survey mailing which yielded a very high return rate of 83%. Thus, the study provides picture of nearly all school counselors in the state. Of the respondents, 58% worked in grades 7 to 12 and 36% worked in elementary schools. Subjects completed the Counselor Self-Efficacy Scale which is a modification of the Teacher Self-Efficacy Scale (Gibson & Denbo, 1984). Sutton and Fall found a significant relationship between school counselor self-efficacy
and level of administrative support and colleague support, $F(12, 197) = 6.77, p < .001$. Self-efficacy was significantly positively related to time spent in individual counseling and to counseling in high school. Counselors spending less time counseling and more time in non-counseling tasks reported lower expectancies for the outcome of their counseling behavior, $F(12, 197) = 3.03, p < .001$.

Sutton and Fall (1995) identified three factors in the Counselor Self-Efficacy Scale: counselor self-efficacy, self-efficacy outcome, and multiple roles. Counselor self-efficacy described their tasks and roles, while self-efficacy outcome described the achievement of their goals. The third factor found was unique to school counselors. The multiple roles factor addressed the multiplicity of roles and role conflict and was not reflected in the original Teacher Self-Efficacy Scale. Administrative support for school counselors significantly predicted counselor efficacy expectancy and outcome expectancy for counselor behavior (Larson & Daniels, 1998). In the original scale, teacher self-efficacy described the teacher's individual professional role and the specific job tasks required to be competent, such as planning lessons. Outcome self-efficacy explained the achievement of goals such as teaching students new skills. Teachers with strong self-efficacy spent more time with students, praised them more often, and criticized them less often than those with weak self-efficacy. Thus, teachers with strong self-efficacy were more affirming and supportive of their students. Although validation of the Counselor Self-Efficacy Scale is needed, Sutton and Fall concluded that "counselor self-efficacy has the potential of becoming a powerful construct in helping school counselors to understand their influence over people and systems, and more importantly, to understand themselves" (p. 335).

In summary, research supports self-efficacy as a moderator of stress and negative factors in the work environment, especially in high-demand environments. Self-efficacy has a spiraling effect so that the more the worker succeeds at tasks, the higher the level of self-efficacy reflecting one's belief in the ability to perform a task. Repeated performance
success or enactive mastery is the most effective way to increase self-efficacy; however, self-efficacy improvement is significantly related to higher levels of experience. This result suggested that inexperienced counselors need more structured environments and mentoring, while experienced counselors may need greater control, autonomy, and charge of decision-making. Thus, the ability to accomplish purposeful tasks and the appropriate level of job control are important factors in increasing self-efficacy.

While it did not address school counselor burnout, the Sutton and Fall research (1995) is important to the current study because it examined school climate and social support factors that influence school counselor self-efficacy and the work environment and ultimately burnout. Sutton and Fall found that self-efficacy was positively related to administrative and colleague support, time spent counseling individual students, and higher grade level assignment. Self-efficacy was negatively related to increased non-guidance tasks. Although qualitative and anecdotal literature suggested that self-efficacious behaviors in school counselors reduce stress and negative work factors (Gysbers & Henderson, 1994; Runte et al., 1991), no quantitative studies were found investigating the relationship of school counselor self-efficacy to burnout.

School Counseling Initiatives

Masinch and Leiter (1997) proposed that burnout factors were grounded in the work environment, rather than the professional. Thus, they focused on six positive organizational factors to balance six burnout factors: (a) a manageable workload rather than work overload, (b) feelings of choice and control rather than lack of control, (c) recognition and reward rather than insufficient reward, (d) a sense of community rather than breakdown of community, (e) fairness, respect, and justice rather than unfairness, and (f) meaningful and valued work rather than work with vane conflicts.
When the organization does not provide resources to prevent burnout, Skovholt (2001) recommended that counselors create a "professional greenhouse at work" (p. 135). He proposed a continuum of five resources based on self-efficacy and social support: (a) peer support, (b) initiative to create a balance between self-care and others, (c) fun, (d) providing mentoring, and (e) being mentored and cared for. At the opposite end of the continuum he cited: (a) one-way relationships, (b) vicarious traumatization, (c) poor social support, (d) lack of fun, and (e) poor professional development and caring.

Skovholt (2001) identified the national school counselor initiative as a significant organizational exception to burnout environments. Created by school counselor associations and local school counselors, school counseling initiatives benefited from the effects of strong self-efficacy and social support to reduce school counselor job strain and burnout. Skovoll proposed that multiple resources can prevent the slow process toward burnout and promote healthy job engagement. His greenhouse concept blended groups of resources that combined Hobfoll’s (2002) conceptualization of personal resource reservoirs and Maslach’s and Leiter’s (1997) engaged environment. Thus a strong reservoir of integrated resources helps individuals and groups change burnout environments into emotionally healthy and satisfying work environments.

Even more critical than the effects of burnout on counselors and mental health professionals is the potential impact on students as the recipients of services provided by burned out counselors. Thus, self-efficacy and peer support can foster and sustain work initiatives to promote both school counselor and student well-being. This construct moves beyond traditional self-efficacy.

Role Breadth Self-Efficacy

Chemiss (1993, 1995) expanded the construct of traditional task-based self-efficacy to include empowerment factors that reduce job stressors. Parker (1998) also suggested that role breadth self-efficacy (RBSE) is a more relevant and dynamic factor
preventing burnout than traditional self-efficacy in reducing job strain. Since role breadth self-efficacy focuses upon a wide range of skills that workers believe they are able to do, training and professional development can enhance role breadth self-efficacy across a broad range of tasks in the work environment, particularly in school environments that promote site-based management decision making. Thus, role breadth self-efficacy may be a more relevant construct than traditional self-efficacy for school counselors involved in school counseling initiatives.

Role breadth self-efficacy emphasizes self-direction, initiative, proactivity, flexibility, motivation to change, interpersonal skills, and interdependence. Parker (1998) proposed that role breadth self-efficacy increased with changes and "is expected to change in response to the environment...it will be shaped by their organizational experiences" (p. 837). Role breadth self-efficacy reflects the counselor's confidence in becoming more self-directed in a school environment that promotes high levels of personal involvement and decision-making. This construct is vital to the success of school counseling initiatives based upon school counselors' beliefs that they can change the work environment to reduce job stress and to improve counseling services for students. For example, high-loading items on the first role breadth self-efficacy scale reflect this change agency: "If I believe in an idea, no obstacle will prevent me from making it happen," "I excel at identifying opportunities," "If I see something I don't like, I fix it," "No matter what the odds, if I believe in something, I will make it happen," "I am always looking for better ways to do things," and "I love being a champion for my ideas, even against others' opposition."

The second scale assessed how well workers believe in their ability to do the task. High-loading role breadth self-efficacy items on the second scale were: "How confident would you feel helping to set targets/goals in your work area," "How confident would you feel making suggestions to management about ways to improve the working of your section," "How confident would you feel analyzing a long-term problem to find a
solution," and "How confident would you feel designing new procedures for your work area?" Since role breadth self-efficacy reflects confidence in the ability to perform a range of tasks in an integrated work environment, scores are averaged across the tasks rather than reported for a single technical task (Parker, 1998).

Parker (1998) found that persons with high self-efficacy working in a high demand-high control environment demonstrated higher role breadth self-efficacy. Workers with minimal training who did simple tasks in a high demand-low control environment had low role breadth self-efficacy. They demonstrated little motivation and confidence to improve even when opportunities for reactive mastery were presented and others performed tasks successfully. Parker concluded that "not only will employees judge these tasks as complex ones that they lack the skills to carry out, but also their attribution of past experiences might lead them to feel they have little control over the determinants of their performance anyway" (p. 837).

After developing a scale for role breadth self-efficacy (RBSE), Parker (1998) conducted validity studies using a sample of 669 workers in a manufacturing company to determine the relationship of its components to proactive personality, self-esteem, and self-efficacy. While the author did not investigate the relationship of RBSE to burnout, her research is important to the current study of involvement in school counseling initiatives and burnout. After determining that self-efficacy items were related, she added these items together on the new scale. Parker found that proactive personality and self-esteem measured a different construct than RBSE, however both predicted RBSE (self-esteem: $\beta = .11, p < .01$; proactive personality: $\beta = .24, p < .001$). There were significant differences between levels of RBSE in supervisors ($M = 3.92, SD = 0.86$) and employees ($M = 2.44, SD = 1.02$), $F(4, 664) = 44.18, p < .001$. After combining non-supervisory subjects in one group and supervisory subjects in another, Parker found significantly lower RBSE in the non-supervisory group, $t(664) = 7.21, p < .001$. Significant relationships were also found between role breadth self-efficacy and job enlargement. $r =$
involvement in improvement groups, \( r = .29, p < .01 \); task control, \( r = .49, p < .001 \); and influence in decision-making, \( r = .44, p < .001 \). Task control, a strong indicator of job enrichment, predicted RBSE, \( \beta = .31, p < .001 \), as did membership in improvement groups and overall job enrichment, \( \beta = .11, p < .001 \). Investigating 179 workers who belonged to improvement groups, Parker found that their perceived opportunity for being involved in the group predicted RBSE, \( R^2 = .06, p < .001 \), with a high beta value, \( \beta = .34, p < .001 \). She recommended redesigning the work environment using empowerment strategies such as quality circles, continuous improvement teams, autonomous work groups, and job enlargement strategies, and job enrichment. Such strategies provided more opportunities to become involved in work initiatives and to increase RBSE and were employed by The New Jersey School Counseling Initiative in trainings to increase school counselors' confidence in their ability to make changes in their jobs (J. Lukach, personal communication, June 15, 2003; Runte et al., 2001).

While the study used a sample from the manufacturing industry, her results are of interest to the current study of school counselors. Work redesign initiatives have had their roots in the business sector, thus counselors and educators thus benefited from studies of business initiatives employing site-based management initiatives and quality circles. Parker's strategies have strong similarities to those used in school counseling initiative academies (J. Lukach, personal communication, June 15, 2003). While there were more supervisors in her study than in school organizations, the characteristics of RBSE in non-supervisory workers were similar to those of school counselors.

**Job enrichment and enlargement.** Parker (1998) measured the effectiveness of job enrichment by the degree to which workers controlled their time and the methods they used to carry out their tasks. Job enrichment expanded jobs vertically to give workers greater task control, decision-making, and responsibility. Parker measured the effectiveness of job enlargement by how much workers used their skills to do a range of tasks. Effective job enlargement increased flexibility, interdependence, and integration.
among workers. Together the two work-redesign practices increased perceived control and enhanced proactive personality, thus increasing self-efficacy and mitigating job strain.

In her study of work initiative techniques, Parker found that the involvement in groups with high task control was the greatest predictor of higher self-efficacy. Further, increased quality of communication, rather than the quantity of communication contacts, also predicted an increase in self-efficacy. Parker concluded that "the more people feel that they are informed, listened to, and encouraged to speak, then the more likely they will develop confidence in carrying out a range of proactive, interpersonal, and integrative tasks" (p. 845).

Parker's results supported earlier research demonstrating the relationship between job control and increased self-efficacy (Bandura, 1997; Wood & Bandura, 1989). Further, role breadth self-efficacy was significantly related to age, tenure in the job, and employment status. Older employees with longer tenure in their companies reported higher levels of role-breadth self-efficacy. Men had significantly higher levels of self-efficacy than women; however, no gender differences were found in one work group that already functioned as a work improvement group with role breadth self-efficacy.

Thus, role breadth self-efficacy reflects the counselor's confidence in a wider range of tasks than traditional self-efficacy, particularly integrated work environments that promote empowerment and self-direction. Job enrichment and enlargement are strategies counselors could use to increase role breadth self-efficacy when improvement teams and job enrichment are utilized. Work redesign initiatives increase job control and decrease job strain and ultimately affect burnout. Further, high task control was related to higher self-efficacy and involvement in groups, and greater quality of communication rather than the quantity of communication also increased self-efficacy.
School Counseling Initiative Models

School counseling initiative models reflected resource reservoirs that included role breadth self-efficacy and peer support networks. The Gysbers and Henderson model (1994) called for greater role definition, planning, autonomy, and leadership for school counselors. Their model was a formative part of the national school counseling initiative advocating for an enriched school counselor role. The movement encouraged counselors to lead and deliver comprehensive programs to increase student achievement. Although the new focus aimed to reduce non-guidance and clerical tasks, the model also emphasized a teaching and program management role rather the counseling and therapeutic role. Role confusion may have continued because school counselors were in the beginning stages of developing national standards, job descriptions, and models for training and supervision, compared to the strong professionalization of school psychologists and school social workers (Schmidt & Ciechalski, 2001). Other school counseling leaders and researchers focused on counseling skills as the professional role difference between counselor and teachers (Baker, 2001; Runte et al., 1991).

The New Jersey School Counselor Model (Runte et al., 1991) advocated for a counseling role that was “totally school counseling focused” (p. 3) so that school counselors should “do what they are professionally trained to do” (p. 6). Runte et al., shifted from system support (Gysbers & Henderson, 1994) as a component to system enhancement emphasizing role breadth self-efficacy, workplace redesign, and job enrichment. They refocused the Missouri responsive services component to a counseling component to underscore the professional counseling, prevention, and intervention role and the specialized graduate training of counselors. Thus, as school counselors reallocated their time from non-guidance duties to counseling students as their professional role standard, they also increased their feelings of job satisfaction and personal accomplishment, as well as affirmation by supervisors and students. Benefiting from the effects of repeated performance success, role breadth self-efficacy, they increased
their skill and effectiveness. The Arizona school counseling program model (Yillik Downer, 2000) also reflected the effects of self-efficacy and personal empowerment. Although the Arizona program outsized a comprehensive model, it encouraged counselors to develop program initiatives that meet the local needs of students.

State school counseling initiative models. Many school initiatives are based upon the early Missouri model (Gysbers & Henderson, 1994) with the first American School Counselor Association (ASCA) initiative following the work of Gysbers and Henderson. Although ASCA (2003) standards advocated for accountability and research, qualitative and quantitative research on program initiatives and their effect on counselors has been sparse. Whiston and Sexton (1998) reviewed 7 qualitative and 43 quantitative studies on school counseling from 1988 to 1995 and found that counselors who were directly involved in counseling were considered more effective.

Lehr and Sumarah (2002) studied the perceptions of 72 school counselors involved in the Nova Scotia Comprehensive Guidance and Counseling Program (NSCGP) with components similar to the Missouri model (ASCA, 2003; Gysbers & Henderson, 1994). Subjects reported satisfaction with the program model on a Likert scale from 1 (very dissatisfied) to 7 (very satisfied), and with support from administrators (M = 5.86). Of this group, 35% reported strong satisfaction with administrative support from administrators and 80% reported general satisfaction with the program. Subjects reported high satisfaction with time available (M = 3.64) with nearly half (42%) reporting a rating of 3 or below. In qualitative interviews, counselors reported problems with time constraints, non-guidance duties, multiple school assignments, balancing roles, and stress coordinating the roles.

In a large study of 631 school counselors in Arizona, Missouri, and Texas, Yillik Downer (2000) studied their perceptions about the process of change from traditional guidance programs to comprehensive school counseling programs. Counselors completed the Perceptions of Comprehensive Guidance and Counseling Inventory (PCGCI) that she
developed as an attitudinal survey of the change process with items selected through reviews and a pilot study. The item analysis yielded 24 citations with a coefficient alpha of .93. Factor analysis and principal component analysis yielded 3 components that described the process of change: collaboration, task, and impact.

Scores for total concerns ranged from 0 (no concern at this time), to 168 (very concerned at this time), with an average level of concern of 96. Subjects were also surveyed regarding the stage of comprehensive school counseling program implementation in their school. School counselors at the first stage of planning and design reported the highest collaboration, task, and total concerns. Counselors in the middle stage reported moderate concerns, and those in the third stage of evaluation reported the lowest collaboration, task and total concerns. Significant differences were found for grade level, state residency, and years of experience as a school counselor.

High school counselors reported greater task concerns and lower levels of importance for comprehensive programs than elementary counselors. School counselors with fewer than 5 years of experience reported significantly more collaboration concerns, and counselors with more than 20 years experience reported the fewest collaboration concerns (p < .05).

Yilik Downer (2000) concluded that novice counselors needed greater support and structure than more experienced counselors, and that high school counselors were more burdened by paper and clerical tasks.

Differences in state membership and level of involvement provided important perspectives for the current study. School counselors in Missouri reported significantly higher task concerns than counselors in Texas and Arizona. While Missouri adopted a more structured model, Texas and Arizona models encouraged school counselors to initiate and develop programs that respond to local needs. A significant positive relationship was found between counselors in Texas and their perceptions of importance. These results suggest the relationship of role breath self-efficacy and empowerment in grass roots initiatives in Texas and Arizona.
Yiilik Downer (2000) found a significant negative relationship between the level of counselor involvement and the number of task and total concerns (p < .05). As counselors became more involved in a school counseling initiative, they reported fewer job concerns. Counselor perceptions of the importance of the program were inversely related to both task concerns and to high school level (p < .05). Yiilik Downer concluded that as involvement increased, concerns and anxiety decreased. Her results supported research on self-efficacy and role breadth self-efficacy (Parker, 1998) that found as counselors achieved greater success in their tasks, they judged their ability to do the job more positively. Thus, with increased administrative and peer support for their initiative program efforts, school counselors strengthened their resource reservoir. Greater resources then worked to increase self-efficacy, and eventually increased satisfaction with their efforts, reducing work stress and ultimately burnout. Yiilik Downer found no significant differences in position, location, caseload, or educational focus (school counseling rather than therapeutic training). Thus, school counselors who perceived a higher level of importance for comprehensive programs reported fewer task concerns. Counselors who responded to the study may have been more interested or involved in the comprehensive school counseling initiative than those who chose not to respond.

School Counseling Initiative. The New Jersey Department of Education (NJDOE, 2000) created the School Counseling Initiative (SCI) and the Student Support Services Professional Development Initiative (SSSPDI) collaboratively with the New Jersey School Counselor Association (NJSCA, 2000). Both grant projects were work-redesign initiatives built upon a history of grass roots initiatives in New Jersey. The first New Jersey Developmental School Counseling Initiative (Runte et al., 1991) raised awareness of the need for the revitalization and professionalization of school counselors, and the authors received national recognition for the unique emphasis on self-efficacy and collaborative support. Ten years later, NJDOE funded 15 pilot district teams of counselors and administrators to start up local initiatives. Teams worked together for 3
days in a school counselor initiative academy to learn empowerment and work initiative skills.

As a pilot district team in the School Counseling Initiative, Webber, Pellet, Wallock, White, and Greenbaum (2002) conducted a local school counseling needs assessment in the Roxbury Township School District, surveying a sample of teachers, students, and parents. They found little or no awareness of the comprehensive school counseling movement among teachers, parents, students, and counselors. After the second year of the grant, school counselors involved in the pilot initiative project reported greater peer support, self-efficacy, control, and job satisfaction and received a NJDOE Best Practice Award for their high school program initiative model, 4-2C (Webber et al., 2002). In the third year of the initiative, they were among pilot school teams that conducted workshops for other New Jersey school counselors to continue to expand awareness of the initiative and promote job empowerment.

**Student Support Services Professional Development Initiative.** The New Jersey Department of Education (2000) and the New Jersey School Counselor Association (2000) established the Student Support Services Professional Development Initiative (SSSPDI) to assist 14 pilot districts in the development of innovative collaborative models among support services staff (school counselors, school psychologists, learning consultants, and social workers). The implementation of the SSSPDI was delayed more than 1 year due to the impact of September 11 on school counselors. The SSSPDI (NJDOE, 2000) utilized job empowerment strategies and administrative and peer support. Participants developed unique models to increase the effectiveness of mental health services to student and to improve the quality of communication and support among professionals. Pilot school teachers, students, parents, counselors, and support professionals completed satisfaction surveys as the first step in developing effective support networks and collaborative models for student services (Mascari, personal communication, September 12, 2003).
Thus, school counselors reported fewer task concerns in states that encouraged counselors to develop their own programs to meet local needs than counselors using a more structured, directed state model. School counselors who attributed a higher level of importance to, or were more involved in, comprehensive school counseling programs reported fewer task and overall program concerns. Counselors in elementary schools were more involved in and attributed higher importance to program initiatives than high school counselors.

The school counseling initiative movement proposed to reduce work overload, role ambiguity and confusion, and non-guidance tasks and increase school counselor self-efficacy and job empowerment (ASCA, 2003; Runde et al., 1991). The New Jersey Department of Education (2000) and the New Jersey School Counselor Association (2000) collaborated to promote local work redesign initiatives emphasizing counselor self-efficacy, autonomy, and social support and developed counselor academies utilizing work empowerment strategies that promoted self-efficacy. Although the author found extensive anecdotal and descriptive literature, few quantitative research studies were found that studied the effects of school counseling program initiatives or school counselor self-efficacy.

Social Support

There is extensive literature on the effect of social support on stress and burnout in human service professionals such as therapists, teachers, and nurses (Constable & Russell, 1986; Curtona & Russell, 1987; Greeglass, Fiksenbaum, & Burke, 1994; Kee, Johnson, & Hunt, 2002; Maslach & Leiter, 1997; Mayer et al., 1983; Ross, et al., 1989; Russell, Altmair, & Van Vezen, 1987; Sarason, Levine, Basham, & Sarason, 1983; Sarason et al., 1991; Thoits, 1989). However the author found few studies on social support for school counselors (O’Connor, 2000; Paisley & Borders, 1995; Roberts & Borders, 1994; Sutton & Fall 1995). While self-efficacy is an intrapersonal or personality
resource, social support is considered a process and an interactional resource (Hobfoll, 2002). For example, Maslach (1986) found that mental health workers with inadequate support groups had higher levels of burnout, and, Coster and Schuwebl (1997) identified peer support and supervision as important themes in qualitative interviews with six psychologists considered to be well-functioning in their fields.

Social Support Construct

Social support may be categorized by structure or function. Structural support refers to the supportive person while functional support indicates the type of support the person provides. Emotional support refers to intangible support provided such as willingness to listen or being there. Tangible support may be logistical or instrumental such as feedback or solving problems. Structural support may be divided into work or personal support. Although work support traditionally referred to supervisor or leader support, research includes co-worker and peer support especially in modern integrated environments (Parker, 1998). Personal support includes family, friends, and relatives, with increasing research on effects of family support on stress (Greenglass et al., 1994).

Although assessment of support may be external or internal, perceived or observed, perceived support is the most frequently used measure. Support is assessed by subjective statements such as “I feel supported by my supervisor” or “My supervisor listens to me”; however, these do not show if support was in fact offered or accepted.

Further, social support may be considered a main effect or buffering effect that helps counselors utilize social support when faced with stressful events. In this study, social support was hypothesized as a main effect and operationalized as the subject’s perception of support by the supervisor, coworkers, or principal. Family support was not considered
due to both the complexity of identifying members of the family and the focus on stress in the workplace.

Social Support and Job Stress

In an extensive review of theories of integrated resources, Jobbott (2002) found that individuals with strong social support were insulated from the negative effects of stressful events. Koeske and Koeske (1991) suggested that persons with very high levels of stress may not be able to access needed social support. In a 5-year study, Stovholt and Rønnestad (1992) evaluated the effects of peer support and professional development in 60 counselors. Isolation was stronger in novice counselors with less than 5 years of experience and in very experienced counselors with 25 years or more. Thus, Skovolt and Rønnestad recommended differentiated peer support and professional experiences for less experienced counselors to reduce stress.

Social support affects work effectiveness, physical and mental health, and the ability to cope with stress. Research studies found that social support reduced stress and burnout in human service workers, teachers, shelter workers, nurses, counseling center staff, and traffic enforcement agents (Mayer et al., 1983; Moracco et al., 1984; Stroebe & Stroebe, 1996; Sist & Fall, 1995; Thoits, 1986; Wiauah, 1993).

In a study of university counseling center staff members, Ros et al. (1989) investigated the effects of stress and social support on burnout using the MBI. Of 257 counselors, 169 participated in the study with a strong return rate of 65.6%. The mean staff size was 14.28 (SD = 7.60). Participants reported a mean of 10.81 years of postdoctoral experience (SD = 8.27) and 3.66 years of experience in their center (SD = 1.38). Subjects experienced moderate depersonalization (M = 5.65, SD = 3.77) and
personalization accomplishment \((M = 40.30, SD = 5.10)\) and low emotional exhaustion \((M = 19.11, SD = 8.27)\) when compared to norms for social service. First, subjects rated structural support from supervisors, coworkers, spouses, and friends/relatives on a scale (House, 1981) with an alpha coefficient of .75 to .92. Second, subjects completed the Social Provisions Scale (SPS, Catrona & Russell, 1987) with an alpha coefficient of .65 to .76. The SPS assessed 6 functional types: (a) attachment (relationships providing a sense of safety and security), (b) social integration (network of persons with shared concerns and interests), (c) reassurance of worth (persons respecting one’s abilities and skills), (d) guidance (opportunity to turn to trustworthy persons for advice), (e) reliable alliance (ability to count on persons for help in any situation), and (f) opportunity for nurturance (relationship providing care for one’s well-being).

Greater job stress, identified by the number of stressful events experienced in the previous year, predicted higher levels of burnout. The mean number of stressful events experienced from a list of 54 events was 27.54 \((SD = 11.31)\). Thus counselors reported experiencing more than half the number of stressful events. Thus, social support functioned as a main effect in a stressful work setting rather than a buffering effect of less frequent stressors. Events most experienced were: (a) suicide threat, (b) clients crying (rated least stressful), (c) administrative committee work (rated least stressful), and (d) outside presentations. Among the least experienced but also most stressful events were physical threat and suicide. Consistent with other research, counselors with fewer years of postdoctoral experience reported experiencing a high number of stressful events.

Counselors with supportive supervisors reported significantly lower burnout on all three dimensions: emotional exhaustion \((p < .001)\), depersonalization \((p < .01)\), and
personal accomplishment ($p < .05$). Social integration significantly predicted lower emotional exhaustion and depersonalization, and guidance and reassurance of worth significantly predicted higher personal accomplishment. Ross et al. (1989) concluded that "persons who have supportive social relationships are able to rely on others for help when dealing with stress, a resource which lessens the negative effect of stress on their physical and mental health" (p. 464).

**Social Support and School Counselors**

Social support can also be provided through supervision relationships and professional development opportunities with other counselors. However, school counselors infrequently receive supervision from a qualified counseling professional or have opportunities for counseling-related professional development. Although Mayer et al. (1983) found a positive relationship between principal’s support and the counselor’s ability to make a change in role, they concluded that support systems for school counselors were minimal.

In a study of school counselors in Maine discussed previously in this chapter, Sutton and Fall (1995) found that peer support was the highest predictor of counselor self-efficacy and client outcome efficacy and that administrator support also significantly predicted self-efficacy. The results of their study provided evidence for the effectiveness of grouping resources into reservoirs and caravans (Holden & Freedy, 1993). Sutton and Fall concluded that support from parents, principals, and policy makers "may be an important variable in understanding and improving services and counselor performance" (p. 535).

Research on social support and school principal burnout also provided insight into burnout in school counselors. In a study of 107 principals using the MBI, Whitaker (1994) found low to moderate levels of burnout in principals with more than one third of the subjects reporting high levels of depersonalization. In a study of 821 principals,
Friedman (1995) found that burnout in principals was significantly related to lack of support, over-demanding parents, heavy workload, problems with teachers, and responsibility. Westman and Etzion (1999) studied crossover effect in Israeli elementary school teachers and principals and found levels of job-induced tension predicted turnover. The researchers defined crossover as “the process that operates when a stressor or psychological strain experienced by one person affects the level of strain of another person in the same social environment” (p. 269). Thus, Westman and Etzion found evidence for the negative contagion effect in social networks. Their findings were consistent with other studies of administrative support and school organizational climate (Cummings & Nall, 1983; O’Connor, 2000; Sutton & Fall, 1995). In a study of school counselor perceptions of supervision, Roberts and Borders (1994) found 80% of the subjects reported professional development and professional support as their supervision priorities, and more than half (58%) identified needing support to avoid burnout. Thus social network and support countered the crossover effects of job stress. In summary, Henderson and Gysbers (1998) emphasized that “the more school counselors feel supported and encouraged by school district, the better they perform” (p. 295).

Supervision as support. After an extensive study of school counselor supervision, the School Counseling Task Force of the American Association for Counseling and Development (Baker, personal communication, November 9, 1989) concluded that “little appropriate school counselor supervision was provided, with most principals having minimal or no counseling training or experience. Professional role issues also created barriers to effective collaboration among school social workers, school psychologists, student assistance counselors, learning consultants, and nurses. An exception to the problem of role conflicts and barriers to social support is the Student Support Services Professional Development Initiative (NJDOE, 2000; NJSCA, 2000) that encouraged school counselors to develop collaborative support teams with other school mental health professionals.”
Although clinical supervision has been an effective component of administrative support (Hobfoll, 2002), most research on the effectiveness of counselor supervision, has been conducted on graduate students or trainees; therefore, the results of these studies may not generalize to practicing counselors in school environments. In a study of 168 school counselors in North Carolina, Roberts and Borders (1994) found that 75% of the school counselors reported a need for clinical supervision. Only 37% of the counselors received clinical supervision, mostly self-report, and only 15% received live supervision. In a survey of 493 school counselors in Maine, Sutton and Page (1994) found only 20% received clinical supervision, and, of this group, 25% paid for their supervision. The Sutton and Page research is important to the current study because it provided a valuable state profile with nearly all (92%) Maine school counselors responding. Cummings and Nall (1983) studied the relationship between supervisory leadership style and burnout in 32 school counselors in Iowa using the Semantic Differential Scales. They found a significant positive relationship between higher burnout in counselors whose principal had an authoritarian style of supervision. Counselors with principals who had a participatory style of supervision reported lower of burnout.

In the few studies on supervision of practicing school counselors, peer supervision played a significant role in the overall supervision model. In a study of the peer supervision program for elementary counselors in Roanoke County, Virginia, Agnew (1999) found that most current school counselor supervision was conducted using a self-report model that provided little or no contact with peers or supervisors. In the self-report model, the counselor chose a goal that was approved by the supervisor and self-monitored behavioral changes toward the goal without face-to-face support. In the Getz Roanoke Model (Agnew, 1999), a supervisor initially provided monthly clinical supervision training for participants for 9 months. In the second and third years, counselors met in small peer groups for 2 hours every 2 months, and by the third year, peer groups met without the clinical supervisor. Agnew used the Semantic Differential
Scales to assess levels of burnout and the influence of peer support, supervisory feedback, administrative support, and personal growth. Although the program lacked an experimental design or pretest data, qualitative comments from participants emphasized the benefits of group bonds, trust, comfort, reduced isolation and validation.

Crutchfield and Borders (1997) investigated the effects of the Systematic Peer Group Supervision (SPGS) model in 29 rural school counselors in North Carolina using the Counseling Self-Estimate Inventory and the Index of Responding. Although they did not find any significant results, counselors expressed the need for more professional supervision. In an extensive state study of school counseling supervision, Wilson and Remley (1987) surveyed 141 school systems in Virginia and found that only 31 districts provided supervision.

In a study of 487 elementary counselors in Virginia, the relationship between job stress and supervision was examined using the Minnesota Satisfaction Questionnaire (L. Murray, 1995). Most counselors reported being satisfied with their jobs although nearly all (90%) of the school counselors did not receive supervision. Evans and Hotheshil (1997) also utilized the Minnesota Satisfaction Questionnaire in a study of 231 student assistance counselors and found significant negative relationships between job stress, the experience and degree of the supervisor, and the number of supervision sessions. Counselors whose supervisors had a clinical focus reported lower levels of job stress than counselors whose supervisors had an administrative focus.

Zanetttidt and Perry (1992) evaluated a mentoring program designed to provide support for new school counselors in Maine. Mentors reported higher increases in support and professional development than new counselors. Their study is relevant to the current study because it considered the construct of support specifically for school counselors and provided evidence that support should be differentiated according to level of experience.
The study conducted by Ross, et al. (1989), discussed previously in this chapter, also has important implications for burnout prevention and intervention programs for school counselors. First, of the four types of structural social support, supervisor support was the only type significantly related to all three dimensions of burnout. Second, the most stressful events reported by college counselors were also events least frequently reported: suicide, physical threat, and family safety from a dangerous client. However, although these events are rare, especially suicide and physical threat, their occurrence seriously affects school counselor stress and ultimately burnout (Maslach, 2002).

Ross et al. (1989) also found that strong social integration predicted lower levels of emotional exhaustion and depersonalization, and reassurance of worth and guidance predicted higher levels of personal accomplishment. Thus, social integration, strong social networks, could also serve to reduce burnout as components of local school counseling initiatives. Reassurance of worth or self-esteem support that affirms the counselor is loved, valued and held in respect has been shown as an important component of administrative support for school counselors (O’Connor, 2000, 2002).

In summary, social support, primarily supervisor support, significantly predicted lower burnout on all three dimensions. Although two studies were found examining the relationship between peer support and burnout in school counselors; however, the studies lacked pretest data and experimental design. In some school counselor studies, burnout was measured using the Semantic Differential Scales rather than the Maslach Burnout Inventory, with results reported on a single dimension rather than the three dimensions used in the MBI normative data.

Few school counselors received clinical supervision from a supervisor with counseling training and experience. Where supervisory support was unavailable, school counselor peer supervision was a factor in reducing job stress and ultimately in mitigating burnout when counselor received adequate training in a peer supervision model. Although there may be an optimum interaction between supervisor and peer support to
buffer or reduce burnout in high-stress counseling environments, no quantitative studies were found examining the relationship between social support and levels of emotional exhaustion, depersonalization, and personal accomplishment in school counselors.

Administrative support for school counselors. O'Connor (2000) investigated the perception of administrative support in 338 high school counselors in Michigan using the School Climate Scale (SCS) which is a measure of administrative support and peer support, the Minnesota Satisfaction Questionnaire (MSQ), and the Counseling Assessment Questionnaire (CAQ), a new assessment tool for high school counselors' perceptions of administrative support developed by O'Connor. Surveys were mailed to 711 public high school counselors in the Detroit, Michigan area with a return rate of 47.5%. While O'Connor did not address the relationship of administrative support to counselor burnout, his research is relevant to the current study since it investigated perceptions of administrative support in a large sample of high school counselors in one state. O'Connor also identified perceived factors of support that reflected self-efficacy and empowerment in school counselors and conducted a confirmatory analysis of the new instrument. With Cronbach's alpha, the reliability of the Counseling Assessment Questionnaire was .97. Subscale reliabilities ranged from .77 to .97, with a correlation between the new tool and the administrative support subscale of the School Climate Scale of .91. Pearson product moment correlations for the Counseling Assessment Questionnaire and the School Climate Scale were .97 with subscale correlations ranging from .41 to .91. O'Connor found a significant relationship between administrative support of counseling programs and job satisfaction using the Minnesota Satisfaction Questionnaire (p < .01), and a significant relationship between administrative support of school counseling programs and school climate on the School Climate Scale (p < .01).

Prior to the study, O'Connor (2000) conducted three school counselor focus groups and found major differences between counselors' perceptions of administrative support and theoretical components of support derived from his literature review.
Counselors reported the need for more communication between the principal and other stakeholders regarding the value of counseling and support of the counselor as a professional rather than as a person. Considering this emphasis on counselor role, O'Connor (2002) concluded that school counselors needed administrative support to do their jobs well and that they need "to know their work is valued" (p. 18).

Factor analysis of the Counseling Assessment Questionnaire yielded five factors: (a) Affirmation, (b) Encouragement of Program Growth, (c) Program and Logistical Support, (d) Engaged Advocacy, and (e) Capital Allocations. O'Connor (2000) defined affirmation as trust in one's ability to do the job. Administrators demonstrated affirmation by providing support for counselor autonomy and control. Two factors, Affirmation and Encouragement of Professional and Program Growth, reflect workers with high role breadth self-efficacy. Counselors who encourage initiatives, initiate systemic program change, collaborate, and empower other counselors through professional role development, demonstrated role breadth self-efficacy in modern work environments. In the study, counselors rated their perceived administrative support for each component on a Likert scale from 1 (strongly disagree that support is present) to 5 (strongly agree that support is present). The survey showed fairly strong agreement that school counselors perceived that Affirmation was present ($M = 4.14$) and mild agreement that the four other components were present: Encouragement of Program Growth ($M = 3.53$), Engaged Advocacy ($M = 3.47$), Capital Allocations ($M = 3.39$), and Logistical/Program Support ($M = 3.27$). Thus, O'Connor (2000) found that counselors in the survey felt trusted and professionally supported in their work by administrators.

In their qualitative comments, counselors cited the need for clerical help and relief from non-counseling duties in order to provide more time to counsel students. The theoretical foundation for the study was based primarily on anecdotal and qualitative reports of the need for support. O'Connor also conducted counselor focus groups in Michigan to compare his theoretical findings with counselor perceptions. However, the
Research on school counselors was limited. Theoretical and empirical investigations of social support found in psychological literature were not part of his investigation. Integrating qualitative counseling literature with psychological constructs and studies of social support could have broadened the scope of the support construct. Further, since O'Connor (2000) focused on administrative support for college counselors, his study included only high school counselors. Further study is needed to determine if middle school and elementary school counselors have similar or different perceptions of administrative support.

In summary, school counselors perceived the need for greater administrative and supervisory support. Although the literature suggested a need for affirmation of the counselor as a person, school counselors reported a strong need for affirmation of their professional role. Counselors also perceived a need for greater administrative support for activities that promote role breadth, self-efficacy including school counseling initiatives, program improvement, and professional development. The Counseling Assessment Questionnaire (O'Connor, 2000) provided a new tool for administrative support for school counselors and has the potential to play an important role in the determination of support factors that prevent burnout in school counselors. Since the study focused on high school counselors, its ability to generalize to elementary school and middle school counselors needs to be assessed.

*September 11 and Proximity to the World Trade Center*

The impact of the events of September 11 and its aftermath should be considered in studies of counselor burnout especially in samples in close proximity of New York City. The magnitude of the disaster and its effects on the personal and professional lives of caregivers could confound study results.

School counselors, like other mental health professionals, were deeply affected by September 11 and its aftermath (Auger, et al., 2004; Baker, 2002; Gentry, 2002; Mascari,
2002; Webber Rents, 2002). In addition to personal trauma affecting family and friends, school counselors, like other mental health professionals, were vulnerable to the effects of secondary traumatic stress working with students and their families. Counselors and students in schools close the World Trade Center could view the events from their school windows, an experience magnified by television coverage (Mascari, personal communication, September 13, 2001). In the aftermath of September 11, intense crisis response, disaster relief, funerals, and memorials added to the personal and professional trauma of counselors (Gentry, 2002; Webber Rents, 2002).

**Resident Stress after September 11**

In a random phone survey of 1,008 Manhattan residents south of 110th Street, Galea et al. (2002) assessed levels of Post Traumatic Stress Disorder (PTSD) and depression 5 to 8 weeks after September 11. While the overall prevalence of PTSD reported was 7.5% for the study, one fifth (20%) of residents who lived close to Ground Zero south of Canal Street reported PTSD symptoms (p < .04). The researchers noted that prevalence of PTSD the year before indicated less than one half the current rate (3.6%). The rate of depression was 9.7%, compared to 4.9% in other studies in the previous month. An important finding of this study was the bivariate correlation between PTSD and depression and low social support, ethnicity and gender, and higher numbers of stressors experienced in the previous 12 months. Females reported higher levels of PTSD (p < .005) and depression (p < .03). Subjects with low social support reported a prevalence of 19.2% for PTSD compared to those with high social support (4.4%) or medium support (8.7%) (p < .01). Subjects with low levels of social support reported a rate of 15.5% for depression compared to residents with high levels of support (5.6%) or medium support (7.3%) (p < .001). Residents who directly viewed the events reported
twice the prevalence of PTSD than those who did not. Residents reporting two or more stressors in the previous year had more than 4 times the rate for both PTSD and depression than residents reporting no stressors and 2 to 3 times the rate for those reporting one stressor.

In a nationally representative study of 508 adults, Schuster et al. (2001) surveyed stress reactions 3 to 5 days after September 11. Subjects were asked five questions and responded on a 5-point Likert scale: 1 (Not at all), 2 (A little bit), 3 (Moderately), 4 (Quite a bit), and 5 (Extremely). Substantial stress was defined as responding quite a bit or extremely to one or more of the five questions selected from symptoms reported by half (50%) or more of the survivors of the Oklahoma bombing (North, Nixon, & Sklarot et al., 1999 as cited in Schuster et al., 2001): (1) “Since Tuesday, have you been bothered by feeling very upset when something reminds you of what happened,” (2) “Repeated, disturbing memories, thoughts, or dreams about what happened,” (3) “Having difficulty concentrating,” (4) “Trouble falling or staying asleep,” and 5) “Feeling irritable or having angry outbursts.”

Nearly half of the subjects (44%) reported at least one or more major symptoms of stress and nearly all (90%) reported at least one or more symptoms a little bit to extremely. Proximity to Ground Zero was significantly related to higher levels of substantial stress. Residents living 100 or less miles from Ground Zero had a 61% prevalence of substantial stress reaction, compared to 48% for residents living between 101 and 1000 miles, and 36% for residents living 1001 or more miles. Of those watching 13 or more hours of TV about September 11, more than half (58%) reported substantial stress reactions compared to slightly less than half (46%) who watched 8 to 12 hours, and
about two fifths (39%) who watched 4 to 7 hours. Regarding coping behaviors, nearly all (98%) reported that they had coped by talking to others about the events and their feelings. Of this group, more than half (57%) talked a lot and three tenths (30%) talked a medium amount (p. 1510). Only 5% often avoided activities like watching TV because they reminded the respondent of the events. Nearly all (90%) turned to praying and, of this group, three fourths used religion a medium amount or a lot. The magnitude of the manmade disaster and continuous television coverage created nearly universal reaction. Thus, Schuster et al. (2001) concluded that “it remains to be seen whether stress reactions in people throughout the country will indeed diminish, especially with recurrent triggers from ongoing threats and recurrent attacks” (p. 1511).

Mental Health Professional Stress and September 11

Psychologist stress. A study of psychologists 3 months after the terrorist attacks provided a vivid picture of the emotional and psychological impact on September 11 (Eidelson et al., 2003). The survey was composed of 15 questions that assessed perceptions of level of engagement in September 11 work, psychological experience of work, changes in professional and personal life, and the number of clients with September 11 distress. In mid-December, 14 weeks after September 11, 4,728 surveys were sent in a one-time mailing with no follow-up to half of the members of the state psychological associations in Connecticut, New York, Pennsylvania, and New Jersey. Of the 712 surveys returned (15%), 592 psychologists were included in the study who identified themselves as working in a clinical setting. Of the sample, 56% were female.
with an average age of 51.0 years ($SD = 10.81$) and 20.24 years of experience ($SD = 11.06$).

The researchers expressed caution about the results noting the limited number of surveys returned ($N = 592$) about September 11 from a very large mailing ($N = 4,728$). Eidelson et al. (2003) pondered, "Were the psychologists who were most involved in post September 11 work or those who experienced the most turnout from working with victims of the disaster among those who did not respond?" (p. 145).

Despite the national limitations of the sample size and the sample composition of psychologists rather than school counselors, results of the study provided important insights into the effects of September 11 on mental health professionals. Geographic proximity to the World Trade Center was a significant predictor of all 15 items on the survey ($p < .01$). Proximity was defined by four concentric zones from the points in New Jersey closest to the center of Ground Zero to the furthest outside circumference determined by the authors: (a) Zone 1, 0 - 10 miles (22%); (b) Zone 2, 11 - 50 miles (26%); (c) Zone 3, 50 - 190 miles (26%); and (d) Zone 4, greater than 100 miles (26%). Psychologists closest to Ground Zero reported the largest personal and professional changes, and the largest percentage of clients with September 11 issues. Means for Zones 1 and 2 were significantly higher than Zones 3 and 4 for most of the items. Further, the means for Zones 1 and 2 were significantly different for each survey item except for increased positive feelings about work, irrational fear, self-referrals, and charitable funds. The means for Zones 2 and 3 were significantly different except for increased negative feelings about work, irrational fear, feeling afraid, distressed clients, and personal life affected. The means for Zones 3 and 4 were significantly different only for client distress.
Fourth fifths of the psychologists (82%) reported their personal lives were affected at least minimally (Zone 1, 90%; Zone 2, 81%; and Zone 3, 82%; and Zone 4, 77%). Nearly three fourths (72%) reported they were personally more afraid to some degree with nearly all in Zone 1 (85%) and 70%, 75%, and 62% in Zones 2, 3, and 4 respectively. Three fifths (62%) of all the subjects and nearly all (81%) in Zone 1 reported some change of professional focus compared with 68%, 54%, and 50% in Zones 2, 3, and 4 respectively. Overall, more than half of the psychologists reported some increase in work-related stress with more than three fourths (76%) in Zone 1 compared to 64%, 49%, and 45% in Zones 2, 3, and 4 respectively. Half (50%) of the respondents felt some feelings of being professionally unprepared (66% in Zone 1, 57% in Zone 2, 45% in Zone 3, and 35% in Zone 4).

An important finding indicated a significantly higher increase in positive feelings than negative feelings. \( t(690) = 16.11, p < .01 \). The majority of the respondents (54%) reported an increase of positive feelings about work, with slightly more than one tenth (11%) reporting an increase of negative feelings. More than three fifths of the psychologists in Zones 1 (66%) and 2 (63%) reported increased positive feelings about work compared to Zone 3 (50%) and Zone 4 (44%). About one fourth of the psychologists in Zone 1 (23%) and slightly more than one tenth in Zone 2 (13%) reported increased negative feelings compared to Zone 3 (6%) and Zone 4 (4%).

Hierarchical multiple regression analyses were conducted on the variables of work stress, feelings of unpreparedness, and positive feelings about work. Increased demand on professional time was the highest predictor of stress \( p < .001 \). Impact on
personal life ($p < .001$), increased personal fear ($p < .01$), client distress ($p < .001$), and change of professional focus ($p < .01$) also significantly predicted increased stress.

Psychologists with fewer years of experience reported significantly higher levels of increased work stress and feelings of being unprepared ($p < .01$), and women reported significantly higher feelings of being afraid ($p < .01$). Although helping through volunteer activities predicted increased stress, feeling personally more afraid, and feeling unprepared ($p < .01$), volunteer activities also increased positive feelings and change in professional focus ($p < .001$). Demand on professional time however was not a significant predictor. A changed view of irrational fear predicted both feeling unprepared ($p < .001$) and having increased positive feelings ($p < .05$). According to Eidelson et al. (2003),

Not surprisingly, it appears that the heightened demands were not themselves sources of greater satisfaction; instead, specific aspects of the increased workload—the change in professional focus and volunteer activities with those impacted by the disaster—created more positive feelings about work. (p. 148)

Most psychologists responded to the invitation to write open-ended responses to each item. Participants cited being unprepared to handle clients' problems while struggling with their own issues, the intensity of clients' pain and suffering that exceeded their own resources, the need to stay connected, and the loss of professional boundaries helping friends and families. While the results should be considered cautiously because of the low return rate, this study provides a detailed profile of the overwhelming impact of September 11 on psychologists in the greater New York area. The results are
consistent with the previous research regarding goals, personal satisfaction, and lower burnout even with high emotional exhaustion (Cherniss, 1980a, 1980b; Stovholt, 2001).

School counselor stress. While the investigator found anecdotal literature on the impact of September 11 on school counselors (Baker, 2002; Bullock et al., 2002; Gerecki, 2001; Weber Runte, 2002), only two descriptive studies were found (Auger et al., 2004; Mascari, 2002; Mascari, personal communication, September 30, 2003). Six months after September 11 as part of the debriefing process, Mascari (2002) conducted a survey of 45 school counselors and other members of the response teams working at the Clifton School District. An urban district of 10,500 students, Clifton is about nine miles from the World Trade Center where the burning towers were seen from the windows of some schools. Mascari found that 87% of the response team members were affected emotionally and 93% felt that debriefing was necessary. Auger et al. (2004) conducted a survey of school counselors and other helping professionals in Minnesota 6 weeks after the attacks on the World Trade Center. While the authors were cautious about generalizing the results because of the geographic distance from New York City and indirect measurement of reactions, the research provided important data and recommendations for school counselors and other mental health professionals. Further, Auger et al. conducted a landmark study on October 25, 2001, less than 2 months after the attacks on the World Trade Center that addressed a void in school trauma research on September 11. The authors conducted the study during a workshop for mental health professionals on stress and trauma from September 11 in children and their families, thus providing a model for a one session solicitation with a high return rate. Of the 125 workshop attendees, 89 (71%) completed the survey. More than three fourths were
female (78.7%), and more than half of the respondents were school counselors (n = 47, 52.8%). All school levels were represented: elementary (n = 24, 27.0%); middle school (n = 24, 27.0%); high school (n = 24, 27.0%) and K-12 (n = 16, 18.9%). Seven counselors (7.9%) listed other as their school level.

Using a 5-point Likert scale from 1 (no observable distress) to 5 (severe distress), participants marked the level of distress they perceived in students, staff, and themselves immediately after the terrorist attacks and at the time of the workshop (6 weeks after September 11). Participants also rated the degree that they perceived the distress interacted with responding to students’ needs by staff members and themselves on a 4-point Likert scale from 1 (not at all) to 4 (greatly). The authors surveyed methods used to inform staff and students, percentage of teachers showing live TV coverage, number of hours students watched live coverage in school on September 11, behavioral changes, student concerns, school responses, and counselor responses.

Of the 87 participants, two thirds (n = 58, 66.6) reported that students had moderate to high levels of distress (moderate stress: n = 39, 44.8%; high stress: n = 19, 21.8%). Further, 31.0% (n = 27) rated student distress as slight and 2.3% (n = 2) reported no student distress. Six weeks later, none of the participants rated high student distress (n = 0) 32.2% rated moderate distress (n = 28), 55.2% (n = 48) rated slight distress, and 12.6% (n = 11) rated students with no distress. While only 5% of the students sought school help, slightly less than half of the participants (44.9%) reported increased student fear, anxiety, or worry, and 15.6% cited increased angry or aggressive behaviors in students. Students who were more affected had preexisting mental health problems, were at risk, or had family members in the military or who traveled frequently by air.
Slightly more than three fourths of the counselors (76.3%) rated their own distress level as either moderate (n = 39, 43.8%), high (n = 27, 30.3%), or severe, (n = 2, 2.2%). Staff distress levels were assessed as moderate to high by 84% of the participants (moderate: n = 39, 43.8%; high: n = 36, 40.4%; severe; n = 0, 0%). While counselor distress was much higher than student distress, participants also reported that their distress did not affect the delivery of services to students. Thus, professional staff distress may have been higher than student distress depending on proximity and other factors (B. Korpos, personal communication, September 12, 2001; L. Reedy, personal communication, September 9, 2003; J.B. Mascari, personal communication, September 20, 2001).

Only 4.5% (n = 4) reported that their school restricted student access to media as a way to respond to their emotional distress, and only 15% (n = 13) indicated there was no access to television. Three fourths (75%) of the respondents’ schools used network television to notify students and staff members of the attacks, and 55% had live television coverage during and immediately after the attacks. Nearly three fourths (n = 63, 74%) reported that classroom teachers decided on network television access in their rooms.

Of concern were 12% (n = 11) of the respondents reporting that their school did not take action to assist students and 52.8% (n = 47) reporting that no action was taken to respond to the emotional distress of staff members. Only 10.1% of participants worked in schools that provided support services or debriefing meetings for staff. Considering the very small percentage of students seeking assistance and the high percentage of staff affected, Auger et al. (2004) recommended more direct ways to reach students and more help for students with preexisting mental health conditions. Further, the authors
underscored the need for school counselors to address staff distress since "the mental health needs of staff members were typically ignored in the sample" (p. 229). The pivotal role of the school counselors in planning for and providing crisis response to both students and staff members was also emphasized in New Jersey anecdotal reports. In the midst of their own trauma experience, school counselors were exhorted to assume responsibilities to "continue to assist students and fellow staff in providing opportunities to debrief and receive support" (Gorecki, 2001, p. 1).

**School Counselor Crisis Response Preparation**

A study by Allen et al. (2002) showed that nearly half (45%) of the school counselors surveyed had no experience in crisis intervention in their practicum or internship. More than one third (36%) reported no exposure in graduate school, and more than one half (57%) reported that their graduate program minimally prepared them or did not prepare them at all for crisis intervention. Auger et al. (2004) also assessed level of trauma response preparation in their study of Minnesota counselors. Slightly more than one third of the sample (n = 32, 36%) had inadequate preparation, and, of this group, 12.5% did not respond to staff or student distress. The majority (n = 53, 60%) rated their preparation as adequate or very adequate (n = 4, 4%) and 3.5% of this group took no action. Five percent (n = 5) reported receiving no preparation for trauma work. While perceived preparation was stronger in the Auger et al. study, only 52.8% of the participants were school counselors and others were psychologists or social workers who may have had more training. Mascari (J.B. Mascari, personal communication, September 30, 2003) reported conducting trauma training sessions for school counselors and other response team members that included eye movement and other techniques during the
years following September 11. Mascari (2002) also reported conducting regular training for crisis response, sudden and violent loss, and crisis and disaster planning.

Positive Emotions and September 11

While it may seem that positive emotions are not expected or warranted after such tragic events, research suggests that positive emotions were felt and had value during September 11 and its aftermath. Fredrickson, Tugade, Waugh, and Larkin (2003) found that resilience in college students after September 11 was significantly related to positive emotions ($p < .001$) and negatively related to negative emotions and depressive symptoms ($p < .05$). Positive emotions "were critical active ingredients that helped resilient people to thrive despite the emotional blows delivered by the September 11th attacks" (p. 375). Further, Fredrickson et al. proposed that positive emotions mediated increased satisfaction after crises.

Since the authors tested 133 University of Michigan students in an earlier study of emotions between March and June of 2001, they were able to locate and retest 42 subjects between 12 and 24 days after September 11, and 5 subjects between 37 and 56 days. Psychological resources were assessed before and after September 11 using the Satisfaction with Life Scale and the Life Orientation Test. Pretests also included the Neuroticism, Extraversion, and Openness Scales of the NEO Five-Factor Inventory and the Ego-Resiliency Scale. For posttests, the authors also used items from the Positive Meaning Scale and the Coping Response Inventory, and they added 8 positive emotions to the Differential Emotions Scale. Amusement, awe, contentment, gratitude, hope, love, pride, and sexual desire were added to joy, interest, surprise, anger, sadness, fear, disgust, contempt, sympathy, and embarrassment. Current mood was assessed using the Affect
Grid and depressive symptoms were measured on the Center for Epidemiological Studies—Depression Measure.

Results showed that resilience was negatively related to anger ($p < .001$) and sadness ($p < .05$). Students with both high and low resilience experienced anger, fear, disgust, and contempt. Resilience was significantly related to six positive emotions of interest, joy, sexual desire, and contentment ($p < .001$) and hope and pride ($p < .01$). Fredrickson et al. (2003) concluded that, although individuals experienced negative emotions of anger, fear, disgust, and contempt as a result of September 11, those with high resilience also experienced positive emotions. Posttests showed resilience was significantly positively related to tranquility, finding positive meaning, and frequency of positive emotions at the $p < .001$ level, and life satisfaction ($p < .05$), optimism ($p < .01$), and negatively related to negative emotions and depressive symptoms ($p < .05$).

Further, pre-crisis trait resilience significantly predicted post-crisis positive emotions ($\beta = .50$), $F(43) = 4.29, p < .001$. When trait resiliency was controlled for, positive emotions were significantly related to increases in psychological resources ($\beta = .48$), $F(43) = 2.88, p < .01$. When depressive symptoms were controlled for, trait resilience also predicted positive emotions ($\beta = .52$), $r(44) = 4.42, p < .001$. In response to open-ended questions about problems they faced after the terrorist attacks, 26% feared future attacks and war, 23% were concerned about friends and relatives in New York City and Washington, D.C., 13% had problems with studies, 11% were concerned about helping friends with the stress of unaccounted for relatives, and 8% experienced extreme emotional reactions. Participants however felt grateful that they were alive and their loved ones were safe. They felt closer to family members, and were more interested in
the nation's response. The authors cited the work of both Frankel (1959) and Folkman (1997) regarding the critical importance of positive meaning in the experience of trauma.

According to Fredrickson et al. (2003),

Efforts to cultivate and nurture positive emotions in the aftermath of crises pay off both in the short-term, by improving subjective experiences, undoing physiological arousal and enhancing broad-minded coping, and in the long-term, by minimizing depression and building enduring resources, the hallmark of thriving. (p. 14)

Further, Fredrickson et al. cited ways positive emotions can be fostered through finding positive meaning by sharing past best experiences, carrying out favorite activities, reframing negative experiences into positive ones, and using spiritual or philosophical meanings.

In summary, few Americans, if any, escaped the impact of September 11 and its aftermath. Continuous and repetitive television coverage created vicarious experiences for those even in areas distant from the World Trade Center. While the immediate shock and emotional distress was overwhelming, much of the initial distress dissipated in 6 to 9 weeks. Symptoms often persisted in those with direct experience, relatives or friends directly impacted, or prior trauma or mental health problems. Studies showed that proximity to the site of the World Trade Center was significantly related to distress. Psychologists in the metropolitan area were significantly more affected personally and professionally the closer they worked to Ground Zero. Nearly all school counselors and mental health professionals in a study in the Midwest experienced moderate to high
emotional distress after September 11 and reported that school staff experienced similar levels.

While only one tenth of the respondents in the Midwest study reported their schools provided support services for staff after September 11, a New Jersey city school district survey indicated crisis response, debriefing, and long term trauma response training was provided for counselors. Psychologists who worked within 50 miles of the site reported that positive feelings about their work increased significantly. Positive emotions did not disappear during September 11 and its aftermath; rather, they predicted increases in psychological resources and personal satisfaction.
Chapter III
Methodology

The purpose of this chapter is to describe the methods and procedures used in this study. The chapter begins with a description of the participants and is followed by a discussion of the procedures used for subject selection and instrument selection. Procedures for solicitation of subjects, completion of the research instruments, and collection of data are presented. After a description of the research instruments, validity and reliability data related to the research instruments are presented. Methods of data analysis and power analysis are also described.

Participants

Subjects in this study were counselors currently employed full-time in New Jersey public schools. The job title for nearly all subjects was “school counselor” or “guidance counselor.” Mental health professionals or other certificated employees with other job titles were included in the study if they reported a full-time caseload of students, were considered school counselors by their school, and performed the duties of a school counselor. Those who were not certified school counselors were certified school social workers or substance awareness coordinators working as school counselors in elementary or middle schools who did not require school counselor certification at those levels.

Procedures

The subjects were recruited by mail and through in-person enrollment at professional school counselor conferences. Potential participants were solicited by mail
using the membership mailing list of the New Jersey School Counselor Association. Three conferences were utilized for solicitation: the New Jersey School Counselor Network Conference, Educational Talent Search Conference at Seton Hall University, and the Clifton Schools District Staff Development Day. The investigator distributed and collected the survey envelopes at the respective first and second conferences. At the Clifton conference, a school-counseling supervisor distributed the survey envelopes. Each subject was provided with a Letter of Introduction, Statement of Informed Consent, the Maslach Burnout Inventory--Educators Survey (Maslach, Jackson, & Schwab, 1996), the Counselor Self-Efficacy Scale (Sutton & Fall, 1995), the Demographic Survey, and the Work Survey. The Letter of Introduction and Statement of Informed Consent contained information about the purpose and procedures. The investigator clearly explained the purpose of the research and assured the participants of their voluntary participation, anonymity, confidentiality, and the availability of the study results after its completion. The investigator stated that the participants gave their permission to participate in the study by returning the completed research instruments. The investigator also explained how to obtain results of the study, and how the participants could contact her with any questions concerning the study. Participants were asked to give about 30 minutes of their time to complete the questionnaires.

The investigator requested that the participants complete the following instruments: The Demographic Survey, the Work Survey, the Maslach Burnout Inventory--Educators Survey (Maslach, Jackson, & Schwab, 1996), and the Counselor Self-Efficacy Scale (Sutton & Fall, 1995). Each research instrument contained instructions for completion. Participants who wanted the results of the study were asked to send their name and address on a postcard to the researcher, and the author would mail the results to them when the study was completed.

Participants who were recruited by mail were asked to complete the research instruments at home, school, or other place not in the presence of the investigator, place
the surveys in the enclosed stamped, self-addressed envelope, and return by mail to the investigator. To assure anonymity, the investigator requested that subjects recruited by mail place the completed surveys in the enclosed self-addressed stamped envelope. A coded number was written on the burnout survey and envelope to ensure that they were not duplicated and to account for those returned.

The envelopes were distributed at conferences attended by potential subjects in January and February of 2004. A follow-up note and packet was sent in March of 2004, encouraging participants to respond if they had not yet done so. Subjects recruited at the conferences were given the option to pick up survey envelopes from a carton labeled "SHU Research Study" located at the registration desk or near the conference tables, or directly from the investigator. To assure anonymity, participants recruited at conferences were asked to complete the surveys and place them in an enclosed envelope. Subjects had the option of placing the envelope in a secured carton labeled “Completed SHU Surveys” located near the registration desk, or mailing the stamped, addressed envelope after the conference.

Research Instruments

The following surveys were used in this study: the Maslach Burnout Inventory—Educators Survey (Maslach, Jackson, & Schwab, 1996); and the Counselor Self-Efficacy Scale (Sitton & Fall, 1995); a Demographic Survey developed by the investigator of the study; and a Work Survey developed by the investigator of the study. In order to test the format and procedures of the study, the investigator conducted a pilot study of 14 school counselors. Nine participants in the pilot study were high school counselors and five were elementary school counselors. They completed each of the instruments at a district school counselors’ meeting and then participated in a focus group to provide feedback about the administration and content of the surveys and to offer suggestions for
improvement. Suggestions dealt primarily with editorial and format improvements. Counselors recommended that the investigator print the item number and Likert scale next to the item on the Work Survey and the Counselor Self-Efficacy Scale rather than only at the top of the sheet. Three statements on the Work Survey were eliminated for redundancy and minor changes in wording were made to improve clarity.

**Demographic Survey**

The investigator's Demographic Survey is a self-administered measure designed to provide personal and demographic information. The following data was requested from each participant: professional position, gender, age, school counseling experience, certification, ethnic background, relationship/living status, highest level of education, counselor training, religious/spiritual preference, school setting, zip code, district factor grouping, school level, number of schools assigned, caseload, teaching experience, participation in school counseling initiatives, distance from Ground Zero, tasks with greatest percentage of time, professional identity, and theoretical orientation. Among these variables, research indicated that relationship status, ethnicity, highest degree held, work setting, supervision, satisfaction with caseload and supervision, and years of experience were significantly related to self-perceptions of stress and burnout (Ackerly et al., 1988; Farber, 1991; Maslach, & Jackson, 1986; Maslach, Jackson, & Leiter, 1996). Participants were also asked to respond to questions on a 5-point Likert scale from 1 (not at all) to 5 (very much so) regarding feelings of job stress and burnout, caseload size and time spent on tasks, involvement in and effects of school counseling initiatives, support by principal, supervisor, and counselors, and preparedness for and impact of September 11 and its aftermath.
Maslach Burnout Inventory—Educators Survey

The Maslach Burnout Inventory—Educators Survey (MBI—ES, Maslach, Jackson, and Schwab, 1996) is identical to the Maslach Burnout Inventory—Human Services Survey (MBI—HSS, Maslach & Jackson, 1996) except for minor changes in wording to reflect the school setting. The MBI is a 22-item instrument designed to assess the three dimensions of the burnout syndrome: emotional exhaustion, depersonalization, and a lack of personal accomplishment. Examples of items include: "I feel frustrated on my job," "I feel burned out from my work," or "I don't really care what happens to some students."

The authors changed the term "recipients" in the survey to "students" as the recipients of the service to assure understanding and to reflect the school setting. Each dimension is measured by a separate subscale using a 3-point response format from 1 (Never) to 6 (Every Day). The three scores are reported separately and users are directed not to combine scores (Maslach, Jackson, & Leiter, 1996). Although the first edition reported separate intensity and frequency ratings, Maslach and Jackson (1986) deleted intensity ratings in the second edition. While both ratings were highly correlated, Maslach and Jackson concluded that the frequency ratings were more significantly related to burnout.

A third version, the Maslach Burnout Inventory—General Scale (MBI—GS) is a 16-item scale used for a wider range of occupations than human services (Sezafi et al., 1996).

The Maslach Burnout Inventory—HSS (Maslach & Jackson, 1996) and the Maslach Burnout Inventory—ES (Maslach, Jackson & Schwab, 1996) were labeled "Humane Services Survey" and "Educators Survey" respectively to avoid possible influence or bias using the term burnout in the title of the survey. Both forms are administered and scored in the same way. The emotional exhaustion subscale is composed of nine items that measure feelings of being overextended, tired, and drained by clients' needs. The personal accomplishment subscale is composed of eight items that measure feelings of incompetence, disappointment, and lack of success on the job, and the depersonalization subscale is composed of five items that measure a detached,
impersonal, or negative response to clients. The MBI is self-administered with respondents completing the survey in about 10 minutes. In this study, the investigator described the instruments as surveys regarding feelings about work, job stress, and September 11.

Scores on the MBI range from low to high. Low scores on the emotional exhaustion and depersonalization subscales and a high score on the personal accomplishment subscale indicate a low degree of burnout. Moderate scores on the three subscales indicate a moderate degree of burnout. High scores on the emotional exhaustion and depersonalization subscales and a low score on the personal accomplishment subscale indicate a high level of burnout. According to the Masiach Burnout Inventory Manual (Maslach, Jackson, & Leiter, 1996), the range of scores from low to high “enables each respondent to compare himself or herself to the overall norm, and to obtain a rough estimate of the degree of his or her experience with the various aspects of burnout” (p. 9).

The normative means for mental health workers are: emotional exhaustion, $M = 16.89$, depersonalization, $M = 5.72$, and personal accomplishment, $M = 30.87$. The normative sample for mental health workers included 730 psychologists, psychotherapists, counselors, mental hospital staff, and psychiatrists. Other normative samples were post-secondary education, social services, medicine, and other groups (legal aid employees, attorneys, police officers, probation officers, ministers, librarians, and agency administrators). The normative sample for teachers included 4,163 educators who taught in elementary and secondary schools from kindergarten to Grade 12. The range of normative scores for teachers are emotional exhaustion, less than 16 (low); 17 to 26 (average); and greater than 27 (high); depersonalization, less than 9 (low); 9 to 15 (average); and greater than 14 (high); and personal accomplishment greater than 37 (low); 36 to 51 (average); and less than 30 (high).
Maslach, Jackson, and Leiter (1996) provided a broad range of scores for the purpose of feedback for participants but not as a diagnostic instrument for burnout. The authors cautioned that "there is insufficient research on the pattern(s) of scores as indicators of individual dysfunction or the need for intervention" (p. 9).

Levels of burnout. Researchers have reported a range of means compared to the means in the validation studies for the MBI–ES (Maslach, Jackson, & Leiter, 1996). In a national sample of 562 licensed psychologists who worked primarily in mental health agencies, Ackerly et al. (1988) reported means significantly higher than those reported by Maslach and Jackson (1986): emotional exhaustion, \( M = 19.44 \) compared to \( M = 16.89 \); depersonalization, \( M = 6.31 \) compared to \( M = 5.72 \); and personal accomplishment, \( M = 4.227 \) compared to \( M = 3.67 \) (\( p < .05 \)). One third of the psychologists experienced high levels of depersonalization and two fifths experienced high levels of emotional exhaustion. Slightly more than one fifth of the respondents reported that they would choose another career if they had the opportunity to choose again.

In a study of 225 psychologists, Skorupa and Agresti (1993) reported lower levels of burnout than those reported by Maslach and Jackson (1986); however, the means for emotional exhaustion and depersonalization were not significantly different. The researchers found a significant difference in personal accomplishment between the mean for psychologists (\( M = 43.20 \)) and the norm (\( M = 30.87 \)) (Maslach & Jackson, 1986). Thus, a high score in personal accomplishment indicates low burnout.

Validity and reliability. Validity and reliability for the Maslach Burnout Inventory–ES have been extensively supported through confirmatory factor analysis, behavioral ratings, and correlations with job factors and personal outcomes (Maslach, Jackson, & Leiter, 1996). The three constructs of the Maslach Burnout Inventory were significantly different than other psychological constructs such as job satisfaction. Scores were also significantly correlated with job factors contributing to burnout and with
independent behavioral ratings made by a worker who knew the participant (Pines & Maslach, 1978).

There are extensive validation studies for the three dimensions of the Maslach Burnout Inventory. In a study of 469 Massachusetts teachers, Iwanicki and Schwab (1981) found the three subscales to be valid dimensions of burnout. Cronbach’s reliability coefficients for internal consistency were .90 for emotional exhaustion, .76 for depersonalization, and .76 for personal accomplishment. According to Maslach and Jackson (1986), test-retest reliability at 2-week to 4-week intervals was .82 for emotional exhaustion, .60 for depersonalization, and .80 for personal accomplishment. Maslach and Jackson reported that internal consistency as measured with Cronbach’s coefficient alpha (n = 1.316) was .90 for emotional exhaustion, .79 for depersonalization, and .71 for personal accomplishment. Internal consistency for the second edition measured with Cronbach’s coefficient alpha was .89 for emotional exhaustion, .70 for depersonalization, and .78 for personal accomplishment.

In his study of California students using the Maslach Burnout Inventory—Educators Survey, Gold (1984) reported Cronbach’s reliability coefficients for internal consistency to be .88 for emotional exhaustion, .74 for depersonalization; and .72 for personal accomplishment. At 2-week to 4-week intervals, all three subscales were significant at the p < .001 level. Reliability coefficients were .82 for emotional exhaustion, .86 for depersonalization, and .80 for personal accomplishment. In their study of teachers with a 1-year interval between test sessions, Jackson et al. (1986) reported reliability coefficients of .60 for emotional exhaustion, .54 for depersonalization, and .57 for personal accomplishment. Reliability coefficients for the Educators Survey have been consistent with those for the Human Services Survey (Maslach, Jackson, & Leiter, 1996).

Other Burnout Measures. Three other measures were evaluated as an instrument to assess burnout in the current study. Even though two thirds of the 30 items are consistent with Maslach’s and Jackson’s operational definition of burnout. The Staff
Burnout Scale (Jones, 1980) was designed to assess burnout in health professionals and provides a broader range of dimensions than the affective focus of the Maslach Burnout Inventory. The scale includes physiological dimensions with items that address physical illness, distress, and unprofessional patient relationships. Further, the use of the term "patient" is not relevant to the student population school counselors serve.

The Tedium Scale (Pines et al., 1989) also follows a much broader definition of stress and burnout than the Maslach Burnout Inventory with the concept of tedium expanded to a general satisfaction with life. The scale measures chronic stress and pressure resulting in physical, emotional, and mental exhaustion in the overall workforce. While burnout in human service professionals may be a part of the tedium dimension, it is not the overall goal of the Tedium Scale.

Two studies of school counselor burnout reviewed in chapter 2 used Semantic Differential Scales to assess burnout (Agnew, 1999; Cummings & Nell, 1983). Semantic Differential Scales are economical and easy to administer; however, they lack the extensive normative information available for several human services professions found in the Maslach Burnout Inventory Manual that is useful in comparing levels of burnout in this study (Maslach, Jackson, & Leiter, 1996). While the scales' potential to identify projective and indirect feelings cross culturally is helpful, the investigator considered the specificity, objectivity, validity, and reliability of the statements in the Maslach Burnout Inventory to be more appropriate to the current study. Further, agreement on the meaning and intensity of the adjective pairs used in prior studies of school counselor burnout required analyses were beyond the purpose and scope of this study.

Counselor Self-Efficacy Scale

The Counselor Self-Efficacy Scale (Sutton & Fall, 1995) is a 37-item Likert scale that measures how school counselors perceive their ability to do their job. Sutton
and Fall (1995) developed the Counselor Self-Efficacy for school counselors as a modification of the Teacher Self-Efficacy Scale (Gibson & Dembo, 1984), a 30-item scale that measures self-efficacy in teaching professionals. Sample items on the Teacher Self-Efficacy Scale are: “If a student in my class becomes disruptive and noisy, I feel assured that I know some techniques to redirect him quickly” and “When I really try, I can get through to most students.” Sutton and Fall (1995) limited the modification of the scale to rephrasing or adding items to reflect the role of the school counselor and omitting irrelevant items. For example, the item “Even a teacher with good teaching abilities may not reach many students” was changed to “Even a counselor with effective counseling abilities may not reach many students.”

Validity and reliability. Although few studies have tested the validity of the Counselor Self-Efficacy Scale (Sutton, personal communication, April 3, 2003), the scale is the only self-efficacy assessment found by the evaluator designed for school counselors rather than mental health counselors, career counselors, or counselors in training. Further, the Counselor Self-Efficacy Scale addressed the multiple roles of school counselors. With the influence of the ASCA (2003) standards and school counseling initiatives, additional validity studies are needed to determine if factors are related to current school counselor self-efficacy or role breadth self-efficacy.

In the original Teacher Self-Efficacy Scale, two factors, Teacher-Efficacy Expectancy and Outcome Expectancy, were derived from self-efficacy theory (Bandura, 1997). Bandura defined efficacy expectation as “the belief that one can perform behaviors at a certain level; outcome expectancy is the belief that certain performed behaviors lead to certain outcomes” (p. 331). According to Bandura (1986), self-efficacy
expectations increased as a result of performance, verbal persuasion, vicarious experience, and physical and emotional symptoms, with performance as the strongest source. Consistent with Bandura’s sources of self-efficacy expectations, Sutton and Fall (1995) found that organizational factors and relationships to peers and supervisors predicted the level of counselor self-efficacy.

A factor analysis showed three self-efficacy expectancies for counselors: Role, Outcomes, and Multiple Roles. Internal consistency reliability coefficients ranged from .65 to .75 for the three factors using Cronbach’s alpha (Sutton & Fall, 1995). Sutton and Fall (1995) retained efficacy expectancy and outcome expectancy as factors; however, the third factor, multiple roles, was not found in the Teacher Self-Efficacy Scale, indicating this was a unique factor of the school counselor’s role. An example of outcome efficacy is: “When student behavior changes for the positive, it is usually because I have found more effective counseling approaches.” Examples of multiple roles are: “I feel competent to develop goals and objectives for a systematic comprehensive, developmental guidance program” and “the school staff has too many expectations of me, thereby reducing my effectiveness.” Larson and Daniels (1998) analyzed the latter item in a review of counseling self-efficacy studies between 1983 and 1998. Upon examining outcome expectancy measures, they suggested that on the Counselor Self Efficacy Scale, the outcome expectancy factor may measure reasons for outcomes rather than expectations of school counseling on the Counselor Self Efficacy Scale.

Statistical Analysis

In the first hypothesis, collected study sample means and ranges were compared to norms for emotional exhaustion, depersonalization, and personal accomplishment in human services workers reported in the Maslach Burnout Inventory Manual (Maslach,
Jackson & Leiter, 1996). Means for the sample of school counselors were compared to the overall norms for emotional exhaustion, depersonalization, and personal accomplishment scores on the Maslach Burnout Inventory—Educators Survey (Maslach, Jackson, & Schwab, 1996).

In the second hypothesis, the independent variable was the level of self-efficacy in school counselors measured by the mean score on the Counselor Self-Efficacy Scale (Sutton & Fall, 1995). The dependent variables were the levels of burnout in the collected study sample of school counselors measured by the emotional exhaustion, depersonalization, and personal accomplishment scores on the Maslach Burnout Inventory—Educators Survey (Maslach, Jackson, & Schwab, 1996).

In the third hypothesis, the independent variable was social support in school counselors measured by items on the Work Survey. The dependent variables were the levels of burnout in school counselors measured by the emotional exhaustion, depersonalization, and personal accomplishment scores on the Maslach Burnout Inventory—Educators Survey (Maslach, Jackson, & Schwab, 1996).

In the fourth hypothesis, the independent variable was participation in school counseling work initiatives indicated by an item on the Demographic Survey. The dependent variables were burnout levels measured by the emotional exhaustion, depersonalization, and personal accomplishment scores from the Maslach Burnout Inventory—Educators Survey (Maslach, Jackson, & Schwab, 1996).

In the fifth hypothesis, the independent variable was distance in miles from the World Trade Center indicated by an item on the Demographic Survey. The dependent variables were burnout levels in school counselors measured by the emotional exhaustion, depersonalization, and personal accomplishment scores on the Maslach Burnout Inventory—Educators Survey (Maslach, Jackson, & Schwab, 1996).

Data from the Demographic Survey, the Work Survey, the Maslach Burnout Inventory—Educators Survey and the Counselor Self-Efficacy Scale were collected.
Descriptive statistics and inferential analyses were conducted and an alpha level of $p < .05$ was used. Descriptive statistics were computed including frequencies, measures of central tendency, and variability. Means and standard deviations were calculated for the three dimensions of burnout using numerical scores for the emotional exhaustion, depersonalization, personal accomplishment subscales, and demographic factors. Correlations were calculated for each independent variable (self-efficacy, social support, school counseling initiatives, and distance from Ground Zero) with emotional exhaustion, depersonalization, and personal accomplishment subscale scores.

A multiple regression analysis was conducted to determine the significance of relationships among three dimensions of burnout, counselor self-efficacy, social support, influence of school counseling program initiatives, distance, and various subgroups. For significant differences, a univariate analysis of variance (ANOVA) was computed as a follow-up test. Tukey HDS post-hoc tests were conducted to analyze differences between groups. Multiple regression analysis was used to determine if levels of counselor self-efficacy and selected factors predicted levels of burnout on each of the three dimensions.

**Power Analysis**

In order to detect an effect in the sample of school counselors, power was an important consideration in the design of this study. It provided the sample size with greater sensitivity to detect an effect than merely using sample size, thus reducing the probability of a Type II error as low as possible. The sample could not be too small so that a significant effect was missed, or too large so that a relationship was significant but not strong or important. A sample size that was too small could result in a large standard error and an insensitive test. If the probability was too large, the sample would have to be increased to reduce the chance of an error.
The sample size divided by the number of variables yields a reasonable level of power. In this survey, 210 subjects divided by 7 variables yields a 30:1 ratio, which is reasonable for this study.
Chapter IV

Results

This study examined levels of burnout in school counselors working in New Jersey. The study also investigated the relationship of burnout to self-efficacy, social support, involvement in school counseling initiatives as a measure of role breadth self-efficacy, and proximity to Ground Zero. This chapter includes data collection and a description and analysis of the four outcome measures used. Data analysis and results are presented for the five hypotheses and for a supplemental analysis of demographic and work factors.

Data Collection:

In this study, survey packets were distributed to school counselors who were members of the New Jersey School Counselor Association (NJSCA) or were participants in various school counseling professional development conferences. A research packet was sent or distributed to each potential subject in the study. The packet contained a letter explaining the purpose of the study, how to participate, and assurances of confidentiality; a statement from the Institutional Review Board of Seton Hall University; a demographic survey; a work survey; assessment instruments concerning burnout and self-efficacy; and a stamped, addressed return envelope. A coded number was written on the surveys and envelope to ensure that they were not duplicated and to account for those returned. The envelopes were sent or delivered to the work setting of potential participants or
distributed at conferences attended by potential subjects in January and February of 2004. A follow-up note and packet was sent in March of 2004, encouraging participants to respond if they had not yet done so. Out of 300 potential participants, a total of 252 survey packets were returned for a response rate of 50.4%.

During the on-site conference solicitations in January, 88 survey packets were distributed and 35 were returned (39.8%). For the initial mail solicitation, 412 survey packets were mailed and 107 were returned (26.0%). Considering this relatively low response rate, a second survey packet was mailed to the 305 potential subjects who had not previously responded. The researcher was able to determine those who responded by the number on the return envelope and the survey. In the second mailing, 110 additional surveys were returned, which increased the mail response rate to 52.7% and overall return rate to 50.4%. The coded list of numbers was destroyed after the study to ensure participant anonymity.

Of the 252 returned surveys, 247 were usable. Four respondents did not complete the Maslach Burnout Inventory—ES, and one did not complete the Counselor Self-Efficacy Scale. These surveys were eliminated from the sample. One respondent returned the unused second packet, reporting that the first one had been completed and sent. Responses were tabulated and frequency distributions were examined for irregularities that could threaten the validity of the study. After the author determined that there were no outliers in the data, descriptive statistics were calculated. Prior to running principal analyses, demographic factors were related to burnout variables. There were no significant relationships between any of the dimensions of burnout and age, gender, or highest level of counselor training (p > .05). Data were analyzed with SPSS Version 10.
Outcome Measures

Maslach Burnout Inventory—Educators Survey

The MBI—ES (Maslach, Jackson, & Schwab, 1996) was scored according to the procedures in the Maslach Burnout Inventory Manual (Maslach, Jackson, & Leiter, 1996). Respondents rated each of the 11 items on a 0 to 6 Likert scale. Items were summed on three dimensions: emotional exhaustion (EE), depersonalization (DP), and personal accomplishment (PA). According to Maslach, Jackson, and Leiter, burnout is reported on three distinct dimensions. Normative ranges for low, average, and high burnout are reported for each dimension. A high score for emotional exhaustion and depersonalization indicates burnout. Since personal accomplishment is reverse scored for burnout, low personal accomplishment indicates high burnout. After analysis of the data, average and high levels of burnout were combined as an indicator of burnout. Since burnout is a continuous variable, the combination of average and high ranges can be considered an indicator of burnout and is consistent with the results of other studies (Ackerly et al., 1988; Maslach, Jackson, & Leiter, 1996).

Demographic Survey

The Demographic Survey provided personal, educational, and work information for use in this study and for the purpose of generating questions for future research. Data collected included professional position, gender, age, school counseling experience, certification, ethnic background, relationship/living status, highest level of education, counselor training, religious/spiritual preference, school setting, zip code, district factor grouping, school level, number of schools assigned, caseload, teaching experience, participation in school counseling initiatives, distance from Ground Zero, primary job
functions, supervisor, professional identity, and theoretical orientation. The sample was skewed toward female, Caucasian, those with a professional identity as a counselor working in a school setting, and those who earned a master’s degree in school counseling. All subjects served as school counselors in New Jersey schools or performed the job functions of a school counselor.

Counselor Self-Efficacy Scale

Respondents scored the 33-item Counselor Self-Efficacy Scale (Sutton & Fall, 1995) on a 6-point Likert scale: 1 (Strongly Disagree), 2 (Moderately Disagree), 3 (Somewhat Disagree), 4 (Somewhat Agree), 5 (Moderately Agree), and 6 (Strongly Agree). Scores are summed yielding a total score for counselor self-efficacy.

Work Survey

The work survey consisted of 23 items on work stress, support, and the impact September 11 and school counseling initiatives. Counselors responded to each question on a 5-point Likert scale: 1 (Not at all), 2 (A little bit), 3 (Moderately), 4 (Quite a bit), and 5 (Very much so). Five items were concerned about work stress; four items were related to social support; seven items questioned the impact of September 11 and its aftermath; and seven were related to involvement in school counseling initiatives.

Social Support Survey

The social support survey was comprised of four of the items on the Work Survey. Items questioned the degree to which the subject felt supported by counselors, teachers, the principal, and the day-to-day counseling supervisor. The items were consistent with various social support surveys discussed in chapter 2 with the exception of support by family and support by friends which were not in the scope of this study. Responses were scored on a 5-point Likert scale: 1 (Not at all), 2 (A little bit), 3
(Moderately), 4 (Quite a bit), and 5 (Very much so). Scores are summed yielding a total score.

Demographic Analysis

Three fourths ($n = 187, 75.7\%$) of the counselors were female. Most of the subjects ($n = 216, 87.4\%$) were Caucasian ($n = 216$). Of the sample, 6.9\% ($n = 17$) were African American; 2.8\% ($n = 7$) were Hispanic or Latino; and 1.6\% ($n = 4$) were Asian. Nearly three fourths of the school counselors lived with their spouse ($n = 167, 67.6\%$) or life partner ($n = 15, 6\%$). Of the sample, 15.8\% ($n = 38$) lived alone. More than one half (57.9\%) were 50 years of age or older. The mean age of the sample was 49 ($SD = 9.98$) and the participants ranged in age from 21 to 66. One third (33.2\%) of the counselors were between the ages of 31 and 40 and one twentieth (4.9\%) were between the ages of 21-29.

More than half ($n = 126, 51.1\%$) of the school counselors reported their religious or spiritual identity as Catholic. Nearly one fifth ($n = 49, 19.8\%$) were Protestant and slightly more than one tenth (13.4\%) were Jewish. Nearly one half (45.4\%) reported their primary theoretical orientation as either person-centered ($n = 101, 40.9\%$) or existential/humanistic ($n = 11, 4.5\%$). Slightly more than one fourth (28.3\%) were eclectic and nearly one fifth ($n = 44, 17.8\%$) reported a cognitive-behavioral orientation.

Nearly three fourths ($n = 169, 68.4\%$) of the participants reported their highest level of counselor training as a master’s degree in counseling and 24\% ($n = 6$) reported having a doctoral degree in counseling. About one fifth ($n = 49, 19.8\%$) reported having a master’s degree in another subject, and 8.3\% ($n = 22$) reported that graduate courses comprised their highest level of counselor training.

When identified by geographical setting, more than half ($n = 153, 61.9\%$) of the counselors worked in suburban districts; 25.9\% ($n = 64$) reported working in urban
districts; and 5.7% (n = 14) were employed in rural districts. All worked in New Jersey. The average number of years of school counseling experience was 12.8 (SD = 9.56) with a range of one half year to 39 years of counseling experience. Three tenths (n = 71, 29.0%) had fewer than 6 years of experience, and about 70% (n = 165, 68.8%) had fewer than 16 years of experience. Subjects reported an average of 13.5 years of teaching experience (SD = 11.0) with a range of teaching experience from 0 to 43 years. Of the respondents, 4.5% (n = 11) had no teaching experience; 27% had fewer than 6 years; and 44.8% had fewer than 16 years.

When identified by school level, more than one half (n = 142, 57.5%) of the respondents worked in high school settings. Elementary school counselors comprised slightly more than one fourth (n = 71, 28.7%) of the sample and 11.7% (n = 29) were middle school counselors. Only five counselors (2%) worked on multiple school levels. None of the high school or middle school counselors worked in more than one school. The mean counselor caseload (number of students assigned to the counselor) was 335 students (SD = 384.3). Nearly three fourths of the respondents worked within 50 miles of the former site of the World Trade Center. Slightly more than one tenth (n = 27, 10.9%) worked in a school within 10 miles of the site and 0.3% (n = 156) worked between 11 and 50 miles of the former site of the World Trade Center (n = 156). Counselors working 51–80 miles from the site numbered 33 (12.4%), and 15 counselors worked between 81 and 100 miles away. Those working more than 100 miles from the site accounted for 5.35% of the sample (n = 13).

To consolidate similar job functions, the categories of record-keeping, schedules/changes, and transcripts/applications were combined into a general category of non-counseling paperwork, and substance abuse counseling was combined with the category of personal counseling. Counselors indicated the two functions in which they spent the most time. Table 1 displays the first and second ranked job functions and the combined job functions. Most of the counselors' time was spent on either non-counseling
paperwork (21.5%) or in personal counseling (25.7%). Non-counseling paperwork (25.7%) and personal counseling (20.6%) were also reported as the second-ranked responsibility. When the first and second ranking roles were combined, similar percentages resulted: 25% personal counseling, 24.5% paperwork, 21.8% academic counseling, and 11.5% career and college planning.

Table 1

<table>
<thead>
<tr>
<th>Job Function</th>
<th>Ranked 1</th>
<th></th>
<th></th>
<th>Ranked 2</th>
<th></th>
<th></th>
<th>Combined 1-2</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td></td>
<td>n</td>
<td>%</td>
<td></td>
<td>n</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>Personal counseling</td>
<td>71</td>
<td>28.7</td>
<td>51</td>
<td>20.6</td>
<td>122</td>
<td>25.1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Academic counseling</td>
<td>71</td>
<td>28.7</td>
<td>35</td>
<td>14.2</td>
<td>106</td>
<td>21.8</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paperwork (Non-counseling)</td>
<td>53</td>
<td>21.5</td>
<td>66</td>
<td>26.7</td>
<td>119</td>
<td>24.5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Career/college planning</td>
<td>21</td>
<td>2.5</td>
<td>35</td>
<td>14.2</td>
<td>56</td>
<td>11.5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Guidance classes</td>
<td>11</td>
<td>4.5</td>
<td>18</td>
<td>7.3</td>
<td>29</td>
<td>6.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Crisis intervention</td>
<td>10</td>
<td>4.0</td>
<td>3</td>
<td>9.3</td>
<td>33</td>
<td>6.8</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>8</td>
<td>3.2</td>
<td>13</td>
<td>5.3</td>
<td>21</td>
<td>4.3</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The majority of counselors (n = 132, 53.4%) reported their day-to-day supervisor as the Guidance Director or Supervisor, and 37.2% (n = 92) identified their principal as their day-to-day supervisor. As displayed in Table 2, more than three fourths of the respondents (78.1%) described their professional identity as a counselor working in an
educational setting \( n = 193 \), white 18.2\% \( n = 45 \) described themselves as an educator using counseling skills.

Table 2

<table>
<thead>
<tr>
<th>Identity</th>
<th>( n )</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counselor working in school setting</td>
<td>193</td>
<td>78.1</td>
</tr>
<tr>
<td>Educator using counseling skills</td>
<td>45</td>
<td>18.2</td>
</tr>
<tr>
<td>Other</td>
<td>9</td>
<td>3.8</td>
</tr>
</tbody>
</table>

Table 3 displays the distribution of initiatives and models used. More than one half of the counselors (58.3\%) reported that their schools followed a school counseling initiative or program model. Slightly more than one fourth (27.5\%) reported that they used a locally-developed model or initiative, and nearly three tenths (28.3\%) indicated that no model or program was used.

Just over one half (54.3\%) of the respondents used a New Jersey initiative. The School Counseling Initiative (NJDOE, 2000; NJSCA, 2000) in New Jersey was identified by 12.2\% \( n = 30 \) of the respondents. The New Jersey Developmental School Counseling Model (Runte et al., 1991), which was the precursor to the SCI, was used by 14.2\% \( n = 35 \) of the respondents, and the Student Support Services Professional Development Initiative (NJDOE, 2000; NJSCA, 2000) in New Jersey was reported by used by 6.4\% \( n = 1 \). The American School Counseling Association (ASCA) (2003) national model, was reported being used by 4.0\% of the respondents \( n = 10 \).
Table 3

Sample Distribution by School Counseling Initiative Model

<table>
<thead>
<tr>
<th>Initiative/Model Use</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>144</td>
<td>58.3</td>
</tr>
<tr>
<td>Model used</td>
<td>68</td>
<td>27.5</td>
</tr>
<tr>
<td>Locally developed model</td>
<td>35</td>
<td>14.2</td>
</tr>
<tr>
<td>NJ Developmental model</td>
<td>30</td>
<td>12.2</td>
</tr>
<tr>
<td>SCI model</td>
<td>10</td>
<td>4.0</td>
</tr>
<tr>
<td>ASCA model</td>
<td>1</td>
<td>0.4</td>
</tr>
<tr>
<td>SSSPDI model</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No model used</td>
<td>70</td>
<td>28.3</td>
</tr>
<tr>
<td>No response</td>
<td>33</td>
<td>13.4</td>
</tr>
</tbody>
</table>

Participants responded to several items in the work survey about their attitudes toward work, stress, burnout, school counseling initiatives, and September 11 and its aftermath. Responses to work survey items relevant to the study are reported later in this chapter. In addition, the proximity of Ground Zero to schools has been hypothesized as an important variable in this study. Responses to work survey items relevant to the effects of September 11 on school counselors are also reported.

Results

Hypothesis 1

Hypothesis 1 stated that there will be no statistically significant difference in the dimension of emotional exhaustion for burnout and a there will be a statistically
significant difference in the dimensions of depersonalization and reduced personal accomplishment between school counselors and human services workers according to the overall norms for the Maslach Burnout Inventory (Maslach, Jackson, & Leiter, 1996). This hypothesis was supported.

Table 4 displays Chi square analyses with significant differences between the collected study sample and MBI norms. The results for each dimension of burnout are reported. Table 5 indicates percentages for each range of burnout in the collected study sample and Table 6 provides normative data for the ranges according to the Maslach Burnout Inventory Manual (Maslach, Jackson, & Leiter, 1996). Table 7 summarizes means of the range for each dimension of burnout.

Table 4.

<table>
<thead>
<tr>
<th>Norms</th>
<th>$\chi^2$</th>
<th>df</th>
<th>$p$</th>
</tr>
</thead>
<tbody>
<tr>
<td>EE Overall</td>
<td>1.79</td>
<td>1</td>
<td>.181</td>
</tr>
<tr>
<td>EE Teaching</td>
<td>1.79</td>
<td>1</td>
<td>.181</td>
</tr>
<tr>
<td>EE Mental Health</td>
<td>30.64</td>
<td>1</td>
<td>.000*</td>
</tr>
<tr>
<td>DP Overall</td>
<td>115.63</td>
<td>1</td>
<td>.000*</td>
</tr>
<tr>
<td>DP Teaching</td>
<td>163.57</td>
<td>1</td>
<td>.000*</td>
</tr>
<tr>
<td>DP Mental Health</td>
<td>39.68</td>
<td>1</td>
<td>.000*</td>
</tr>
<tr>
<td>PA Overall</td>
<td>61.25</td>
<td>1</td>
<td>.000*</td>
</tr>
<tr>
<td>PA Teaching</td>
<td>121.17</td>
<td>1</td>
<td>.000*</td>
</tr>
<tr>
<td>PA Mental Health</td>
<td>173.48</td>
<td>1</td>
<td>.000*</td>
</tr>
</tbody>
</table>

*Note: *$p < .001.$
Table 5

Sample Distribution by Burnout Range

<table>
<thead>
<tr>
<th>Subscale</th>
<th>Low (Lower Third)</th>
<th>Average (Middle Third)</th>
<th>High (Upper Third)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Sample</td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Emotional Exhaustion</td>
<td>114 46.2%</td>
<td>84 34.0%</td>
<td>49 19.8%</td>
</tr>
<tr>
<td>Depersonalization</td>
<td>220 89.1%</td>
<td>22 8.9%</td>
<td>5 2.0%</td>
</tr>
<tr>
<td>Personal Accomplishment</td>
<td>214 86.6%</td>
<td>21 8.5%</td>
<td>12 4.9%</td>
</tr>
</tbody>
</table>

Table 6

Range of Burnout for Normative Samples

<table>
<thead>
<tr>
<th>MBf</th>
<th>Subscale</th>
<th>Low (Lower Third)</th>
<th>Average (Middle Third)</th>
<th>High (Upper Third)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Overall</td>
<td>EE ≤16 17-26</td>
<td>≥27</td>
<td></td>
</tr>
<tr>
<td></td>
<td>norms</td>
<td>DP ≤6 7-12</td>
<td>≥13</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Teaching</td>
<td>PA ≥39 38-32</td>
<td>≤31</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(K-12)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>norms</td>
<td>EE ≤16 17-26</td>
<td>≥27</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mental</td>
<td>DP ≤8 9-13</td>
<td>≤14</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Health</td>
<td>PA ≥37 36-31</td>
<td>≤30</td>
<td></td>
</tr>
<tr>
<td></td>
<td>norms</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>EE ≤13</td>
<td>14-20</td>
<td>≥21</td>
<td></td>
</tr>
<tr>
<td></td>
<td>DP ≤4</td>
<td>5-7</td>
<td>≥8</td>
<td></td>
</tr>
<tr>
<td></td>
<td>PA ≥34</td>
<td>5-7</td>
<td>≤28</td>
<td></td>
</tr>
</tbody>
</table>
Table 7

Means of Burnout in Study Sample and Normative Samples

<table>
<thead>
<tr>
<th>Sample</th>
<th>EE</th>
<th>DP</th>
<th>PA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Sample</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M</td>
<td>18.46</td>
<td>3.41</td>
<td>42.10</td>
</tr>
<tr>
<td>SD</td>
<td>9.67</td>
<td>3.56</td>
<td>5.17</td>
</tr>
<tr>
<td>Overall Norms</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M</td>
<td>20.99</td>
<td>8.73</td>
<td>34.58</td>
</tr>
<tr>
<td>SD</td>
<td>10.75</td>
<td>5.89</td>
<td>7.11</td>
</tr>
<tr>
<td>Teaching Norms</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M</td>
<td>21.25</td>
<td>11.00</td>
<td>33.54</td>
</tr>
<tr>
<td>SD</td>
<td>11.01</td>
<td>6.19</td>
<td>6.89</td>
</tr>
<tr>
<td>Mental Health Norms</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M</td>
<td>16.89</td>
<td>5.72</td>
<td>30.87</td>
</tr>
<tr>
<td>SD</td>
<td>8.90</td>
<td>4.62</td>
<td>6.37</td>
</tr>
</tbody>
</table>

*Emotional exhaustion.* As displayed in Table 5, more than half of the participants (53.8%) reported average-to-high feelings of emotional exhaustion. Comparison to overall norms indicated that 19.3% of the counselors (n = 49) reported high emotional exhaustion, 34% reported average emotional exhaustion (n = 84), and 46.2% of the counselors reported low emotional exhaustion (n = 114). As displayed in Table 7, the sample mean for emotional exhaustion was 18.46, slightly lower than the overall norm (M = 21.0) and teaching norm (M = 21.3). The sample mean was higher than the mental health norm (M = 16.9). See Table 5.

Scores were dichotomized into two groups (low burnout and average-to-high burnout). Chi square analyses revealed a significant difference in emotional exhaustion and mental health norms where the collected study sample was significantly higher than
mental health norms, suggesting greater burnout, \( \chi^2(1) = 30.6, p < .001 \). No differences were found between emotional exhaustion and overall norms and teaching norms.

*Depersonalization.* Average-to-high feelings of depersonalization were reported by 10.9% of the counselors. Two percent (\( n = 5 \)) were in the high range and 8.9% (\( n = 22 \)) were in the average range for depersonalization. Most of the counselors indicated low depersonalization (\( n = 220, 39.1\% \)). The sample mean of 3.4 was lower than overall norms (\( M = 8.7 \)), teaching norms (\( M = 11.0 \)), and mental health norms (\( M = 5.7 \)).

Chi square analyses indicated significant differences for depersonalization between average-to-high burnout and low burnout for overall norms, \( \chi^2(1) = 115.6, p < .001 \), teaching norms \( \chi^2(1) = 163.6, p < .001 \), and mental health norms \( \chi^2(1) = 39.7, p < .001 \).

*Personal accomplishment.* More than four fifths of the counselors (\( n = 214, 86.6\% \)) reported high levels of personal accomplishment, an indicator of low burnout. Only 12 participants (4.9%) reported low levels of personal accomplishment and 21 (8.5%) reported average levels. Therefore, only 13.4% responded in the average-high categories of burnout for low personal accomplishment.

Chi Square analyses revealed significant differences between average-high personal accomplishment and low personal accomplishment for overall norms \( \chi^2(1) = 61.3, p < .001 \), teaching norms \( \chi^2(1) = 121.2, p < .001 \) and mental health norms \( \chi^2(1) = 173.7, p < .001 \).

*Summary.* Overall, the collected study sample reported higher personal accomplishment and lower depersonalization than the overall norms, teaching norms, and mental health norms. There were no statistical differences between the collected sample and emotional exhaustion for overall norms and teaching norms. The collected sample reported significantly higher emotional exhaustion than mental health norms.
Table 8 and Table 9 display the regression analyses for emotional exhaustion in the total sample and the subsample according to professional identity. The regression model was not significant in the total collected study sample or in the subsample of subjects identifying themselves as school counselors rather than guidance counselors.

Table 8

*Regression Comparing Emotional Exhaustion Among Predictors*

<table>
<thead>
<tr>
<th>Model</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regression</td>
<td>285.061</td>
<td>4</td>
<td>71.265</td>
<td>759</td>
<td>.553</td>
</tr>
<tr>
<td>Residual</td>
<td>27720.242</td>
<td>242</td>
<td>93.883</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>23065.304</td>
<td>246</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 9

*Regression Among Predictors in the School Counselor Subsample*

<table>
<thead>
<tr>
<th>Model</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regression</td>
<td>1067.242</td>
<td>4</td>
<td>266.811</td>
<td>2.747</td>
<td>.032*</td>
</tr>
<tr>
<td>Residual</td>
<td>10101.198</td>
<td>104</td>
<td>97.127</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>11168.440</td>
<td>108</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Model</th>
<th>B</th>
<th>SEB</th>
<th>β</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-Efficacy</td>
<td>-8.284E-03</td>
<td>0.022</td>
<td>-0.036</td>
<td>-3.80</td>
<td>.005</td>
</tr>
<tr>
<td>Social Support</td>
<td>-8.860E-02</td>
<td>0.040</td>
<td>-0.236</td>
<td>-2.241</td>
<td>.027*</td>
</tr>
<tr>
<td>Initiatives Mode1</td>
<td>3.628E-02</td>
<td>0.015</td>
<td>0.249</td>
<td>2.379</td>
<td>.099*</td>
</tr>
<tr>
<td>Proximity to WTC</td>
<td>1.848</td>
<td>1.008</td>
<td>0.174</td>
<td>1.834</td>
<td>.070</td>
</tr>
</tbody>
</table>

*Note.* *p < .05.
Hypothesis 2

Hypothesis 2 stated that among school counselors there will be a statistically significant negative relationship between counselor self-efficacy and the burnout dimensions of emotional exhaustion, depersonalization, and reduced personal accomplishment. This hypothesis was not supported.

Hypothesis 3

Hypothesis 3 stated that among school counselors there will be a statistically significant negative relationship between social support and the burnout dimensions of emotional exhaustion, depersonalization, and reduced personal accomplishment. The hypothesis was supported.

Table 10 displays correlations between types of support (principal, supervisor, counselor, teacher) and the three dimensions of burnout. Pearson correlations were computed between social support and each dimension of burnout. There was a negative relationship between emotional exhaustion and principal support \((p < .001)\), teacher support \((p < .05)\), and support by the day-to-day counseling supervisor \((p < .001)\). Depersonalization was significantly negatively correlated with support by the day-day counseling supervision \((p < .001)\) and counselor support \((p < .01)\). Personal accomplishment was significantly positively correlated with counselor support \((p < .01)\).

As indicated in Tables 8 and 9, the regression was not significant in the total collected study sample for total social support. However, there was a significant positive relationship between high personal accomplishment (low burnout) and social support in the subsample of subjects who identified themselves as school counselors rather than guidance counselors \(F(4,104) = 2.7, p < .05\).
Table 10

Correlations of Burnout and Social Support

<table>
<thead>
<tr>
<th>Social Support</th>
<th>Emotional Exhaustion</th>
<th>Depersonalization</th>
<th>Personal Accomplishment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Principal</td>
<td>Pearson Correlation</td>
<td>-.21</td>
<td>-.12</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>.00***</td>
<td>.06</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>246</td>
<td>246</td>
</tr>
<tr>
<td>Supervisor</td>
<td>Pearson Correlation</td>
<td>-.29</td>
<td>-.23</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>.00***</td>
<td>.00***</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>234</td>
<td>234</td>
</tr>
<tr>
<td>Counselor</td>
<td>Pearson Correlation</td>
<td>-.11</td>
<td>-.18</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>.09</td>
<td>.01*</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>231</td>
<td>231</td>
</tr>
<tr>
<td>Teacher</td>
<td>Pearson Correlation</td>
<td>-.15</td>
<td>-.12</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>.02**</td>
<td>.07</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>246</td>
<td>246</td>
</tr>
</tbody>
</table>

Note. *p < .01. **p < .05. ***p < .001.
Hypothesis 4

Hypothesis 4 stated that there will be a statistically significant difference between dimensions of emotional exhaustion, depersonalization, and reduced personal accomplishment in school counselors who work in school counseling initiative programs and school counselors who do not. The hypothesis was partially supported.

Table 8 and Table 9 display the results of the regression analyses. The regression model was not significant in the total sample. However, there were significant differences in the subsample of subjects identifying themselves as school counselors rather than guidance counselors. In this subsample, participation in school counseling initiatives or program models made a small significant contribution to the prediction of burnout, $F(4, 104) = 2.7, p < .05$.

Hypothesis 5

Hypothesis 5 stated that among school counselors there will be a statistically significant positive relationship between proximity to Ground Zero and emotional exhaustion, a statistically significant negative relationship between proximity and depersonalization, and a statistically significant positive relationship between proximity and personal accomplishment. The hypothesis was not supported.

No significant differences were found in the total collected study sample or the subsample of subjects identifying themselves as school counselors rather than guidance counselors. Differences were observed, however, between the total sample and the subsample of subjects identifying themselves as school counselors rather than as guidance counselors. While the overall ANOVA was not significant, proximity to Ground Zero approached significance to the prediction of emotional exhaustion.
Supplemental Analysis of Demographic and Work Factors

As a supplementary analysis, perceived impact of September 11 and its aftermath was explored on six items on the Work Survey on a Likert scale of 1 (Not at all) to 5 (Very much so). Responses suggested that September 11 had a strong positive impact on feelings about work. The highest item mean ($M = 3.73, SD = 1.17$) was in response to the question, “As a result of September 11, have you had more positive feelings about your work?” Nearly all the subjects reported more positive feelings ($n = 239, 96.8\%$) and 84.5\% ($n = 202$) responded moderately to very much so. The lowest mean ($M = 1.34, SD = .69$) was in response to the question, “As a result of September 11, have you had more negative feelings about your work?” Fourth fifths ($n = 187, 77.9\%$) replied not at all and 10.5\% ($n = 26$) replied moderately to quite a bit. In response to the question, “Do you feel more fearful as a result of September 11?” three fourths ($n = 185, 75.5\%$) answered affirmatively with 39.2\% ($n = 90$) responding moderately to very much so.

To the question, “Did you feel prepared/trained to respond to September 11 on your job?” 31\% ($n = 73$) reported quite a bit to very much so. Nearly all subjects ($n = 234, 93.4\%$) think about September 11 now at least a little bit with over 40\% ($n = 102, 41.2\%$) reported thinking about September 11 moderately to very much so. More than 80\% reported being affected personally or professionally on the job. To the question, “Did September 11 affect you personally?” 84.1\% ($n = 206$) responded affirmatively with 54.5\% reporting moderately to very much so. Similarly, 83.3\% ($n = 200$) responded affirmatively to the question, “Did September 11 affect you professionally on the job?” with the majority ($n = 124, 51.1\%$) reporting moderately to very much so.
Significant differences were also found in several demographic variables at the $p < .001$ level. The following variables shared significant differences: job title, gender, ethnic background, relationship status, counselor training, religious identity, school setting, school level, counseling initiative involvement, and proximity to Ground Zero.

Analyses were conducted on each dimension of the Maslach Burnout Inventory-ES and certain demographic variables which the author considered for further research. School level, school setting, and professional identity were examined. The overall ANOVA was significant with a difference in depersonalization and school level, $F(2,239) = 3.2, p < .05$. Post hoc analysis using the Tukey HSD procedure revealed that elementary school counselors were significantly lower in depersonalization than high school counselors ($p < .05$). Tables 11-14 display analyses of variance, post hoc analysis, and comparisons between depersonalization and school level.

Table 11

<table>
<thead>
<tr>
<th>Source of Variance</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>476.568</td>
<td>2</td>
<td>238.284</td>
<td>2.559</td>
<td>.079</td>
</tr>
<tr>
<td>Within Groups</td>
<td>22253.829</td>
<td>239</td>
<td>93.112</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>22730.397</td>
<td>241</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Analysis of variance indicated significant differences between personal accomplishment and school geographical setting, $F(2, 228) = 3.8, p < 0.05$. Post hoc analysis using the Tukey HSD procedure revealed that rural counselors reported
significantly higher personal accomplishment than urban and suburban counselors. No significant differences in personal accomplishment were found for school levels. Tables 16-19 summarize the results for school settings.

Table 12
ANOVA for Personal Accomplishment Between School Levels

<table>
<thead>
<tr>
<th>Sources of Variance</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>57.411</td>
<td>2</td>
<td>28.705</td>
<td>1.672</td>
<td>.344</td>
</tr>
<tr>
<td>Within Groups</td>
<td>6399.007</td>
<td>239</td>
<td>26.774</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>6456.417</td>
<td>241</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 13
ANOVA for Depersonalization between School Levels With Post Hoc Analyses

<table>
<thead>
<tr>
<th>Sources of Variance</th>
<th>SS</th>
<th>df</th>
<th>Mean Square</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>80.858</td>
<td>2</td>
<td>40.429</td>
<td>3.215</td>
<td>.042*</td>
</tr>
<tr>
<td>Within Groups</td>
<td>3005.642</td>
<td>239</td>
<td>12.576</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>3086.500</td>
<td>241</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note. *p < .05

Combination | M Diff. | Std. Error | p   |
-------------|---------|------------|-----|
Elementary   | -3.317  | .7815      | .905|
Middle       |         |            |     |
High         | -1.353  *| .5154      | .040*|

Note. *p < .05
Table 14
Comparisons Between Depersonalization and School Levels

<table>
<thead>
<tr>
<th>School Level</th>
<th>School Level</th>
<th>Mean Dif.</th>
<th>Std. Error</th>
<th>p</th>
<th>95% Confidence Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elementary</td>
<td>Middle</td>
<td>-0.3317</td>
<td>782</td>
<td>.905</td>
<td>-2.1634</td>
</tr>
<tr>
<td>High</td>
<td></td>
<td>-1.2535</td>
<td>515</td>
<td>.040*</td>
<td>-2.4616</td>
</tr>
<tr>
<td>High</td>
<td></td>
<td>-0.218</td>
<td>723</td>
<td>.409</td>
<td>-2.6155</td>
</tr>
<tr>
<td>High</td>
<td>Elementary</td>
<td>1.2535</td>
<td>515</td>
<td>.040*</td>
<td>4.546E-02</td>
</tr>
<tr>
<td>High</td>
<td>Middle</td>
<td>0.9218</td>
<td>723</td>
<td>.09</td>
<td>7.719</td>
</tr>
</tbody>
</table>

Note. *p < .05.

Table 15
ANOVA for Emotional Exhaustion Between School Settings

<table>
<thead>
<tr>
<th>Sources of Variance</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>325.068</td>
<td>2</td>
<td>162.534</td>
<td>1.714</td>
<td>.182</td>
</tr>
<tr>
<td>Within Groups</td>
<td>21622.205</td>
<td>228</td>
<td>94.834</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>21947.273</td>
<td>230</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 16
ANOVA for Depersonalization Between School Settings

<table>
<thead>
<tr>
<th>Sources of Variance</th>
<th>SS</th>
<th>df</th>
<th>Mean Square</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>66.043</td>
<td>2</td>
<td>33.022</td>
<td>2.530</td>
<td>.082</td>
</tr>
<tr>
<td>Within Groups</td>
<td>2975.705</td>
<td>228</td>
<td>13.051</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>3041.749</td>
<td>230</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note. *p < .05.
Table 17

ANOVA for Personal Accomplishment Between School Settings

<table>
<thead>
<tr>
<th>Sources of Variance</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>202.980</td>
<td>2</td>
<td>101.490</td>
<td>3.791</td>
<td>.024*</td>
</tr>
<tr>
<td>Within Groups</td>
<td>6103.669</td>
<td>228</td>
<td>26.770</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>6306.649</td>
<td>241</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note. *p < .05.

Table 18

Comparisons Between Personal Accomplishment and School Settings:

<table>
<thead>
<tr>
<th>School Setting</th>
<th>School Setting</th>
<th>Mean Diff.</th>
<th>Std. Error</th>
<th>p</th>
<th>Lower Bound</th>
<th>Upper Bound</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural</td>
<td>Suburban</td>
<td>3.7017</td>
<td>1.445</td>
<td>.028*</td>
<td>.3157</td>
<td>7.0876</td>
</tr>
<tr>
<td>Rural</td>
<td>Urban</td>
<td>4.1585</td>
<td>1.527</td>
<td>.018*</td>
<td>.5806</td>
<td>7.7363</td>
</tr>
<tr>
<td>Suburban</td>
<td>Urban</td>
<td>-4.568</td>
<td>.770</td>
<td>.018*</td>
<td>-1.3494</td>
<td>2.2620</td>
</tr>
<tr>
<td>Urban</td>
<td>Rural</td>
<td>-4.1585</td>
<td>1.527</td>
<td>.018*</td>
<td>-2.2620</td>
<td>1.3484</td>
</tr>
<tr>
<td>Urban</td>
<td>Suburban</td>
<td>-4.568</td>
<td>.770</td>
<td>.018*</td>
<td>-5.806</td>
<td></td>
</tr>
</tbody>
</table>

Note. *p < .05.

Table 19 displays means for professional identity and burnout and Table 20 displays analyses of variance. Subjects describing themselves as counselors working in schools reported lower emotional exhaustion and depersonalization and higher personal accomplishment. Analysis of variance indicated significant differences for professional identity and personal accomplishment, $F(2, 228) = 3.8$, $p < .024$. 

Table 19

*Comparison of Burnout Means According to Professional Identity*

<table>
<thead>
<tr>
<th>Professional Identity</th>
<th>EE</th>
<th>DP</th>
<th>PA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counselor Working in a School Setting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>M</em></td>
<td>18.18</td>
<td>3.30</td>
<td>42.49</td>
</tr>
<tr>
<td><em>SD</em></td>
<td>9.72</td>
<td>3.45</td>
<td>4.94</td>
</tr>
<tr>
<td>Educator Using Counseling Skills</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>M</em></td>
<td>18.98</td>
<td>3.91</td>
<td>40.44</td>
</tr>
<tr>
<td><em>SD</em></td>
<td>9.56</td>
<td>4.19</td>
<td>5.96</td>
</tr>
</tbody>
</table>

Table 20

*ANOVA for Personal Accomplishment Between Professional Identities*

<table>
<thead>
<tr>
<th>Sources of Variance</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>152.251</td>
<td>1</td>
<td>152.251</td>
<td>5.746</td>
<td>.017*</td>
</tr>
<tr>
<td>Within Groups</td>
<td>6253.329</td>
<td>236</td>
<td>26.497</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>6405.580</td>
<td>237</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note. *p < .05.

Summary of Findings

1. Subjects in the study demonstrated average emotional exhaustion, low depersonalization, and high personal accomplishment (low burnout), compared to overall MBI norms. Nearly 20% of the participants reported high emotional exhaustion and 34% reported average emotional exhaustion. Nearly 90% reported low depersonalization and high personal accomplishment.
2. There were no significant differences between emotional exhaustion and overall norms.

3. Significant differences were found between high personal accomplishment (low burnout) and low-to-average personal accomplishment (higher burnout) for overall norms.

4. There were significant differences between low depersonalization (low burnout) and average-to-high depersonalization (higher burnout) for overall norms.

5. Self-efficacy did not make a significant contribution to the prediction of burnout.

6. Principal support, supervisor support, and teacher support were significantly related to lower emotional exhaustion. Counselor support and supervisor support were significantly related to higher personal accomplishment (lower burnout). In the subsample of subjects identifying themselves as school counselors rather than as guidance counselors, total social support was related to lower emotional exhaustion.

7. In the subsample of subjects identifying themselves as school counselors rather than as guidance counselors, involvement in school counseling initiatives predicted higher emotional exhaustion.
8. School proximity to Ground Zero did not make a significant contribution to the prediction of burnout in the total sample. In the subsample of subjects identifying themselves as school counselors rather than guidance counselors, proximity approached significance for emotional exhaustion. In a supplemental study, nearly all the counselors reported that they had more positive feelings about their work as a result of September 11. Nearly all think about September 11 now, and three fourths feel more fearful as a result of September 11.

9. In a supplemental study, burnout was significantly related to school setting, school level, and professional identity. Rural counselors reported significantly higher personal accomplishment (lower burnout) than suburban and urban counselors. Elementary counselors reported significantly lower depersonalization than high school counselors. Subjects describing themselves as counselors working in schools felt significantly higher personal accomplishment than subjects describing themselves as educators using counseling skills.
School counseling is a counseling specialty in transition. National and state school counseling initiatives have begun to develop standards and consistent roles for school counselors. However, until school counselors achieve the level of professional standards and expectations of other professionals like school social workers and school psychologists, they will continue to deal with the strain of conflicting and ambiguous roles, high demands, and little autonomy over their jobs. Although considerable research has been conducted on burnout in teachers and other human service workers, little attention has been given to school counselors. The literature that focuses on burnout in school counselors has been primarily anecdotal and qualitative. Only a few quantitative studies have investigated the dimensions of burnout and its correlates in school counselors. Further, to this author's knowledge, no study has empirically examined the relationship of burnout in school counselors after September 11 to a cluster of factors that have been shown to predict lower burnout in other human services professions, specifically social support, self-efficacy, and role breadth self-efficacy.

The current focus of national school counseling initiatives has been on developing comprehensive developmental school counseling standards and programs. During this period of transforming traditional guidance programs into school counseling systems that emphasize a counseling curriculum to teach skills, the counselor's role has also been transformed by the dramatic impact of school shootings and terrorist attacks. The counselor is one of a few mental health professionals in the school, and, at times, the
only professional, available to respond to the crises and tragedies that affect students, families, and teachers. Of particular concern is the ongoing impact of September 11 on school counselors. Although there is a growing body of literature on the short-term and long-term effects of September 11 on human service professionals and on the public, to the author's knowledge, no study has examined the effects of September 11 on burnout in school counselors who work in close proximity to New York City. This chapter provides a summary, discussion, and integration of the results into the literature, the limitations of the study, and recommendations. Results and recommendations from the current study will be helpful in improving burnout prevention and intervention programs for school counselors.

Summary

In this study, 247 school counselors employed in New Jersey schools completed the Maslach Burnout Inventory (Maslach, Jackson, & Schwab, 1996), the Counselor Self-Efficacy Scale (Sutton & Fall, 1995), a demographic survey, and a work survey. Descriptive statistics were calculated, and regression and correlation analyses conducted. Three fourths of the sample subjects were female, and the majority worked in suburban high schools. More than half were employed within 50 miles of the World Trade Center site, and one tenth worked within 10 miles of the site. The mean counselor caseload was 335 students. Slightly more than half identified their job title as a school counselor rather than as a guidance counselor. More than three fourths described their professional identity as a counselor working in an educational setting rather than an educator using counseling skills. More than one half were 50 years of age or older and three fourths of
the counselors were Caucasian. The majority of the counselors (58.3%) reported that their schools followed or used a school counseling initiative or program model, and slightly more than one fourth (28.3%) indicated that they did not follow an initiative or program model. Burnout was reported on three distinct subscale scores of the Maslach Burnout Inventory (Maslach, Jackson, & Schwab, 1996). Several anticipated results were realized in this study concerning the levels of burnout for each dimension and their correlations with social support and involvement in school counseling initiatives. The lack of significance in the relationship between burnout and self-efficacy and burnout and proximity to Ground Zero as not anticipated.

Comparison of Burnout Levels in Study Sample and Overall Norms

Participants experienced average emotional exhaustion, low depersonalization, and high personal accomplishment (low burnout). There were no significant differences between average-to-high emotional exhaustion and low emotional exhaustion for both overall norms and teaching norms. Thus hypothesis 1 was supported. The significant difference between average-to-high emotional exhaustion and low emotional exhaustion for mental health norms was anticipated. The mental health normative sample was composed of agency and private practice professionals and agency professionals who consistently reported lower burnout than those employed in school settings. Subjects in this sample generally work with one client per hour and receive regular individual and group supervision by qualified professionals. Further, mental health professionals working in private practice settings consistently reported lower burnout than those in agency or institutional settings (Ackerly et al., 1988). Counselors and teachers experience
greater student contact than mental health practitioners, and school counselors have large caseloads of several hundred students.

Significant differences between average-to-high depersonalization and low depersonalization were expected for overall norms, teaching norms, and mental health norms. The size of differences between the study sample and teaching norms however was not anticipated. Although teachers and school counselors work in the same environmental setting with the same students, there are major differences in role and function that affect job stress and burnout. Differences may also reflect the increased role ambiguity and role confusion of the school counselor’s role, the intensity of student problems addressed, the one-sided nature of the therapeutic relationship, or the effect of vicarious traumatization on counselors.

The level of personal accomplishment in this study was similar to levels in two school counselor studies described in chapter 2 (Stickel, 1988; Ward-Allen, 2002). Levels of emotional exhaustion and depersonalization for the study sample were slightly lower than levels of the two aforementioned studies. Several factors may have affected these differences including sample size, school location, school level, number of counselors in a school, impact of national or local crises, and timing of the completion of the surveys. For example, Stickel surveyed counselors in three western states who worked as the only counselor in a rural school. However, Ward-Allen studied nearly all of the counselors employed in a suburban county district in Maryland, and her sample was distributed evenly among the three school levels, elementary, middle, and high school. In comparison, although the New Jersey collected study sample was composed of
counselors at all three levels, it was primarily composed of suburban high school counselors.

Slightly more school counselors reported low emotional exhaustion in the New Jersey study sample (46.2%) than the Maryland sample (37.7%). While nearly one fifth (19.8%) of the New Jersey school counselors reported high emotional exhaustion (19.8%), nearly two fifths (38.7%) of the Maryland counselors were in the high range. Differences in year of study (2002 vs. 2004), time of year (October vs. January to March), region (suburban vs. urban, suburban vs. rural) and other district factors may have contributed to the difference in the percentage of high emotional exhaustion.

Further, Maryland counselors completed the study together during an in-service day. This type of administration may have influenced their level of self-reported emotional exhaustion. Low de-personalization levels were nearly equal (New Jersey study sample, 84.9%; Maryland sample, 84.94%). Although very few fell in the high de-personalization range, fewer counselors reported high de-personalization in New Jersey (2.0%) than in Maryland (5.1%).

Levels of personal accomplishment (low burnout) were nearly equal in both studies (New Jersey study sample: high, 86.6%; average-to-low, 13.4%; Maryland sample: high, 86.02%; average-to-low, 14%). In the New Jersey study sample, the percentage of counselors with low personal accomplishment (high burnout) (4.9%) was slightly higher than in the Maryland sample (2.15%). Although this percentage is still very low, the long-term impact of September 11, the war in Iraq, and ongoing terrorist threats may have been influential. The New Jersey sample was composed of counselors
in urban, rural, and suburban areas rather than only suburban areas. Thus there could be a wider range of student problem, resources, and size of caseload.

The investigator found significant differences between high personal accomplishment (low burnout) and low personal accomplishment (high burnout) between the study sample overall norms, teaching norms, and mental health norms. Counselors in the study sample with high levels of emotional exhaustion also reported high levels of personal accomplishment, a paradoxical effect found in studies of mental health counselors, school counselors, and psychologists (Ackerman et al., 1988; Cherniss, 1980a; Ward-Allen, 2002; Wolpin, Burk, & Greenleaf, 1991). In their study of New York City metropolitan area psychologists after September 11, Eidelson et al. (2003) suggested increased job satisfaction and positive feelings could be an effect of feeling satisfied in being able to help in a professional way. Eidelson et al. concluded that “many psychologists greeted the new professional challenges with energy and dedication that enhanced their sense of purpose and that perhaps enabled them to respond resolutely during a period of heightened stress” (p. 150).

The Relationship between Burnout and Self-Efficacy

Although self-efficacy has been correlated with lower job stress, self-mastery, and higher autonomy (Bandura, 1986; Hobfoll, 2002), this study did not find a significant relationship between self-efficacy and burnout. Low self-efficacy may be more related to short-term stress of job dissatisfaction than burnout, a long-term process. Self-efficacy may also be affected by the level of counseling experience, training and established professional standards. Cherniss (1980b) found that the lack of experience in novice
counselors led to lower self-efficacy and ultimately burnout, but more experienced participants demonstrated greater confidence in their ability to perform counseling duties. In the study sample, subjects reported an average of 12.8 years of counseling experience with a range of 1½ to 39 years. Sutton and Fall (1995) developed The Counselor Self-Efficacy Scale (SES) prior to the national dissemination of the ASCA model. School counselors who participated in the current study could be participating at a higher collaborative level, thus interpreting or rating the items of the assessment instrument differently. Further, new school counseling certification requirements that emphasize CACREP (2001) core counseling standards rather than traditional guidance or clerical tasks may have positively influenced school counselor beliefs regarding their professional role.

The Relationship between Burnout and Social Support

The results of this study indicate the importance of social support in reducing or buffering school counselor burnout. Counselor support was significantly correlated with low de-personalization and high personal accomplishment. Support by the day-to-day supervisor was correlated with low emotional exhaustion and de-personalization, and principal support and teacher support were correlated with low emotional exhaustion. Thus, the kind of support is differential related to the three dimensions of burnout. The results suggest that administrative or supervisory support is important in the amelioration or prevention of emotional exhaustion, while peer support affects personal satisfaction. O'Connor (2002) found that high school counselors preferred support and affirmation as professionals more than personal support from their administrators. School counselors.
however, often receive little or no clinical supervision by a trained counseling professional. More than one third (37%) of the subjects identified their principal, and slightly more than one half (53.4%) cited their counseling supervisor or guidance director as their day-to-day supervisor.

The Relationship between Burnout and Involvement in School Counseling Initiatives

Yilik Downer (2000) suggested that the degree of counselor participation was positively related to perceived importance of comprehensive school counseling programs. Involvement in school counseling initiatives predicted significantly higher emotional exhaustion for those identifying themselves as school counselors rather than guidance counselors. The positive stress of developing effective programs as well as the negative stress experienced in the beginning stages of change may lead to higher emotional exhaustion.

While most school counselors deal with enormous job strain, few counselors reported high levels of burnout in all three dimensions of emotional exhaustion, depersonalization, and reduced personal accomplishment. Counselors with low burnout may use different coping strategies to deal with stressful events in the work environment. For example, Hobfoll (2002) found that using resource reservoirs of social support, self-efficacy, and satisfaction in attainment of goals effectively reduced or buffered burnout.

In this study, role-breath self-efficacy was operationalized as involvement in a school counseling initiative that utilizes work redesign, collaboration and job empowerment strategies. Skovholt (2001) identified the school counseling movement as a successful grassroots work-design initiative to reduce burnout. The New Jersey
Developmental School Counseling Initiative, begun in 1990, has improved the role and status of school counselors. The impact of this grass roots job empowerment initiative was evident in the current sample in which a majority of the subjects reported participation in an initiative model.

Yillik Downer (2000) found that counselors working in the initial stage of change to comprehensive developmental school counseling programs were significantly affected by the stresses of the change process, specifically, collaborative and task concerns of early stages. These stressors may account for the positive direction of the relationship. Written comments from subjects suggest that the process of changing to a comprehensive developmental program was rewarding, but it created additional work and stress.

Written comments regarding Work Survey items on initiatives suggested a lack of understanding of the national school counseling initiative movement by some subjects. More than one tenth (13.3%) of the sample did not respond to the item asking for involvement in school counseling initiative models. This group may not be familiar with school counseling initiative or their school's involvement in a model program. Perhaps counselors with higher burnout were not involved in professional developmental activities or professional associations that disseminate information on school counseling initiatives.

**The Relationship between Burnout and Proximity to Ground Zero**

The lack of significance between burnout and proximity to Ground Zero in the total sample was not anticipated. The majority of the study sample worked within 50 miles of the former site of the World Trade Center and reported higher emotional
exhaustion than those working beyond 50 miles of the site. However, the regression approached significance in the subsample of subjects identifying themselves as school counselors.

Although the tragedies of September 11 occurred more than 2 years before the study, results of the supplemental investigation suggested that September 11 continues to affect counselors strongly. Since burnout is a slowly developing process, there may be a buffering effect between the immediate effects and the long-term impact of September 11. With the increased threat of terrorist attacks in the United State, the impact of the Iraq war, and the ongoing conflict in Afghanistan, and the impact of secondary traumatic stress and PTSD, counselors may be at higher risk for burnout than they were prior to September 11. Eidelson et al. (2003) concluded that "the impact of September 11 was quite pervasive" (p. 146).

As a result of September 11 ($M = 2.27$) increased positive feelings about their work in the total study sample were nearly equal to that of psychologists in a 10-mile radius of Ground Zero ($M = 2.23$). Increased negative feelings about work in the study sample ($M = 1.33$) were also nearly equal to psychologists working in a 10-mile radius ($M = 1.57$). Counselors were slightly more afraid ($M = 2.30$) than psychologists in the 10-mile radius of Ground Zero ($M = 2.24$). Further, counselors in the study sample felt more unprepared ($M = 3.03$) than psychologists working in a 10-mile radius of Ground Zero ($M = 2.19$). More than 2 years later, school counselors across the state reported that their lives were more affected professionally ($M = 2.67$) than psychologists who worked within a limited 10-mile radius shortly after the attacks ($M = 2.55$).
Supplemental Analysis of Demographic and Work Factors

Supplemental analyses found significant differences between burnout in school levels, school settings, professional identity, and job title. Rural counselors reported significantly higher personal accomplishment than suburban or urban counselors.

Elementary counselors experienced significantly lower depersonalization than high school counselors who may be overwhelmed by cyclical tasks such as scheduling, college applications, testing, and individual planning tasks. High school student problems are also more intense and stressful including alcohol and drug issues, fighting, auto accidents, adolescent peer relationships, dating and sexual problems. The elementary counselor has more control over planning with increased time for group counseling and developmental counseling activities that are less stressful and more satisfying. Further, elementary counselors do not deal with the enormous record-keeping functions of high school counselors since elementary school students do not have credits, course requirements, grade point averages, or rank (Coll & Freeman, 1997; DeMato, 2001; Hardesty & Dillard, 1994; Kirk, 1988; Miller, 1989; Morse & Russell, 1988; B. Murray, 1995; Sears, 1993).

With formal operational thought, egocentricity, and social and political awareness of adolescents, many high school counselors were deeply involved in crisis counseling and long term response to September 11 and its aftermath. Subjects describing themselves as counselors working in schools reported lower emotional exhaustion and depersonalization and higher personal accomplishment rather than those identifying themselves as educators using counseling skills. This result may be related to the
satisfaction of the counselor role, the increased emphasis on counseling and the national school counseling initiative movement.

Positive effects of this stronger counselor role identity were found in the results of the demographic survey. More than three fourths (78.1%) of the participants described their professional identity as a counselor working in a school setting rather than an educator using counseling skills. Significant differences were found between the subsample of subjects identifying themselves as school counselors and those as guidance counselors. Results of this study and supplemental analyses suggest that national and state movements and improved state certification requirements increased counselor personal accomplishment. Further research is needed to identify direct or buffering effects of perceptions of professional identity.

Limitations

Although the Maslach Burnout Inventory—Educators Survey (Maslach, Jackson, & Schwab, 1996) is the generally accepted assessment for burnout, other instruments provide a unidimensional measure of burnout or may assess different dimensions of burnout. Two school counselor studies utilized the Semantic Differential method. This instrument provides a more subjective or perceived report of burnout based upon adjective pairs. However, it does not report extensive normative data that is provided in the Maslach Burnout Inventory Manual (Maslach, Jackson, & Leiter, 1996).

The surveys were completed during the winter of 2004. School counselors may have responded differently at the beginning or end of the year when the levels of stress
are frequently higher. This study did not investigate the developmental stages of burnout or measure burnout at different points in the progression. Other factors affecting burnout such as perfectionism, havénness, depression, helplessness, or coping style were beyond the scope of this study.

Subjects may have responded in a socially appropriate way to items that measure depersonalization on the Maslach Burnout Inventory (Maslach, Jackson, & Schwab, 1996) that suggest that counselors are detached or judgmental about their students. Although the procedures assured anonymity, they limited the investigator's control over the testing process. Written comments indicated that a small number of counselors were confused by the vocabulary regarding school counseling models.

The results of this study may differ with a larger randomized sample of New Jersey counselors or counselors from other states. The ability to generalize the results to counselors in other locations may be limited. Counselors who did not respond to the solicitation may have done so because of higher levels of emotional exhaustion or depersonalization. Also, counselors who responded may have been more involved in professional school counselor associations or initiatives with opportunities for discussion, social networks, and professional development that could reduce burnout.

Although written comments indicated that some subjects appreciated the opportunity to respond to items about September 11, others may have chosen not to respond as a result of their experiences with September 11 or their level of stress or burnout. Eidelson et al. (2003) questioned whether psychologists who chose to return surveys were more affected or less affected by September 11 than those who chose not to
respond. Levels of burnout may have been different prior to September 11. The ability to compare burnout levels prior to September 11 was affected by the limited research.

Using geographic proximity of the school to the site of the World Trade Center as a variable this definition may not have adequately accounted for the relationship to or the effect of the events of September 11 on burnout. Role-breadth self-efficacy was operationalized as involvement in school counseling initiatives or program models. This variable may not adequately represent the developmental stages of the initiative or the stressors of the beginning stage of change from traditional services to a comprehensive developmental program. Further, the limited quantitative research on school counselor roles, stressors, and burnout limited the investigator’s ability to compare data.

**Recommendations**

Results of this study suggest both similarities and differences in levels of burnout between school counselors and other human services professions. The majority of the subjects reported experiencing average or high emotional exhaustion, generally accepted as the first step in the development of burnout. However, the majority also reported very high levels of personal accomplishment. High levels of personal accomplishment accompanied by average-to-high emotional exhaustion are a paradox in mental health professionals particularly after the terrorist attacks on September 11. One subject in the current study working the eligibility age for retirement commented, “If I didn’t love working with my students, I couldn’t deal with the exhaustion of the job.” Future research is needed to identify the personal, interpersonal and environmental resources
that buffer the effects of emotional exhaustion and help school counselors maintain higher levels of personal accomplishment about their work.

The three-dimensional construct, specifically the depersonalization dimension, may not adequately describe burnout experienced by school counselors. Other instruments may be more relevant such as Semantic Differential Scales. With high levels of personal accomplishment reported in the sample study, the construct of compassion fatigue, assessed by the Compassion Satisfaction and Fatigue Test (Stamm & Figley, 1996), may provide a more appropriate measure. Although the constructs of compassion fatigue and compassion satisfaction (Figley, 1995; Gentry, 2002) were not assessed in this study, burnout is one component of compassion fatigue. Thus, they may be relevant variables for study in future school counselor research especially with the continuing impact of September 11 and terrorist threats.

In recent years, school counseling has made dramatic progress as a developing profession. The ASCA standards and national and state school counseling initiatives have provided catalysts for the professionalization of school counseling. Sweeping revisions in the New Jersey Department of Education requirements for certification, mandate that counselors complete a strong counseling core that complies with CACREP standards. Thus, new counselors may be better trained to deal with stressful events that lead to burnout. The requirement that approved programs meet professional CACREP standards for school counseling will help maintain the focus on counseling rather than clerical and non-counseling duties.

Counselors need to orient teachers, supervisors, principals, superintendents and board members to the need for and benefits of comprehensive school counseling
programs. Further, counselors, parents, and principals need to collaborate to advocate for policies that sanction the role of professional school counselors to do the work they are trained to provide. Otherwise, clerical and other non-counseling tasks assigned to counselors could be filled by teaching and non-professional staff without specialized counseling preparation. Administrative and faculty support and understanding are vital to reducing factors in schools that promote emotional exhaustion, depersonalization and reduced personal accomplishment. Further, school counselors need to provide evidence of the effectiveness of their counseling programs to advocate for increased time and support for comprehensive developmental programs. Although counselors who are overwhelmed by non-counseling tasks have little time for vital needs assessments and program evaluation, these functions provide the evidence for promoting their professional role. With the NJDOE requirements for CACREP standards for school counselor preparation, new counselors will complete 48 credits including a core of counseling skills and a 600 hour internship. Supervisors of school counselors also need to be clinically trained to provide counseling supervision. Counselors and professional associations such as the New Jersey Counseling Association, the New Jersey School Counselor Association, and the New Jersey Association for College Admission Counseling should advocate for school counseling supervision from qualified counseling professionals rather than administrators. Regular time for individual and group supervision is a strong priority, although peer supervision models and group supervision programs by counselor educators and county counselor associations can be used to assist school counselors without adequate supervision. Elementary, middle, and high school counselor support groups in New Jersey counties have worked to fill the need for group supervision. Further
research is needed to identify the characteristics of effective support and supervision models that serve to reduce or buffer burnout in school counselors.

Assessment instruments should be designed to measure social support of school counselors, a strong correlate to reduced burnout. The Counseling Assessment Questionnaire (O'Connor, 2000) is a promising new instrument that can be used in future comparative studies to increase knowledge about levels and types of administrative support for school counselors. Burnout assessment tools modeled on the Psychologists' Burnout Inventory should be designed specifically for school counselor stressors. Further study is needed to determine if the most stressful problems and events affecting school counselors, like other mental health professionals, are those that occur least frequently rather than on a daily basis such as suicide, accidental death, abuse, and violent attacks.

A more comprehensive picture of burnout in school counselors at the school, district, region, and state levels is needed. Comparative research across New Jersey cities, and other states and geographical regions should be conducted. Specific district and school environmental factors may have an important impact including size, school climate, leadership style of the principal and counseling supervisor, local student needs, administrative and community support, and level of autonomy and decision-making. District-wide studies can be conducted during in-service programs and county and state professional development meetings to increase the number of responses. In a study of school counselors in Anne Arundel County in Virginia, Ward-Allen (2002) obtained a very high response rate after soliciting subjects during an in-service program for school counselors. Written comments by subjects in this study sample provided suggestions to include the study on professional development days when school is closed and counselors
are not inundated with student appointments and crises. After the current study was completed, 42 additional surveys were received near or after the end of the school year, 3 months after the study was completed. As one counselor wrote, "Sorry, I couldn’t get to this until school ended. I wish I had completed it earlier, but there is never any time. I didn’t realize how burned out I was."

This study provided a profile of burnout in school counselors in New Jersey, a state seriously affected by the attacks on the World Trade Center and ongoing terrorist threats. Despite emotional exhaustion, school counselors continued to demonstrate high levels of personal accomplishment. Results of the supplementary study suggest that subjects were strongly affected by the attacks on the World Trade Center and continue to be impacted more than 2 years after the events. Terrorist threats and uncertainties impact school counselors on a daily basis, especially those working close to potential targets such as the George Washington Bridge, the Lincoln and Holland Tunnels, Wall Street, Port of Elizabeth, and Newark International Airport. Only two studies were found that assessed school counselor response or effects (Auger et al., 2004; Mascari, 2002). Counselor written comments in this study indicated they had no time to document or evaluate their responses. Research models are needed to help counselors assess the effects of September 11, terrorist threats and the Iraq war in New Jersey as well as in states farther from New York City. Counselors educators can assist school counselors with training and preparation to conduct studies and collect data. Edelson et al. (2003) concluded that such studies "are potentially critical for more effectively supporting and preparing mental health workers as this country faces the prospect of future disasters" (p.
While studying the effects of preparing to respond to potential future terrorist attacks may seem distasteful, it is warranted.

Until the school counseling profession crystallizes roles and expectations, school counselors will continue to deal with enormous job stressors. Although self-efficacy was not a significant predictor of low burnout in this study, other studies can be replicated that found a significant relationship between burnout and role ambiguity and role confusion. Results of this study showed that although counselors at all school levels experienced moderate to high levels of emotional exhaustion, high school counselors experienced the highest levels of emotional exhaustion and thus were the most at risk for burnout. Further research is needed to investigate and compare factors at each level in order to design appropriate burnout prevention and intervention programs particularly for high school counselors. One high school counselor wrote, "My students keep me going or I would self-destruct with all the paperwork and assignments that have nothing to do with counseling."

The School Counseling Initiative in New Jersey and the New Jersey School Counselor Association have advocated for school counseling enhancement and change for the past 15 years. The certification title revision from student personnel services to school counselor and the increase in required counseling preparation underscore the importance and effectiveness of school counseling. It is critical that school counselors and professional associations advocate for state and district support in the development of appropriate school expectations and counselor job descriptions. The SCIs should vigorously continue its work to promote the greenhouse effect of work initiatives in New Jersey (Skovholt, 2001).
Burnout is a serious problem for school counselors who experience overwhelming caseloads, job demands, and role conflict. Although their role may not be clearly understood or appreciated, school counselors shoulder enormous responsibilities as the mental health caregivers of our children in schools. Through comprehensive developmental school counseling models, school counselors have begun to address the social, emotional, and intellectual needs of students in planned, systematic preventative programs. However, counselors also respond to the most challenging mental health problems facing students—violence, suicide, drug and alcohol abuse, family dysfunction, and physical and sexual abuse. Added recently to this daunting list are societal and global crises—school shootings, terrorist attacks, and ongoing terrorist threats in a changed and fearful world. Despite emotional exhaustion and burnout, feelings of personal accomplishment and satisfaction in school counselors are extremely high. It is the hope of the author that this study will serve to strengthen the positive resources of school counselors and the school counseling initiative movement to prevent the flame from burning out.
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Appendix A

APPROVAL FOR NEW JERSEY SCHOOL

COUNSELOR ASSOCIATION MEMBERSHIP MAILING LIST
New Jersey School Counselor Association, Inc.

Sept. 15, 2003

To Whom It May Concern:

Please permit this letter to serve as an approval for Jane Webber Runte to use the New Jersey School Counselor Association membership database. This use will be for the sole purpose of sending her dissertation letter and surveys to the NJSCA membership to ask them to participate and to complete them voluntarily. Members can ask to have the results sent back to them. Materials may also be published in our publications, The NJSCA Newsletter or NJSCA Newsline and distributed to our membership at conferences and workshops.

Respectfully,

Jim Lukach
Executive Director
New Jersey School Counselor Association
Appendix B

APPROVAL FOR NEW JERSEY SCHOOL

COUNSELOR NETWORK CONFERENCE
December 10, 2003

Ms. Jane Webber
2 Mullews Lane
Bernardsville, NJ 07924

Dear Jane,

You most certainly may distribute your survey during the NJSCN Workshop/Conference on Friday, January 30, 2004, at Kean University in order to aid in the production of your dissertation. We understand that conference attendees who choose to participate will do so only voluntarily. Furthermore, we understand that results will be available for those who would like them.

Sincerely,

Phyllis H. Nutt
President-elect
Appendix C

APPROVAL FOR

EDUCATIONAL TALENT SEARCH CONFERENCE
December 15, 2003

Ms. Jane Webber
2 Mullens Lane
Bernardsville, NJ 07924

Dear Jane:

You have permission to distribute your dissertation survey at the Newark School Counselor Conference to be held on the Seton Hall University campus.

Sincerely yours,

Erwin Ponder
Associate Dean
Office of Federal TRIO Programs
Appendix D

STAFF DEVELOPMENT DAY APPROVAL

FOR CLIFTON SCHOOLS DISTRICT
December 22, 2003

Ms. Jane Webber
2 Mullens Lane
Bernardsville, NJ 07924

Dear Jane:

My counselors will be pleased to participate in your survey during the District Staff Development Day, January 21, 2004. Of course, the individual counselors will have the option to refuse participation without penalty. Collections of the submissions will be anonymous where each individual will place their completed surveys in a secure box in the back of the room. See you soon.

Sincerely,

[Signature]

J. Barry Mascari

Supervisor of Counseling and Student Services
Appendix E

MASLACH BURNOUT INVENTORY
Maslach Burnout Inventory c. 1996
Appendix F

APPROVAL FOR COUNSELOR SELF EFFICACY SCALE
April 30, 2002

Jane Webber Rante
2 Mullens Lane
Bernardsville, NJ 07924

Dear Ms. Webber Rante,

You have my permission to use the "Counselor Self Efficacy Scale" in your research.

Best wishes,

[Signature]

John M. Sutton, Jr.
Professor & Chair
Appendix G

COUNSELOR SELF EFFICACY SCALE
Counselor Self Efficacy Scale
Appendix H

DEMOGRAPHIC SURVEY
A. DEMOGRAPHIC SURVEY  Mark your responses with an X, or as indicated, or write on the line for "other".

1. Your job title
   ___ School Counselor
   ___ Guidance Counselor
   ___ Guidance Director/Supervisor
   ___ Student Assistance Counselor
   ___ Other

2. Gender  ___ M  ___ F

3. Age ______

4. Years of experience as a counselor  ______

5. Ethnic background
   ___ Hispanic/Latino  ___ White  ___ Asian
   ___ Native American  ___ African American
   ___ Middle Eastern White  ___ Other

6. Mark all professional credentials that you hold
   ___ Certified SPS  ___ LPC  ___ Emergency Certificate
   ___ Alternate Route  ___ Certified SAC  ___ NCC
   ___ Certified Dr. SPS  ___ National CSC  ___ LCSW
   ___ Certified School SW  ___ Counselor Intern
   ___ Certified School Psychologist  ___ Other

7. Relationship/Living Situation (mark all that apply)  
   ___ married  ___ life partner  ___ with a friend
   ___ alone  ___ with children

8. Highest level of your counselor training
   ___ Counselor graduate courses
   ___ Counselor Masters Degree
   ___ Counselor Doctoral Degree
   ___ Other Masters Degree
   ___ No counselor courses

9. Religious/spiritual identity
   ___ Protestant  ___ Jewish  ___ Catholic
   ___ Muslim  ___ Hindu  ___ Buddhist
   ___ Agnostic  ___ Atheist  ___ Other

10. All school descriptors that apply to your school
    ___ Rural  ___ Suburban  ___ Urban
    ___ Public  ___ Private  ___ Parochial

11. School zip code  ______

12. DFG (for public schools)  ______

13. Mark all school levels to which you are assigned
    ___ elementary  ___ middle  ___ high  ___ other

14. Number of schools in which you work  __ 1  ___ 2  ___ 3  ___ 4  ___ other

15. Your caseload ______

16. Years of teaching experience ______

17. Mark all school counseling initiatives and/or program models that your school follows or uses
   ___ NJSCC  ___ NJSSPD
   ___ Locally Developed Model  ___ ASCA model
   ___ NJ Developmental School Counseling Model
   ___ No model or program

18. Approximately how far in miles is your school from Ground Zero (the site of the World Trade Center)
    ___ 0-10  ___ 11-50  ___ 51-80  ___ 81-100  ___ more than 100

19. Mark the 2 job functions in which you spend most of your time. Rank #1 and #2 only

20. Who is your day-to-day supervisor?
    ___ Guidance Director/Supervisor  ___ Principal
    ___ Other ______

21. Which best describes your professional identity?
    ___ A counselor working in a school setting
    ___ An educator using counseling skills
    ___ Other ______

22. Mark your primary theoretical orientation
    ___ Person Centered
    ___ Existential/Transpersonal
    ___ Cognitive Behavioral
    ___ Psychodynamics/Psychoanalytic
    ___ Family Systems
    ___ Eclectic
    ___ Other ______
Appendix I

WORK SURVEY
**B. WORK SURVEY**

**PLEASE ANSWER QUESTIONS 23-42 USING THIS SCALE, THEN COMPLETE QUESTIONS 43-45.**

<table>
<thead>
<tr>
<th>(1) Not at all</th>
<th>(2) A little bit</th>
<th>(3) Moderately</th>
<th>(4) Quite a bit</th>
<th>(5) Very much so</th>
</tr>
</thead>
<tbody>
<tr>
<td>23. Are you satisfied with your current caseload?</td>
<td>21. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. Do you feel satisfied with how you spend most of your time on the job?</td>
<td>24. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. Do you have influence over important decisions about your job?</td>
<td>25. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26. Do you feel supported in your job by your principal?</td>
<td>26. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27. Do you feel supported in your job by your day-to-day counseling supervisor?</td>
<td>27. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28. Do you feel supported in your job by your counselors?</td>
<td>28. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29. Do you feel supported in your job by your teachers?</td>
<td>29. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30. Do you feel turned out in your job?</td>
<td>30. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31. Do you feel over-involved with your students?</td>
<td>31. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>32. Did 9/11 affect you personally?</td>
<td>32. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>33. Did 9/11 affect you professionally in your job?</td>
<td>33. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>34. Did you feel prepared/trained to respond to 9/11 in your job?</td>
<td>34. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>35. Do you feel more fearful as a result of 9/11?</td>
<td>35. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>36. As a result of 9/11, have you had more positive feelings about your work?</td>
<td>36. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>37. As a result of 9/11, have you had more negative feelings about your work?</td>
<td>37. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>38. How often do you think about 9/11 now?</td>
<td>38. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>39. Do you follow a comprehensive school counseling program model e.g. ASCA model, NJ Developmental School Counseling Model, or a locally developed model?</td>
<td>39. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>40. Has using a school counseling program model improved your counseling?</td>
<td>40. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>41. Has using a comprehensive school counseling program model improved your job satisfaction?</td>
<td>41. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>42. Has using a comprehensive school counseling program model improved your control over your job?</td>
<td>42. 1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

43. What are your 2 greatest job stressors? 1 ____________________________________________
    2 ____________________________________________

44. What do you do to reduce job stress? ____________________________________________

45. You are invited to add comments to any responses. Please use the space below or on the back of the survey pages. *Thank you.*
Appendix J

LETTER TO POTENTIAL PARTICIPANTS
Dear Potential Participant:

I am asking school counselors in New Jersey to participate in a doctoral dissertation research project being conducted as a doctoral student in Clinical Psychology in the Department of Professional Psychology and Family Therapy at Seton Hall University. The purpose of this study is to provide increased knowledge about New Jersey school counselors and their attitudes about work, job stress, and 9-11. The results can benefit both new and experienced school counselors in New Jersey.

I ask that you take about 30 minutes to complete four short surveys. The first is a Demographic Survey which asks for background information about yourself and your work. The next three, the Work Survey, Counselor Self-Efficacy Scale, and Educator Survey are surveys about your attitudes toward school counselor work, self-efficacy, stress, and 9-11.

Completion and return of the survey packet will constitute your consent to the use of the data exclusively for the research purposes stated above. Please mail the completed survey packet in the enclosed pre-addressed envelope. If you have completed the surveys at a professional conference, you may deposit the pre-addressed envelope in the secured box labeled “SHU Completed Surveys or you can mail the envelope.

Participation in the study is completely voluntary. You are under no obligation to take a research packet, and even if you have begun the surveys and wish to stop taking the survey and participating in the study, please do so and accept my thanks for your time.

Please be assured that your anonymity will be protected in various ways. First, I ask that you do not put your name on the surveys. Second, no part of this study requires that you provide your name or other information that could reveal your identity. Third, results of this study will be reported based on group data only.

All data will be stored in a secured cabinet maintained by Jane Webber Runte. No other person outside the researcher, Jane Webber Runte and a confidential secretary/data entry clerk, will have access to this data.

If you have any questions about the research or the details of your participation, you may contact me at 908.766.7225 or NJStatestudy@gmail.com.

This project has been reviewed and approved by the Seton Hall University Institutional Review Board for Human Subjects Research. The IRB believes that the research procedures adequately safeguard the subject’s privacy, welfare, civil liberties, and rights. The Chairperson of the IRB may be reached at (973) 761-2977 or 315-6314.

I would appreciate your taking the time to complete and return the questionnaires at your earliest convenience, preferably within the next week. Thank you very much for your time and participation in this project.

Sincerely,

Jane Webber Runte
Doctoral Candidate
Department of Professional Psychology and Family Therapy

Approved

Nov 20, 2002

IHS
Seton Hall University

College of Education and Human Services
Department of Professional Psychology and Family Therapy
Tel: 973.761.9451
400 South Orange Avenue • South Orange, New Jersey 07079-0883

Approved
Confidentiality of Data
All data will be stored in a secured cabinet maintained by Jane Webber Runze, and no other person will have access to this data.

Access to Research Records
No one outside the researcher, Jane Webber Runze, and a confidential secretary/data entry clerk, will have access to this data.

Anticipated Risks
It is not expected that participation in this study will involve significant risk or discomfort. However, if you experience any distress as a result of this study, please discontinue your participation.

Anticipated Benefits
It is not expected that this study will benefit participants directly. However, through increased knowledge about school counselors in New Jersey, and their activities, this study may provide information that will be valuable to new and experienced school counselors.

Procedures to Follow if Case of Distress
As stated above, if you experience significant distress, I urge you to discuss these feelings with a counselor or a trusted friend.

Alternative Procedures
This study does not involve any clinical treatment; therefore, there are no relevant alternative procedures.

Who to Contact for Additional Information
If you have any questions regarding the research process or would like to have a copy of the results, please contact Jane Webber Runze at 908.766.7215 or at NJSCounselor@aol.com.

Video- or Audio-taping
This study does not involve video- or audio-taping.

Participant’s Informed Consent
This project has been reviewed and approved by the Seton Hall University Institutional Review Board for Human Subjects Research. The IRB believes that the research procedures adequately safeguard the subject’s privacy, welfare, civil liberties, and rights. The Chairperson of the IRB may be reached at 973.275.2914.

Your informed consent is implied by your choosing to return the study materials. Thank you very much for your time and participation in this project.

APPROVED

NOV 20 2003
THE
SETON HALL UNIVERSITY
APPENDIX K

INFORMED CONSENT TO PARTICIPATE IN RESEARCH
Informed Consent to Participate in Research

Researcher’s Affiliation
You are invited to participate in a research study addressing school counselors in New Jersey and their attitudes about work, stress, and 9-11. The research is being conducted by a doctoral student in the Department of Professional Psychology and Family Therapy, in the Seton Hall University College of Education and Human Services in fulfillment of requirements for the Ph.D. degree in clinical psychology.

Purpose and Duration of Study
The purpose of this study is to determine the demographic characteristics of school counselors working in New Jersey and their attitudes about school counselor work, job resources, burnout, and 9-11.

Procedures
I ask that you take about 30 minutes to complete four short surveys. The first is a demographic survey that asks for background information about yourself and your work setting. The next three, the Work Survey, Counselor Self-Efficacy Scale, and Educators Survey are surveys about your attitudes toward school counselor work, self-efficacy, stress, and 9-11. Please return the completed survey packet in the pre-addressed envelope. If you have completed the packet at a professional conference, you can also deposit the envelope in the secured box labeled "SHU Completed Surveys" or you can mail the pre-addressed envelope.

Voluntary Nature of Participation
Participation in the study is completely voluntary. If you decide not to participate after reviewing the study materials, you are under no obligation to continue. Further, if you begin the study and at any time you decide to discontinue your participation, you are free to do so, and please accept my thanks for your interest.

Anonymity
Please be assured that your anonymity will be protected in various ways. First, I ask that you do not put your name on the surveys. Second, no part of this study requires that you provide your name or other information that could reveal your identity. Third, results of this study will be reported based on group data only. Fourth, all data will be stored in a secured cabinet and no other person will have access to this data.

College of Education and Human Services
Department of Professional Psychology and Family Therapy
Tel: 973.561.5463
405 South Orange Avenue • South Orange, New Jersey 07079-2685

APPROVED
NOV 20 2003
SETON HALL UNIVERSITY