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The Use of Supervision to Reduce Stress in Counselors Working in Substance Abuse Treatment Centers

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THE USE OF SUPERVISION TO REDUCE STRESS IN COUNSELORS
WORKING IN SUBSTANCE ABUSE TREATMENT CENTERS

This study is a pilot study designed to investigate the use of supervision to reduce stress in therapists working in the substance abuse treatment field by surveying counselors in such an agency directly on the issues of stress and the availability of supervision. For this study, a survey questionnaire was developed utilizing information taken from the related literature.

The survey was administered to detoxification counselors and primary therapists working in a substance abuse treatment center in Bloomington, Illinois. The data from eighteen surveys was analyzed. Based on the results of this study, the following proposals for future studies were suggested: 1) Substance abuse counselors experience the most stress as a result of their relationships with their clients and whether or not they feel that they can help make a difference in their clients' lives; 2) Substance abuse counselors find non-job related stress reducers more helpful in reducing stress than job related stress reducers; and 3) Substance abuse counselors are satisfied with their supervision but want even more help through individual

supervision at work to develop those skills which will more effectively help them manage the stress that they experience.

Regarding implications for future research, future studies need to more closely examine the relationship between the use of supervision and stress reduction in counselors working in substance abuse treatment centers. Also, stress needs to be more clearly defined in future studies. Additionally, future studies may need to utilize other means of collecting data about stress, and they need to explore the proposals generated in this pilot study by studying a greater number of substance abuse counselors in order to provide representation across a greater geographical area and across gender and ethnicity variables. Finally, more intricate statistical tests need to be run on the collected data to determine the significance of the findings.

THE USE OF SUPERVISION TO REDUCE STRESS IN COUNSELORS
WORKING IN SUBSTANCE ABUSE TREATMENT CENTERS

by

Tammy L. Hirstein

A Thesis Submitted to the Faculty of the Graduate School
of Loyola University of Chicago in Partial Fulfillment
of the Requirements for the Degree of
Master of Arts

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1993

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VITA

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CHAPTER I

INTRODUCTION

The concepts of job stress and burnout have been a focus of research for many years. More recently, the use of supervision to reduce stress in the workplace has become a focus of research. In addition, researchers are just beginning to focus on factors that contribute to stress in social service professionals working in substance abuse treatment centers. Research on stress and burnout has tended to focus on correlates of burnout. In the counseling field, some correlates are related to the work setting or job itself, some are related to the counselor, and some are related to client outcomes and characteristics (Beck, 1987; Streepy, 1981). Much research has been done to explore each of these correlates.

More recently in the literature, stress factors unique to substance abuse treatment have begun to receive recognition. There is a high percentage of involuntary clients in substance abuse treatment centers, often referred to treatment facilities by the criminal justice system or a family intervention program (Brown, 1989; Rugel & Barry, 1990; Weisner, 1990). Many substance abuse

treatment clients experience a high level of denial, and treatment center staff must deal with clients with the knowledge that the entire truth is seldom available (Cordingly, Wilkinson, & Martin, 1990; McAuliffe, 1989; Rugel & Barry, 1990; Summerhill, 1990). Addiction therapists must also contend with enabling friends and family members of their clients (Weisner, 1990). Relapse is a serious problem facing the chemical dependency field, and developing intensive follow-up aftercare plans for newly discharged clients is a major concern for effective treatment program planning (Annis, 1990; Brown, 1989; Gorski, 1990; Rioux & Van Meter, 1990; Ritson, 1990; Summerhill, 1990). Finally, dealing with medical personnel's attitudes towards substance abuse clients may be stressful for substance abuse counselors (Abed & Neira-Munoz, 1990).

Research has also been conducted on the importance of supervision in the workplace. The availability of supervision for counselors may alleviate some of the stress and may help them deal more successfully with problems involved in their work (Ross, Altmaier, & Russell, 1989). Some research has shown that counselors who exhibit a higher degree of job satisfaction and a more positive attitude towards the profession also indicate that they receive adequate opportunities for discussion of

problematic cases, agency problems, and their feelings about their work (Pines & Kafry, 1978; Streepy, 1981). The use of supervision to reduce counselor stress and to help prevent burnout needs to be explored much more thoroughly.

This study is a pilot study designed to investigate more closely the use of supervision to reduce stress in therapists working in the substance abuse treatment field by surveying counselors in such agencies directly on the issues of stress and the availability of supervision. For this pilot study, a survey questionnaire was developed utilizing information taken from the related literature. The survey was designed to explore the types of stress and the amount of stress present in counselors working in substance abuse treatment centers. It was also designed to explore the extent to which supervision may aid in reducing stress and burnout in counselors in such agencies.

Because this is a pilot study, it is designed to be hypothesis-generating rather than hypothesis-confirming. The following hypothesis-generating research questions will be addressed in this study:

1. What is the nature of stress of counselors in substance abuse treatment centers?
2. What are the effects of stress on the individual?

3. How do counselors in these agencies deal with stress?
 - a. What kind of non-job related stress reduction methods are used?
 - b. What kind of opportunities are provided or encouraged by the agency which may lead to stress reduction?
4. How does supervision in particular reduce stress?

The organization of this paper will include a review of the related literature in Chapter II, an explanation of the methodology in Chapter III, an analysis of the data in Chapter IV, and a discussion of the results in Chapter V. In Chapter VI, some hypotheses will be presented which may be used as the focus for future research. Also, limitations of this study and other implications for future research will be discussed in Chapter VI.

CHAPTER II

LITERATURE REVIEW

Correlates of Counselor Burnout

Studies of counselor burnout tend to focus on correlates of burnout. Some correlates are related to the work setting or job itself; some are related to the counselor; and some are related to client outcomes and characteristics (Beck, 1987; Streepy, 1981).

Data for Beck's study (1987) was provided by counselors and clients from seventeen family service agencies representing all geographic regions in the United States and one Canadian agency. Counselors completed two burnout questionnaires and additional questions covering their personal characteristics and background, their work-related attitudes, perceptions of work stress, and steps they and their agencies had taken to reduce stress. In addition, a client-outcome questionnaire was used to assess the relationship between counselor burnout and outcomes of counseling as perceived by clients. The findings, reported in terms of correlations or means, indicate that burnout levels among family service counselors in the present sample were consistently and

significantly below the corresponding published norms. Work-stress levels in these family agencies were well below levels in related fields. On the average, family service counselors were "satisfied" with their "job as a whole." Sixty-two percent reported that they felt "challenged" during the majority of the time spent with clients; another 35 percent said that they felt "relaxed." Beck (1987) emphasized that to understand the factors conducive to burnout, its multiple correlates must be analyzed.

Streepy (1981) conducted a study in 1978 to investigate burnout among direct service providers in family service agencies. The study was designed to establish client, worker, job, and agency profiles in order to understand more fully the direct service provider and his/her work environment and the relationship between those variables and worker burnout. In her study, 138 direct service providers from twelve New Jersey family service agencies completed questionnaires designed to collect information about the degree of worker burnout and client, worker, job, and agency characteristics. Findings showed that most workers in these agencies exhibited a high degree of job satisfaction, positive attitudes toward the profession, and good agency functioning, and the majority of burnout scores indicated little or no burnout

among the direct service workers participating in the study. These results were consistent with the findings of Beck's study (1987), which also indicated that burnout levels among family service counselors were fairly low.

Correlates related to work setting or job itself

Correlates of burnout related to the work setting or job itself include: job rewards or satisfaction (Beck, 1987; Bradfield & Fones, 1985; Jayaratne & Chess, 1984; Pines & Kafry, 1978; Schuttenberg, O'Dell, & Kaczala, 1990; Steffy & Jones, 1990; Streepy, 1981), job functions (Beck, 1987; Harrison, 1980; Jayaratne & Chess, 1984), handicaps to the provision of service (Beck, 1987; Daley, 1979), job pressures (Beck, 1987; Daley, 1979; Jayaratne & Chess, 1984; Ross, Altmaier, & Russell, 1989; Steffy & Jones, 1990; Streepy, 1981), lack of support and positive feedback (Beck, 1987; Daley, 1979; McLeroy, Green, Mullen, & Foshee, 1984; Pines & Kafry, 1978; Ross, Altmaier, & Russell, 1989; Streepy, 1981), administrative style (Beck, 1987; Streepy, 1981), agency goals and policies (Beck, 1987; Streepy, 1981), case arrangements (Beck, 1987; Streepy, 1981), and physical work setting (Beck, 1987; Jayaratne & Chess, 1984).

Beck (1987) divided correlates of burnout related to the work setting into the following categories: handicaps to the provision of service, job rewards, job functions,

job pressures, lack of support and positive feedback, administrative style, agency goals and policies, case arrangements, and physical work setting. In the handicaps to the provision of service category, Beck's study showed positive correlations between burnout and the following correlates: difficulties in providing clients with as much help as they needed, handicapping agency policies or rules, productivity pressures, perceived need for more skill or knowledge, growing waiting lists, pressure to change treatment methods, and excessive paperwork. In the job rewards category, positive correlations were found between burnout and the following correlates: dissatisfaction with salary, hours of work, lack of promotional opportunities, dissatisfaction with job security, and dissatisfaction with fringe benefits. In the job functions category, components with positive correlations to burnout include: dissatisfaction with the significance of work, dissatisfaction with level of job autonomy, and dissatisfaction with responsibility level. Job pressure components with positive correlations to burnout include: dissatisfaction with the level of job pressure, with size of caseload, and with amount of overtime. Lack of support components include: lack of support from executives, lack of support from supervisors, lack of support from support staff, lack of support from

other administrative staff, and lack of support from colleagues. Of the various types of support, the most critical dimensions were lack of technical support, lack of emotional support, lack of listening, infrequent sharing of views on social realities, lack of technical challenge, lack of emotional challenge, and low positive feedback from supervisors, clients, and colleagues. Administrative style components include: dissatisfaction with work pressure, with task orientation, with lack of staff support, with lack of innovation, and with excess rules and regulations for control. Components in the agency goals and policies category include: desire for greater staff input on policies and procedures; desire for improved, clearer, and more consistent agency policies and procedures, desire for more equity in their application, desire for better management-staff communication and cooperation, and desire for more staff autonomy. In the case arrangements category, those counselors whose caseloads included a substantial proportion of cases with major social problems, such as crime, delinquency, chemical abuse, mental illness, retardation, etc., exhibited higher burnout levels than counselors with fewer such cases. Finally, physical work setting components which correlate positively with burnout include: temperature extremes, noise, unattractive decor,

inadequate space, office location, lack of privacy, uncomfortable furniture, poor lighting, lack of needed equipment, excessive travel, parking problems, safety risks during evening hours, and isolation from colleagues due to working in outposts.

Bradfield and Fones (1985) conducted a study to investigate whether or not there is a connection between the level of stress experienced by special education teachers and the extent to which they experience job satisfaction. They also examined whether or not these teachers engage in any specific behaviors that are related to lowered stress levels and that could be considered aids in coping with stress. They asked 60 special education teachers in three school districts in Northern California to complete stress scales, a social readjustment scale, a health status questionnaire, and an exercise questionnaire. Results indicated that teachers who rated their levels of job satisfaction higher scored much lower on the stress scales. The teachers who scored lower on the stress scales held more positive attitudes toward their work. These findings are consistent with those reported by Beck (1987) involving counselors and with those reported by Streepy (1981) involving social workers.

Jayarathne and Chess (1984) conducted a national study which explored job satisfaction, burnout, and

turnover among social workers working in child welfare agencies, community mental health centers, and family service agencies. The study measured stress variables such as role ambiguity, role conflict, work load, and value conflict. It also measured physical comfort, challenge, financial rewards, and promotional opportunities as indicators of organizational climate. Analyses were based on data collected from a national survey of the National Association of Social Workers membership in 1981. Results indicated that all three groups reported a high level of job satisfaction, although a large number of individuals stated that they planned to seek new employment. Family service workers reported a relatively stress-free, comfortable, and challenging work context, while child welfare workers reported a work situation that was comparatively stressful, uncomfortable, and nonchallenging. The survey data clearly indicated that child welfare workers are under greater stress than their colleagues. The best predictor of job satisfaction for all three settings appeared to be promotional opportunities, and financial rewards emerged as the only significant predictor of intent to change jobs.

In Streepy's study (1981), participants responded to questions concerning characteristics of their present jobs as well as agency characteristics. The only variable

associated with job characteristics that was found to be related to burnout was the degree of difficulty workers experienced in delivering services to clients, which appeared to be most prevalent in workers who reported a lack of skills or knowledge. The data also indicated that most agency characteristics were not significantly correlated with the degree of worker burnout. It was found, however, that the degree of work pressure (measured in terms of pressure to increase the quantity or quality of work, degree of job security, and degree to which threats, coercion, or punitive measures are used) was positively related to the degree of worker burnout.

Harrison (1980) conducted a study in the winter of 1978 in which he surveyed 112 statutory agency child protective service workers in three counties in Minnesota in order to test the hypothesis that role conflict and role ambiguity would be inversely related to job satisfaction among such workers. Paper and pencil questionnaires were administered to the participants. Role conflict and ambiguity were measured using scales consisting of fourteen statements about one's job. Job satisfaction was measured by the Job Descriptive Index which provides scores for five dimensions of job satisfaction including the work itself, co-workers, supervision, pay, and promotional opportunities. Results

indicated that the social workers surveyed showed very high degrees of role conflict and ambiguity. The study also showed that both role conflict and role ambiguity were inversely related to satisfaction with the work itself, to supervision, to co-workers, and to overall job satisfaction. However, the relationship of both role variables to satisfaction with pay and promotional opportunities was insignificant, which is in direct contrast to the study conducted by Jayaratne and Chess (1984). The analysis also indicated that the most problematic outcome of role conflict is likely to involve the social worker's attitude about the supervisor, probably because the supervisor who is perceived as sending either contradictory role prescriptions or role information which contradicts that from other role information sources may be viewed as a source of dissatisfaction. It appears that the supervisor is in a very important position with regard to the role conflict phenomenon.

Daley (1979) published an article exploring why caseworkers in protective services are especially susceptible to becoming burned out emotionally. He indicated that certain common elements relating to stress appear to exist among caseworkers. He stated that factors in the worker's environment that prove especially

stressful include barriers to the attainment of goals, uncomfortable working conditions, the necessity of reconciling incompatible demands, and ambiguous role prescriptions. These caseworkers' stress is further compounded by the inordinate amount of paperwork they have to complete, the number of meetings they have to attend, frustrations about completing the job because of pressures stemming from large caseloads and arbitrary deadlines, the lack of a tangible index of success for use with clients, and poor working conditions. In addition, Daley indicated that supervisors can do much to help alleviate some of the stress in these caseworkers by providing much support and positive feedback.

Pines and Kafry (1978) attempted a systematic investigation of the various stresses inherent in social work. They suggested that there are two general sources of stress in social work situations: internal and external. Internal sources are the intrinsic properties of the work conditions, including: job variety, job autonomy, significance of work, success in performance, and feedback from the work itself. External sources are the properties of the work environment, including: work relations, work sharing, support from co-workers, the availability of sanctioned time-out periods, and feedback from supervisors and colleagues. Pines and Kafry

developed a questionnaire to investigate the relationship between the previous variables and tedium, defined as a general experience of physical, emotional, and attitudinal exhaustion. They then surveyed 129 social service workers who attended a 1976 workshop on occupational burnout.

Results indicated that tedium was negatively correlated with work attitudes, overall job satisfaction, liking the job, liking the caseload, and liking the agency. Tedium was positively correlated with a desire to leave the job and the development of negative attitudes towards clients. Of the internal characteristics, only feedback was significantly correlated with tedium. The five external characteristics were all significantly and negatively correlated with tedium. Pines and Kafry (1978) conclude that, since the external work characteristics were more significantly correlated with tedium than the internal characteristics, social workers may be more normally sensitive to people as sources of both emotional stress and support.

Schuttenberg, O'Dell, and Kaczala (1990) conducted a study in which they investigated the relationships of sex, length of service, vocational personality types, and sex-role perceptions with job satisfaction levels of 200 school teachers, 200 school counselors, and 200 building-level administrators in northeastern Ohio. Subjects were

administered Holland's Self-Directed Search (SDS), the Bem Sex-Role Inventory (BSRI), and a brief survey form asking three questions about their current professional position. Of the respondents, 95% indicated that they derived "moderate" or "great" satisfaction, and 55% reported that they derived "great" satisfaction from their present positions. Also, respondents with androgynous sex-role self-perceptions indicated a higher degree of job satisfaction than did those with other sex-role perceptions. Thirty-six percent of the respondents stated that they "probably would" choose the same position again, while 52% stated that they "definitely would". Those who indicated that they "probably" or "definitely" would choose their current positions again included 80% of the teachers, 93% of the counselors, and 92% of the administrators. A greater proportion of respondents with androgynous sex-role self-perceptions indicated a great degree of job satisfaction than did those with other sex-role self-perceptions. The finding that androgyny was linked with "great" job satisfaction for both men and women suggests that the flexibility inherent in the androgynous role is related to educator satisfaction in the workplace.

Steffy and Jones (1990) conducted a survey utilizing a large sample of hospital employees to evaluate

differences in work satisfaction and role strain between full-time and part-time employees. The study evaluated differences in satisfaction with pay, advancement, management, co-workers, and the work in general. Approximately 10,000 employees from 65 small to medium-sized hospitals were administered a survey by an independent researcher. The measures employed in the study were drawn from the Human Factors Inventory (HFI). Subjects of the study responded to questions concerning work status, role stresses, job tension, and work satisfaction. Results suggested that part-time employees are more likely to be women, white, older, and less tenured. Results also suggested a moderate relationship between part-time employment and experiencing greater load pressures, ambiguity, and work-related tension, as well as greater dissatisfaction with co-workers and pay. Findings supported the hypothesis that part-time employees may experience greater role strain than their full-time counterparts.

Ross, Altmaier, and Russell (1989) investigated the effects of job experiences and social support on burnout among counseling center staff. A national sample of 169 doctoral-level staff were recruited from the staffs of all university counseling centers listed in the 1985-1986 edition of the Association of Psychology Internship

Centers (APIC) directory. Two different types of social support measures were included in the questionnaire, and to assess the participants' reactions to job-related stress, the Maslach Burnout Inventory (MBI) was administered. Analyses of the data provided descriptive information about the occurrence of job-related stress and burnout among counseling center staff, examined the extent to which characteristics of the counselor and the job setting predict the amount of job-related stress and burnout reported by the counselor, and examined the impact of job-related stress and social support on burnout among counseling center staff. Results showed that those counselors who reported the fewest years of postdoctoral experience, who were supervising another counselor, and who were married reported greater emotional exhaustion. Also, counselors with supportive supervisors reported lower levels of emotional exhaustion and depersonalization and higher levels of personal accomplishment. Counseling center staff who reported having a network of people who shared their interests and concerns showed less emotional exhaustion and depersonalization. Greater levels of accomplishment were reported by staff who indicated that other people respected their abilities and that they could turn to others for advice. However, this study showed no evidence that there is a buffering effect of social

support on the relation between job-related stress and burnout. These findings suggested the overall absence of social support as a determinant of counselor burnout.

In a review of stress program evaluations in the workplace, McLeroy, Green, Mullen, and Foshee (1984) found that stress reduction programs are among the most frequently offered worksite health promotion services. This appears to be true because stress reduction programs are popular among employees and because stress in the workplace has been associated with both health effects and productivity consequences. Worksite programs can focus on changing the worksite characteristics which are related to stress among employees, or they may focus on changing individuals. Changing worksite characteristics may include job redesign, changes in organizational structure, changes in the corporate reward system, changes in work schedules, role and job clarification, improved matching of job demands and employee characteristics, human relations training for managers and supervisors, increased employee involvement in decision making, improving communication between employees and supervisors, increased employee control over the work pace, and corporate services such as daycare programs to reduce stress on employees from outside the workplace. Approaches to worksite stress oriented to changing individuals include:

instruction in stress management techniques, such as physical, cognitive, and emotional strategies for managing individual physiological or psychological reactions to the work environment; and stress reduction techniques, such as skills training and interpersonal strategies for effectively reducing stress from the work environment. Stress management techniques include: progressive relaxation, biofeedback, autogenic training, visualization, sensory awareness, deep breathing exercises, massage, yoga, meditation, exercise, diet, emotional discharge, self-awareness, values clarification, cognitive restructuring, stress inoculation, psychological withdrawal, and social support. Stress reduction techniques include: goal setting, assertiveness training, networking, time management, problem solving, lifestyle assessment, decision making training, conflict resolution, and interpersonal skills training. In their review of nineteen stress reduction programs in the workplace, which included both blue and white collar workers, McLeroy, Green, Mullen, and Foshee found that the majority of programs were preventive in nature and used individual-oriented approaches to stress management and reduction. Most of the studies combined techniques in their treatment protocols, including education about stress, relaxation, coping and cognitive restructuring,

meditation, and biofeedback. Fifteen of the studies included relaxation and meditation. Cognitive-behavioral skills training was indicated in seven of the studies. Only three of the studies specifically mentioned stress reduction as opposed to stress management techniques. Two of the studies utilized either group or individual counseling approaches to stress management, conducting discussions of stressful events experienced by participants during the week and structured exercises on stress coping skills, including relaxation, conflict resolution, communication skills, or role-playing. Most of the studies reported positive physiological, psychological, and behavioral effects from the stress reduction programs in the worksites.

Correlates related to counselors and human service providers

Burnout correlates related to the counselor include: the demographic characteristics of the counselor (Beck, 1987; Jick & Mitz, 1985; Ross, Altmaier, & Russell, 1989), his/her professional background (Beck, 1987; Matthews, 1990; Streepy, 1981), the home stresses he/she is experiencing (Beck, 1987; Ross, Altmaier, & Russell, 1989), his/her attitude toward the social services profession (Pines & Kafry, 1978; Streepy, 1981), his/her self-management techniques (Barrett & McKelvey, 1980; Bradfield & Fones, 1985), and the attitude of significant others toward his/her career choice (Beck, 1987).

Beck (1987) divided those correlates of burnout related to the counselor into the following categories: demographic characteristics of counselors, professional background, and personal characteristics. Of the demographic correlations, only the age and sex components reached significant correlation levels. Age was negatively correlated with burnout, and males showed significantly higher burnout levels. In the professional background category, neither educational preparation nor amount of experience correlated significantly to burnout. Experience in another social work setting prior to present position showed a barely significant negative correlation with burnout. Components of the personal characteristics category which were significantly correlated with burnout include: a feeling of lack of success in coping with work-related stress, a feeling that their efforts to cope with work stress had been minimally helpful, dissatisfaction with choice of profession, adverse effect of job on home life, more physical symptoms, intent to seek another job within a year, personal involvement in clients' problems, loneliness, dissatisfaction with overall level of job success, low success in coping with stresses outside of work, minimal use of coping strategies at work, use of more interviews per case, dissatisfaction with practice skills, and home stresses adversely affecting work.

In Streepy's study (1981), counselor characteristics were defined in terms of: 1) the demographic factors, 2) the length and type of work experience, 3) the client problem preference, 4) the attitude toward the social service profession, 5) the practice techniques used, 6) the theoretical orientation, and 7) the degree of job satisfaction. Findings indicated that the only counselor demographic found to be significantly correlated with burnout was annual family income, with those having family incomes under \$20,000 having the highest burnout scores. The findings also showed that workers with undergraduate degrees or those without degrees had higher burnout scores than those with graduate level education. More experienced workers also had significantly lower burnout scores. Also, those counselors who had less involvement in the client-counselor relationship were more likely to be burned out. Finally, the degree of burnout was found to be significantly correlated with workers' attitudes toward the social service profession in that those workers who preferred remaining in the profession, who felt that the profession was helpful, and who viewed their work as meaningful were less likely to be burned out. This is consistent with the findings of Pines and Kafry (1978), who found tedium to be negatively correlated with work attitudes and liking the job.

Matthews (1990) conducted a study comparing burnout in six different occupational fields. The sample consisted of 244 full-time employees in health service, banking, social welfare, industry, education, and postal service organizations in the midlands of South Carolina. Subjects of the study were administered the Maslach Burnout Inventory, the State-Trait Anxiety Inventory, the Matthews Burnout Scale for Employees, and a form requesting personal data. Results indicated that the occupational groups were different in their mean burnout scores. Findings suggested that employees of social services were a different group, showing greater propensity towards burnout.

After reviewing the related literature, Barrett and McKelvey (1980) concluded that the failure of child welfare workers to cope effectively with stress may have numerous and varied consequences, including physical and emotional problems and job burnout. In order to avoid job burnout, effective stress managers seem to possess self-knowledge, a variety of interests, and a large repertory of stress reactions. The most effective self-management techniques for stress appear to be physical exercise, proper nutrition, "letting-go" techniques, and personal planning. Bradfield and Fones (1985) also found in their study that special education teachers who scored low on

the stress scales exercised twice as hard as those teachers who scored high on the stress scales.

Jick and Mitz (1985) wrote a paper in which they reviewed nineteen studies which identify gender as a critical demographic characteristic that influences an individual's stress level. Most of the studies reviewed used representative samples of working adults or of the population at large. The results suggest that women tend to exhibit low emotional well-being to a greater extent than men in that women reported higher rates of psychological and emotional discomfort. However, men exhibit a significantly greater incidence of stress-related physical symptoms such as coronary heart disease, cirrhosis of the liver, and suicide. They conclude that men are more prone to serious and incapacitating illness than women, while women more often tend to suffer from less severe psychological problems with a greater incidence of acute symptoms. Therefore, gender appears to be a significant correlate of stress.

In the study conducted by Ross, Altmaier, and Russell (1989), those counselors who reported the fewest years of postdoctoral experience, who were supervising another counselor, and who were married reported greater emotional exhaustion. Staff members representing minority groups reported experiencing fewer stressful events in their jobs.

Correlates related to client outcomes and characteristics

Finally, those correlates of burnout related to client outcomes include: client dropout (Beck, 1987), amount of positive feedback received from clients (Beck, 1987; Streepy, 1981), and success in meeting performance goals (Pines & Kafry, 1978).

In Beck's study (1987), he also found that administrative style had an indirect effect on client outcomes. Client satisfaction was highest for the participatory style agencies and lowest for authoritarian agencies. Client drop-out was highest for laissez-faire agencies.

In Streepy's study (1981), client characteristics were determined by socioeconomic class, type of client problem, manner of referral to the agency, and degree of positive feedback given by clients to counselors. Findings indicated that burnout was not found to be related to clients' socioeconomic class, type of client problem, or type of referral. The degree of positive feedback that counselors received from clients was significantly related to burnout in that the greater the frequency of positive feedback, the lower the burnout score.

In Pines and Kafry's study (1978), success in performance was predicted to be an important work

characteristic, with feedback from the work itself being viewed as essential for workers to gain knowledge of their performance level. Results indicated that feedback was significantly and negatively correlated with tedium.

Stress Factors Unique to Substance Abuse Treatment Issues

Besides the above mentioned stress factors, counselors working in substance abuse treatment centers encounter stress factors unique to substance abuse issues. Working in the field of substance abuse can be very frustrating (Brown, 1989; Summerhill, 1990). One issue unique to the substance abuse treatment field is the high percentage of involuntary clients, often referred to treatment facilities by the criminal justice system or a family intervention program (Brown, 1989; Rugel & Barry, 1990; Weisner, 1990). Many substance abuse treatment clients experience a very high level of denial (Mc Auliffe, 1989; Rugel & Barry, 1990; Summerhill, 1990), and treatment center staff must deal with clients with the knowledge that the whole truth is seldom available (Cordingley, Wilkinson, & Martin, 1990; Mc Auliffe, 1989; Summerhill, 1990). Addictions therapists must also contend with enabling family members and friends of their clients (Weisner, 1990). Relapse is also a serious problem facing the chemical dependency field (Annis, 1990; Gorski, 1990; Rioux & Van Meter, 1990;

Summerhill, 1990). The importance of developing an intensive follow-up aftercare plan for clients newly discharged from drug abuse treatment programs is a major concern for effective treatment program planning (Brown, 1989; Rioux & Van Meter, 1990; Ritson, 1990). Finally, dealing with medical personnel's attitudes towards substance abuse clients may be stressful for substance abuse counselors (Abed & Neira-Munoz, 1990).

In an interview in 1989, Barry S. Brown, Ph.D., Chief of the Community Research Branch of the National Institute on Drug Abuse, expressed concern about staff burnout in the human services fields. He believes that the provision of human services will remain intensely challenging, and continued difficulties with staff burnout can be expected. He states that burnout should be acknowledged by program administrators, and steps should be taken to provide support groups, ongoing training, opportunity for counseling or other assistance, off-site conferences and meetings as rewards for service, and some effort to add new work experience in exchange for old. Additionally, Dr. Brown notes that it has become a central issue in society that the government is providing funding for drug abuse treatment in order to permit the more effective containment of criminal activity. Therefore, many drug-using individuals initiate treatment to avoid

potential legal sanctions. Many of the clients who are in a treatment setting are likely to be referrals from the criminal justice system. As a result, substance abuse treatment programs must respond by developing programming to help clients reduce criminal behaviors as well as drug abuse. Finally, Dr. Brown states that the importance of conducting follow-up services for drug abuse clients is a major concern for effective treatment planning because clients, no matter how effectively aided within treatment programs, must still cope with an environment and expectations that are predicated on their earlier roles in society. Structured programs of aftercare have been found to reduce rates of recidivism significantly in terms of drug use and crime.

Summerhill (1990), a member of the department of psychiatry at St. Georges Hospital in London, wrote an article in which he discusses some of the difficulties in the management of addiction in a Drug Dependence Unit. He notes that denial is often very difficult to overcome in clients because chemically dependent individuals tend to be very ambivalent about the prospect of losing their relationship with drugs. Therefore, they typically react very defensively to treatment programs which advocate abstinence from mood-altering substances. Their accounts are usually shaped by untruths and evasions, and staff

have to develop ways of accomodating within their ongoing relationships with clients the knowledge that the entire truth is seldom available. Passive-aggression and denial appear to be the most frequently used defense mechanisms among chemically dependent clients. Summerhill also notes that the high incidence of relapse among substance dependent clients are a frequent source of frustration for addictions therapists. Staff members are particularly disappointed when members of a "good prognosis" group quickly relapse and sever recovery-oriented contacts. Summerhill concludes by noting that the above mentioned factors render working in the chemical dependency field very exhausting work.

Rugel and Barry (1990) indicate that alcoholism has been described as a disease of denial. They also note that alcohol safety action program (ASAP) groups have been developed to rehabilitate those convicted of driving while intoxicated. All participants are court referred and must participate in order to avoid jail or losing their drivers' licenses. Rugel and Barry conducted a study of 28 male subjects in four separate ASAP groups. Subjects were administered a Problem Drinking Scale (PDS) on which they were asked to evaluate their past drinking behavior. This scale was administered both prior to the beginning of their treatment experience as well as at the conclusion of

treatment. After each group meeting, they were also administered the Gross Cohesion Scale as a measure of group acceptance, and they completed a Self-Acceptance Measure. Results indicated that scores on the PDS for the group as a whole increased from pretest to posttest, indicating increased admission of drinking problems and decreased denial following treatment. Also, test results indicated that the subjects who experienced the group as most accepting experienced the greatest degree of self-acceptance following each group session. In turn, subjects who felt the largest degree of self-acceptance following the group sessions showed the largest PDS score changes, indicating greatest decreased denial. Rugel and Barry conclude that denial can be overcome when the client experiences group acceptance and subjectively determines that the threat of devaluation is minimal. A counselor working with a client whose denial can be overcome will experience less frustration and stress.

Weisner (1990) conducted a study in which she sampled all consecutive admissions to 21 publicly run and contracted alcohol programs in a northern California county during a four month period in 1984. The sample included 747 clients from five program types, who were administered a structured questionnaire by trained interviewers in face-to-face interviews. The

questionnaire consisted of a series of questions on alcohol-related problematic events in the twelve months prior to treatment entry and responses to those events. Results indicated that drunk driving, traffic accidents, and health events resulted in significantly more treatment suggestions from community sources rather than family or friends. However, family problems, job problems, and serious drinking episodes resulted in significantly more treatment suggestions from family and friends rather than from community sources. Most often, referrals for treatment come from criminal justice systems, employee assistance programs, and intervention programs directed at the family, where treatment is an option to jail, job loss, or some other penalty. Family members and friends often enable and hide alcohol problems and attempt to solve them within the family setting rather than encouraging treatment, making it more difficult for counselors to work with these clients.

William E. Mc Auliffe, Ph.D., is Associate Professor of Psychiatry (Medical Sociology) in the Department of Psychiatry, Harvard Medical School at the Cambridge Hospital, and Lecturer on Behavioral Sciences at the Harvard School of Public Health. His interest in drug addiction led him to co-author a treatment manual, *Recovery Training and Self Help*, with James Ch'ien and

Fred Zackon. In an interview conducted in 1990, Dr. Mc Auliffe indicates that teaching relapse prevention to substance abuse clients is one of the most important aspects of treatment. This involves what he terms "de-activation of addiction," or the extinction of the conditioned drug use response strength and the drug user's integration into a non-addict society. Dr. Mc Auliffe believes that substance abuse treatment staff must be decisive and directive and need to have ample experience treating addicts to recognize and efficiently deal with denial, dishonesty, and other forms of resistance. He also underscores the importance of providing staff supervision (individual meetings each week with a sympathetic and helpful supervisor to discuss the case load) and mutual support from other staff in weekly clinical staff meetings in order to prevent or minimize the occurrence of burnout.

The concept of relapse is also addressed by Annis (1990). She confirms that the prevention of relapse is increasingly being recognized as a central problem in the treatment of alcoholism and other substance abuse. Relapse, by definition, involves a failure to maintain behavior change rather than a failure to initiate change. Utilizing a cognitive-social learning approach to relapse prevention, Annis believes that treatment programs should

incorporate specific procedures designed to ensure generalization of the change in drinking behavior to the natural environment and maintenance of this change over time. Within this model, assessment of a client's high-risk situations for drinking or using drugs is a critical first step in the development of an individually tailored treatment plan. Additionally, issues of self-efficacy and self-esteem need to be a focus of treatment; high self-efficacy has been found to be associated with good treatment outcomes. Annis concludes that a cognitive-social learning approach to relapse prevention is a relatively recent development that is showing promise in the treatment of alcoholism and other substance abuse problems.

Gorski (1990) also concurs that relapse is a serious problem facing the chemical dependency treatment field. He notes that clients who successfully complete treatment maintain higher recovery rates than those who do not. Gorski believes that relapse-prone clients can be divided into two distinct subgroups: unmotivated and motivated. Unmotivated relapse-prone clients fail to recognize or accept that they are suffering from chemical dependency in spite of initial treatment. They refuse to adhere to a recovery program requiring abstinence, physical and psychological rehabilitation, and lifestyle change.

Motivated relapse-prone clients recognize that they are chemically dependent, need to maintain abstinence to recover, and need to maintain an ongoing recovery program to stay abstinent. However, despite their efforts, these individuals develop symptoms of dysfunction that eventually lead them back to alcohol and other drug use. Gorski has developed the Cenaps Model of Relapse Prevention, which is a systematic method for teaching recovering clients to recognize and manage relapse warning signs. Clients are taught to recognize and intervene when these warning signs appear, before chemical use or collapse occurs. Special techniques have also been developed for involving the family and the employee-assistance counselor.

Rioux and Van Meter (1990) indicate that the majority of persons who first enter recovery with positive motivation will experience a relapse. They have developed a Relapse Treatment Program which is designed for adults who have resumed alcohol or drug use after having completed an inpatient treatment program or an intensive outpatient treatment program and maintaining sobriety for at least sixty consecutive days. Treatment modalities include relapse-specific and interactive lectures, daily journaling, frequent individual counseling, communication therapy groups, practice in cognitive mapping, stress

reduction training, development of an individualized relapse prevention plan, and fostering a specialized aftercare program. Rioux and Van Meter conclude by proposing that professionals and self-help organizations enhance the possibility of recovery from relapse by dispelling the old negative myth of recovery folklore which stigmatizes those who relapse.

Cordingly, Wilkinson, and Martin (1990) state that the validity of self-reported alcohol and drug use is often questioned. Attempts to validate self-report have typically been of three types: urine drug-screening, official records, and collateral informants. They conducted a study examining the concordance between reports of multiple drug abusers and their collaterals two years posttreatment. Reports were obtained on usage of drugs, adverse consequences of drug use, and social adjustment. Subjects for this study were clients who had voluntarily sought treatment at the Addiction Research Foundation in Toronto. Follow up interviews were conducted at two years. The findings of the study suggest that multiple drug abusers' self-reports of drug use and related behavior are generally corroborated by collateral reports. This would indicate that the self-reports of groups of multiple drug users following treatment are valid indicators of their posttreatment drug use and

social adjustment, at least when they are aware that efforts will be made to corroborate the validity of the self-reports.

In accordance with Brown (1989) and Rioux and Van Meter (1990), Ritson (1990) also documents the importance of follow-up care for chemically dependent clients who have received treatment. He states that for almost all clients and particularly for those who experience relapses, regular continued contact seems very important. Follow-up services may be on either an individual or group basis. It will often involve joint interviews with a spouse or other close family members. Some clients will require only a brief supportive interview or a focus on relapse prevention, while others will need much more intensive counseling, but all clients can benefit from follow-up services.

Abed and Neira-Munoz (1990) utilized a questionnaire to conduct a survey among general practitioners to investigate the attitudes of physicians towards drug addicts and addiction. Responses to the questionnaire showed that the majority of physicians surveyed were prepared to help drug addicts but believe that drug addicts are unreliable patients. They also believe that the problems experienced by drug addicts are of their own making, and the vast majority of physicians do not

consider drug addiction to be a medical problem. They tend to question the value of drug treatment on its own. Seventy-six percent of the general practitioners surveyed thought that the management of addiction was beyond their competence. The majority consider themselves lacking in the necessary skills, and 72% consider drug addicts as particularly difficult and uncooperative.

The Use of Supervision to Reduce Stress in Counselors

All of the above correlates contribute to counselor stress and may eventually lead to burnout. The availability of supervision for counselors may alleviate some of the stress and may help them deal more successfully with problems involved in their work (Daley, 1979; Ross, Altmaier, & Russell, 1989). Beck (1987) suggests that agencies might attempt to reduce counselor burnout through the use of "feelings" meetings or use of an outside consultant. Streepy (1981) and Pines and Kafry (1978) note that those counselors who exhibit a higher degree of job satisfaction and a more positive attitude toward the profession also indicate that they receive adequate opportunity for discussion of problematic cases, agency problems, and their feelings about their work. For counselors working in the substance abuse treatment field in particular, Brown (1989) and Mc Auliffe (1989) stress the importance of staff supervision and mutual support

from other staff in weekly clinical staff meetings. Kahn (1978) and Beehr, King, and King (1990) call for increasing supervisory support on the job. Daley (1979), DeLucia, Bowman, and Bowman (1989), and McNeill and Worthen (1989) suggest that supervisors may wish to utilize supportive techniques more often, such as allowing counselors to ventilate their pent-up feelings, demonstrating empathy for their problems, and helping them to gain insight into the source and nature of their problems.

Kahn (1978) indicates that burnout may be attacked at either the individual or organizational levels. The main approach to the prevention of burnout at the individual level is training, which includes teaching counselors to put a self-preserving distance between themselves and their clients without developing dehumanizing kinds of qualities. Organizational remedies may include reducing the amount of unrelieved client contact. Most importantly, stress reducing strategies involve increasing social support on the job, including recognition and confirmation from supervisors about job difficulties and stressful situations.

In a study conducted by Beehr, King, and King (1990), the contents of communications between supervisors and subordinates were investigated in the context of

occupational stress as potential forms of social support for 225 registered nurses randomly selected from seven hospitals in central Michigan. Ten different measures and scales were utilized. Results indicated that when subordinates experience a subjective feeling of support from their supervisors, their communications are more concerned with non-job-related events and with positive aspects of the job than with negative aspects. Also, the findings indicated that the buffering effects of social support are most salient or apparent when social support is operationalized in terms of contents of communications between employees and potentially supportive others in the work environment. Beehr, King, and King conclude that under high stress conditions, supervisors who talk about non-job-related issues to subordinates may be addressing things subordinates care about most, and supervisors and subordinates who talk to each other about nonwork events may simply have qualitatively different relationships from other supervisors and subordinates.

McNeill and Worthen (1989) note that the field of professional psychology is currently experiencing an increase of interest in issues of training and supervision. They also point out that analysts involved in supervision observed that the transference of the therapist and the countertransference of the supervisor

within the supervisory session appeared to parallel what was happening in the therapy session between client and therapist. In such supervisory sessions, the supervisor makes use of what is occurring in both the therapist-client relationship and the therapist-supervisor relationship to enable the therapist to use his or her own experience of emotional difficulties in receiving help from the supervisor to facilitate understanding of the client's situation. McNeill and Worthen state that they believe that the parallel process in supervision in its various manifestations can be the focus for some of the most potent and impactful interventions within the supervisory relationship. Consequently, it is suggested that supervisors pay close attention to the process in order to facilitate effective supervision, as well as personal and professional growth in psychotherapy trainees.

DeLucia, Bowman, and Bowman (1989) also discuss the use of parallel process in supervision and group counseling to facilitate counselor and client growth. They present a model for supervision of group counselors focusing on the parallel process between the supervisory and counseling relationships. A series of stages is outlined in their article. Initial stage tasks focus on learning the rules and getting acquainted. The transition

stage is characterized by conflict, confusion, and gradual awareness of resistance. In the working stage, relationships are examined with conflicts and needs being openly expressed. The termination stage focuses on consolidation of learning and ending the relationships. Resolution of the stage-specific tasks by the counselor within the supervisory relationship facilitates the resolution of parallel issues within the group. Parallel process can be used within the supervisory relationship to gain insight into potential problem areas and improve counselor development.

Most of the above authors agree that more research is necessary in the field of supervision.

Summary

This chapter provided a review of the literature related to job stress and burnout, factors that contribute to stress in social service professionals working in substance abuse treatment centers, and the use of supervision to reduce stress in the workplace.

The following chapter describes the methodology used in the present study, which attempts to explore the use of supervision to reduce stress in counselors working in substance abuse treatment centers.

CHAPTER III

METHODOLOGY

In the previous chapter, a review of the related literature was discussed. In this chapter, the methodology used in this study will be described.

This study investigates the use of supervision to reduce stress in counselors working in substance abuse treatment centers. A survey technique was utilized for this pilot study. The survey was developed using information from the related literature. The survey was designed to explore the types of stress and the amount of stress present in counselors working in substance abuse treatment centers. It was also designed to explore the extent to which supervision may aid in reducing stress and burnout in such agencies.

The survey was divided into six sections, each addressing a different question regarding stress and/or supervision. For purposes of this study, stress was defined as "strain, pressure, tension, or strained exertion" (Webster's New Universal Unabridged Dictionary, 1983). Supervision can occur either formally or informally. For purposes of this study, formal

supervision was considered feedback given by a senior person on staff or a consultant designated to oversee or direct a counselor's work. Informal supervision was considered feedback given by peers. Both types of supervision can occur in individual or group settings at regularly scheduled times or as needed.

The first section of the survey explored the nature of stress as perceived by counselors working in substance abuse treatment centers. Respondents were asked to rate the amount of stress they experience as a result of items in each of nine categories: 1) job rewards; including salary, promotional opportunities, job security, benefits, and staff or funding resources; 2) job functions; including significance of work, level of job autonomy, level of responsibility, variety of work, challenges of work, opportunities for professional development, and satisfaction of work; 3) job pressures; including level of job pressure, size of caseload, amount of overtime, length of client waiting lists, amount of paperwork, opportunities for breaks, flexibility of work hours, use of part-time staff, composition of caseload, client/case outcomes, amount of direct client contact, and amount of involuntary clients seen; 4) feedback; including feedback from executives and administrators, feedback from supervisors, feedback from staff and colleagues, feedback

from clients, and feedback from the community;

5) administration; including administrative style, amount of innovation of the administration, use of rules and regulations, accomodation to staff input and suggestions, agency goals and policies, cooperation among staff, cooperation with other agencies, and availability of other resources; 6) physical work setting; including temperature, noise level, decor, space, office location, amount of privacy, lighting, air circulation, equipment availability, amount of travel required, parking, and amount of safety risks during evening hours;

7) professional background; including amount of previous educational preparation, amount of previous work experience, need for additional skill or knowledge, and choice of profession; 8) home stresses; including marital issues, concerns about children, aging parents, and distance of work from home; and 9) issues unique to the substance abuse field; including number of involuntary clients, relapse rate, dishonesty of clients, clients' level of denial, enabling family members and friends of clients, intensive aftercare plans, medical personnel's attitudes towards substance abuse clients, and amount of time spent in court. Space was also provided for a write-in response in each category. Respondents were asked to rate the amount of stress experienced as a result of each

item by circling "no stress", "slight stress", "moderate stress", "high stress", or "extreme stress" for each item. They were also asked to indicate what specifically was stressful about each item in the space provided.

The second section of the survey explored the effects of stress on counselors. Respondents were provided with a list of symptoms which often occur as a result of stress, and they were asked to indicate whether or not they had experienced each symptom by circling "yes" or "no". If they circled "yes" for an item, they were asked to rate the severity of that item by circling "not severe", "slightly severe", "moderately severe", "very severe", or "extremely severe". The list of symptoms included physiological responses, shortness with co-workers, decreased performance, shortness with family, difficulty concentrating, overidentification with clients' problems, inability to relax, lack of energy, sense of powerlessness, reactions to clients, dread going to work, marriage/family problems, and alcohol/drug problems.

In the third section of the survey, respondents were presented with a list of stress reduction methods and were asked to indicate whether or not they had used any of the methods as a means of stress reduction outside of the workplace by circling "yes" or "no". For those for which they circled "yes", respondents were asked to rate how

helpful they felt that method was in reducing stress by circling "not helpful", "slightly helpful", "moderately helpful", "very helpful", or "extremely helpful". The methods of stress reduction included exercise, nutrition, talking to friends, outside supervision, sense of humor, keeping a diary, reading, hobbies, involvement in outside activities/groups/clubs, training courses, vacations, and family support.

In the fourth section of the survey, respondents were provided with a list of stress reduction methods and asked to indicate whether or not their agency provided or encouraged any of the methods by circling "yes" or "no". For those methods for which they circled "yes", respondents were then asked to rate how helpful they found the method to be in reducing stress by circling "not helpful", "slightly helpful", "moderately helpful", "very helpful", or "extremely helpful". Stress reduction methods included talking to co-workers, group meetings, individual supervision, group supervision, use of an outside consultant, membership in a professional organization, reading, staff retreats, inservices and special speakers, attendance at professional workshops and trainings, and stress management courses.

The fifth section of the survey was designed to determine whether or not respondents felt that supervision

encourages behaviors which reduce stress. Respondents were asked to indicate what kind of supervision they receive at their place of employment and how often they receive it, including formal individual supervision, formal group supervision, informal individual supervision, and informal group supervision. Respondents were then presented with a list of behaviors and asked to indicate whether or not the supervision they are currently receiving promotes these behaviors by circling "yes" or "no". They were also asked to indicate whether or not they feel supervision idealistically should promote these behaviors, again by circling "yes" or "no". For those items to which they responded "yes", they were asked to indicate whether or not that item is or would be helpful by circling "not helpful", "slightly helpful", "moderately helpful", "very helpful", or "extremely helpful". The behaviors listed included discourages overcommitment, encourages setting realistic limits, encourages self-pacing, encourages defining goals in smaller and more achievable units, encourages time management, encourages delegation of responsibilities, encourages personal time planning, provides support, decreases feelings of isolation, accents positive achievements, monitors and discourages overworking, assists in developing coping strategies, encourages greater variety in assignments,

encourages ventilation of feelings, and increases a sense of confidence and competence. Finally, respondents were asked to identify the kind of supervision they prefer and why.

The final section of the survey was a demographics section. It was designed to elicit background information on respondents including sex, race, age, full-time or part-time employment status, marital status, educational level completed, current salary level, number of years working as a counselor/therapist, and number of years working as a counselor/therapist in the substance abuse treatment field.

The survey was administered to detoxification counselors and primary therapists working in a substance abuse treatment center in Bloomington, Illinois. The treatment center was selected by the author of this study due to her knowledge of the facility and the willingness of all staff members to participate in the study. In order to protect confidentiality, the survey was placed in each counselor's mailbox at the treatment center, and the counselors were asked to return the surveys to the mailbox of this author by a certain date within one week. Because this study is a pilot study designed to generate some hypotheses, only one treatment center was utilized. This is a limitation of the study, and the sample population

should be broadened in future research studies on this topic.

After all of the surveys were returned, the data was analyzed by tallying the responses in each section and converting the resulting numbers into percentages. In those sections utilizing a five-point scale to rate the degree of stress experienced or the amount of helpfulness of stress reducers, the results were categorized into low, medium, and high ranges by combining the resulting numbers for the two lowest intervals of the scale and for the two highest intervals of the scale.

The results of the data analysis of the survey are provided in Chapter IV, and a discussion of the results are provided in Chapter V.

CHAPTER IV

RESULTS

In the previous chapter, the methodology used in this study was discussed. In this chapter, the results of the study will be presented.

Demographics

Eighteen surveys of the 22 surveys administered were returned and analyzed, yielding a return rate of 82%. Of the respondents, 72% were females, while 18% were males. Ninety-four percent of those surveyed listed their race as white, while 6% of them listed their race as black. Regarding age, 78% of the respondents were between the ages of 19 and 35, 17% were between the ages of 35 and 50, and 5% were between the ages of 51 and 64. Eighty-three percent of those surveyed work full-time, while 17% work part-time. Fifty percent of the respondents were single, 44% were married, and 6% were divorced or separated. Of those surveyed, 6% were high school graduates, 22% had received some college education, 22% were college graduates, 11% had received some graduate school education, and 39% had master's degrees. Regarding salaries, 17% reported making \$10,000 or less; 39% reported making between \$10,000 and \$20,000; and 44%

Table 1

DEMOGRAPHICS

| <u>Gender</u> | | <u>Marital Status</u> | |
|--------------------------|----|------------------------------------|----|
| Females | 72 | Single | 50 |
| Males | 18 | Married | 44 |
| | | Divorced/Separated | 6 |
| | | Widowed | 0 |
| <u>Race</u> | | <u>Educational Level Completed</u> | |
| White | 94 | High school graduate | 6 |
| Black | 6 | Some college | 22 |
| Hispanic | 0 | College graduate | 22 |
| | | Some graduate school | 11 |
| | | Master's degree | 39 |
| | | Doctoral degree | 0 |
| <u>Age</u> | | <u>Current Salary Level</u> | |
| 18 and under | 0 | \$10,000 or below | 17 |
| 19 to 35 | 78 | \$10,001 to \$20,000 | 39 |
| 36 to 50 | 17 | \$20,001 to \$30,000 | 44 |
| 51 to 64 | 5 | \$30,001 to \$40,000 | 0 |
| | | \$40,001 to \$50,000 | 0 |
| | | \$50,001 and over | 0 |
| <u>Employment Status</u> | | <u>Type of Counselor</u> | |
| Full-time | 83 | Detox | 56 |
| Part-time | 17 | Primary | 44 |

(Results are listed in percentages. Total N=18.)

reported making between \$20,000 and \$30,000. Finally, 44% of those surveyed indicated that they were primary counselors, while 56% indicated that they were detox counselors.

Analyses of the data produced the following results:

Nature of Stress

In this section, respondents rated the amount of stress they experienced in a number of categories, based on a five-point scale.

Job rewards

Regarding job rewards, 22% of the respondents indicated that they experience no or slight stress due to their salary, 56% stated that they experience moderate stress due to their salary, and 22% indicated that they experience high or extreme stress due to their salary. Fifty percent of those surveyed reported experiencing no or slight stress due to the amount of promotional opportunities available, while 33% reported experiencing moderate stress and 17% reported experiencing high or extreme stress due to the amount of promotional opportunities available. Of those surveyed, 78% responded that they experienced no or slight stress due to job security, 17% stated that they experienced moderate stress due to job security, and 5% indicated that they experienced high or extreme stress due to job security. Sixty-one percent of the respondents reported experiencing

Table 2

AMOUNT OF STRESS OF FACTORS RELATED TO JOB REWARDS

| | <u>No/Slight</u> | <u>Moderate</u> | <u>High/Extreme</u> |
|------------------------------|------------------|-----------------|---------------------|
| Salary | 22 | 56 | 22 |
| Promotional opportunities | 50 | 33 | 17 |
| Job security | 78 | 17 | 5 |
| Benefits | 61 | 22 | 17 |
| Staff/funding resources | 56 | 33 | 11 |

(Results are listed in percentages. Total N=18.)

no or slight stress as a result of their benefits, 22% reported experiencing moderate stress, and 17% reported experiencing high or extreme stress as a result of their benefits. Finally, 56% of those surveyed indicated that they experienced no or slight stress as a result of staff or funding sources, 33% indicated that they experienced moderate stress, and 11% indicated that they experienced high or extreme stress as a result of staff or funding resources.

Job functions

In the job functions section, 33% of those surveyed reported experiencing no or slight stress due to the significance of their work, 39% responded that they experienced moderate stress, and 28% stated that they experienced high or extreme stress due to the significance of their work. Sixty-seven percent of the respondents reported experiencing no or slight stress due to their level of job autonomy, 28% reported experiencing moderate stress, and 5% reported experiencing high or moderate stress due to their level of job autonomy. Of those surveyed, 28% indicated that they experienced no or slight stress in regards to their level of responsibility, 39% reported experiencing moderate stress, and 33% indicated that they experienced high or extreme stress in regards to their level of responsibility. Fifty-six percent of the respondents indicated that they experienced no or slight

Table 3

AMOUNT OF STRESS OF FACTORS RELATED TO JOB FUNCTIONS

| | <u>No/Slight</u> | <u>Moderate</u> | <u>High/Extreme</u> |
|--|------------------|-----------------|---------------------|
| Significance of work | 33 | 39 | 28 |
| Level of job autonomy | 67 | 28 | 5 |
| Level of responsibility | 28 | 39 | 33 |
| Variety of work | 56 | 39 | 5 |
| Challenges of work | 39 | 28 | 33 |
| Opportunities for professional development | 61 | 22 | 17 |
| Satisfaction of work | 66 | 17 | 17 |

(Results are listed in percentages. Total N=18.)

stress due to the variety of their work, 39% stated that they experienced moderate stress, and 5% reported that they experienced high or extreme stress due to the variety of their work. Of those surveyed, 39% reported experiencing no or slight stress in regards to the challenges of their work, 28% reported experiencing moderate stress, and 33% reported experiencing high or extreme stress in regards to the challenges of their work. Sixty-one percent of the respondents indicated that they experienced no or slight stress in relation to the opportunities for professional development, 22% stated that they experienced moderate stress, and 17% indicated that they experienced high or extreme stress in relation to the opportunities for professional development. Finally, 66% of those surveyed responded that they experienced no or slight stress in regards to the satisfaction of their work, while 17% indicated that they experienced moderate stress, and 17% indicated that they experienced high or extreme stress in regards to the satisfaction of their work.

Job pressures

Regarding job pressures, 45% of those surveyed indicated that they experienced no or slight stress due to the level of job pressure, 22% reported experiencing moderate stress, and 33% reported that they experienced

high or extreme stress due to the level of job pressure. Thirty-three percent of those surveyed indicated that they experienced no or slight stress due to the size of their caseload, 33% reported experiencing moderate stress, and 33% indicated that they experienced high or extreme stress due to the size of their caseload. Of the respondents, 50% reported experiencing no or slight stress due to the amount of overtime they work, while 39% reported experiencing moderate stress, and 11% reported experiencing high or extreme stress due to the amount of overtime they work. Of those surveyed, 78% indicated that they experienced no or slight stress due to the length of client waiting lists, 17% indicated that they experienced moderated stress, and 5% indicated that they experienced high or extreme stress due to the length of client waiting lists. Twenty-two percent of the respondents reported experiencing no or slight stress due to the amount of paperwork required, and 11% reported experiencing moderate stress, while 67% reported experiencing high or extreme stress due to the amount of paperwork required. Of those surveyed, 66% indicated that they experienced no or slight stress in regards to the opportunities for breaks, 17% indicated that they experienced moderate stress, and 17% indicated that they experienced high or extreme stress in regards to the opportunities for breaks. Of the

respondents, 83% reported experiencing no or slight stress regarding the flexibility of their work hours, 11% indicated that they experienced moderate stress, and 6% stated that they experienced high or extreme stress regarding the flexibility of their work hours. In regards to the use of part-time staff, 72% of the respondents reported experiencing no or slight stress, 17% reported experiencing moderate stress, and 11% reported experiencing high or extreme stress. Of those surveyed, 44% indicated that they experienced no or slight stress as a result of the composition of their caseload, 39% stated that they experienced moderate stress, and 17% reported that they experienced high or extreme stress as a result of the composition of their caseload. Thirty-three percent of the respondents indicated that they experienced no or slight stress in regards to client/case outcomes, while 45% stated that they experienced moderate stress, and 22% indicated that they experienced high or extreme stress in regards to client/case outcomes. Of those surveyed, 39% reported experiencing no or slight stress as a result of the amount of direct client contact, while 33% reported experiencing moderate stress, and 28% reported experiencing high or extreme stress as a result of direct client contact. Finally, in regards to the amount of involuntary clients seen, 39% of the respondents indicated

respondents, 83% reported experiencing no or slight stress regarding the flexibility of their work hours, 11% indicated that they experienced moderate stress, and 6% stated that they experienced high or extreme stress regarding the flexibility of their work hours. In regards to the use of part-time staff, 72% of the respondents reported experiencing no or slight stress, 17% reported experiencing moderate stress, and 11% reported experiencing high or extreme stress. Of those surveyed, 44% indicated that they experienced no or slight stress as a result of the composition of their caseload, 39% stated that they experienced moderate stress, and 17% reported that they experienced high or extreme stress as a result of the composition of their caseload. Thirty-three percent of the respondents indicated that they experienced no or slight stress in regards to client/case outcomes, while 45% stated that they experienced moderate stress, and 22% indicated that they experienced high or extreme stress in regards to client/case outcomes. Of those surveyed, 39% reported experiencing no or slight stress as a result of the amount of direct client contact, while 33% reported experiencing moderate stress, and 28% reported experiencing high or extreme stress as a result of direct client contact. Finally, in regards to the amount of involuntary clients seen, 39% of the respondents indicated

Table 4

AMOUNT OF STRESS OF FACTORS RELATED TO JOB PRESSURES

| | <u>No/Slight</u> | <u>Moderate</u> | <u>High/Extreme</u> |
|------------------------------------|------------------|-----------------|---------------------|
| Level of job pressure | 45 | 22 | 33 |
| Size of caseload | 33 | 33 | 33 |
| Amount of overtime | 50 | 39 | 11 |
| Length of client waiting lists | 78 | 17 | 5 |
| Amount of paperwork | 22 | 11 | 67 |
| Opportunities for breaks | 66 | 17 | 17 |
| Flexibility of work hours | 83 | 11 | 6 |
| Use of part-time staff | 72 | 17 | 11 |
| Composition of caseload | 44 | 39 | 17 |
| Client/case outcomes | 33 | 45 | 22 |
| Amount of direct client contact | 39 | 33 | 28 |
| Amount of involuntary clients seen | 39 | 39 | 22 |

(Results are listed in percentages. Total N=18.)

that they experienced no or slight stress, 39% indicated that they experienced moderate stress, and 22% indicated that they experienced high or extreme stress.

Feedback

Regarding feedback received from others, 50% of those surveyed reported experiencing no or slight stress due to the feedback received from executives and administrators, 22% reported experiencing moderate stress, and 28% reported experiencing high or extreme stress due to this feedback. Sixty-seven percent of the respondents indicated that they experienced no or slight stress due to the feedback received from supervisors, 22% stated that they experienced moderate stress, and 11% indicated that they experienced high or extreme stress due to feedback from supervisors. Of those surveyed, 55% reported experiencing no or slight stress as a result of feedback received from staff and colleagues, 28% reported experiencing moderate stress, and 17% reported experiencing high or extreme stress as a result of such feedback. Of the respondents, 50% indicated that they experienced no or slight stress as a result of the feedback received from clients, and 50% indicated that they experienced moderate stress, while none of them reported experiencing high or extreme stress as a result of feedback from clients. Finally, 100% of the

Table 5

AMOUNT OF STRESS OF FACTORS RELATED TO FEEDBACK

| | <u>No/Slight</u> | <u>Moderate</u> | <u>High/Extreme</u> |
|---|------------------|-----------------|---------------------|
| Feedback from executives and administrators | 50 | 22 | 28 |
| Feedback from supervisors | 67 | 22 | 11 |
| Feedback from staff and colleagues | 55 | 28 | 17 |
| Feedback from clients | 50 | 50 | 0 |
| Feedback from the community | 100 | 0 | 0 |

(Results are listed in percentages. Total N=18.)

respondents reported experiencing no or slight stress as a result of feedback received from the community.

Administration

Regarding the administration, 61% of those surveyed reported experiencing no or slight stress as a result of the administrative style, 11% reported experiencing moderate stress, and 28% reported experiencing high or extreme stress as a result of the administrative style. Fifty-five percent of those surveyed reported experiencing no or slight stress as a result of the amount of innovation of the administration, while 28% reported experiencing moderate stress, and 17% reported experiencing high or extreme stress as a result of the administration's amount of innovation. Of the respondents, 56% indicated that they experienced no or slight stress in regards to the use of rules and regulations, while 22% indicated that they experienced moderate stress, and 22% stated that they experienced high or extreme stress in regards to the use of rules and regulations. Thirty-three percent of the respondents indicated that they experienced no or slight stress as a result of the accomodation to staff input and suggestions, 39% stated that they experienced moderate stress, and 28% reported that they experienced high or extreme stress as a result of the accomodation to staff input and suggestions.

Table 6

AMOUNT OF STRESS OF FACTORS RELATED TO ADMINISTRATION

| | <u>No/Slight</u> | <u>Moderate</u> | <u>High/Extreme</u> |
|---|------------------|-----------------|---------------------|
| Administrative style | 61 | 11 | 28 |
| Amount of innovation of the administration | 55 | 28 | 17 |
| Use of rules and regulations | 56 | 22 | 22 |
| Accomodation to staff input and suggestions | 33 | 39 | 28 |
| Agency goals and policies | 50 | 22 | 28 |
| Cooperation among staff | 78 | 17 | 5 |
| Cooperation with other agencies | 67 | 22 | 11 |
| Availability of other resources | 33 | 45 | 22 |

(Results are listed in percentages. Total N=18.)

Of those surveyed, 50% reported experiencing no or slight stress due to agency goals and policies, 22% reported experiencing moderate stress, and 28% reported experiencing high or extreme stress due to agency goals and policies. Of the respondents, 78% indicated that they experienced no or slight stress due to the cooperation among staff members, while 17% stated that they experienced moderate stress, and 5% indicated that they experienced high or extreme stress due to staff members' cooperation. Of those surveyed, 67% reported experiencing no or slight stress due to cooperation with other agencies, 22% reported experiencing moderate stress, and 11% reported experiencing high or extreme stress. Finally, 33% of those surveyed stated that they experienced no or slight stress in regards to the availability of other resources, 45% indicated that they experienced moderate stress, and 22% reported that they experienced high or extreme stress in regards to the availability of other resources.

Physical work setting

Regarding the physical work setting, 56% of the respondents reported experiencing no or slight stress due to temperature, 22% reported experiencing moderate stress, and 22% reported experiencing high or extreme stress due to temperature. Seventy-two of the respondents reported

experiencing no or slight stress due to noise, 22% reported experiencing moderate stress, and 6% reported experiencing high or extreme stress due to noise. Of those surveyed, 94% reported experiencing no or slight stress due to the decor, while 6% reported experiencing moderate stress, and 0% reported experiencing high or extreme stress due to the decor. Of the respondents, 67% of them indicated that they experienced no or slight stress due to space, while 22% indicated that they experienced moderate stress, and 11% stated that they experienced high or extreme stress due to space. Eighty-nine percent of those surveyed reported experiencing no or slight stress due to the location of their office, 11% reported experiencing moderate stress, and 0% reported experiencing high or extreme stress due to office location. Of those surveyed, 61% indicated that they experienced no or slight stress due to their amount of privacy, 17% stated that they experienced moderate stress, and 22% indicated that they experienced high or extreme stress due to their amount of privacy. Of the respondents, 83% reported experiencing no or slight stress due to lighting, while 17% reported experiencing moderate stress, and 0% reported experiencing high or extreme stress due to lighting. In regards to air circulation, 67% reported experiencing no or slight stress, 5% reported

Table 7

AMOUNT OF STRESS OF FACTORS
RELATED TO PHYSICAL WORK SETTING

| | <u>No/Slight</u> | <u>Moderate</u> | <u>High/Extreme</u> |
|---|------------------|-----------------|---------------------|
| Temperature | 56 | 22 | 22 |
| Noise | 72 | 22 | 6 |
| Decor | 94 | 6 | 0 |
| Space | 67 | 22 | 11 |
| Office location | 89 | 11 | 0 |
| Amount of privacy | 61 | 17 | 22 |
| Lighting | 83 | 17 | 0 |
| Air circulation | 67 | 5 | 28 |
| Equipment available | 61 | 33 | 6 |
| Amount of travel | 94 | 6 | 0 |
| Parking | 94 | 6 | 0 |
| Amount of safety risks during evening hours | 83 | 11 | 6 |

(Results are listed in percentages. Total N=18.)

experiencing moderate stress, and 28% reported experiencing high or extreme stress. Sixty-one percent of those surveyed indicated that they experienced no or slight stress due to the equipment available, 33% stated that they experienced moderate stress, and 6% indicated that they experienced high or extreme stress due to available equipment. Of those surveyed, 94% indicated that they experienced no or slight stress due to their amount of travel, while 6% stated that they experienced moderate stress, and 0% reported that they experienced high or extreme stress due to their amount of travel. Of the respondents, 94% indicated that they experienced no or slight stress due to parking, while 6% indicated that they experienced moderate stress, and 0% indicated that they experienced high or extreme stress due to parking. Finally, 83% of the respondents reported experiencing no or slight stress due to the amount of safety risks during evening hours, 11% indicated that they experienced moderate stress, and 6% stated that they experienced high or extreme stress due to the amount of safety risks during evening hours.

Professional background

Regarding professional background, 50% of the respondents reported experiencing no or slight stress due to their amount of previous educational preparation, 28%

Table 8

AMOUNT OF STRESS OF FACTORS
RELATED TO PROFESSIONAL BACKGROUND

| | <u>No/Slight</u> | <u>Moderate</u> | <u>High/Extreme</u> |
|--|------------------|-----------------|---------------------|
| Amount of previous educational preparation | 50 | 28 | 22 |
| Amount of previous work experience | 72 | 11 | 17 |
| Need for additional skill or knowledge | 55 | 17 | 28 |
| Choice of profession | 61 | 6 | 33 |

(Results are listed in percentages. Total N=18.)

reported experiencing moderate stress, and 22% reported experiencing high or extreme stress due to previous educational preparation. Of those surveyed, 72% indicated that they experienced no or slight stress in regards to their amount of previous work experience, 11% indicated that they experienced moderate stress, and 17% stated that they experienced high or extreme stress in regards to previous work experience. Fifty-five percent of the respondents reported experiencing no or slight stress in relation to their need for additional skill or knowledge, 17% reported experiencing moderate stress, and 28% reported experiencing high or extreme stress. Finally, 61% of the respondents indicated that they experienced no or slight stress due to their choice of profession, 6% stated that they experienced moderate stress, and 33% indicated that they experienced high or extreme stress due to their choice of profession.

Home stresses

Regarding home stresses, 72% of those surveyed indicated that they experienced no or slight stress due to marital issues, 11% stated that they experienced moderate stress, and 17% reported that they experienced high or extreme stress due to marital issues. Sixty-six percent of the respondents reported experiencing no or slight stress in regards to concerns about children, while 17%

Table 9

AMOUNT OF STRESS OF FACTORS RELATED TO HOME STRESSES

| | <u>No/Slight</u> | <u>Moderate</u> | <u>High/Extreme</u> |
|----------------------------|------------------|-----------------|---------------------|
| Marital issues | 72 | 11 | 17 |
| Concerns about children | 66 | 17 | 17 |
| Aging parents | 67 | 28 | 5 |
| Distance of work from home | 72 | 28 | 0 |

(Results are listed in percentages. Total N=18.)

reported experiencing moderate stress, and 17% reported experiencing high or extreme stress due to concerns about children. Of those surveyed, 67% stated that they experienced no or slight stress due to having aging parents, 28% reported experiencing moderate stress, and 5% indicated experiencing high or extreme stress due to having aging parents. Finally, 72% of the respondents indicated that they experienced stress due to the distance of work from their home, while 28% reported experiencing moderate stress, and none reported experiencing high or extreme stress due to the distance of work from their home.

Substance abuse issues

Regarding substance abuse issues specifically, 39% of those surveyed reported experiencing no or slight stress as a result of the number of involuntary clients seen, 33% reported experiencing moderate stress, and 28% reported experiencing high or extreme stress as a result of involuntary clients seen. Of the respondents, 39% reported that they experienced no or slight stress due to the relapse rate of clients, 17% stated that they experienced moderate stress, and 44% indicated that they experienced high or extreme stress due to the relapse rate. In regards to the dishonesty of clients, 28% of the respondents reported experiencing no or slight stress, 50%

reported experiencing moderate stress, and 22% reported experiencing high or extreme stress. Eleven percent of those surveyed indicated that they experienced no or slight stress due to the clients' level of denial, while 61% stated that they experienced moderate stress, and 28% indicated that they experienced high or extreme stress due to their clients' denial level. Of those surveyed, 28% reported experiencing no or slight stress as a result of enabling family members and friends of clients, 55% reported experiencing moderate stress, and 17% reported experiencing high or extreme stress as a result of their clients' enabling family members and friends. Of the respondents, 61% indicated that they experienced no or slight stress arranging intensive aftercare plans for their clients, 22% stated that they experienced moderate stress, and 17% indicated that they experienced high or extreme stress due to the clients' intensive aftercare plans. As a result of medical personnel's attitudes towards substance abuse clients, 78% of the respondents indicated that they experienced no or slight stress, 5% stated that they experienced moderate stress, and 17% reported that they experienced high or extreme stress. Finally, 89% of those surveyed reported experiencing no or slight stress due to the amount of time spent in court, while 5% reported experiencing moderate stress, and 5%

Table 10

AMOUNT OF STRESS OF FACTORS
RELATED TO SUBSTANCE ABUSE ISSUES

| | <u>No/Slight</u> | <u>Moderate</u> | <u>High/Extreme</u> |
|---|------------------|-----------------|---------------------|
| Number of involuntary clients | 39 | 33 | 28 |
| Relapse rate | 39 | 17 | 44 |
| Dishonesty of clients | 28 | 50 | 22 |
| Clients' level of denial | 11 | 61 | 28 |
| Enabling family members and friends of clients | 28 | 55 | 17 |
| Intensive aftercare plans | 61 | 22 | 17 |
| Medical personnel's attitudes towards substance abuse clients | 78 | 5 | 17 |
| Amount of time spent in court | 89 | 5 | 5 |

(Results are listed in percentages. Total N=18.)

reported experiencing high or extreme stress due to time spent in court.

Effects of Stress

In this section, respondents were asked to indicate whether or not they had experienced symptoms as a result of stress. If they had, they were asked to rate the severity of the symptom, based on a five-point scale.

In regards to physiological responses, 89% of the respondents indicated that they have experienced such symptoms. Of those reporting that they have experienced physiological responses, 25% reported that the symptoms were not severe or slightly severe, 56% described the symptoms as moderately severe, and 19% indicated that their symptoms were very severe or extremely severe.

Eighty-three percent of those surveyed reported experiencing shortness with co-workers as a result of stress. Of those responding affirmatively, 60% indicated that this symptom was not severe or slightly severe, 7% described this symptom as moderately severe, and 33% reported that they experienced the symptom to be very or extremely severe.

In regards to decreased performance, 67% reported experiencing this symptom in response to stress. Of those acknowledging this symptom, 42% rated it as not severe or slightly severe, 16% described it as moderately severe,

and 42% stated that the symptom was very or extremely severe for them.

Eighty-three percent of the respondents indicated that they experienced shortness with their family as a result of stress. Fifty-four percent of those responding affirmatively reported that the symptom was not severe or slightly severe for them, 33% described this symptom as moderately severe, and 13% described this symptom as very or extremely severe.

Difficulty concentrating as a result of stress was acknowledged by 72% of the respondents, with 31% of them rating this symptom as not severe or slightly severe, 61% of them rating this symptom as moderately severe, and 8% of them rating this symptom as very or extremely severe.

In regards to overidentification with clients' problems, 39% of those surveyed responded that this symptom occurs for them in response to stress. Forty-three percent of those acknowledging this symptom described it as not severe or slightly severe, 14% described it as moderately severe, and 43% described it as very or extremely severe.

Eighty-three percent of those surveyed indicated that they have difficulty relaxing as a result of stress. Of those having difficulty relaxing, 53% indicated that they experienced this symptom as not severe or slightly

severe, 20% stated that they experienced this symptom as moderately severe, and 27% reported that they experienced this symptom as very or extremely severe.

Of the respondents, 72% reported experiencing a lack of energy due to stress. Of those responding affirmatively, 31% described this symptom as not severe or slightly severe, 8% described it as moderately severe, and 61% described the symptom as very or extremely severe.

Seventy-eight percent of those surveyed reported experiencing a sense of powerlessness due to stress, with 42% rating this symptom as not severe or slightly severe, 29% rating it as moderately severe, and 29% rating it as very or extremely severe.

Seventy-eight percent of the respondents reported experiencing reactions to clients such as stereotyping, blaming, and distancing themselves from their clients as a result of stress. Of those responding affirmatively, 36% indicated that this symptom was not severe or slightly severe, 36% stated that this symptom was moderately severe, and 28% reported that this symptom was very or extremely severe.

Of those surveyed, 61% indicated that they dread going to work in response to stress. Of those respondents who dread going to work, 27% indicated that they experienced this symptom as not severe or slightly severe,

Table 11

PRESENCE AND SEVERITY OF SYMPTOMS RELATED TO STRESS

| | <u>Presence</u> | | <u>Severity</u> | | |
|---|-----------------|-----------|------------------|-----------------|---------------------|
| | <u>yes</u> | <u>no</u> | <u>no/slight</u> | <u>moderate</u> | <u>very/extreme</u> |
| Physiological responses | 89 | 11 | 25 | 56 | 19 |
| Shortness with co-workers | 83 | 17 | 60 | 7 | 33 |
| Decreased performance | 67 | 33 | 42 | 16 | 42 |
| Shortness with family | 83 | 17 | 54 | 33 | 13 |
| Difficulty concentrating | 72 | 28 | 31 | 61 | 8 |
| Overidentification with clients' problems | 39 | 61 | 43 | 14 | 43 |
| Inability to relax | 83 | 17 | 53 | 20 | 27 |
| Lack of energy | 72 | 28 | 31 | 8 | 61 |
| Sense of powerlessness | 78 | 22 | 42 | 29 | 29 |
| Reactions to clients | 78 | 22 | 36 | 36 | 28 |
| Dread going to work | 61 | 39 | 27 | 36 | 36 |
| Marriage/family problems | 33 | 67 | 50 | 33 | 17 |
| Alcohol/drug problems | 11 | 89 | 50 | 0 | 50 |

(Results are listed in percentages. Total N=18.)

36% indicated that they experienced this symptom as moderately severe, and 36% indicated that they experienced this symptom as very or extremely severe.

Thirty-three percent of the respondents reported experiencing marriage and family problems as a result of stress, with 50% rating this symptom as not severe or slightly severe, 33% rating this symptom as moderately severe, and 17% rating this symptom as very or extremely severe.

Finally, two of the eighteen respondents, or 11%, reported experiencing alcohol or drug problems as a result of stress. One respondent described the symptom as slightly severe, and the other respondent described the symptom as extremely severe.

Non-Job Related Stress Reducers

In this section, respondents were asked to indicate what means of stress reduction they utilized outside of work. They were also asked to indicate how helpful they experienced these stress reducers to be, based on a five-point scale.

Seventy-two percent of those surveyed indicated that they utilized exercise as a means of stress reduction. Of those who exercised, 8% indicated that they found exercise to be not helpful or slightly helpful in reducing stress, 31% indicated that they found exercise to be moderately

helpful, and 61% indicated that they found exercise to be very helpful or extremely helpful in reducing stress.

Of those surveyed, 61% reported using nutrition as a means of stress reduction, with 18% describing nutrition as not helpful or slightly helpful in reducing stress, 27% describing nutrition as moderately helpful, and 55% describing nutrition as very or extremely helpful as a means of stress reduction.

Of the respondents, 100% reported that they talk to friends as a way to reduce stress. Of the respondents, 6% stated that they found talking to friends to be not helpful or slightly helpful in reducing stress, 22% indicated that they found this to be moderately helpful, and 72% reported that they found talking to friends to be very or extremely helpful in reducing stress.

In regards to utilizing outside supervision, 33% of those surveyed reported using this as a means of stress reduction. Seventeen percent of those utilizing outside supervision reported that they found this to be not helpful or slightly helpful in reducing stress, 33% described it as moderately helpful, and 50% indicated that they found it to be very or extremely helpful in reducing stress.

Of the respondents, 94% stated that they utilized a sense of humor to reduce stress, with 6% describing a

sense of humor as not helpful or slightly helpful, 29% describing a sense of humor as moderately helpful, and 65% describing a sense of humor as very or extremely helpful in reducing stress.

Thirty-three percent of those surveyed reported keeping a diary as a means of stress reduction. Of those keeping a diary, 33% indicated that they found it to be not helpful or slightly helpful, 0% indicated that they found it to be moderately helpful, and 67% indicated that they found it to be very or extremely helpful.

In regards to reading as a means of stress reduction, 78% of the respondents indicated that they use this method. Of those who read in order to reduce stress, 22% reported that they found this to be not helpful or slightly helpful, 14% reported that they found this to be moderately helpful, and 64% reported that they found this to be very or extremely helpful as a means of stress reduction.

Seventy-two percent of those surveyed indicated that they utilize hobbies as a means of stress reduction. Of those with hobbies, 23% indicated that they found hobbies to be not helpful or slightly helpful, 31% indicated that they found hobbies to be moderately helpful, and 46% indicated that they found hobbies to be very or extremely helpful in reducing stress.

Of the respondents, 78% stated that they utilize involvement in outside activities, groups, or clubs to reduce stress, with 7% describing this as not helpful or slightly helpful in reducing stress, 14% describing this as moderately helpful, and 79% describing this as very or extremely helpful as a means of stress reduction.

Twenty-two percent of the respondents reported utilizing training courses as a means of stress reduction, with 0% describing this as not helpful or slightly helpful, 50% describing this as moderately helpful, and 50% describing this as very or extremely helpful in reducing stress.

Of those surveyed, 67% reported using vacations to reduce stress. Of those using vacations as a means of stress reduction, 100% reported experiencing this as a very or extremely helpful way to reduce stress.

Of the respondents, 72% reported utilizing family support as a means of stress reduction, with 15% indicating that they found family support to be not helpful or slightly helpful, 8% indicating that they found it to be moderately helpful, and 77% indicating that they found it to be very or extremely helpful in reducing stress.

Table 12

USE AND HELPFULNESS OF NON-JOB RELATED STRESS REDUCERS

| | <u>Use</u> | | <u>Helpfulness</u> | | |
|---|------------|-----------|--------------------|-----------------|---------------------|
| | <u>yes</u> | <u>no</u> | <u>no/slight</u> | <u>moderate</u> | <u>very/extreme</u> |
| Exercise | 72 | 28 | 8 | 31 | 61 |
| Nutrition | 61 | 39 | 18 | 27 | 55 |
| Talking to friends | 100 | 0 | 6 | 22 | 72 |
| Outside supervision | 33 | 67 | 17 | 33 | 50 |
| Sense of humor | 94 | 6 | 6 | 29 | 65 |
| Keep a diary | 33 | 67 | 33 | 0 | 67 |
| Reading | 78 | 22 | 22 | 14 | 64 |
| Hobbies | 72 | 28 | 23 | 31 | 46 |
| Involvement in outside activities | 78 | 22 | 7 | 14 | 79 |
| Training courses | 22 | 78 | 0 | 50 | 50 |
| Vacations | 67 | 33 | 0 | 0 | 100 |
| Family support | 72 | 28 | 15 | 8 | 77 |

(Results are listed in percentages. Total N=18.)

Job Related Stress Reducers

In this section, respondents were asked what means of stress reduction were provided for them by their agency. They were also asked to rate how helpful they experienced these stress reducers to be, based on a five-point scale.

Of those surveyed, 100% reported talking to co-workers as a means of stress reduction, with 5% describing this as not helpful or slightly helpful, 28% describing this as moderately helpful, and 67% describing this as very or extremely helpful in reducing stress.

In regards to attending group meetings in order to reduce stress, 61% of those surveyed indicated utilizing this method. Of those utilizing group meetings to reduce stress, 46% reported that they found this to be not helpful or slightly helpful, 36% indicated that they found this to be moderately helpful, and 18% reported that they found this to be very or extremely helpful.

Ninety-four percent of the respondents indicated that they utilized individual supervision as a means of stress reduction. Of those utilizing individual supervision, 23% stated that they found individual supervision to be not helpful or slightly helpful, 18% indicated that they found it to be moderately helpful, and 59% reported that they found it to be very or extremely helpful in reducing stress.

In regards to utilizing group supervision to reduce stress, 56% of the respondents reported using group supervision as a means of stress reduction. Of those utilizing group supervision, 60% indicated that they found it to be not helpful or slightly helpful in reducing stress, 0% described group supervision as moderately helpful, and 40% stated that they found group supervision to be very or extremely helpful as a means of stress reduction.

Eleven percent of those surveyed reported utilizing the services of an outside consultant in order to reduce stress, with 50% reporting that they found the use of an outside consultant to be slightly helpful and 50% reporting that they found this to be very helpful in reducing stress.

Of the respondents, 17% indicated that they utilized membership in an organization as a means of stress reduction, with 33% describing this as not helpful or slightly helpful in reducing stress, 0% describing this as moderately helpful, and 67% describing this as very or extremely helpful as a means of stress reduction.

Fifty-six percent of those surveyed indicated that they utilized reading at work in reducing stress. Of those who utilize reading, 50% indicated that they found reading to be not helpful or slightly helpful, 40% stated

that they found reading to be moderately helpful, and 10% indicated that they found reading to be very or extremely helpful in reducing stress.

None of those surveyed reported utilizing staff retreats as a means of stress reduction.

Of the respondents, 89% indicated that they attended inservices to hear special speakers at work, with 50% reporting that they found inservices to be not helpful or slightly helpful as a means of stress reduction, 38% reporting that they found inservices to be moderately helpful, and 12% reporting that they found inservices to be very or extremely helpful in reducing stress.

Sixty-one percent of those surveyed reported attending professional meetings or trainings. Of those attending professional meetings or trainings, 55% stated that they found this to be not helpful or slightly helpful in reducing stress, 9% indicated that they found this to be moderately helpful, and 36% stated that they found this to be very or extremely helpful as a means of stress reduction.

Finally, 11% of those surveyed indicated that they attended stress management courses as a means of stress reduction, with 50% describing this as slightly helpful in reducing stress and 50% describing this as extremely helpful in reducing stress.

Table 13

USE AND HELPFULNESS OF JOB RELATED STRESS REDUCERS

| | <u>Use</u> | | <u>Helpfulness</u> | | |
|--|------------|-----------|--------------------|-----------------|---------------------|
| | <u>yes</u> | <u>no</u> | <u>no/slight</u> | <u>moderate</u> | <u>very/extreme</u> |
| Talking to co-workers | 100 | 0 | 5 | 28 | 67 |
| Group meetings | 61 | 39 | 46 | 36 | 18 |
| Individual supervision | 94 | 6 | 23 | 18 | 59 |
| Group supervision | 56 | 44 | 60 | 0 | 40 |
| Use of outside consultant | 11 | 89 | 50 | 0 | 50 |
| Membership in an organization | 17 | 83 | 33 | 0 | 67 |
| Reading | 56 | 44 | 50 | 40 | 10 |
| Staff retreats | 0 | 100 | 0 | 0 | 0 |
| Inservices | 89 | 11 | 50 | 38 | 12 |
| Attendance of professional trainings | 61 | 39 | 55 | 9 | 36 |
| Stress management courses | 11 | 89 | 50 | 0 | 50 |

(Results are listed in percentages. Total N=18.)

Supervision

In this section, respondents were asked whether or not the supervision they are currently receiving provided certain benefits, and if so, they were asked to rate how helpful they felt that benefit was in reducing stress, based on a five-point scale. In addition, they were asked whether or not supervision should idealistically provide certain benefits, and if so, they were asked to rate how helpful they felt that benefit would be in reducing stress, based on a five-point scale.

In terms of discouraging overcommitment, 83% of the respondents felt that the supervision they are currently receiving provides that, with 27% describing this as not helpful or slightly helpful in reducing stress, 27% describing this as moderately helpful in reducing stress, and 46% describing this as very or extremely helpful in reducing stress. Of the respondents, 94% indicated that they felt supervision should idealistically discourage overcommitment, with 23% reporting that they believed this would not be helpful or would be slightly helpful in reducing stress, 18% reporting that they believed this would be moderately helpful in reducing stress, and 59% reporting that they believed this would be very or extremely helpful in reducing stress.

Eighty-three percent of those surveyed indicated that they believed that the supervision that they are currently receiving encourages setting realistic limits, with 13% describing this as not helpful or slightly helpful in reducing stress, 20% describing this as moderately helpful, and 67% describing this as very or extremely helpful in reducing stress. Ninety-four percent of those surveyed indicated that they felt that supervision should idealistically encourage setting realistic limits, with 12% stating that they believed this would not be helpful or would be slightly helpful in reducing stress, 18% indicating that they believed this would be moderately helpful, and 70% indicating that they believed this would be very or extremely helpful in reducing stress.

Of those surveyed, 83% reported feeling as though their current supervision encourages self-pacing, with 33% describing this as not helpful or slightly helpful in reducing stress, 33% describing this as moderately helpful, and 33% describing this as very or extremely helpful in reducing stress. Of those surveyed, 89% reported feeling as though supervision should idealistically encourage self-pacing, with 19% indicating that they felt this would not be helpful or would be slightly helpful in reducing stress, 37% indicating that

they felt this would be moderately helpful, and 44% indicating that they felt this would be very or extremely helpful in reducing stress.

Of the respondents, 50% indicated that they felt their supervision currently encourages defining goals in smaller, more achievable units, with 44% describing this as not helpful or slightly helpful in reducing stress, 11% describing this as moderately helpful, and 44% describing this as very or extremely helpful in reducing stress. Of the respondents, 89% indicated that they felt supervision should idealistically encourage defining goals in smaller, more achievable units, with 25% indicating that they believed this would not be helpful or would be slightly helpful in reducing stress, 31% indicating that they believed this would be moderately helpful in reducing stress, and 44% indicating that they believed this would be very or extremely helpful in reducing stress.

Sixty-seven percent of those surveyed reported that they believed that their current supervision encourages time management improvement, with 33% stating that they found this to be not helpful or slightly helpful in reducing stress, 33% stating that they found this to be moderately helpful, and 33% stating that they found this to be very or extremely helpful in reducing stress. Eighty-nine percent of those surveyed reported that they

believed that supervision should idealistically encourage time management improvement, with 25% indicating that they believed this would not be helpful or would be slightly helpful in reducing stress, 19% indicating that they believed this would be moderately helpful, and 56% indicating that they believed this would be very or extremely helpful in reducing stress.

Of the respondents, 78% indicated that they believed that their current supervision encourages delegation of responsibilities, with 21% reporting that they found this to be not helpful or slightly helpful in reducing stress, 14% stating that they found this to be moderately helpful in reducing stress, and 64% reporting that they found this to be very or extremely helpful in reducing stress. Of the respondents, 94% indicated that they believed that supervision should idealistically encourage delegation of responsibilities, with 12% reporting that they believed this would not be helpful or would be slightly helpful, 18% reporting that they believed this would be moderately helpful, and 70% indicating that they believed this would be very or extremely helpful in reducing stress.

In regards to encouraging personal time planning, 72% of those surveyed indicated that they believed that their current supervision provides it, with 31% indicating that they found this to be not helpful or slightly helpful

in reducing stress, 46% stating that they found this to be moderately helpful, and 23% reporting that they found this to be very or extremely helpful in reducing stress.

Eighty-nine percent of those surveyed indicated that they believed that supervision should idealistically encourage personal time planning, with 19% believing that this would not be helpful or would be slightly helpful in reducing stress, 56% believing that this would be moderately helpful in reducing stress, and 25% believing that this would be very or extremely helpful in reducing stress.

Of those surveyed, 100% indicated that they believed that their current supervision provides support, with 22% indicating that they found this to be not helpful or slightly helpful in reducing stress, 0% indicating that they found this to be moderately helpful, and 78% indicating that they found this to be very or extremely helpful in reducing stress. Of those surveyed, 94% indicated that they believed that supervision should idealistically provide support, with 6% reporting that they believed that this would be not helpful or slightly helpful in reducing stress, 0% reporting that they believed that this would be moderately helpful, and 94% reporting that they believe that this would be very or extremely helpful in reducing stress.

In regards to decreasing feelings of isolation, 89% of those surveyed indicated that they felt that their current supervision provides it, with 19% stating that they found it to be not helpful or slightly helpful in reducing stress, 19% indicating that they found it to be moderately helpful, and 62% reporting that they found it to be very or extremely helpful. Eighty-nine percent of those surveyed indicated that they felt that supervision should idealistically decrease feelings of isolation, with 19% stating that they believed it would not be helpful or would be slightly helpful, 6% indicating that they believed it would be moderately helpful, and 75% reporting that they believed it would be very or extremely helpful in reducing stress.

Of the respondents, 89% reported that they feel that their current supervision accents positive achievements, with 19% indicating that they found this to be not helpful or slightly helpful in reducing stress, 12% stating that they found this to be moderately helpful, and 69% reporting that they found this to be very or extremely helpful in reducing stress. Ninety-four percent of the respondents reported believing that supervision should idealistically accent positive achievements, with 6% indicating that they believed this would not be helpful or would be slightly helpful in reducing stress, 12% stating

that they believed this would be moderately helpful, and 82% reporting that they believed that this would be very or extremely helpful in reducing stress.

Of those surveyed, 72% reported that their current supervision monitors and discourages overworking, with 31% stating that they found this to be not helpful or slightly helpful in reducing stress, 31% reporting that they found this to be moderately helpful, and 38% indicating that they found this to be very or extremely helpful in reducing stress. Of those surveyed, 94% reported that they believed that supervision should idealistically monitor and discourage overworking, with 18% indicating that they believed that this would not be helpful or would be slightly helpful, 29% reporting that they believed that this would be moderately helpful, and 53% stating that they believed that this would be very or extremely helpful in reducing stress.

Of the respondents, 67% reported that their current supervision assists in developing coping strategies, with 50% indicating that they found this to be not helpful or slightly helpful in reducing stress, 25% indicating that they found this to be moderately helpful, and 25% indicating that they found this to be very or extremely helpful in reducing stress. Of the respondents, 100% reported that they believed that supervision should

idealistically assist in developing coping styles, with 17% reporting that they believed this would be not helpful or slightly helpful in reducing stress, 17% reporting that they believed this would be moderately helpful, and 66% reporting that they believed this would be very or extremely helpful in reducing stress.

Fifty percent of those surveyed reported that their current supervision encourages greater variety in assignments, with 33% stating that they found this to be not helpful or slightly helpful in reducing stress, 22% indicating that they found this to be moderately helpful, and 45% indicating that they found this to be very or extremely helpful in reducing stress. Ninety-four percent of those surveyed reported that they believed that supervision should idealistically encourage greater variety in assignments, with 18% indicating that they believed that this would not be helpful or would be slightly helpful in reducing stress, 29% stating that they believed that this would be moderately helpful, and 53% reporting that they believed that this would be very or extremely helpful in reducing stress.

In regards to encouraging ventilation of feelings, 72% of those surveyed reported that they felt that their current supervision provides this, with 15% indicating that they believed this to be not helpful or slightly

helpful in reducing stress, 8% reporting that they believed this to be moderately helpful, and 77% stating that they believed this to be very or extremely helpful in reducing stress. Ninety-four percent of those surveyed reported that they felt that supervision should idealistically encourage ventilation of feelings, with 6% indicating that they believed that this would not be helpful or would be slightly helpful in reducing stress, 23% reporting that they believed that this would be moderately helpful, and 71% stating that they believed that this would be very or extremely helpful in reducing stress.

Ninety-four percent of the respondents reported that they believed that their current supervision increases their sense of confidence and competence, with 12% reporting that they found this to be not helpful or slightly helpful in reducing stress, 47% reporting that they found this to be moderately helpful, and 41% reporting that they found this to be very or extremely helpful in reducing stress. Ninety-four percent of the respondents indicated that they believed that supervision should idealistically increase their sense of confidence and competence, with 6% reporting that they believed this would not be helpful or would be slightly helpful in reducing stress, 11% indicating that they believed this

Table 14

RATINGS OF HOW SUPERVISION HELPS IN MANAGING STRESS

| | <u>Currently</u> | | | | | <u>Ideally</u> | | | | |
|---|------------------|-----------|-----------------------|-------------|--------------------------|----------------|-----------|-----------------------|-------------|--------------------------|
| | <u>Helps</u> | | <u>Helpfulness</u> | | | <u>Helps</u> | | <u>Helpfulness</u> | | |
| | <u>yes</u> | <u>no</u> | <u>no/ slight</u> | <u>mod.</u> | <u>very/ extreme</u> | <u>yes</u> | <u>no</u> | <u>no/ slight</u> | <u>mod.</u> | <u>very/ extreme</u> |
| Discourages overcommitment | 83 | 17 | 27 | 27 | 46 | 94 | 6 | 23 | 18 | 59 |
| Encourages setting realistic limits | 83 | 17 | 13 | 20 | 67 | 94 | 6 | 12 | 18 | 70 |
| Encourages self-pacing | 83 | 17 | 33 | 33 | 33 | 89 | 11 | 19 | 37 | 44 |
| Encourages defining goals in achievable units | 50 | 50 | 44 | 11 | 44 | 89 | 11 | 25 | 31 | 44 |
| Encourages time management improvement | 67 | 33 | 33 | 33 | 33 | 89 | 11 | 25 | 19 | 56 |
| Encourages delegation of responsibilities | 78 | 22 | 21 | 14 | 64 | 94 | 6 | 12 | 18 | 70 |

Table 14 (cont.)

| | <u>Currently</u> | | | | | <u>Ideally</u> | | | | |
|---|------------------|-----------|-----------------------|-------------|--------------------------|----------------|-----------|-----------------------|-------------|--------------------------|
| | <u>Helps</u> | | <u>Helpfulness</u> | | | <u>Helps</u> | | <u>Helpfulness</u> | | |
| | <u>yes</u> | <u>no</u> | <u>no/ slight</u> | <u>mod.</u> | <u>very/ extreme</u> | <u>yes</u> | <u>no</u> | <u>no/ slight</u> | <u>mod.</u> | <u>very/ extreme</u> |
| Encourages personal time planning | 72 | 28 | 31 | 46 | 23 | 89 | 11 | 19 | 56 | 25 |
| Provides support | 100 | 0 | 22 | 0 | 78 | 94 | 6 | 6 | 0 | 94 |
| Decreases feelings of isolation | 89 | 11 | 19 | 19 | 62 | 89 | 11 | 19 | 6 | 75 |
| Accents positive achievements | 89 | 11 | 19 | 12 | 69 | 94 | 6 | 6 | 12 | 82 |
| Monitors and discourages overworking | 72 | 28 | 31 | 31 | 38 | 94 | 6 | 18 | 29 | 53 |
| Assists in developing coping strategies | 67 | 33 | 50 | 25 | 25 | 100 | 0 | 17 | 17 | 66 |
| Encourages greater variety in assignments | 50 | 50 | 33 | 22 | 45 | 94 | 6 | 18 | 29 | 53 |

Table 14 (cont.)

| | <u>Currently</u> | | | | | <u>Ideally</u> | | | | |
|--|------------------|-----------|-----------------------|-------------|--------------------------|----------------|-----------|-----------------------|-------------|--------------------------|
| | <u>Helps</u> | | <u>Helpfulness</u> | | | <u>Helps</u> | | <u>Helpfulness</u> | | |
| | <u>yes</u> | <u>no</u> | <u>no/ slight</u> | <u>mod.</u> | <u>very/ extreme</u> | <u>yes</u> | <u>no</u> | <u>no/ slight</u> | <u>mod.</u> | <u>very/ extreme</u> |
| Encourages ventilation of feelings | 72 | 28 | 15 | 8 | 77 | 94 | 6 | 6 | 23 | 71 |
| Increases sense of confidence and competence | 94 | 6 | 12 | 47 | 41 | 94 | 6 | 6 | 11 | 53 |

would be moderately helpful, and 53% stating that they believed this would be very or extremely helpful in reducing stress.

Finally, 61% of the respondents indicated that they prefer some type of individual supervision, while the other respondents gave other various answers. None of those surveyed indicated a preference for group supervision.

The next chapter will provide a discussion regarding the results of this study which were reported in this chapter.

CHAPTER V

DISCUSSION

In this chapter, some observations will be made based on the results discussed in the last chapter regarding the nature of stress, the effects of stress, non-job related and job related stress reducers, and supervision of counselors in substance abuse treatment centers.

Nature of Stress

In regards to job rewards, the majority of the counselors surveyed reported experiencing moderate to extreme stress only in relation to their salary. It is likely that most counselors feel that they are underpaid. The majority of the respondents did not report experiencing such stress in relation to the other job rewards listed on the survey.

In regards to job functions, the majority of those surveyed reported experiencing moderate to extreme stress in relation to the significance of their work, their level of responsibility, and the challenges of their work. It appears that the counselors surveyed experienced more stress in relation to job functions which are more

directly associated with their impact on and effectiveness with their clients.

The majority of counselors indicated that in regards to job pressures, they experienced moderate to extreme stress due to the level of job pressure, the size of their caseload, the amount of paperwork required, the composition of their caseload, client/case outcomes, the amount of direct client contact that they have, and the amount of involuntary clients seen. Again, the counselors surveyed appeared to experience more stress in relation to those job pressures which are more directly related to direct client contact and case outcomes, which may be a result of the responsibility that counselors feel to be effective in impacting the lives of their clients. It was noted that over half of the respondents reported experiencing high or extreme stress as a result of the paperwork required. This is most likely due to the fact that government-funded social service agencies require careful documentation of services provided to clients and treatment progress of clients in order to meet state and federal guidelines for funding sources.

In regards to the administration, the majority of counselors surveyed reported experiencing moderate to extreme stress due to the accomodation of the administration to staff input and suggestions and due to the availability of other resources. It is likely that in

order for counselors to feel that they are able to be helpful to their clients, they would like to be able to make useful suggestions to administrative staff and would like to make more effective referrals to other community agencies.

In regards to specific substance abuse issues, the majority of those surveyed reported experiencing moderate to extreme stress as a result of the number of involuntary clients seen, the relapse rate of clients, the dishonesty of clients, clients' level of denial, and clients' enabling family members and friends.

The majority of respondents did not report experiencing moderate to extreme stress due to factors in the areas of feedback received from others, the physical work setting, their professional background, or home stresses. This may be due to the fact that the factors listed in these areas are not directly related to the relationships between the counselors and their clients.

The significant factor that appears to be evident regarding the nature of stress of counselors working in substance abuse treatment centers is that, with the possible exception of salary, the factors which appear to cause the majority of stress in counselors seem to be related directly or indirectly to the counselors' relationships with their clients and whether or not they

feel that they can help make a difference in their clients' lives.

Effects of Stress

The majority of the counselors surveyed reported experiencing the following symptoms as a result of stress: physiological responses, shortness with co-workers, decreased performance, shortness with family members, difficulty concentrating, an inability to relax, a lack of energy, a sense of powerlessness, reactions to clients (such as stereotyping, blaming, and distancing from them), and dreading to go to work. The majority did not identify overidentification with clients' problems, marriage and family problems, or alcohol and drug problems as symptoms experienced as a result of stress.

Of those symptoms identified by the majority of respondents, the majority described experiencing physiological responses, decreased performance, difficulty concentrating, a lack of energy, a sense of powerlessness, reactions to clients, and dreading to go to work as moderately to extremely severe symptoms. In addition, over half of those surveyed described a lack of energy as being a very severe or extremely severe symptom for them.

Non-Job Related and Job Related Stress Reducers

The majority of those surveyed reported utilizing the following non-job related means of stress reduction: exercise, nutrition, talking to friends, a sense of humor,

reading, hobbies, involvement in outside activities/groups/clubs, vacations, and family support. Use of outside supervision, keeping a diary, and training courses were not identified by the majority of those surveyed as means of stress reduction which they utilize. Of those stress reducers which the majority of respondents reported using, they indicated that with the exception of hobbies, they found all of the non-job related stress reducers to be very or extremely helpful in reducing stress. In addition, 100% of those who identified vacations as a means of stress reduction for them stated that they found vacations to be very helpful or extremely helpful in reducing stress.

The majority of those surveyed reported utilizing the following job related means of stress reduction: talking to co-workers, group meetings, individual supervision, group supervision, reading, inservices and special speakers, and attendance of professional meetings and trainings. Use of an outside consultant, membership in an organization, staff retreats, and stress management courses were not reported to be used as a means of stress reduction by a majority of the respondents. In contrast to the non-job related stress reducers, however, only talking to co-workers and individual supervision were described by the majority of respondents to be very helpful or extremely helpful in reducing stress.

It appears that most of the counselors surveyed found non-job related stress reducers to be more beneficial in reducing stress than job related stress reducers.

Supervision

More than half of the counselors surveyed reported that the supervision they now receive provides them with most of the listed benefits, including discouraging overcommitment, encouraging setting realistic limits, encouraging self-pacing, encouraging time management improvement, encouraging delegation of responsibilities, encouraging personal time planning, providing support, decreasing feelings of isolation, accenting positive achievements, monitoring and discouraging overworking, assisting in developing coping strategies, encouraging ventilation of feelings, and increasing a sense of confidence and competence. Exactly half of the respondents indicated that their supervision also encourages defining goals in smaller and more achievable units and encourages greater variety in assignments. Six of these benefits were described by a majority of the respondents to be very helpful or extremely helpful in reducing stress, including encouraging setting realistic limits, encouraging delegation of responsibilities, providing support, decreasing feelings of isolation,

accenting positive achievements, and encouraging ventilation of feelings.

In comparing the list of benefits which the respondents indicated they are now receiving in supervision with the list of benefits which the respondents indicated they felt supervision should idealistically provide, the greatest discrepancies were noted to be between the number of respondents who felt their supervision encourages defining goals in smaller and more achievable units and the number of respondents who felt supervision should idealistically encourage this, between the number of respondents who felt that their supervision assists them in developing coping strategies and the number of respondents who felt that supervision should idealistically assist in this, and between the number of respondents who felt that their supervision encourages greater variety in assignments and the number of respondents who felt that supervision should idealistically encourage this. On a somewhat smaller scale, discrepancies were also noted between respondents who felt that their supervision encourages time management improvement and respondents who felt that supervision should idealistically encourage this, between respondents who felt that their supervision monitors and discourages overworking and respondents who felt that supervision

should idealistically monitor and discourage this, and between respondents who felt that their supervision encourages ventilation of feelings and respondents who felt that supervision should idealistically encourage this. Perhaps significantly, the benefits that respondents found to be most lacking in the supervision which they now receive are those which would most likely be the most beneficial in helping to reduce the stress which they experience in relation to their relationships with their clients and whether or not they feel that they can help make a difference in their clients' lives.

CHAPTER VI

SUMMARY AND CONCLUSIONS

This pilot study was designed to investigate more closely the use of supervision to reduce counselor stress in therapists working in the substance abuse treatment field by surveying counselors in such agencies directly on the issues of stress and the availability of supervision. Based on the results of this study, several of the research questions listed in Chapter I generated some possible answers which may be explored in future studies. There are also a number of limitations to this study which provide implications for future research.

Future Questions to be Addressed

Based on the results of this study, the research questions listed in Chapter I generated the following questions for future research:

- 1) Substance abuse counselors experience the most stress as a result of their relationships with their clients and whether or not they feel that they can help make a difference in their clients' lives.

- 2) Substance abuse counselors find non-job related stress reducers more helpful in reducing stress than job related stress reducers.

3) Substance abuse counselors want more help through individual supervision at work to develop those skills which will more effectively help them manage the stress that they experience.

Limitations of the Study

The limitations of this study can be described as follows:

1) The sample size used in this study was very small. In addition, the sample was not representative in terms of sex, age, or race.

2) Counselors from only one agency were sampled, which limits the usefulness of some of the information collected in terms of being able to generalize findings to apply to counselors in other substance abuse treatment centers.

3) The results of this study were reported only in percentages, so significance, validity, and reliability data is unavailable.

4) The stress factors listed in the survey were not clearly defined, therefore each respondent formulated his/her own definition. Additionally, the stress factors were purposefully listed in neutral terms, without specifying "too much" or "too little" of each particular factor.

Implications for Future Research

Future studies need to more closely examine the relationship between the use of supervision and stress reduction in counselors working in substance abuse treatment centers. In future studies, stress needs to be more clearly defined by allowing those surveyed to indicate whether they experience "too much" or "too little" of each of the listed stress factors. Also, future studies may need to utilize other means of collecting data about stress, such as using published stress test measures and by using an interview format to collect data. Future studies need to begin exploring the questions generated in this pilot study by studying a greater number of substance abuse counselors in order to provide representation across a greater geographical area and across gender and ethnicity variables. Also, more appropriate statistical tests may be utilized on the collected data to determine the relative significance of the findings.

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APPROVAL SHEET

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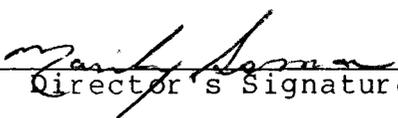
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The final copies have been examined by the director of the thesis and the signature which appears below verifies the fact that any necessary changes have been incorporated and that the thesis is now given final approval by the Committee with reference to content and form.

The thesis is therefore accepted in partial fulfillment of the requirements for the degree of Master of Arts.

4-19-93

Date


Director's Signature