

UNIVERSITY OF OKLAHOMA

GRADUATE COLLEGE

BURNOUT AND ENGAGEMENT IN CORRECTIONAL MENTAL HEALTH
PROFESSIONALS: THE ROLE OF ORGANIZATIONAL FACTORS

A DISSERTATION

SUBMITTED TO THE GRADUATE FACULTY

in partial fulfillment of the requirements for the

Degree of

DOCTOR OF PHILOSOPHY

By

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Norman, Oklahoma

2013

BURNOUT AND ENGAGEMENT IN CORRECTIONAL MENTAL HEALTH
PROFESSIONALS: THE ROLE OF ORGANIZATIONAL FACTORS

A DISSERTATION APPROVED FOR THE
DEPARTMENT OF EDUCATIONAL PSYCHOLOGY

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Dedication

To Rob, My Post.

To Madeleine Grace and Caroline Jeanne:

You are my motivation, my inspiration, and a daily source of pride.

Acknowledgements

I would like to thank my advisor, Dr. Jody Newman, for the grace, empathy, insight, humor, and patience she brings to all of our encounters. I will always be grateful for the opportunity to grow under her guidance. I would also like to thank my committee, Dr. Denise Beesley, Dr. Melissa Frey, Dr. Susan Sharp and Dr. Robert Terry for their support, guidance and helpful suggestions. I am fortunate to have a mentor who helped shape the practice of correctional psychology, Dr. Robert Powitzky. His guidance and instruction are invaluable. I would also like to offer a special thank you to Dr. Mary Rolison and Dr. Ryan Jones, who introduced me to correctional mental health units and the importance of our work as psychologists in the correctional system. More recently, Dr. Trent Engel deserves a round of applause for his amazing balancing acts: work and family, offenders and officers, administrators, peers and supervisees. When it's my turn, I hope to provide supervision with as much compassion and insight. There are a number of friends who kept me focused, relaxed, and engaged through this arduous journey: Best friend extraordinaire, Erika Mattingly, for providing a consistent reminder of our youthful potential; the most supportive cohort I could ask for, Aaron Jennings, Jessica Brody, Jon Hart, Joshua Wilson, Mark Yapelli, and Scott Drabenstot; and a very special group of lionesses: Corbin Hamm, Desiree Herring, and Kate Maness. Special thanks to my family, for their understanding, patience, love, lunches, and babysitting. Most importantly, my husband, Rob, and our daughters, Madeleine and Caroline – lots of folks wonder how I did this with a family. I tell them I did it for you and could not have done it without you.

“Only Robinson Crusoe could get everything done by Friday.”

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Abstract

This study examined the role of organizational factors in the experience of engagement and burnout in a sample of correctional mental health professionals. Specifically, a linear combination consisting of perceived organizational support and six dimensions of the Areas of Worklife Scale were used in three multiple regression analyses to predict three dimensions of burnout from the Maslach Burnout Inventory. In the first analysis, approximately 44% of the variance in Emotional Exhaustion was accounted for, with Workload accounting for the most variance. In the second analysis, approximately 22% of the variance in Depersonalization was accounted for, with Organizational Support accounting for approximately 19% of the variance. In the third analysis, approximately 20% of the variance in Personal Accomplishment was accounted for, with Organizational Support accounting for approximately 14% of the variance. Implications, limitations, and future areas for research are discussed.

Introduction

Non-custodial correctional rehabilitation staff, including correctional mental health professionals, plays an important role in reducing recidivism among inmates (Garland, McCarty & Zhao, 2009). Aside from the main purpose of providing direct services to inmates, correctional mental health professionals often fill many other roles, including providing services to correctional staff through Employee Assistance Programs, reducing tension, enhancing safety, and working in management/administrative capacities to design and implement appropriate and beneficial policies and programs (Boothby & Clements, 2000; 2002). They are also in a position to aid inmates in the shift from inmate to citizen in post-incarceration reintegration plans (Smith & Sabatino, 1990).

Unfortunately, correctional mental health professionals are at risk for low levels of engagement (active involvement and dedication to one's work) and high levels of burnout by the very nature of their work. They work in agency settings, typically within a bureaucratic structure, and with clients who exhibit negative behaviors – two known correlates of burnout for licensed psychologists (Ackerley, Burnell, Holder & Kurdek, 1988).

Mental health professionals who experience burnout are likely to experience higher levels of perceived inefficacy or lack of enthusiasm or effectiveness; higher levels of depersonalization (callous lack of concern) toward their clients; and higher levels of emotional exhaustion (the emotional dimension of chronic fatigue and stress in the workplace) (Maslach, Jackson & Leiter, 1997). Because of their increased risk for burnout and the importance of their roles in prisoner rehabilitation and reduced rates of

recidivism, the impact of burnout on correctional mental health professionals should not be underestimated. To further exacerbate the problem of burnout, psychologists may tend to gloss over their own professional impairment resulting from personal distress and are unlikely to attend to a colleague who is showing signs of personal distress or professional impairment (Barnett, Baker, Elman, & Schooner, 2007). Fortunately, the problem of burnout among correctional mental health professionals is beginning to move to the foreground of research agendas.

Researchers have proposed ways to improve correctional outcomes such as reduced recidivism, positive community reintegration, and rehabilitation. Some of the proposed strategies include making commitments to assessing staff functioning, including absences, attrition, turnover, and medical costs of burnout (Clements, Althouse, Ax, Fagan, Wormith & Magaletta, 2007) and researching the correlates of burnout among correctional mental health professionals. Once correlates of burnout among correctional mental health professionals are identified, developing prevention and intervention techniques to bolster strengths and address weaknesses should be both organizational and personal goals. However, to date, very little research has been conducted on correlates of burnout among correctional mental health professionals. In one published study, results indicated correctional psychologists experienced higher levels of burnout compared to psychologists who work in other settings (Senter, Morgan, Serna-McDonald & Bewley, 2010). In another study examining the levels and correlates of burnout among correctional mental health professionals, results also indicated that correctional mental health professionals experienced higher levels of burnout compared to other mental health service providers and that self-reported

optimism, work/family role conflict, and attitudes toward prisoners were significant predictors of positive and negative work experiences (Gallavan & Newman, 2013). Additionally, only recently has the question of what to do about burnout been addressed in the literature (Dunford, Shipp, Boss, Angermeier & Boss, 2012; Maslach, Leiter & Jackson, 2012). It is important to maintain momentum in this area of research in order to continue best practices in correctional mental health.

Burnout

Burnout is a “psychological syndrome of exhaustion, cynicism, and inefficacy, which is in response to chronic job stressors” (Leiter & Maslach, 2004 p. 93). The first dimension, exhaustion, refers to emotional exhaustion and is defined as the emotional manifestation of chronic fatigue or stress. Emotional exhaustion has been linked to insomnia, fatigue, anxiety and tension (Leiter & Maslach, 2004; Maslach, Jackson, & Leiter, 1997; Perlman & Hartman, 1982). Cynicism, or depersonalization, is regarded as a coping strategy wherein one tries to stem the flow of emotional resources by resorting to a callous lack of concern regarding clients. Inefficacy, or a decrease in the perception of personal accomplishment, is an outcome of the stress-strain-coping sequence and is defined as a perception of a lack of enthusiasm and effectiveness that comes from working with people (Leiter & Maslach, 2004).

Burnout is grounded in the conservation of resources theory of stress, wherein individuals strive to gather and retain resources and are threatened by the loss of resources (Hobföll, 1989). Examples of these resources are mastery, self-esteem, learned resourcefulness, socioeconomic status, and employment (Hobföll, 1989). Psychological stress is an individual’s reaction to an environment where their resources

are threatened or have been lost, or they are unable to gain resources after investing time and energy in an effort to attain them (Hobföll, 1989). When an individual in a high-demand work environment is faced with fewer job resources to complete work tasks, the toll on personal resources is higher. Unsurprisingly, the presence of high job demands and low job resources was found to result in higher rates of burnout among health professionals (Hu, Schaufeli & Taris, 2011).

Job characteristics that have been related to burnout include an overload of work, time pressure, role ambiguity, role conflict, and the severity of client problems (Maslach, Schaufeli & Leiter, 2001; Rupert & Scaletta Kent, 2007). In addition to job demands that correlate with burnout, the absence of job resources correlated highly with the experience of burnout. Specifically, the lack of support from supervisors has been found to correlate more highly with burnout than the lack of support from colleagues (Maslach, Schaufeli & Leiter, 2001). Other job resources linked to burnout included the lack of feedback, low levels of participative decision-making, and a lack of autonomy (Maslach, Schaufeli, & Leiter, 2001). Occupational characteristics that have been tied to burnout include those occupations that involve a high level of emotional involvement, or emotional labor – most often described as “people work” – including work in the areas of mental or physical health, law enforcement, and education. The common factor seems to be the necessity for active presence of emotion or active suppression of emotion in order to get the job done effectively. Research in this area indicates that this level of emotional labor accounts for a significant amount of variance in levels of burnout (Zapf, Seifert, Schmutte, & Mertini, 2001). Organizational characteristics that have been found to contribute to levels of burnout include such

factors as hierarchical and bureaucratic structures and how resources are distributed (including space and supply distribution) (Maslach, Schaufeli, & Leiter, 2001; Rupert & Morgan, 2005; Rupert & Scaletta Kent, 2007). Organizational characteristics such as operating policies and procedures, paths for career growth in hierarchical, bureaucratic, or non-profit environments, and policies for work-family balance can have an impact on the employee's perceptions of fairness, value, and autonomy (Maslach, Schaufeli, & Leiter, 2001) and are highly likely to contribute to levels of burnout.

One factor that seems to be correlated with burnout is age. Research has indicated that younger employees appear to be at higher risk for burnout than employees between the ages of 30-40 (Maslach, Schaufeli, & Leiter, 2001; Rupert & Scaletta Kent, 2007). It is unknown why this is the case, though it has been postulated that there is a survivor bias. That is, employees who do not quit early in their careers are likely to report lower levels of burnout (Maslach, Schaufeli, & Leiter, 2001). The research on sex differences in experiences of overall burnout is equivocal at best, except that men tend to have higher scores on the cynicism/depersonalization dimension and women tend to have higher scores on the emotional exhaustion dimension (Maslach, Schaufeli, & Leiter, 2001; Purvanova & Muros, 2010; Rupert & Morgan, 2005). Marital status may act as a protective factor against burnout, as single individuals, especially men, tend to experience higher levels of burnout than those who are married or who were married then divorced (Maslach, Schaufeli, & Leiter, 2001). Higher levels of education also contributed to higher rates of burnout, though the explanation for these findings is not very clear. Higher educational attainment is associated with higher socioeconomic status, but also with higher levels of responsibility at work and more

stress (Maslach, Schaufeli, & Leiter, 2001). In addition to demographic variables, personality characteristics have also been examined as correlates of burnout. Low levels of hardiness, external locus of control, and passive coping strategies have all been correlated with high levels of burnout (Maslach, Schaufeli & Leiter, 2001; Semmer, 1996). Neuroticism, one of the Big Five personality traits, includes trait anxiety, vulnerability, hostility, depression, and self-consciousness. Individuals who are neurotic are at a higher risk for experiencing burnout because they are prone to psychological distress (Maslach, Schaufeli, & Leiter, 2001). In terms of Jungian analysis, “feeling types” are more prone to the cynicism/depersonalization dimension of burnout than “thinking types” (Maslach, Schaufeli, & Leiter, 2001). Additionally, low levels of dispositional optimism have been found to be related to burnout and negative experiences of work (Gallavan & Newman, 2013).

Engagement

In contrast to burnout, engagement is a dynamic motivational state characterized by vigor, dedication, and absorption (Macey & Schneider, 2008; Schaufeli, Salanova, González-Romá & Bakker, 2002). The premise that vigor and dedication are polar opposites of emotional exhaustion and cynicism/ depersonalization has been tested and confirmed (González-Romá, Schaufeli, Bakker & Lloret, 2006; Maslach & Leiter, 1997). Vigor is defined as a feeling of mental resilience and high levels of energy at work (Schaufeli, Salanova, González-Romá, & Bakker, 2002). Dedication is exemplified by challenge, inspiration, and enthusiasm toward work (Schaufeli, Salanova, González-Romá & Bakker, 2002). Absorption is a state of harmony and enjoyable concentration on work tasks while time passes quickly (Hallberg & Schaufeli,

2006; Schaufeli, Salanova, González-Romá & Bakker, 2002). Absorption is the antithesis of clock-watching, which is typically manifested by checking the time every few minutes as the workday comes to a close. Work engagement is dependent on the worker's affective state and includes high self-involvement at work and positive feelings about work (George, 1989; Kahn, 1989; Rich, Lepine & Crawford, 2010; Schaufeli, Salanova, González-Romá & Bakker, 2002).

The affective, energetic and self-involvement components of work engagement distinguish this construct from job involvement, organizational commitment, and job satisfaction (Leiter & Maslach, 2004; Macey & Schneider, 2008; Rich et al., 2010; Sonnentag, Dormann, & Demerouti, 2010). Engagement describes the employee's relationship with the work itself, whereas organizational commitment is focused on the employee's allegiance to the organization, job satisfaction focuses on work as a source of contentment, and job involvement fails to capture the energy and effectiveness dimensions of engagement (Maslach, Schaufeli & Leiter, 2001).

The relationship between affect and work engagement is explained by self-regulation theory. Positive affect (e.g. feeling happy and enthusiastic) acts as a signal to approach and continue an action, as well as provides an impetus to set high goals and act upon them to reap positive outcomes (Elliot, 2006; Frijda, 1988; Hakanen, Bakker, & Schaufeli, 2006, Ilies & Judge, 2005). This sort of positive affect-driven, goal-directed behavior is a necessary precondition for work engagement (Kazén, Kaschel, & Kuhn, 2008). However, positive affect is not the only affective state that can lead to work engagement. Self-regulation theory also supports the role of negative affect in the emergence of work engagement (Carver & Scheier, 1990; Kuhl, 2000). Negative affect

signals that events are not going well and a shift in focus or rate of goal pursuit should be considered (Carver & Scheier, 1990; Frijda, 1988; Kuhl, 2000). Empirical research has supported the notion that negative affect can act as a motivating factor in work engagement (Foo, Uy, & Baron, 2009; Louro, Pieters, & Zeelenberg, 2007). In an effort to discern a more dynamic model of work engagement, Bledow, Schmitt, Frese, and Kühnel (2011) determined that work engagement was linked to positive affect, but only when it emerged as a result of the interplay between positive and negative affect in response to positive and negative work events.

A worker's affective state at work is typically in response to a positive or negative work event or the organizational climate. Dollard and Bakker (2010) linked one aspect of organizational climate to high levels of engagement – a psychosocial safety climate. A psychosocial safety climate (PSC) is a set of policies, procedures, and practices for the protection of employees' psychological health and safety (Dollard, 2007). This empirical work has indicated that PSC is a basic organizational resource directly linked to employee engagement and psychological health (Dollard & Bakker, 2010).

The Maslach Burnout Inventory (MBI) is one instrument used to measure levels of burnout and engagement. The three dimensions of burnout (emotional exhaustion, cynicism/depersonalization, and inefficacy) are the opposite of the three dimensions of engagement (vigor, dedication, and absorption). Using one measure to determine levels of burnout and engagement allows researchers to be more efficient when they are trying to determine rates and levels of both constructs in the workplace. Support for the use of the MBI in this manner is found in Leiter and Maslach's (2005) examination of two

hospital units. In the first unit, levels of burnout were high and respondents indicated unfavorable perceptions of their worklife. In the second unit, levels of burnout were low (i.e., engagement was high on this unit) and they reported more favorable perceptions of their worklife.

Areas of Worklife

The perceptions of worklife described in Leiter and Maslach's (2005) hospital study were correlated with their measure of burnout and engagement – the MBI. Leiter and Maslach (2004) identified these six areas of worklife from a comprehensive review of the literature on organizational correlates of job stress and burnout. Leiter and Maslach's (2004) model of burnout indicates support for the role of burnout and engagement as mediators between areas of worklife and work outcomes. These areas of worklife are: workload, control, reward, community, fairness, and values. Workload is defined as having job demands which exceed human limits (Leiter & Maslach, 2004). Control is based on employees' perceptions that they can influence decisions about their work, exercise professional autonomy, and have access to the resources they need to be effective at their job (Leiter & Maslach, 2004). Reward is the extent to which intrinsic and extrinsic rewards are consistent with expectations. Inadequate recognition and reward are associated with feelings of devaluation and inefficacy (Leiter & Maslach, 2004). Community is the general quality of interaction with other employees and supervisors, and includes issues of conflict, reciprocal support, closeness, and teamwork (Leiter & Maslach, 2004). This type of community support affirms that the worker is a member of a group that has a shared sense of values. The concept of fairness is based in equity theory (Walster, Berscheid, & Walster, 1973), wherein there is a balance

between one's inputs (i.e., time, effort, expertise) and outputs (reward and recognition). Fairness is the perception that workplace decisions are being made fairly and that employees are treated with respect (Leiter & Maslach, 2004). Leiter and Maslach indicated that the value component of areas of worklife "encompasses the ideals and motivations that originally attracted [an employee] to the job (p. 99)." It is the intersection and compatibility of an individual's values and the organization's values. When the two are misaligned or there is conflict, there is a greater likelihood of experiencing burnout (Leiter & Maslach, 2004).

In support of Leiter and Maslach's six areas of worklife, a recent meta-analysis of burnout with job demands, resources and attitudes (Alarcon, 2011) indicated that role ambiguity, role conflict, and workload have a positive relationship with emotional exhaustion, cynicism (or depersonalization), and reduced personal accomplishment. In contrast, control and autonomy in the workplace were negatively related to emotional exhaustion, cynicism, and reduced personal accomplishment (Alarcon, 2011).

Perceived Organizational Support

In addition to employees' perceptions of individual facets of worklife, employees' perceptions of how they are being supported by their organization as a whole is important to a more complete understanding of burnout and engagement. Perceived organizational support refers to employees' perception that the organization for which they work values their contributions and cares about their well-being. Organizational support theory (Eisenberger, Huntington, Hutchinson, & Sowa, 1986; Rhoades & Eisenberger, 2002; Shore & Shore, 1995) and perceived organizational support have their roots in norm reciprocity, which concludes that people should help

others who have helped them (Gouldner, 1960). Organizational support theory posits that employees form a general opinion about how much their organization supports them and is committed to them, much in the same way organizations evaluate their employees (Eisenberger, Huntington, Hutchison, & Sowa, 1986; Rhoades & Eisenberger, 2002; Shore & Shore, 1995). Employment is typically viewed as a social exchange between a worker and an organization. The worker trades loyalty and effort for material and social reward (Etzioni, 1961; Gould, 1979; Levinson, 1965; March & Simon, 1958; Mowday, Porter, & Steers, 1982). As a result of this exchange, workers develop economic and affective attachments to the organization for which they work and may ascribe to the organization anthropomorphic traits based on administrative and supervisory actions taken on behalf of the organization (Eisenberger, Huntington, Hutchinson, & Sowa, 1986). Employees base their perceptions of an organization's support on such factors as receipt of sincere praise and supportive comments, raises, rank, opportunities for job enrichment and input on organizational policies (Blau, 1964; Brinberg & Castell, 1982). In short, employees want to see and believe that the organization is investing as much in them as they are in the organization. Employees also rely on the organization, in part, to help meet their needs for approval, esteem, and affiliation by holding employees in high regard (Eisenberg, Huntington, Hutchison & Sowa, 1986).

In a meta-analysis of studies of perceived organizational support, employees' perceptions of organizational fairness, supervisor support, organizational rewards, and favorable job conditions were associated with perceived organizational support (Rhoades & Eisenberger, 2002). Perceived organizational support was subsequently

associated with positive outcomes for both the employee (e.g., job satisfaction and positive affect) and the organization (e.g., performance, lessened withdrawal behavior, and affective commitment) (Rhoades & Eisenberger, 2002).

Unfortunately, there has been little research on mental health professionals' perceptions of organizational support and its relationship to burnout and engagement. One study, focused specifically on mental health professionals, indicated that about 40% of the variance in the emotional exhaustion and depersonalization dimensions of burnout were accounted for by low perceived organizational support (Mutkins, Brown, & Thorsteinsson, 2011). Low perceived organizational support did not account for a significant portion of the variance in perceptions of personal accomplishment (Mutkins, Brown, & Thorsteinsson, 2011). The few studies that have focused on the relationship between perceived organizational support and burnout across a broader range of occupations revealed that high levels of perceived organizational support were negatively related to overall burnout (Cropanzano, Howes, Grandey, and Toth, 1997), only the emotional exhaustion dimension of burnout (Armstrong-Stassen, 2004) and only the emotional exhaustion and depersonalization dimensions of burnout (Jawahar, Stone, & Kisamore, 2007). Research specifically geared toward correctional mental health professionals has indicated that perceived organizational support is an important facet to overall job satisfaction (MacKain, Myers, Ostapiej, & Newman, 2010), but the relationship to burnout and engagement has not yet been investigated.

Burnout among Mental Health Professionals

In one of the earliest studies conducted to measure burnout and its correlates among licensed psychologists, researchers sent a background questionnaire, the

Maslach Burnout Inventory (MBI; Maslach, Jackson, & Leiter, 1997), and the Psychologist's Burnout Inventory (PBI; Ackerley, Burnell, Holder & Kurdek, 1988) to a random sample of 1,589 doctoral-level, licensed psychologists who worked primarily in human services settings (i.e., private practice, hospitals, community centers) (Ackerley, Burnell, Holder & Kurdek, 1988). Approximately 73% of participating psychologists were in the moderate to high range for emotional exhaustion; 59% were in the moderate to high range for depersonalization; and only 4.7% were in the moderate to high range for personal accomplishment (Ackerley, Burnell, Holder & Kurdek, 1988). In comparison to the normative sample of mental health workers, results indicated that the licensed psychologists' scores on the emotional exhaustion and depersonalization dimensions of the MBI were significantly higher, while their scores were significantly lower on perceptions of personal accomplishment.

Reported correlates of burnout among licensed psychologists included age, income, work setting (private practice v. public agency), negative client behaviors, such as making suicidal or psychopathic statements (i.e., pathological lying and manipulation), missing appointments, or defensively withdrawing or withholding information; feelings of low personal control over how and when one's daily responsibilities are completed; and feeling personally responsible for client progress (Ackerley, Burnell, Holder & Kurdek, 1988; Vredenburgh, Carlozzi & Stein, 1999).

In the literature on gender as a correlate of burnout among mental health professionals, the findings have been equivocal. Although not all studies reported gender as a correlate of burnout (Ackerley, Burnell, Holder & Kurdek, 1988; Raquepaw & Miller, 1989), some studies have shown that an interaction between gender and

workplace setting has been related to emotional exhaustion (Rupert & Morgan, 2005; Rupert & Scaletta Kent, 2007). Specifically, in the Rupert and Morgan (2005) study, female psychologists who worked in agency settings reported significantly higher levels of emotional exhaustion than females in private practice or group practice, and males who worked in group practice reported significantly higher levels of emotional exhaustion than male psychologists who worked in private practice or agencies. One possible explanation for both genders' experiences of emotional exhaustion may be explained by the notion of *emotional labor*. Emotional labor is defined as the enhancement or suppression of emotion and is most often experienced by individuals who do "people work" (e.g., mental health, law enforcement, and education). Emotional labor is a known correlate of the emotional exhaustion dimension of burnout. In this supposition, gender and job characteristics of different work settings interact and may result in emotional exhaustion.

In one study of the gender differences in emotional labor, individuals in power positions (e.g. administration and management positions) were less likely to engage in the emotional labor of anger suppression (Sloan, 2012). It was more acceptable for individuals in administrative and management positions to express their anger (Sloan, 2012). Hierarchical work structures, such as those found in large agencies and bureaucracies, are more likely to have leadership positions, and, those leadership positions are more likely to be filled by men (2009 APA Salary Survey, 2010). In keeping with the APA Salary Survey (2010), of those surveyed, female psychologists were more likely to fill subordinate positions in agency and bureaucratic settings. Sloan's research (2012) indicated that individuals in a subordinate position were more

likely to engage in anger suppression while they were at work. The emotional labor of engaging in anger suppression may account for female psychologists' higher levels of emotional exhaustion in large agency or bureaucratic settings.

The relatively flat power structure of group practice settings does not lend itself to the same hierarchical structure as a large agency or bureaucratic work setting. This could mean that expressions of anger are less acceptable in a group setting because there are fewer positions of power. Working in a group setting could result in men engaging in more emotional labor than they do in agency and private practice settings. That is, the suppression of anger may be more emotionally laborious for men and more likely to result in emotional exhaustion for them. Conversely, women and men are more likely to be on equal footing in a group setting because of the flattened power structure. This would seem to indicate that female workers are less likely to engage in the emotional labor of suppressing anger and are, therefore, less likely to experience emotional exhaustion in a group setting.

Another possible explanation for emotional exhaustion levels among female psychologists may be due to socialized gender role expectations that females should be more concerned with family and home responsibilities. Working in a private or group practice may allow them more autonomy and flexibility with their schedules, thereby reducing Work/Family Conflict. Work/Family Conflict has been positively correlated with emotional exhaustion (Gallavan & Newman, 2013).

Demographic and organizational variables that were not correlated with burnout among licensed psychologists were relationship status (single, married, separated, divorced or widowed), theoretical orientation, whether the psychologist was a client in a

therapeutic relationship, and degree of organizational support (Ackerley, Burnell, Holder & Kurdek, 1988). Despite the rather large body of research on burnout among mental health professionals, in general, the question remains: why do mental health professionals who work in correctional settings experience higher levels of burnout and what contributes most to those high levels?

Burnout Among Correctional Mental Health Professionals

The motivation to work in public service is described as “a general, altruistic motivation to serve the interests of a community of people, a state, a nation or humankind” (Rainey & Steinbauer, 1999, p. 20). This definition of a public servant aptly describes correctional mental health professionals far and wide. It may be that an altruistic, other-orientation motivates correctional mental health professionals to choose their work setting purposefully. Indeed, Lewis and Frank (2002) found a positive relationship between the desire to help others and a preference for public service jobs, in general.

For the purposes of this study, Correctional Mental Health Professionals (CMHP) are defined as any employee hired to diagnose and/or treat the mental health needs of individuals who have been convicted of crimes and sentenced to prison terms in state, federal and private prisons across the United States. These individuals could include psychiatrists, psychologists, social workers, mental health counselors, and psychiatric nurses. While there are CMHPs who diagnose and treat individuals who are detained in other settings (e.g., jail or juvenile detention centers), those settings are not within the scope of this study.

To date, organizational research focusing on correctional mental health professionals is scarce. Recently, Garland, McCarty and Zhao (2009) examined job satisfaction and organizational commitment among noncustodial staff that work in the Federal Bureau of Prisons (BOP). They reported that female psychological staff reported more job satisfaction than their male counterparts and that, among all psychological staff, supervision and positive collaboration with other staff members were significant predictors of job satisfaction, institutional commitment and commitment to the BOP. In a study on job satisfaction among correctional psychologists, results indicated that job satisfaction among correctional psychologists was significantly lower than that of psychologists who work in the community (Senter, Morgan, Serna-McDonald, and Bewley, 2010). Findings in that study also indicated that correctional psychologists experienced higher levels of burnout relative to psychologists who work in VA and community settings (Senter, Morgan, Serna-McDonald, & Bewley, 2010). Unfortunately, the samples in both studies were quite narrowly defined in terms of correctional mental health professionals. In the former study, psychological staff consisted of Federal Bureau of Prison employees. The latter study relied solely on APA division membership as a recruitment tool and, unfortunately, as of 2000, only about 8% of correctional psychologists belonged to APA divisions geared toward correctional and forensic practice (Boothby & Clements, 2000). A related study exploring burnout in a sample of correctional mental health professionals indicated that they experienced high levels of burnout and more negative experiences of work. Predictors of burnout for this group of correctional mental health professionals included low levels of optimism and high levels of work-family conflict

(Gallavan & Newman, 2013). One of the limitations of the study was the focus on the contribution of internal and interpersonal variables to burnout rather than organizational variables. In another study examining job satisfaction in a small sample of correctional psychologists in North Carolina, respondents indicated that three general facets of job satisfaction (economics, perceived organizational support, and relationships) were all important to their overall job satisfaction (MacKain, Myers, Ostapiej, & Newman, 2010).

To begin to elucidate which organizational factors may influence correctional mental health professionals' experiences of burnout, an examination of reports of job satisfaction may help bring salient issues to the foreground. Boothby and Clements (2002) indicated there are gaps between what correctional psychologists rate as important dimensions of their work and the level to which they are satisfied with their experience of those dimensions. Most notably, gaps were found in correctional psychologists' perceptions of access to decision-making, salary levels, cooperation among staff, and a professional atmosphere. The respondents also indicated the least satisfaction with opportunities for advancement, professional atmosphere, and influence on decision-making (Boothby & Clements, 2002). These factors align with most of Leiter and Maslach's (2004) six areas of worklife, most notably control, reward, and community.

Kramen-Kahn and Hansen (1998) suggested that to prevent and alleviate burnout and professional impairment, mental health professionals should engage in positive career sustaining behaviors, such as balancing work and personal obligations, taking regular breaks from work, and creating diverse caseloads and professional

development experiences (e.g., attending conferences, engaging in research, etc.). Unfortunately, in the practice of correctional mental health, it may be difficult to balance work and personal obligations when one is on-call or is the lone practitioner in a remote or rural facility (Boothby & Clements, 2000). Additionally, taking regular breaks from work may be implicitly discouraged by the organization when it entails undergoing a search, pat down, and passing through numerous locked doors and metal detectors upon reentry. Another barrier to engaging in positive career sustaining behaviors for some correctional mental health professionals may be homogenous caseloads present in many facilities (e.g., all male or all female, primarily Axis II, etc.). Additionally, there may be organizational barriers to engaging in diverse professional development activities. Agency budgets may not allow for outside training opportunities, supervisors may not understand or prioritize the value of allowing their correctional mental health professionals time to engage in professional development experiences, or correctional mental health professionals may be too weighed down with heavy caseloads and administrative duties to have the time necessary to engage in research and conferences.

At the same time that many correctional mental health professionals are facing agency budget cuts, stagnant wages, and an increase in the inmate-to-mental health professional ratio, there has been a call to expand the scope of correctional psychology to include research on the systemic issues of correctional practice (Clements, Althouse, Ax, Magaletta, Fagan & Wormith, 2007). However, most correctional psychologists are able to devote only a small percentage of their time to research activities (Boothby & Clements, 2000; Boothby & Clements, 2002; Gallavan & Newman, 2013).

Additionally, Boothby and Clements (2000) noted that the role of correctional psychologists has changed in response to an increasing inmate population, an increasing mentally ill inmate population, harsher sentencing laws, and a general public intolerance for treatment over punishment. The survey respondents indicated they spent, on average, 30% of their time devoted to administrative tasks, 26% on treatment, and 18% on assessment. Respondents also indicated they would ideally prefer spending less time on administrative tasks and more time on therapy, assessment, and research.

Purpose of Study

The purpose of the current study was to examine what effect, if any, organizational factors have on the experience of engagement and burnout in a sample of correctional mental health professionals. While there has been some research examining correlates of burnout among correctional mental health professionals, to date there has not been a study examining how areas of worklife and perceived organizational support correlate with and predict engagement and burnout. Studies specifically designed to explore the relationship between organizational predictors of engagement and burnout are needed if the problem is to be effectively addressed in correctional settings.

The current study provides a twofold contribution to the research on correctional mental health professionals' experiences of engagement and burnout. First, this study adds to a fairly new and growing body of research seeking to identify predictors of engagement and burnout among correctional mental health professionals. Second, results of this study may be used to focus or re-direct future research on correctional

mental health professionals' workplace experience, as well as practical applications designed to cultivate engagement and alleviate burnout in the correctional setting.

The primary research questions of interest are:

1. What is the relationship of a linear combination of perceived organizational support and Leiter and Maslach's six worklife dimensions with emotional exhaustion in this sample of correctional mental health professionals?
2. What is the relationship of a linear combination of perceived organizational support and Leiter and Maslach's six worklife dimensions with depersonalization in this sample of correctional mental health professionals?
3. What is the relationship of a linear combination of perceived organizational support and Leiter and Maslach's six worklife dimensions with personal accomplishment in this sample of correctional mental health professionals?

Method

Participants

Forty-nine correctional organizations across the country were contacted to recruit eligible participants, including third-party contractors who provide mental health services to correctional departments. Four organizations declined to allow their employees to participate, one organization did not have internet access in their facilities for their correctional mental health professionals, 14 did not return phone calls or correspondence, 17 organizations were unable to approve the research in time for data collection, and 13 approved the research proposal and disseminated the informational email and survey link to the correctional mental health professionals who were members of their staff or professional organization.

The sample consisted of 128 correctional mental health professionals from 21 states. There were 78 women and 47 men with 3 individuals who did not report their sex. The mean age was 47, the range was 26-70 and the standard deviation was 11.64. The sample was predominately Caucasian, representing 88% of the participants, followed by 8% African-American, 2% American Indian, and 2% Hispanic. The majority of participants were married (69%). Fifty-nine percent of participants reported having a Master's degree, 32% reported having a Doctoral degree, and 9% reported having a Bachelor's degree. Sixty-six participants reported seeking work in a correctional setting intentionally, while 60 indicated the employment was out of convenience. Two individuals did not report one way or the other. This sample of correctional mental health professionals reported working an average of 5.49 years at their current site ($SD = 5.25$) and an average of 7.71 total years in corrections ($SD = 6.49$). They also reported seeing approximately 32 clients per week ($SD = 35.75$). Additional demographic statistics can be found in Table 1.

Measures

The measures utilized in the study included a demographic questionnaire, the Maslach Burnout Inventory – Human Services Survey, the Areas of Worklife Scale, and the Survey of Perceived Organizational Support.

Maslach Burnout Inventory - Human Services Survey (MBI-HSS). The MBI-HSS, developed by Maslach, Jackson, and Leiter (1997), is a 22-item measure consisting of three scales designed to assess emotional exhaustion (EE), depersonalization (DP), and personal accomplishment (PA). Individuals endorse the frequency with which each item occurs on a 7-point Likert scale ranging from *never* (0)

to *everyday* (6). The Emotional Exhaustion subscale assesses feelings of being exhausted by one's work. The Depersonalization subscale assesses the presence of an unfeeling and impersonal response toward recipients of one's care. The Personal Accomplishment subscale assesses feelings of competence and successful achievement in one's work. Reported internal consistency reliabilities of these subscales, as measured with Cronbach's coefficient alpha ($n = 1,316$), were .90 for Emotional Exhaustion, .79 for Depersonalization, and .71 for Personal Accomplishment. In the current study, Cronbach's coefficient alpha was .91 for Emotional Exhaustion, .75 for Depersonalization, and .79 for Personal Accomplishment.

Areas of Worklife Scale (AWS). The AWS, developed by Leiter and Maslach (2004), is a 28-item measure consisting of six subscales designed to assess workload, fairness, values, community, reward, and control. The purpose of the AWS is to measure the match between the person and the organization. A worker may experience varying levels of congruence, or match, with their organization in the six domains assessed by the AWS. The Workload subscale assesses the amount of work to be done in a given timeframe. The Control subscale assesses the opportunity for problem solving and decision-making. The Reward subscale assesses financial and social recognition for job accomplishments. The Community subscale measures positive interpersonal relationships with others in the workplace. The Fairness subscale assesses equitable resource allocation, conflict resolution, and the organization's respect toward the community. The Value subscale measures the extent to which the organization's values are congruent with the employee's values. Reported internal consistency reliabilities of the Areas of Worklife subscales, as measured with Cronbach's

coefficient alpha ($n = 6,815$), were .70 for Workload, .70 for Control, .82 for Reward, .82 for Community, .82 for Fairness, and .73 for Values. In the current study, Cronbach's coefficient alpha was .80 for Workload, .81 for Control, .88 for Reward, .91 for Community, .86 for Fairness, and .82 for Values.

Survey of Perceived Organizational Support (SPOS). The SPOS (Eisenberger, Huntington, Hutchison & Sowa, 1986) is a 36-item measure designed to assess employees' perceptions of how well their workplace supports them. The reported internal consistency reliability of the SPOS, as measured by Cronbach's coefficient alpha ($n = 361$), was .97. In the current study, the Cronbach's alpha coefficient was also .97.

Procedure

Eligible participants were asked to complete an electronic survey that included a demographic questionnaire and the instruments described above. It was estimated that the survey would take approximately 15-20 minutes to complete. Participation was voluntary, and there was no compensation, as that is generally disallowed by most federal and state government agencies.

Results

Preliminary correlation analyses were conducted to investigate the relationships between predictor and criterion variables (see Table 2). There was substantial intercorrelation among the three dimensions of burnout and the predictor variables. The relationships between dimensions of the MBI-HSS and the AWS in this sample of correctional mental health professionals are consistent with those found in the normative sample for the mediation model of burnout. Additionally, the

intercorrelations between the dimensions of the AWS in this sample are consistent with those reported for the normative sample, which consisted of workers from North America, China, and parts of Europe in universities, hospitals, public service and retail, post offices, education, and nursing home workers.

In order to address the three research questions posed in this study, three enter multiple regression analyses were conducted using a linear combination of perceived organizational support and the worklife dimensions to predict the three dimensions of burnout: emotional exhaustion, depersonalization, and personal accomplishment. Because of the exploratory nature of this research, entry criteria were lowered to ensure that all variables entered the analyses.

Based on normative data provided for the MBI-HSS, results indicated that participants in this study reported an average level of emotional exhaustion, depersonalization, and personal accomplishment when compared to the overall normative sample of human service providers (e.g., workers in education, social services, medicine, and mental health). However, when compared specifically to professionals in the mental health field, correctional mental health professionals reported higher levels of emotional exhaustion and depersonalization, and lower levels of personal accomplishment (Maslach, Jackson & Leiter, 1996)(See Table 3). Based on distribution cut-off points for the Areas of Worklife scale (Leiter & Maslach, 2011), results indicated that participants were in approximately the 50th percentile on the Workload, Control, Reward, Community, Fairness, and Values subscales. Higher percentile scores indicated a good match between the employee and the organization on the worklife dimensions, while lower percentile scores indicated a mismatch between

the employee and the organization on the worklife dimensions. The scores from this sample are comparable to those from the overall normative sample for the AWS. Based on normative data from the Survey of Perceived Organizational Support, participants' scores in this sample were in the middle third, i.e., they perceived neither high (upper third) nor low (lower third) levels of organizational support.

In the first regression analysis predicting Emotional Exhaustion (see Table 4), the equation was statistically significant, accounting for approximately 40% of the variance. Workload entered first, accounting for approximately 31% of the variance, followed by Control, which accounted for an additional 9% variance. Incremental changes in R^2 associated with subsequent variables were not statistically significant. As reflected by the Squared Semi-Partials in Table 4, Workload accounted for 16% of the unique variance in Emotional Exhaustion whereas Control accounted for 2%.

In the second regression analysis predicting Depersonalization (see Table 5), the equation was statistically significant, accounting for approximately 17% of the variance. Organizational Support entered first, accounting for approximately 18% of the variance. Incremental changes in R^2 associated with subsequent variables were not statistically significant. As reflected by the Squared Semi-Partials in Table 5, Organizational Support accounted for .2% of the unique variance.

In the third regression analysis predicting Personal Accomplishment (see Table 6), the equation was statistically significant, accounting for approximately 14% of the variance. Organizational Support entered first, accounting for approximately 13% of the variance. Incremental changes in R^2 associated with subsequent variables were not

statistically significant. As reflected in the Squared Semi-Partials in Table 6, Organizational Support accounted for 3% of the unique variance.

Because of equivocal findings in previous research on sex differences in the experience of burnout, a one-way between-groups multivariate analysis of variance was performed to investigate sex differences in Emotional Exhaustion, Depersonalization, and Personal Accomplishment in this sample of correctional mental health professionals. Mean scores are presented in Table 7. There was no statistically significant difference between males and females on overall levels of burnout, $F(3,102) = 2.43, p = .07$; Wilks' Lambda = .933. Some researchers have previously reported a correlation between age and burnout among licensed psychologists (Ackerley, Burnell, Holder & Kurdeck, 1988). However, it has been proposed that there may be a survivor bias among correctional mental health professionals (R. Powitzky, personal communication), i.e., employees who work in corrections longer are not as likely to report experiences of burnout. An examination of the relationship between age and the three dimensions of burnout indicated that there was no statistically significant relationship between age and Emotional Exhaustion or Depersonalization. However, the relationship between age and perceived levels of Personal Accomplishment indicate there was a small, positive correlation ($r = .25$) between higher levels of perceived personal accomplishment and increased age.

Discussion

Emotional Exhaustion and Vigor

Results indicated that correctional mental health professionals reported higher levels of emotional exhaustion compared to their non-correctional mental health peers.

However, the reason for the difference remains unclear. Results from the multiple regression analyses may provide a starting point from which to launch further investigation. The results of the first multiple regression suggest that the strongest relationships of predictors with Emotional Exhaustion occurred for the worklife areas of Workload and Control. Workload had the strongest relationship with emotional exhaustion ($r = -.56$), suggesting that an overload of work responsibilities was associated with employees' emotional vitality and vigor. This finding is consistent with prior research on the relationship between emotional exhaustion and workload across a wide-range of work settings, including sales, education, medical healthcare, universities, and general mental healthcare (Alarcon, 2011; Leiter & Maslach, 2004; Maslach & Leiter, 2008). Emotional exhaustion has been linked to tension, anxiety, and physical fatigue (Maslach & Jackson, 1981; Perlman & Hartman, 1982), as well as numerous stress-related mental and physical health problems (Maslach, Shaufeli & Leiter, 2001). It is possible that tension and anxiety rise when workers realize the heavy workload is an impossible task and physical fatigue may be related to trying to accomplish the impossible anyway. Chronically heavy workloads, such as those found in some correctional settings, provide little chance for recovery and may have an exponential effect on the experience of emotional exhaustion. Additionally, the finding that workload is strongly related to emotional exhaustion is consistent with previous research on burnout among correctional mental health professionals which indicated that Work/Family Conflict was a predictor of negative experiences of work (Gallavan & Newman, 2013) (i.e., work responsibilities which impinge on family duties were related to negative experiences of work). At least four factors may contribute to an

unmanageable workload among correctional mental health professionals. First, the increase in the percentage of mentally ill prisoners means that correctional mental health professionals are faced with ever-increasing caseloads. Second, those who work in correctional units designed specifically for the most severely and chronically mentally ill offenders (e.g. Mental Health Units, Intermediate Care Units, Residential Treatment Programs, and the like) are typically faced with addressing crises on a regular basis as well as handling increased caseloads. Third, high rates of burnout among correctional mental health professionals likely leads to turnover, which places a temporarily higher caseload burden on those professionals who do not terminate employment. Leiter and Maslach (2011) observed that when faced with a chronic unsustainable workload, there is little chance for rest and recovery. This can lead to a deterioration in work quality and in relationships with coworkers. Fourth, the current economic climate in the federal government and many state governments may be leading to reductions in staff or the inability to replace staff who leave. However, the workload reported by this sample of correctional mental health professionals was not much higher than that reported by the AWS overall normative sample. It may be that occupational characteristics interacted with workload to create an ideal circumstance for higher levels of emotional exhaustion in this sample. The emotional labor of practicing as a health professional is strongly correlated with experiences of emotional exhaustion (Naz & Gul, 2011). It is likely that the emotional labor required to work as a correctional mental health professional is also associated with high levels of emotional exhaustion. The emotional labor involved in working as a correctional mental health professional entails conveying a sense of concern and empathy for clients who may be

unable to regulate their own feelings of anger or fear and who may have committed crimes that evoke feelings of disgust, anger, or fear from the mental health professional. These feelings of disgust, anger, and fear must also be suppressed in order to accomplish work demands.

Control also had a statistically significant relationship with emotional exhaustion ($r = -.50$), i.e., this relationship suggests that correctional mental health professionals who reported lower levels of control over their work lives also tended to report higher levels of emotional exhaustion. Leiter and Maslach (2011) indicated that “as human beings, people have the ability to think and solve problems, and want to have the opportunity to make choices and decisions (p. 4).” Control problems occur when employees cannot control their work environment or when they have insufficient authority over their work or resources with which to do their jobs. It is unsurprising that correctional mental health professionals experience low levels of control in their work environments. Prisons are controlled environments with stringent guidelines for safe and secure operation. The bureaucratic structure of most correctional institutions also favors a top-down approach to management with very little meaningful input from non-executive staff. Nevertheless, although the incremental variance associated with Control was statistically significant, its limited contribution of unique variance (2%), coupled with its substantial overlap with perceived organizational support and the other worklife scales make interpretation of its relationship with emotional exhaustion somewhat difficult. Given the substantial overlap among the various scales used in this study, care must be taken not to over-interpret individual relationships.

Depersonalization, Dedication, and Personal Accomplishment

The results of the second and third multiple regression analyses suggest that the strongest predictor of both Depersonalization and Personal Accomplishment was Perceived Organizational Support. However, the precise nature or direction of these relationships are not clear. It is possible that employees experiencing burnout are more likely to perceive levels of organizational support as lower or, conversely, employees who work in settings where low organizational support exists may experience corresponding higher levels of burnout.

One of the difficulties emerging from this study relates to the high intercorrelation that exists among the variables examined. Moderate to high correlations among perceived organizational support and the six worklife dimensions were found. This substantial overlap raises questions about the independence of the constructs represented on these various scales. One possibility may be that there is actually a single construct represented, e.g., something akin to perceived organizational support. Another possibility is that meaningful dimensions of worklife/organizational support do exist, but have not been operationalized in an effective manner on current measures. Leiter and Maslach's research (2004), clarified the overlap between dimensions of areas of worklife and burnout by indicating that burnout mediates the relationship between areas of worklife and work outcomes. However, there is no mediation model between burnout and perceived organizational support, nor is there clear support for the notion that perceived organizational support is simply a more parsimonious model of the dimensions of the AWS. Clearly, further research is needed to address these broader questions.

Implications

Correctional organizations may find the results of this research beneficial as a starting point for addressing their own mental health staff's levels of burnout and engagement. The burnout and worklife measures used in this study were designed to bridge the gap between research and practice, providing a practical and useful tool for assessing burnout and how to best alleviate it and promote engagement.

To increase the experience of engagement in correctional mental health professionals, it is important to address organizational factors that predict burnout and engagement. The results of this research indicate that correctional mental health professionals are likely to experience higher levels of vigor and vitality when they are afforded manageable and sustainable workloads. While the research on organizational interventions for burnout is still relatively new, there are suggestions that such interventions would best be implemented at the work unit level rather than throughout the organization as a one-size-fits-all solution (Maslach, Leiter & Jackson, 2011). The rationale is that managers are held accountable for work units and are typically evaluated according to their supervisees' productivity, turnover rates and work unit engagement (Maslach, Leiter & Jackson, 2011). Managers are likely to have a vested interest in the success of their department if their own evaluations and jobs depend upon it. Unfortunately, in some departments, the organizational response to burnout and turnover among correctional mental health professionals may be to "throw another body on the fire" by placing the blame for attrition at the feet of the employee rather than turning an eye inward to organizational characteristics. Maslach (2003) points out that most burnout interventions focus on changing the individual rather than the

organization. This happens for a couple of reasons: first, there is an assumption that it is less expensive to change an individual than an organization and second, there is an assumption of individual causality and responsibility for experiences of burnout (Maslach, 2003). The assumption of individual responsibility is challenged by research findings which indicate that situational and organizational factors explain more variance in burnout than individual factors (Maslach & Goldberg, 1998). Alternatively, organizations with a top-down approach to management may find that employees and the organization would benefit from the creation of a psychosocial safety climate (PSC) (Dollard & Bakker, 2010). PSC is defined as a “set of policies, practices, and procedures for the protection of worker psychological health and safety. Psychosocial safety relates to freedom from psychological and social risk or harm” (Dollard & Bakker, 2010, p. 580). This sort of intervention is complementary to the administration and management styles of most bureaucratic agencies because it is aimed at policies and procedures that directly affect job design, workload, and workflow. An example of PSC would be implementing procedures for employees to report work overload and fatigue.

Because workload had the strongest relationship to the emotional exhaustion dimension of burnout, it is ripe for organizational intervention. In many organizations it may not be possible to hire more mental health professionals to distribute heavy workloads. However, it is possible to target burnout and improve employee engagement by improving workflow and efficiency. Finally, an important consideration is that workload may not consist solely of clinical work. Workload for correctional mental health professionals may also consist of documentation, administrative duties,

training, meetings, research, and other non-clinical activities. Taking into account the many duties that may add to workload, organizations should consider consulting with their correctional mental health staff to improve their workload, increase engagement, and alleviate burnout.

Employees' perceptions of organizational support are based on sincere praise, supportive comments, raises, ranks, and participative decision-making (Blau, 1964; Brinberg & Castell, 1982). However, the intercorrelation between perceived organizational support and subscales of the AWS makes it difficult to determine which specific interventions would alleviate depersonalization and increase perceptions of personal accomplishment.

There may be a number of explanations for the small, positive correlation between age and perceptions of personal accomplishment. It could be that these employees have more effective coping strategies that help buffer against experiences of emotional exhaustion and depersonalization while focusing on the accomplishments in their career. Such positive coping strategies and low levels of emotional exhaustion and depersonalization may keep them from leaving correctional work in pursuit of other work settings. It is also possible that as these employees age, they have more personal accomplishments than early- or mid-career professionals.

Limitations

Limitations for this study include a small sample size, geographic and work setting differences for participants, and the likelihood that those experiencing the highest levels of burnout did not participate in the survey. Most respondents were from the Western region of the United States (47.2%), followed by the South (39.2%). The

Northeastern United States contributed 8.8% to the sample and the Midwestern United States saw only 4.8% representation in the sample. The regions were determined using United States Census Bureau information. It may be, however, that the regions most represented in this sample have differential rates of incarceration compared to other regions of the United States. Additionally, participants were mostly from State departments of corrections ($n = 113$) with very few employees from Federal ($n = 8$) or Private ($n=2$) prisons. These sample characteristics may prevent generalizing the findings to all correctional mental health professionals. Additionally, procuring participants who are contracted through third-party providers proved difficult. That is, some departments of correction rely on contractors to provide mental health providers for their inmates rather than hiring them as state employees. Experience from this study indicates that one of the two main providers does not allow its employees to participate in any outside research out of concern for liability. The unfortunate part of this limitation is that more than 300 correctional facilities in the United States currently utilize correctional mental health professionals who work through these contractors.

Areas of Future Research

Based on feedback from participants, it might be prudent to begin looking at between-group differences. For example, employees who enjoy the benefits of unionization may have a differential levels of burnout compared to those who do not. In a similar vein, correctional mental health professionals who work as government employees may have differential levels of burnout and engagement when compared to employees who work through private contractors or in private prisons. A more comprehensive study of predictors of burnout and engagement might also include

occupational characteristics (specifically the role of emotional labor), organizational factors, and personal factors (e.g. attitudes, beliefs, and disposition). Additionally, future research should consider a more focused approach on individual departments so that the results might be meaningful for each organization and more effectively implemented. Future research should also consider the construct overlap issues that were encountered in this study, specifically the substantial intercorrelation among the SPOS and AWS dimensions.

Table 1
Summary of Sample Characteristics for Categorical Variables

Variable	Percentage
Annual Family Income	
25-50K	8.8
50-75K	25.6
75-100K	31.2
100-150K	24.8
150K+	9.6
Work Setting	
Urban	31
Rural	69
Security Setting ^a	
Maximum	59.3
Medium	58.9
Minimum	14.8
Community/Transitional	17.2
Other: Intake	1.6
Other: Special Programs	1.6
Other: Policy/Data Support	2.3
Clients	
Male Inmates	69.8
Female Inmates	14.3
Both Male and Female Inmates	14.3
Other: (Policy and Data Support)	1.6

^aMay total more than 100%, participants were allowed to choose more than one option.

Table 2

Correlations of Dependent and Independent Variables

	MBI EE	MBI DP	MBI PA	SPOS	Workload	Control	Reward	Community	Fairness	Values
MBI EE		.54**	-.28**	-.47**	-.56**	-.50**	-.42**	-.36**	-.43**	-.38**
MBI DP			-.35**	-.43**	-.16	-.36**	-.41**	-.38**	-.39**	-.33**
MBI PA				.38**	.08	.37**	.27**	.26**	.22**	.35**
SPOS					.29**	.73**	.82**	.66**	.80**	.69**
Workload						.36**	.29**	.21*	.35**	.26**
Control							.66**	.53**	.61**	.66**
Reward								.57**	.68**	.58**
Community									.59**	.48**
Fairness										.67**
Values										

**Correlation is significant at the 0.01 level

*Correlation is significant at the 0.05 level

Table 3

Summary of Sample Characteristics for Continuous Variables

Variable	Correctional Sample		Normative Sample	
	Mean	Standard Deviation	Mean	Standard Deviation
Dependent Variables				
Maslach Burnout Inventory ^a				
Emotional Exhaustion	22.30	12.44	16.89	8.90
Depersonalization	9.63	6.30	5.72	4.62
Personal Accomplishment	35.03	7.94	30.87	6.37
Independent Variables				
Areas of Worklife^b				
Workload	2.94	.92	2.96	.80
Control	3.25	.90	3.31	.86
Reward	3.17	1.05	3.19	.89
Community	3.34	1.02	3.38	.84
Fairness	2.65	.90	2.78	.80
Values	3.33	.85	3.24	.79
Survey of Perceived Organizational Support	4.31	1.28		

^aNormative sample of mental health professionals (N = 730)^bNormative sample of university, public service, retail, post office, teachers, and nursing home workers (N = 22,714)

Table 4
Multiple Regression Analysis Predicting Emotional Exhaustion

Model	R	Adj. R ²	F for Equation	p for Equation	R ² Change	F for Change	p for Change	Zero Order r	Squared Semi-Partial
Workload	.563	.310	46.81	.000	.317	46.81	.000	-.56*	.159
Control	.647	.407	35.98	.000	.102	17.50	.000	-.50*	.017
Organizational Support	.660	.419	25.53	.000	.018	3.12	.080	-.47*	.006
Community	.662	.415	19.07	.000	.001	.261	.611	-.36*	.002
Fairness	.662	.409	15.10	.000	.000	.013	.910	-.43*	.000
Reward	.662	.403	12.46	.000	.000	.002	.961	-.42*	.000

*Correlation is significant at the 0.01 level

Table 5
Multiple Regression Analysis Predicting Depersonalization

Model	R	Adj. R ²	F for Equation	p for Equation	R ² Change	F for Change	p for Change	Zero Order r	Squared Semi-Partial
Organizational Support	.434	.181	24.14	.000	.188	21.14	.000	-.43*	.002
Community	.451	.188	13.14	.000	.015	1.92	.168	-.38*	.011
Reward	.460	.189	9.13	.000	.008	1.09	.299	-.41*	.006
Fairness	.464	.184	6.92	.000	.003	.449	.505	-.39*	.003
Control	.466	.178	5.54	.000	.002	.223	.638	-.36*	.002
Workload	.466	.169	4.57	.000	.000	.001	.974	-.16	.000

*Correlation is significant at the 0.01 level

Table 6
Multiple Regression Analysis Predicting Personal Accomplishment

Model	<i>R</i>	Adj. <i>R</i> ²	<i>F</i> for Equation	<i>p</i> for Equation	<i>R</i> ² Change	<i>F</i> for Change	<i>P</i> for Change	Zero Order <i>r</i>	Squared Semi-Partial
Organizational Support	.376	.133	16.59	.000	.141	16.59	.000	.38*	.032
Control	.399	.143	9.48	.000	.018	2.17	.143	.37*	.013
Fairness	.422	.153	7.17	.000	.019	2.29	.133	.22*	.023
Values	.439	.160	5.86	.000	.015	1.78	.185	.35*	.014
Reward	.445	.157	4.79	.001	.005	.599	.441	.27*	.005
Workload	.446	.149	3.97	.001	.001	.085	.771	.08	.000
Community	.447	.140	3.38	.003	.001	.078	.781	.26*	.000

*Correlation is significant at the 0.01 level

Table 7
Sex Differences in Burnout

	Male		Female	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Emotional Exhaustion	22.07	12.91	22.34	12.34
Depersonalization	11.68	7.13	8.41	5.52
Personal Accomplishment	34.78	7.73	35.15	8.16

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APPENDIX A: IRB Approvals



Institutional Review Board for the Protection of Human Subjects Approval of Initial Submission – Expedited Review – AP01

Date: February 14, 2013 IRB#: 2266
Principal Investigator: Deanna B. Gallavan, BA Approval Date: 02/14/2013
Expiration Date: 01/31/2014

Study Title: Engagement and Burnout in Correctional Mental Health Professionals: The Role of Organizational Factors

Expedited Category: 7

Collection/Use of PHI: No

On behalf of the Institutional Review Board (IRB), I have reviewed and granted expedited approval of the above-referenced research study. To view the documents approved for this submission, open this study from the *My Studies* option, go to *Submission History*, go to *Completed Submissions* tab and then click the *Details* icon.

As principal investigator of this research study, you are responsible to:

- Conduct the research study in a manner consistent with the requirements of the IRB and federal regulations 45 CFR 46.
- Obtain informed consent and research privacy authorization using the currently approved, stamped forms and retain all original, signed forms, if applicable.
- Request approval from the IRB prior to implementing any/all modifications.
- Promptly report to the IRB any harm experienced by a participant that is both unanticipated and related per IRB policy.
- Maintain accurate and complete study records for evaluation by the HRPP Quality Improvement Program and, if applicable, inspection by regulatory agencies and/or the study sponsor.
- Promptly submit continuing review documents to the IRB upon notification approximately 60 days prior to the expiration date indicated above.
- Submit a final closure report at the completion of the project.

If you have questions about this notification or using iRIS, contact the IRB @ 405-325-8110 or irb@ou.edu.

Cordially,

A handwritten signature in black ink, appearing to read 'E. Laurette Taylor'.

E. Laurette Taylor, Ph.D.
Chair, Institutional Review Board

APPENDIX B: Information Sheet for Consent Form

University of Oklahoma Institutional Review Board Information Sheet to Participate in a Research Study

Project Title: Burnout and Engagement in Correctional Mental Health Professionals: The Role of Organizational Factors
Principal Investigator: Deanna Gallavan, M.Ed.
Department: Educational Psychology

You are being asked to volunteer for this research study. This study is being conducted at the University of Oklahoma. You were selected as a possible participant because of your status as a mental health professional working in a correctional environment. You must be between the ages of 22 and 70 to participate.

Please read this information sheet and contact me to ask any questions that you may have before agreeing to take part in this study.

Purpose of the Research Study

The purpose of this study is to explore potential relationships between several organizational factors and burnout among mental health professionals employed in correctional facilities. There are many unique features of correctional settings that might be expected to influence employees' experience of their work. Better understanding these issues has potentially important implications for training, job structuring in correctional settings, and support services for correctional psychologists.

Number of Participants

About 500 people will take part in this study.

Procedures

If you agree to be in this study, you will be asked to complete a demographic form and three brief questionnaires.

Length of Participation

Questionnaires will be administered once and administration time will take approximately 15-20 minutes.

Risks and Benefits

There are no known risks for participation in this study. While there are no direct benefits to participants, this study may contribute to a better understanding of the unique needs and challenges for mental health professionals working in correctional settings.

Compensation

You will not be reimbursed for your time and participation in this study.

Confidentiality

In published reports, there will be no information included that will make it possible to identify you. Research records will be stored securely and only approved researchers will have access to the records.

The OU Institutional Review Board may inspect and/or copy your research records for quality assurance and data analysis.

All responses from the questionnaires are anonymous and will not be linked to any identifying information.

Information disclosed to the researcher will not be disclosed to the Department of Corrections, except where the researcher believes the individual is a threat to his or her own safety, the safety of another person, or to the security or orderly operation of any Federal Correctional Facility, State Correctional Institution or Community Corrections Center, especially where an inmate has expressed an intention to harm self or others.

Although safety and security are paramount in correctional facilities, it will NOT be possible for the researcher to identify individuals because of the anonymous nature of the survey instruments and data collection process and because the researcher will not have a link between a participant's identity and his or her responses to the surveys.

Voluntary Nature of the Study

Participation in this study is voluntary. If you withdraw or decline participation, you will not be penalized or lose benefits or services unrelated to the study. If you decide to participate, you may decline to answer any question and may choose to withdraw at any time.

Contacts and Questions

If you have concerns or complaints about the research, the researcher conducting this study, Deanna Gallavan can be contacted at:

Phone: (347) 306-8898

Email: dgallavan@ou.edu

Or you may contact Ms. Gallavan's advisor:

Jody Newman, Ph.D.

Phone: (405) 325-5974

Email: jnewman@ou.edu

Contact the researcher(s) if you have questions or if you have experienced a research-related injury.

If you have any questions about your rights as a research participant, concerns, or complaints about the research and wish to talk to someone other than individuals on the research team or if you cannot reach the research team, you may contact the University of Oklahoma – Norman Campus Institutional Review Board (OU-NC IRB) at 405-325-8110 or irb@ou.edu.

Please keep this information sheet for your records. By providing information to the researcher(s), I am agreeing to participate in this study.

- I agree to participate
- I decline

This study has been approved by the University of Oklahoma, Norman Campus IRB.

IRB Number: 2266

Approval date: 2/14/2013

APPENDIX C: Demographic Questionnaire
Demographic Information

_____ Age
_____ Male
_____ Female

Ethnicity (choose as many as apply)
_____ American Indian or Alaska Native
_____ Asian American
_____ African American
_____ Native Hawaiian or Other Pacific Islander
_____ White
_____ Other: _____

Marital Status:
_____ Married/Partnered
_____ Single
_____ Divorced /Separated
_____ Widowed

_____ State of Residence

Annual Household Income:
_____ 0-25K
_____ 25-50K
_____ 50-75K
_____ 75-100K
_____ 100-150K
_____ 150K+

Highest Degree Earned: Bachelors _____ Masters _____ Doctorate _____

Years of Employment in Corrections? _____ Years of Employment at current site? _____

In what type of correctional setting do you see your clients?

Federal _____ State _____ Private _____

Maximum Security _____ Medium Security _____ Community or Transitional _____
Other (please describe) _____

Who are your clients? Male Inmates _____ Female Inmates _____ Both _____

Did you intentionally seek employment in a correctional setting or was it employment of convenience?

Intentional _____ Convenience _____

Please estimate, on average, how many hours per week you spend on the following tasks:

Administrative _____ Research _____ Direct Clinical Services _____

Documentation _____

On average, how many clients do you see per week? _____

APPENDIX D: Areas of Worklife Scale

Six Areas of Worklife

Please use the following rating scale to indicate the extent to which you agree or disagree with the following statements. Please mark on the your answer sheet the number corresponding to your answer.

1	2	3	4	5
Strongly Disagree	Disagree	Hard to Decide	Agree	Strongly Agree

Three Sample Items

	Strongly Disagree	Disagree	Hard to Decide	Agree	Strongly Agree
Workload					
1. I do not have time to do the work that must be done.	1	2	3	4	5
Control					
6. I have control over how I do my work.	1	2	3	4	5
Community					
14. People trust one another to fulfill their roles	1	2	3	4	5

APPENDIX E: Maslach Burnout Inventory – Human Services Survey

MBI – Human Services Survey

How often:

0	1	2	3	4	5	6
Never	A few time a year or less	Once a month or less	A few times a month	Once a week	A few times a week	Everyday

Three Sample Items:

How Often
0-6

Statements

1. _____ I feel emotionally drained from my work.
2. _____ I feel used up at the end of the workday.
3. _____ I feel fatigued when I get up in the morning and have to face another day on the job.

MBI-Human Services Survey (MBI-HSS): Copyright ©1981 Christina Maslach & Susan E. Jackson. All rights reserved in all media. Published by Mind Garden, Inc., www.mindgarden.com

APPENDIX F: Survey of Perceived Organizational Support

Format for the 36-item Survey of Perceived Organizational Support

© University of Delaware, 1984

Listed below and on the next page are statements that represent possible opinions that YOU may have about working at your correctional facility. Please indicate the degree of your agreement or disagreement with each statement by filling in the circle on your answer sheet that best represents your point of view about your correctional facility. Please choose from the following answers:

0	1	2	3	4	5	6
Strongly Disagree	Moderately Disagree	Slightly Disagree	Neither Agree nor Disagree	Slight Agree	Moderately Agree	Strongly Agree

1. _____ values my contribution to its well-being.
2. If _____ could hire someone to replace me at a lower salary it would do so.
3. _____ fails to appreciate any extra effort from me.
4. _____ strongly considers my goals and values.
5. _____ would understand a long absence due to my illness.
6. _____ would ignore any complaint from me.
7. _____ disregards my best interests when it makes decisions that affect me.
8. Help is available from _____ when I have a problem.
9. _____ really cares about my well-being.
10. _____ is willing to extend itself in order to help me perform my job to the best of my ability.
11. _____ would fail to understand my absence due to a personal problem.
12. If _____ found a more efficient way to get my job done they would replace me.
13. _____ would forgive an honest mistake on my part.
14. It would take only a small decrease in my performance for _____ to want to replace me.
15. _____ feels there is little to be gained by employing me for the rest of my career.
16. _____ provides me little opportunity to move up the ranks.
17. Even if I did the best job possible, _____ would fail to notice.
18. _____ would grant a reasonable request for a change in my working conditions.
19. If I were laid off, _____ would prefer to hire someone new rather than take me back.
20. _____ is willing to help me when I need a special favor.
21. _____ cares about my general satisfaction at work.
22. If given the opportunity, _____ would take advantage of me.
23. _____ shows very little concern for me.

24. If I decided to quit, _____ would try to persuade me to stay.
25. _____ cares about my opinions.
26. _____ feels that hiring me was a definite mistake.
27. _____ takes pride in my accomplishments at work.
28. _____ cares more about making a profit than about me.
29. _____ would understand if I were unable to finish a task on time.
30. If _____ earned a greater profit, it would consider increasing my salary.
31. _____ feels that anyone could perform my job as well as I do.
32. _____ is unconcerned about paying me what I deserve.
33. _____ wishes to give me the best possible job for which I am qualified.
34. If my job were eliminated, _____ would prefer to lay me off rather than transfer me to a new job.
35. _____ tries to make my job as interesting as possible.
36. My supervisors are proud that I am a part of this organization.

APPENDIX G: Prospectus

Chapter 1: Introduction

Overview

Non-custodial correctional rehabilitation staff, including correctional mental health professionals, plays an important role in reducing recidivism among inmates (Garland, McCarty & Zhao, 2009). Aside from the main purpose of providing direct services to inmates, correctional mental health professionals often fill many other roles, including providing services to correctional staff through Employee Assistance Programs, reducing tension, enhancing safety, and working in management/administrative capacities to design and implement appropriate and beneficial policies and programs (Boothby & Clements, 2000; 2002). They are also in a position to aid inmates in the shift from inmate to citizen in post-incarceration reintegration plans (Smith & Sabatino, 1990).

Unfortunately, correctional mental health professionals are at risk for low levels of engagement (active involvement and dedication to one's work) and high levels of burnout by the very nature of their work. They work in agency settings, typically within a bureaucratic structure, and with clients who exhibit negative behaviors – two known correlates of burnout for licensed psychologists (Ackerly, Burnell, Holder & Kurdek, 1988).

Mental health professionals who experience burnout are likely to experience high levels of perceived inefficacy or lack of enthusiasm or effectiveness; high levels of depersonalization (callous lack of concern) toward their clients; and high levels of emotional exhaustion (the emotional dimension of chronic fatigue and stress in the

workplace) (Maslach, Jackson & Leiter, 1997). Because of their increased risk for burnout and the importance of their roles in prisoner rehabilitation and reduced rates of recidivism, the impact of burnout on correctional mental health professionals should not be underestimated. To further exacerbate the problem of burnout, psychologists are more likely to gloss over their own professional impairment resulting from personal distress and are less likely to attend to a colleague who is showing signs of personal distress or professional impairment (Barnett, Baker, Elman, & Schooner, 2007). Fortunately, the problem of burnout among correctional mental health professionals is beginning to move to the foreground of research agendas.

Background of the Problem

Researchers have proposed ways to improve correctional outcomes such as reduced recidivism, positive community reintegration, and rehabilitation. Some of the proposed strategies include making commitments to assessing staff functioning, including absences, attrition, turnover, and medical costs of burnout (Clements, Althouse, Ax, Fagan, Wormith & Magaletta, 2007) and researching the correlates of burnout among correctional psychologists. Once correlates of burnout among correctional mental health professionals are determined, developing prevention and intervention techniques to bolster strengths and address weaknesses should be an organizational and personal goal. However, to date, very little research has been conducted on correlates of burnout among correctional mental health professionals. In one published study, results indicated correctional psychologists experienced higher levels of burnout compared to psychologists who work in other settings (Senter, Morgan, Serna-McDonald & Bewley, 2010). In another study examining the levels and

correlates of burnout among correctional mental health professionals, results also indicated that correctional mental health professionals experienced higher levels of burnout compared to other mental health service providers and that self-reported optimism, work/family role conflict, and attitudes toward prisoners were significant predictors of burnout among correctional psychologists (Gallavan & Newman, 2013). Additionally, only recently has the question of what to do about burnout been addressed in the literature (Dunford, Shipp, Boss, Angermeier & Boss, 2012; Maslach, Leiter & Jackson, 2012). It is important to maintain momentum in this area of research in order to continue best practices in correctional mental health.

Statement of the Problem

The purpose of the current study is to examine what effect, if any, organizational factors have on the experience of engagement and burnout in a sample of correctional mental health professionals. While there has been some research examining correlates of burnout among correctional mental health professionals, to date there has not been a study examining how areas of worklife and perceived organizational support correlate with engagement and burnout. Studies specifically designed to explore the relationship between organizational predictors of engagement and burnout are needed if the problem is to be effectively addressed in correctional settings.

The current study provides a twofold contribution to the research on correctional mental health professionals' experiences of engagement and burnout. First, this study adds to a fairly new and growing body of research seeking to determine predictors of engagement and burnout among correctional mental health professionals. Second, results of this study may be used to focus or re-direct future research on correctional

mental health professionals' workplace experience, as well as practical applications designed to cultivate engagement and alleviate burnout in the correctional setting.

Chapter 2

Literature Review

Burnout

Burnout is a “psychological syndrome of exhaustion, cynicism, and inefficacy, which is in response to chronic job stressors (Leiter & Maslach, 2004 p. 93).” The first dimension, exhaustion, refers to emotional exhaustion and is defined as the emotional manifestation of chronic fatigue or stress. Emotional exhaustion has been linked to insomnia, fatigue, anxiety and tension (Leiter & Maslach, 2004; Maslach, Jackson, & Leiter, 1997; Perlman & Hartman, 1982). Cynicism, or depersonalization, is regarded as a coping strategy wherein one tries to stem the flow of emotional resources by resorting to a callous lack of concern regarding clients. Inefficacy, or a decrease in the perception of personal accomplishment, is an outcome of the stress-strain-coping sequence and is defined as a perception of a lack of enthusiasm and effectiveness that comes from working with people (Leiter & Maslach, 2004).

Burnout is grounded in the conservation of resources theory of stress, wherein individuals strive to gather and retain resources and are threatened by the loss of resources (Hobföll, 1989). Examples of these resources are mastery, self-esteem, learned resourcefulness, socioeconomic status, and employment (Hobföll, 1989). Psychological stress is an individual's reaction to an environment where their resources are threatened or have been lost, or they are unable to gain resources after investing time and energy in an effort to attain them (Hobföll, 1989). When an individual in a

high-demand work environment is faced with fewer job resources to complete work tasks, the toll on personal resources is higher. Unsurprisingly, the presence of high job demands and low job resources resulted in higher rates of burnout among health professionals (Hu, Schaufeli & Taris, 2011).

Job characteristics that have been related to burnout include an overload of work, time pressure, role ambiguity, role conflict, and the severity of client problems (Maslach, Schaufeli & Leiter, 2001; Rupert & Scaletta Kent, 2007). In addition to job demands that correlate with burnout, the absence of job resources correlate highly with the experience of burnout. Specifically, the lack of support from supervisors has been found to correlate more highly with burnout than the lack of support from colleagues (Maslach, Schaufeli & Leiter, 2001). Other job resources linked to burnout included the lack of feedback, low levels of participative decision-making, and a lack of autonomy (Maslach, Schaufeli, & Leiter, 2001). Occupational characteristics that have been tied to burnout include those occupations that involve a high level of emotional involvement, or emotional labor – most often described as “people work” – including work in the areas of mental or physical health, law enforcement, and education. The common factor seems to be the necessity for active presence of emotion or active suppression of emotion in order to get the job done effectively. Research in this area indicates that this level of emotional labor accounts for a significant amount of variance in levels of burnout (Zapf, Seifert, Schmutte, & Mertini, 2001). Organizational characteristics that have been found to contribute to levels of burnout include such factors as hierarchical and bureaucratic structures and how resources are distributed (including space and supply distribution) (Maslach, Schaufeli, & Leiter, 2001; Rupert &

Morgan, 2005; Rupert & Scaletta Kent, 2007). Organizational characteristics such as operating policies and procedures, paths for career growth in hierarchical, bureaucratic, or non-profit environments, and policies for work-family balance can have an impact on the employee's perceptions of fairness, value, and autonomy (Maslach, Schaufeli, & Leiter, 2001) and are highly likely to contribute to levels of burnout.

One factor that seems to be correlated with burnout is age. Research has indicated that younger employees appear to be at higher risk for burnout than employees between the ages of 30-40 (Maslach, Schaufeli, & Leiter, 2001; Rupert & Scaletta Kent, 2007). It is unknown why this is the case, though it has been postulated that there is a survivor bias. That is, employees who do not quit early in their careers are likely to report lower levels of burnout (Maslach, Schaufeli, & Leiter, 2001). The research on sex differences in experiences of overall burnout is equivocal at best, except that men tend to have higher scores on the cynicism/depersonalization dimension and women tend to have higher scores on the emotional exhaustion dimension (Maslach, Schaufeli, & Leiter, 2001; Purvanova & Muros, 2010; Rupert & Morgan, 2005). Marital status may act as a protective factor against burnout, as single individuals, especially men, tend to experience higher levels of burnout than those who are married or who were married then divorced (Maslach, Schaufeli, & Leiter, 2001). Higher levels of education also contributed to higher rates of burnout, though the explanation for these findings is not very clear. Higher educational attainment is associated with higher socioeconomic status, but also with higher levels of responsibility at work and more stress (Maslach, Schaufeli, & Leiter, 2001). In addition to demographic variables, personality characteristics have also been examined as correlates of burnout. Low

levels of hardiness, external locus of control, and passive coping strategies have all been correlated with high levels of burnout (Maslach, Schaufeli & Leiter, 2001; Semmer, 1996). Neuroticism, one of the Big Five personality traits, includes trait anxiety, vulnerability, hostility, depression, and self-consciousness. Individuals who are neurotic are at a higher risk for experiencing burnout because they are prone to psychological distress (Maslach, Schaufeli, & Leiter, 2001). In terms of Jungian analysis, “feeling types” are more prone to the cynicism/depersonalization dimension of burnout than “thinking types” (Maslach, Schaufeli, & Leiter, 2001). Additionally, low levels of dispositional optimism have been found to be related to burnout and negative experiences of work (Gallavan & Newman, 2013).

Engagement

In contrast to burnout, engagement is a dynamic motivational state characterized by vigor, dedication, and absorption (Macey & Schneider, 2008; Schaufeli, Salanova, González-Romá & Bakker, 2002). The premise that vigor and dedication are polar opposites of emotional exhaustion and cynicism/ depersonalization has been tested and confirmed (González-Romá, Schaufeli, Bakker & Lloret, 2006; Maslach & Leiter, 1997). Vigor is defined as a feeling of mental resilience and high levels of energy at work (Schaufeli, Salanova, González-Romá, & Bakker, 2002). Dedication is exemplified by challenge, inspiration, and enthusiasm toward work (Schaufeli, Salanova, González-Romá & Bakker, 2002). Absorption is a state of harmony and enjoyable concentration on work tasks while time passes quickly (Hallberg & Schaufeli, 2006; Schaufeli, Salanova, González-Romá & Bakker, 2002). Absorption is the antithesis of clock-watching, which is typically manifested by checking the time every

few minutes as the workday comes to a close. Work engagement is dependent on the worker's affective state and includes high self-involvement at work and positive feelings about work (George, 1989; Kahn, 1989; Rich, Lepine & Crawford, 2010; Schaufeli, Salanova, González-Romá & Bakker, 2002).

The affective, energetic and self-involvement components of work engagement distinguish this construct from job involvement, organizational commitment, and job satisfaction (Leiter & Maslach, 2004; Macey & Schneider, 2008; Rich et al., 2010; Sonnentag, Dormann, & Demerouti, 2010). Engagement describes the employee's relationship with the work itself, whereas organizational commitment is focused on the employee's allegiance to the organization, job satisfaction focuses on work as a source of contentment, and job involvement fails to capture the energy and effectiveness dimensions of engagement (Maslach, Schaufeli & Leiter, 2001).

The relationship between affect and work engagement is explained by self-regulation theory. Positive affect (e.g. feeling happy and enthusiastic) acts as a signal to approach and continue an action, as well as provides an impetus to set high goals and act upon them to reap positive outcomes (Elliot, 2006; Frijda, 1988; Hakanen, Bakker, & Schaufeli, 2006, Ilies & Judge, 2005). This sort of positive affect-driven, goal-directed behavior is a necessary precondition for work engagement (Kazén, Kaschel, & Kuhn, 2008). However, positive affect is not the only affective state that can lead to work engagement. Self-regulation theory also supports the role of negative affect in the emergence of work engagement (Carver & Scheier, 1990; Kuhl, 2000). Negative affect signals that events are not going well and an analytical shift in focus or rate of goal pursuit should be considered (Carver & Scheier, 1990; Frijda, 1988; Kuhl, 2000).

Empirical research has supported the notion that negative affect can act as a motivating factor in work engagement (Foo, Uy, & Baron, 2009; Louro, Pieters, & Zeelenberg, 2007). In an effort to discern a more dynamic model of work engagement, Bledow, Schmitt, Frese, and Kühnel (2011) determined that work engagement was linked to positive affect, but only when it emerged as a result of the interplay between positive and negative affect in response to positive and negative work events.

A worker's affective state at work is typically in response to a positive or negative work event or the organizational climate. Dollard and Bakker (2010) linked one aspect of organizational climate to high levels of engagement – a psychosocial safety climate. A psychosocial safety climate (PSC) is a set of policies, procedures, and practices for the protection of employees' psychological health and safety (Dollard, 2007). This empirical work has indicated that PSC is a basic organizational resource directly linked to employee engagement and psychological health (Dollard & Bakker, 2010).

The Maslach Burnout Inventory (MBI) is one instrument used to measure levels of burnout and engagement. The three dimensions of burnout (emotional exhaustion, cynicism/depersonalization, and inefficacy) are the opposite of the three dimensions of engagement (vigor, dedication, and absorption). Using one measure to determine levels of burnout and engagement may be more efficient for researchers who are trying to determine rates and levels of both constructs in the workplace. Support for the use of the MBI in this manner is found in Leiter and Maslach's (2005) examination of two hospital units. In the first unit, levels of burnout were high and respondents indicated unfavorable perceptions of their work life. In the second unit, levels of burnout were

low (i.e., engagement was high on this unit) and they reported more favorable perceptions of their work life.

Areas of Worklife

The perceptions of work life described in Leiter and Maslach's (2005) hospital study were correlated with their measure of burnout and engagement – the MBI. Leiter and Maslach (2004) identified these six areas of worklife from a comprehensive review of the organizational correlates of job stress and burnout. These areas of worklife are: workload, control, reward, community, fairness, and values. Workload is defined as having job demands which exceed human limits (Leiter & Maslach, 2004). Control is based on an employee's perception that they can influence decisions about their work, exercise professional autonomy, and have access to the resources they need to be effective at their job (Leiter & Maslach, 2004). Reward is the extent to which intrinsic and extrinsic rewards are consistent with expectations. Inadequate recognition and reward are associated with feelings of devaluation and inefficacy (Leiter & Maslach, 2004). Community is the general quality of interaction with other employees and supervisors, and includes issues of conflict, reciprocal support, closeness, and teamwork (Leiter & Maslach, 2004). This type of community support affirms that the worker is a member of a group that has a shared sense of values. The concept of fairness is based in equity theory (Walster, Berscheid, & Walster, 1973), wherein there is a balance between one's inputs (i.e., time, effort, expertise) and outputs (reward and recognition). Fairness is the perception that workplace decisions are being made fairly and that employees are treated with respect (Leiter & Maslach, 2004).

In support of Leiter and Maslach's six areas of worklife, a recent meta-analysis of burnout with job demands, resources and attitudes (Alarcon, 2011) indicated that role ambiguity, role conflict, and workload have a positive relationship with emotional exhaustion, cynicism (or depersonalization), and reduced personal accomplishment. In contrast, control and autonomy in the workplace were negatively related to emotional exhaustion, cynicism, and reduced personal accomplishment (Alarcon, 2011).

Perceived Organizational Support

In addition to an employee's perceptions of individual facets of worklife, the employee's perception of how he or she is being supported by their organization as a whole is important to a more complete understanding of burnout and engagement. Perceived organizational support is an employee's perception that the organization for which they work values their contribution and cares about their well-being. Organizational support theory (Eisenberger, Huntington, Hutchinson, & Sowa, 1986; Rhoades & Eisenberger, 2002; Shore & Shore, 1995) and perceived organizational support have their roots in norm reciprocity, which concludes that people should help others who have helped them (Gouldner, 1960). Organizational support theory posits that employees form a general opinion about how much their organization supports them and is committed to them; much in the same way organizations evaluate their employees (Eisenberger, Huntington, Hutchison, & Sowa, 1986; Rhoades & Eisenberger, 2002; Shore & Shore, 1995). Employment is typically viewed as a social exchange between a worker and an organization. The worker trades loyalty and effort for material and social reward (Etzioni, 1961; Gould, 1979; Levinson, 1965; March & Simon, 1958; Mowday, Porter, & Steers, 1982). As a result of this exchange, workers

develop economic and affective attachments to the organization for which they work and may ascribe to the organization anthropomorphic traits based on administrative and supervisory actions taken on behalf of the organization (Eisenberger, Huntington, Hutchinson, & Sowa, 1986). Employees base their perceptions of an organization's support on such factors as receipt of sincere praise and supportive comments, raises, rank, opportunities for job enrichment and input on organizational policies (Blau, 1964; Brinberg & Castell, 1982). In short, employees want to see and believe that the organization is investing as much in them as they are in the organization. Employees also rely on the organization, in part, to help meet their needs for approval, esteem, and affiliation by holding employees in high regard (Eisenberger, Huntington, Hutchison & Sowa, 1986).

In a meta-analysis of studies of perceived organizational support, employee perceptions of organizational fairness, supervisor support, and organizational rewards and favorable job conditions were associated with perceived organizational support (Rhoades & Eisenberger, 2002). Perceived organizational support was subsequently associated with positive outcomes for both the employee (e.g., job satisfaction and positive affect) and the organization (e.g., performance, lessened withdrawal behavior, and affective commitment) (Rhoades & Eisenberger, 2002).

Unfortunately, there has been little research on mental health professionals' perceptions of organizational support and its relationship to burnout. One study, focused specifically on mental health professionals, indicated that about 40% of the variance in the emotional exhaustion and depersonalization dimensions of burnout were accounted for by low perceived organizational support (Mutkins, Brown, &

Thorsteinsson, 2011). Low perceived organizational support did not account for a significant portion of the variance in perceptions of personal accomplishment (Mutkins, Brown, & Thorsteinsson, 2011). The few studies that have focused on the relationship between perceived organizational support and burnout across a broader range of employees revealed that high levels of perceived organizational support were negatively related to overall burnout (Cropanzano, Howes, Grandey, and Toth, 1997), only the emotional exhaustion dimension of burnout (Armstrong-Stassen, 2004) and only the emotional exhaustion and depersonalization dimensions of burnout (Jawahar, Stone, & Kisamore, 2007). Research specifically geared toward correctional mental health professionals has indicated that perceived organizational support is an important facet to overall job satisfaction (MacKain, Myers, Ostapiej, & Newman, 2010), but the relationship to burnout has not yet been researched.

Burnout among Mental Health Professionals

In one of the earliest studies conducted to measure burnout and its correlates among licensed psychologists, researchers sent a background questionnaire, the Maslach Burnout Inventory (MBI; Maslach, Jackson, & Leiter, 1997), and the Psychologist's Burnout Inventory (PBI; Ackerly, Burnell, Holder & Kurdek, 1988) to a random sample of 1,589 doctoral-level, licensed psychologists who worked primarily in human services settings (i.e., private practice, hospitals, community centers) (Ackerly, Burnell, Holder & Kurdek, 1988). Approximately 73% of participating psychologists were in the moderate to high range for emotional exhaustion; 59% were in the moderate to high range for depersonalization; and only 4.7% were in the moderate to high range for personal accomplishment (Ackerly, Burnell, Holder & Kurdek, 1988). In

comparison to the normative sample of mental health workers, results indicated that the licensed psychologists' scores on the emotional exhaustion and depersonalization dimensions of the MBI were significantly higher, while their scores were significantly lower on the perceptions of personal accomplishment.

Reported correlates of burnout among licensed psychologists included age, income, work setting (private practice v. public agency), negative client behaviors, such as making suicidal or psychopathic statements (i.e., pathological lying and manipulation), missing appointments, or defensively withdrawing or withholding information; feelings of low personal control over how and when one's daily responsibilities are completed; and feeling personally responsible for client progress (Ackerly, Burnell, Holder & Kurdek, 1988; Vredenburgh, Carlozzi & Stein, 1999).

In the literature on gender as a correlate of burnout among mental health professionals, the findings have been equivocal. Although not all studies reported gender as a correlate of burnout (Ackerly, Burnell, Holder & Kurdek, 1988; Raquepaw & Miller, 1989), some studies have shown that an interaction between gender and workplace setting has been related to emotional exhaustion (Rupert & Morgan, 2005; Rupert & Scaletta Kent, 2007). Specifically, in the Rupert and Morgan (2005) study, female psychologists who worked in agency settings reported significantly higher levels of emotional exhaustion than females in private practice or group practice, and males who worked in group practice reported significantly higher levels of emotional exhaustion than male psychologists who worked in private practice or agencies. One possible explanation for both genders' experiences of emotional exhaustion may be explained by the notion of emotional labor. Emotional labor is defined as the

enhancement or suppression of emotion and is most often experienced by individuals who do “people work” (e.g. mental health, law enforcement, and education). Emotional labor is also a known correlate of the emotional exhaustion dimension of burnout. In this supposition, gender and job characteristics of different work settings interact and may result in emotional exhaustion.

In one study of the gender differences in emotional labor, individuals in power positions (e.g. administration and management positions) were less likely to engage in the emotional labor of anger suppression (Sloan, 2012). It was more acceptable for individuals in administrative and management positions to express their anger (Sloan, 2012). Hierarchical work structures, such as those found in large agencies and bureaucracies, are more likely to have leadership positions, and, those leadership positions are more likely to be filled by men (2009 APA Salary Survey, 2010). In keeping with the APA Salary Survey (2010), of those surveyed, female psychologists were more likely to fill subordinate positions in agency and bureaucratic settings. Sloan’s research (2012) indicated that individuals in a subordinate position were more likely to engage in anger suppression while they were at work. The emotional labor of engaging in anger suppression may account for female psychologists’ higher levels of emotional exhaustion in agency settings.

The relatively flat power structure of group practice settings does not lend itself to the same hierarchical structure as a large agency or bureaucratic work setting. This could mean that expressions of anger are less acceptable in a group setting because there are fewer positions of power. Working in a group setting could result in men engaging in more emotional labor than they do in agency and private practice settings.

That is, the suppression of anger may be more emotionally laborious for men and more likely to result in emotional exhaustion for them. Conversely, women and men are more likely to be on equal footing in a group setting because of the flattened power structure. This would seem to indicate that female workers are less likely to engage in the emotional labor of suppressing anger and are, therefore, less likely to experience emotional exhaustion in a group setting.

Another possible explanation for emotional exhaustion levels among female psychologists may be due to socialized gender role expectations that females should be more concerned with family and home responsibilities. Working in a private or group practice may allow them more autonomy and flexibility with their schedules, thereby reducing Work/Family Conflict. Work/Family Conflict has been positively correlated with emotional exhaustion (Gallavan & Newman, in press).

Demographic and organizational variables that were not correlated with burnout among licensed psychologists were relationship status (single, married, separated, divorced or widowed), theoretical orientation, whether the psychologist is a client in a therapeutic relationship, and degree of organizational support (Ackerley, Burnell, Holder & Kurdek, 1988). Despite the rather large body of research on burnout among mental health professionals, in general, the question remains: why do mental health professionals who work in correctional settings experience higher levels of burnout and what contributes most to those high levels?

Foundations of Burnout Among Correctional Mental Health Professionals

The motivation to work in public service is described as “a general, altruistic motivation to serve the interests of a community of people, a state, a nation or

humankind (Rainey & Steinbauer, 1999, p. 20).” This definition of a public servant aptly describes correctional mental health professionals far and wide. It may be that an altruistic, other-orientation motivates correctional mental health professionals to choose their work setting purposefully. Indeed, Lewis and Frank (2002) found a positive relationship between the desire to help others and a preference for public service jobs, in general.

For the purposes of this study, Correctional Mental Health Professionals (CMHP) are defined as any employee hired to diagnose and/or treat the mental health needs of individuals who have been convicted of crimes and sentenced to prison terms in state, federal and private prisons across the United States. These individuals could include psychiatrists, psychologists, social workers, mental health counselors, and psychiatric nurses. While there are CMHPs who diagnose and treat individuals who are detained in other settings (e.g., jail or juvenile detention centers), those settings are not within the scope of this study.

To date, organizational research focusing on correctional mental health professionals is scarce. Recently, Garland, McCarty and Zhao (2009) examined job satisfaction and organizational commitment among noncustodial staff that work in the Federal Bureau of Prisons (BOP). They reported that female psychological staff reported more job satisfaction than their male counterparts and that, among all psychological staff, supervision and positive collaboration with other staff members were significant predictors of job satisfaction, institutional commitment and commitment to the BOP. In a second study on job satisfaction among correctional psychologists, results indicated that job satisfaction among correctional psychologists

was significantly lower than that of psychologists who work in the community (Senter, Morgan, Serna-McDonald, and Bewley, 2010). Findings in that study also indicated that correctional psychologists experienced higher levels of burnout relative to psychologists who work in VA and community settings (Senter, Morgan, Serna-McDonald, & Bewley, 2010). Unfortunately, the samples in both studies are quite narrowly defined in terms of correctional mental health professionals. In the former study, psychological staff consisted of Federal Bureau of Prison employees. The latter study relied solely on APA division membership as a recruitment tool and, unfortunately, as of 2000, only about 8% of correctional psychologists belonged to APA divisions geared toward correctional and forensic practice (Boothby & Clements, 2000). A third study exploring burnout in a sample of correctional mental health professionals indicated that they experienced high levels of burnout and more negative experiences of work. Predictors of burnout for this group of correctional mental health professionals included low levels of optimism and high levels of work-family conflict (Gallavan & Newman, 2013). One of the limitations of the study was the focus on the contribution of internal and interpersonal variables to burnout rather than organizational variables. In a fourth study examining job satisfaction in a small sample of correctional psychologists in North Carolina, respondents indicated that three general facets of job satisfaction (economics, perceived organizational support, and relationships) were all important to their overall job satisfaction (MacKain, Myers, Ostapiej, & Newman, 2010).

To begin to elucidate which organizational factors may influence correctional mental health professionals' experiences of burnout, an examination of reports of job

satisfaction may help bring salient issues to the foreground. Boothby and Clements' (2002) indicated there are gaps between what correctional psychologists rate as important dimensions of their work and the level to which they are satisfied with their experience of those dimensions. Most notably, gaps were found in correctional psychologists' perceptions of access to decision-making, salary levels, cooperation among staff, and a professional atmosphere. The respondents also indicated the least satisfaction with opportunities for advancement, professional atmosphere, and influence on decision-making (Boothby & Clements, 2002). These factors align with most of the six areas of worklife, most notably control, reward, and community.

Kramen-Kahn and Hansen (1998) suggested that to prevent and alleviate burnout and professional impairment, psychologists should engage in positive career sustaining behaviors, such as balancing work and personal obligations, taking regular breaks from work, and creating diverse caseloads and professional development experiences (e.g., attending conferences, engaging in research, etc.) Unfortunately, in the practice of correctional psychology, it may be difficult to balance work and personal obligations when one is on call or is the lone practitioner in a remote or rural facility (Boothby & Clements, 2000). Additionally, taking regular breaks from work may be unwittingly discouraged when it entails undergoing a search, pat down, and passing through numerous locked doors and metal detectors upon reentry. Another barrier to engaging in positive career sustaining behaviors for some correctional mental health professionals is the homogenous caseload present in many facilities (e.g., all male or all female, primarily Axis II, etc.). Additionally, there may be organizational barriers to engaging in diverse professional development activities. Agency budgets may not

allow for outside training opportunities, supervisors may not understand or prioritize the value of allowing their correctional mental health professionals time to engage in professional development experiences, or the correctional mental health professionals may be too weighed down with heavy caseloads and administrative duties to have the time necessary to engage in research and conference activities.

At the same time that many correctional mental health professionals are facing agency budget cuts, stagnant wages, and an increase in the inmate to mental health professional ratio, there has been a call to expand the scope of correctional psychology to include research on the systemic issues of correctional practice (Clements, Althouse, Ax, Magaletta, Fagan & Wormith, 2007). However, most correctional psychologists are able to devote only a small percentage of their time to research activities (Boothby & Clements, 2000; Boothby & Clements, 2002; Gallavan & Newman, 2013). Additionally, Boothby and Clements (2000) noted that the role of correctional psychologists has changed in response to an increasing inmate population, an increasing mentally ill inmate population, harsher sentencing laws, and a general public intolerance for treatment over punishment. The survey respondents indicated they spent, on average, 30% of their time devoted to administrative tasks, 26% on treatment, and 18% on assessment. Respondents also indicated they would ideally prefer spending less time on administrative tasks and more time on therapy, assessment, and research.

Chapter 3

Participants

G*Power 3.1 power analysis software was used to conduct an a priori power analysis to determine an appropriate sample size based on a linear multiple regression,

fixed model, single regression coefficient. Effect size was set at .15 with an α of .01 and seven predictors were culled from the six dimensions of the Areas of Worklife Survey and the composite scores on the Survey of Perceived Organizational Support. Approximately 110 correctional mental health professionals ages 22 to 70 will be recruited from federal, state, and private correctional facilities across the United States. Eligible participants will be provided with a website link to the electronic survey. Correctional mental health supervisors and listserv administrators for appropriate organizations, such as the American Correctional Association and Division 18 of the American Psychological Association, will be contacted by the principal investigator and will be asked to distribute the website link and an information sheet which explains the purpose of the study.

Instruments

The measures utilized in the study include a demographic questionnaire that gathers data such as age, gender, ethnicity, relationship status, annual income, tenure in their current positions and total years in corrections, type of correctional security setting (maximum, minimum, transitional, etc.), breakdown of weekly tasks and, on average, how much time is allotted to each.

Maslach Burnout Inventory - Human Services Survey. The Maslach Burnout Inventory, developed by Maslach, Jackson, & Leiter (1997), is a 22-item measure consisting of three scales designed to assess emotional exhaustion (EE), depersonalization (Dp), and personal accomplishment (PA). Individuals endorse the frequency with which each item occurs on a 7-point Likert scale ranging from *never* (0) to *everyday* (6). The emotional exhaustion subscale assesses feelings of

being exhausted by one's work. The depersonalization subscale assesses the presence of an unfeeling and impersonal response toward recipients of the individual's care. The personal accomplishment subscale assesses feelings of competence and successful achievement in an individual's work. The internal consistency reliability of the Maslach Burnout Inventory, as measured with Cronbach's coefficient alpha (n = 1,316), was .90 for emotional exhaustion, .79 for depersonalization, and .71 for personal accomplishment. Example items include, "I feel very energetic" and "Working with people directly puts too much stress on me."

Areas of Worklife Scale. The Areas of Worklife Scale, developed by Leiter and Maslach (2004), is a 28-item measure consisting of six subscales designed to assess workload, fairness, values, community, reward, and control. The internal consistency reliability of the Areas of Worklife Scale, as measured with Cronbach's coefficient alpha (n = 6,815), was .70 for workload, .70 for control, .82 for rewards, .82 for community, .82 for fairness, and .73 for values. Example items include, "I have control over the work I do" and "My values and the organization's values are alike."

Survey of Perceived Organizational Support. The Survey of Perceived Organizational Support (SPOS; Eisenberger, Huntington, Hutchison & Sowa, 1986) is a 36-item measure designed to assess employees' perceptions of how well their workplace supports them. The internal consistency reliability of the Survey of Perceived Organizational Support, as measured by Cronbach's coefficient alpha (n

= 361), is .97. Example items include, “[my workplace] really cares about my well-being” and “[my workplace] provides me little opportunity to move up the ranks.”

Procedure

Participants will complete an electronic survey that will include a demographic questionnaire and several instruments assessing dimensions of burnout, areas of worklife, and perceived organizational support. It is estimated that the survey will take approximately 25-30 minutes to complete. Participation will be voluntary, and there will be no compensation, as that is generally disallowed by most federal and state government agencies.

Data will be collected via Qualtrics, a secure online survey site. The online survey will be created and securely maintained by the principal investigator. Only the principal investigator will have access to the anonymized data. Data will be collected and maintained through the use of a secure server to prevent unauthorized access to confidential information.

Research Questions

The primary research questions of interest are:

4. What is the relationship between a linear combination of work life dimensions and burnout in this sample of correctional mental health professionals?
5. What is the relationship between a linear combination of work life dimensions and engagement in this sample of correctional mental health professionals?

Data Analysis

Initially, a principal components analysis will be conducted to explore the underlying structure among the six Areas of Worklife scales and the Survey of

Perceived Organizational Support. Subsequently, two forward multiple regression analyses will be conducted using a linear combination of derived work life components to predict first burnout and then engagement. Because of the exploratory nature of this research, entry criteria will be lowered to ensure that all variables enter the analyses.

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Demographic Information

_____ Age
_____ Male
_____ Female

Ethnicity (choose as many as apply)
_____ American Indian or Alaska Native
_____ Asian American
_____ African American
_____ Native Hawaiian or Other Pacific Islander
_____ White
_____ Other: _____

Marital Status:
_____ Married/Partnered
_____ Single
_____ Divorced /Separated
_____ Widowed

_____ State of Residence

Annual Household Income:
_____ 0-25K
_____ 25-50K
_____ 50-75K
_____ 75-100K
_____ 100-150K
_____ 150K+

Highest Degree Earned: Bachelors _____ Masters _____ Doctorate _____

Years of Employment in Corrections? _____ Years of Employment at current site? _____

In what type of correctional setting do you see your clients?

Federal _____ State _____ Private _____

Maximum Security _____ Medium Security _____ Community or Transitional _____
Other (please describe) _____

Who are your clients? Male Inmates _____ Female Inmates _____ Both _____

Did you intentionally seek employment in a correctional setting or was it employment of convenience?

Intentional _____ Convenience _____

Please estimate, on average, how many hours per week you spend on the following tasks:

Administrative _____ Research _____ Direct Clinical Services _____
Documentation _____

On average, how many clients do you see per week? _____

Format for the 36-item Survey of Perceived Organizational Support
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Listed below and on the next page are statements that represent possible opinions that YOU may have about working at your correctional facility. Please indicate the degree of your agreement or disagreement with each statement by filling in the circle on your answer sheet that best represents your point of view about your correctional facility. Please choose from the following answers:

0	1	2	3	4	5	6
Strongly Disagree	Moderately Disagree	Slightly Disagree	Neither Agree nor Disagree	Slight Agree	Moderately Agree	Strongly Agree

- *1. _____ values my contribution to its well-being.
- *2. If _____ could hire someone to replace me at a lower salary it would do so.
- *3. _____ fails to appreciate any extra effort from me. (R)
- *4. _____ strongly considers my goals and values.
- 5. _____ would understand a long absence due to my illness.
- *6. _____ would ignore any complaint from me. (R)
- *7. _____ disregards my best interests when it makes decisions that affect me. (R)
- *8. Help is available from _____ when I have a problem.
- *9. _____ really cares about my well-being.
- 10. _____ is willing to extend itself in order to help me perform my job to the best of my ability.
- 11. _____ would fail to understand my absence due to a personal problem. (R)
- 12. If _____ found a more efficient way to get my job done they would replace me. (R)
- 13. _____ would forgive an honest mistake on my part.
- 14. It would take only a small decrease in my performance for _____ to want to replace me. (R)
- 15. _____ feels there is little to be gained by employing me for the rest of my career. (R)
- 16. _____ provides me little opportunity to move up the ranks. (R)
- *17. Even if I did the best job possible, _____ would fail to notice. (R)
- 18. _____ would grant a reasonable request for a change in my working conditions.
- 19. If I were laid off, _____ would prefer to hire someone new rather than take me back. (R)
- *20. _____ is willing to help me when I need a special favor.
- *21. _____ cares about my general satisfaction at work.
- *22. If given the opportunity, _____ would take advantage of me. (R)
- *23. _____ shows very little concern for me. (R)
- 24. If I decided to quit, _____ would try to persuade me to stay.
- *25. _____ cares about my opinions.

26. _____ feels that hiring me was a definite mistake. (R)
- *27. _____ takes pride in my accomplishments at work.
28. _____ cares more about making a profit than about me. (R)
29. _____ would understand if I were unable to finish a task on time.
30. If _____ earned a greater profit, it would consider increasing my salary.
31. _____ feels that anyone could perform my job as well as I do. (R)
32. _____ is unconcerned about paying me what I deserve. (R)
33. _____ wishes to give me the best possible job for which I am qualified.
34. If my job were eliminated, _____ would prefer to lay me off rather than transfer me to a new job. (R)
- *35. _____ tries to make my job as interesting as possible.
36. My supervisors are proud that I am a part of this organization.

(R) indicates the item is reverse scored.

* indicates the item was retained for the short version of the survey.

Six Areas of Worklife

Please use the following rating scale to indicate the extent to which you agree or disagree with the following statements. Please mark on the your answer sheet the number corresponding to your answer.

1	2	3	4	5
Strongly Disagree	Disagree	Hard to Decide	Agree	Strongly Agree

Three Sample Items

	Strongly Disagree	Disagree	Hard to Decide	Agree	Strongly Agree
Workload					
1. I do not have time to do the work that must be done.	1	2	3	4	5
Control					
6. I have control over how I do my work.	1	2	3	4	5
Community					
14. People trust one another to fulfill their roles	1	2	3	4	5

MBI – Human Services Survey

How often:

0	1	2	3	4	5	6
Never	A few time a year or less	Once a month or less	A few times a month	Once a week	A few times a week	Everyday

Three Sample Items:

How Often

0-6

Statements

1. _____ I feel emotionally drained from my work.
2. _____ I feel used up at the end of the workday.
3. _____ I feel fatigued when I get up in the morning and have to face another day on the job.