Job Burnout in Educational Audiologists: The Value of Work Experience

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Job burnout levels of educational audiologists were determined using a standardized inventory. Eighty-one percent of the 361 participants rated their overall job burnout in the "average or low" range. Participants' scores were in the low burnout range for both the Depersonalization and Personal Accomplishment subscales. A significantly greater number of participants with less than 10 years of experience had scores in the high burnout range for the Emotional Exhaustion subscale when compared with participants with more work experience. The importance of sharing these results with training programs and administrators is discussed in terms of recruitment and retention.

Introduction

According to Maslach (2003) "Job burnout is a psychological syndrome that involves a prolonged response to stressors in the workplace. Specifically, it involves the chronic strain that results from an incongruence, or misfit, between the worker and the job" (p. 189). The current research in the area of job burnout is replete with studies examining this phenomenon which is divided into three components based on Maslach's work (Maslach, 1982; 1998; 2003; Maslach, Jackson, & Leiter, 1996). The first component is emotional exhaustion, defined as feeling drained, tired and fatigued with a resulting need to distance oneself emotionally and cognitively from work. The second component is depersonalization, defined as becoming indifferent, callous and developing cynical attitudes toward children/individuals workers are trying to serve. The third component is a loss of the sense of personal accomplishment, defined as no longer feeling work has any significant impact or makes a difference in the lives of the children/individuals workers are committed to serve.

Burnout is a dynamic process, caused by excessive work demands and results in avoidance, absenteeism, withdrawal, physical and psychological health symptoms, turnover, and poor job performance (Maslach, 1982; 2003; Schaufeli & Buunk, 2003). It is a multibillion dollar problem in the United States and around the world. Maslach (2003) has speculated that identification of job burnout is the beginning of the treatment or management processes. She also suggests that job burnout is related to both individual characteristics and organization climate and environment.

Job Burnout in School Personnel

As early as 1991, Farber reported that between 5% and 20% of all teachers in the United States were burned out at any given time. According to the most recent report from the National Center for Education Statistics and the Teacher Follow-up Survey, 35.7% left the teaching profession in the last year (Marvel, Lyter, Peltola, Strizek & Morton, 2006). The shocking reality is that at least 50% of the educators leaving had less than nine years experience working in the schools (Marvel et al, 2006). Ingersoll (2003) reported that nearly 50% of all teachers who enter the field leave within the first five years due to dissatisfaction, inadequate working conditions, lack of planning time, and no influence over school policies.

Research suggests that professionals in educational settings are more susceptible to job burnout because of the intensity and frequency of one-to-one personal contacts, work overloads, lack of autonomy in the work setting, ambiguity about professional roles, and lack of recognition (Bakker & Schaufeli, 2000; Blood, Ridenour, Thomas, Qualls & Hammer, 2002; Boudreau & Nakashima, 2002; Burke & Greenglass, 1995; Kulik, 2006; Leiter & Maslach, 2000; Maslach, 2003; Maslach & Leiter, 1999; Maslach, Schaufeli, & Leiter, 2001; Wisniewski & Gargiulo, 1997). Job stress and resulting occupational burnout has been reported in general education teachers, special education teachers, school counselors, teachers of the deaf, school speech language pathologists, and administrators (Beer & Beer, 1992; Blood et al. 2002; Borg & Riding, 1993; Darcy, Kusznikow & Lester, 1995; Fimian, Lieberman, & Fastenau, 1991; Male & May, 1997; Moracco, Butcke, & McEwen, 1984; Schaufeli & Enzmann, 1998; Wisniewski & Gargiulo,

1997).

In discussing the individual characteristics which predict job burnout, Maslach et al. (2001) state "Of all demographic variables that have been studied, age is the one that has been most consistently related to burnout. Among younger employees the level of burnout is reported to be higher than it is among those over 30 and 40 years old. ... so burnout appears to be more of a risk earlier in one's career" (p. 409). In the continuing search for predictors of job burnout in educators, Brewer and Shapard (2004) conducted a meta-analysis of 34 studies examining the relationship between years of experience on the job and burnout. The authors examined the most widely used measure of occupational burnout in the research literature – the Maslach Burnout Inventory (MBI) (Maslach, Jackson & Leiter, 1996). They reported a negative correlation between years of experience in a field and the MBI suggesting younger educators show more signs of burnout than their older counterparts.

The MBI provides a reliable and valid measure of job burnout for high stress jobs and provides normative data based on more than 11,000 individuals including law enforcement officers, general physicians, surgeons, dentists, nurses, social workers, air traffic controllers, teachers from kindergarten through university professors, taxicab drivers, lawyers, secretarial staff, business executives, administrators, etc. In addition, thousands of research studies have been reported in the literature using the MBI which has been translated into numerous languages (e.g. Spanish, Dutch, German, Chinese, Finnish, Norwegian, etc). It is currently the most widely used measure for job burnout in the world (Barling, 2005; Buchwald, 2007; Colbert, 2006; Greenberg, 2008; Quick, 2003).

Potential for Job Burnout in Educational Audiologists

During the past two decades, a technology and knowledge explosion in audiology has resulted in major changes to the discipline and expansion in the scope of practice. Children with hearing disabilities are requiring and receiving services at earlier ages. To guarantee the continuation of high quality services, educational audiologists must continually update their knowledge and skills sets in newborn hearing identification and intervention programs, miniaturization and digitalization of assistive devices, counseling in behavior and genetics, and other areas. However, these changes may also bring increased ambiguity in the roles of educational audiologists, oversized caseloads, and new uncertainties about team roles and responsibilities. Educational audiologists are expected to actively

participate as consultants/counselors with parents, caregivers, educational personnel, administrators and child disability advocates while addressing increased accountability issues by school, state, and federal agencies. A possible result of trying to meet new job demands, oftentimes with limited support, training, and/or resources, is that educational audiologists may be placed at high risk for job burnout and job dissatisfaction.

The potential negative effects of job burnout in educational audiologists have received little systematic attention in the literature. The aim of the present study was to expand on previous research using a standardized scale of job burnout with individuals providing services to children in schools with speech, language and hearing disabilities. The primary purpose of this study was: a) to determine the performance of educational audiologists on the MBI (Maslach, Jackson, & Leiter, 1996) total score and subscales of Emotional Exhaustion, Depersonalization, and Personal Accomplishment, and b) to determine significant differences among burnout scores among four groups of educational audiologists based on the number of years of experience working in the field.

Method

Participants

The participants in this study were members of the Educational Audiology Association (EAA). The list of members was obtained via the EAA 2005 membership list. Eleven hundred and ninety one members were mailed a cover letter, a two-section survey, a commercially available, standardized job burnout questionnaire, and a return postage-paid envelope. After 4 weeks, another follow-up survey was sent to potential respondents requesting completion of the survey and/or thanking participants for their cooperation. The data were collected according to the procedures submitted to and approved by the Institutional Review Board, The Pennsylvania State University.

The mailing and follow-up resulted in responses from 481 participants for a 40.4% response rate. Of the returned survey, 120 were deemed unusable due to incomplete demographic information, returned unopened envelopes, incorrect addresses, incomplete surveys, incorrect response options on the surveys or partial completion of the MBI. Therefore, 361 surveys (30.3%) were deemed usable and included in the analyses.

Of the 361 surveys analyzed, 93% of the participants were female. Participants were white, non-Hispanic (91.1%), African American (4.2%), Hispanic American (2.8%), and Asian American (1.9%) with a

mean age of 43.5 years. Caseloads ranged from 25 to 88, with 51% of the participants reporting caseloads with more than 56 children in a month. Participants were grouped into 4 categories based on the number of years of experience as educational audiologists. Sixty-eight (18.8%) participants had been working as educational audiologists for 1-10 years (New Professionals), 111 (30.7%) for 11- 20 years (Young Professionals), 136 (37.8%) for 21- 30 years (Experienced Professionals), and 46 (12.7%) for 31-41 years (Long-Time Professionals).

Survey

The survey designed for this study consisted of two sections including: a) demographic and practicerelated questions, and b) the commercially available Maslach Burnout Inventory (MBI; Maslach, Jackson & Leiter, 1996). For this study, we are reporting on the results of the MBI and the years of experience variable. Participants are asked to rate 22 items on a 7-point scale, in which 0 indicates never and 6 indicates everyday. The MBI consists of three subscales that measure Emotional Exhaustion (9 items), Depersonalization (5 items), and Personal Accomplishment (8 items). Examples of items from the Emotional Exhaustion subscale include, "I feel emotionally drained from my job," and "I feel like I'm at the end of my rope." Some items from the Depersonalization subscale include, "I feel I treat some students as if they were impersonal objects," and, "I've become more callous towards students since I've took this job." Examples of items from the Personal Accomplishment subscale include, "I feel I'm positively influencing students' lives through my job," and "I have accomplished many worthwhile things on this job." Schaufeli and Van Dierendonck (1993) found that the MBI was a reliable and valid indicator of burnout, and Cronbach's coefficient alphas of 0.90, 0.79, and 0.71 have been reported for the Emotional Exhaustion, Depersonalization, and Personal Accomplishment subscales, respectively (Maslach, Leiter, & Jackson, 1996). Higher scores on both the Emotional Exhaustion and Depersonalization subscales suggest the presence of burnout or the susceptibility to burnout. Lower scores on the Personal Accomplishment subscales suggest the presence of burnout or the susceptibility to burnout.

The manual provides normative data based on 11,067 participants from multiple occupations. It also provides cut-off scores for low susceptibility, average susceptibility and high susceptibility for job burnout. For the Emotional Exhaustion subscale, low susceptibility to burnout scores fall below 16, average susceptibility to burnout scores range from 17 to 26, and high susceptibility to burnout scores are above 27.

For the Depersonalization subscale, low susceptibility to burnout scores fall below 6, average/moderate susceptibility to burnout scores range from 7 to 12, and high susceptibility to burnout scores are above 13. It should be noted that higher scores on both of these subscales suggest greater risk for burnout. For the Personal Accomplishment subscale, low susceptibility to burnout scores fall above 39, average/moderate susceptibility to burnout scores range from 32 to 38, and high susceptibility to burnout scores are below 31. In contrast to the other two subscales, lower scores on this subscale indicate greater risk for job burnout.

Results

Of the 361 participants, 152 (42%) had total MBI scores in the low susceptibility range, 141 (39%) in the average range and only 68 (19%) in the high susceptibility range. The mean score for the total MBI normative sample of 11,067 respondents is 64.2. The mean score and standard deviation for the total MBI for the educational audiologists were 60.1 and 12.2, respectively, with a range from 33 to 104 suggesting the majority of educational audiologists scored lower than other workers in terms of susceptibility for job burnout.

Analysis of the mean score on the Emotional Exhaustion subscale was 18.9 (S.D. = 9.2) indicating educational audiologists are in the average burnout category (scores between 17 - 26). The mean score on the Depersonalization subscale was 2.8 (S.D. = 2.9) indicating that participants were in the low burnout category (scores < 6). Based on the normative data, educational audiologists' mean score on the Personal Accomplishment subscale was 39.9 (S.D. = 6.1) suggesting participants were in the low burnout range (scores \geq 39). It is important to remember that lower scores on the Emotional Exhaustion and Depersonalization are good indicators and signal low burnout, while high scores on Personal Accomplishment are good indicators and signal low burnout.

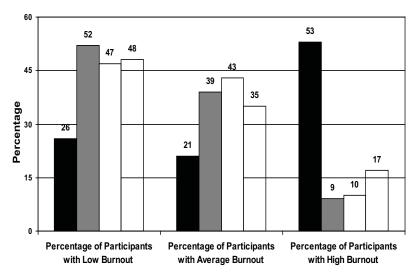
Four, separate one-way analyses of variance (ANOVA) were computed to determine significant differences between the means for the four work experience groups (New Professionals, Young Professionals, Experienced Professionals and Long-Time Professionals). The four dependent variables were the scores from the total MBI, Emotional Exhaustion subscale, Depersonalization subscale, and Personal Accomplishment subscale. Results revealed a significant difference among the four means (25.3, 18.1, 17.7 and 15.5) for the Emotional Exhaustion subscale (F (3, 357) = 14.1, p < 0.001, eta-squared = 0.12, small effect size). Tukey post hoc analyses showed that New Professionals group

had significantly higher mean scores than the other three work experience groups. The number and percentage of participants in the low burnout group, average burnout group and high burnout group were also computed. Inspection of Figure 1 shows that 53% of the New Professionals showed signs of high burnout in comparison to 9%, 10% and 17% of the Young Professionals, Experienced Professionals, and Long-Time Professionals, respectively. In order to determine the significance of the relationship between job burnout from the Emotional Exhaustion scale and the four work experience groups, a chisquare test was computed (Chi-square = 66.1, df = 6; p < 0.0001). This analysis suggests a significant relationship between these two variables that appears to be due to the high burnout observed in the New Professionals relative to the other three groups. Further analyses showed no significant differences among the means for the four work experience groups for the total MBI score (F (3, 357) = 1.96, p = 0.12), the Depersonalization subscale (F (3, 357) = 2.07, p = 0.10) and the Personal Accomplishment subscale (F (3, 357) = 1.64, p = 0.18.

Discussion

The finding that educational audiologists in this study show low susceptibility for burnout is very good

Figure 1. Percentage of participants with low, average and high burnout on the Emotional Exhaustion subscale of the Maslach Burnout Inventory categorized by work experience as an educational audiologist.



Burnout Susceptibility Groups - Emotional Exhaustion



news. Qualitative data from the comments section confirmed these quantitative results. Comments including: "I love my job"; "25 years and still going strong"; "I have good days and bad days, but I would recommend that anyone who wants to really help kids and see changes becomes an audiologist"; "It's an awesome job to watch a child hear sound for the first time"; "It's still my labor of love." As Maslach (2003) clarified in her research, there are a number of individual characteristics that influence job burnout. Researchers have studied martial status, gender, levels of resilience, self-esteem and internal locus of control and its relationship to job burnout. It is possible that audiology as a discipline tends to attract individuals who have a sense of control over their environments, openness to change, readiness to bounce back from small defeats and an internal locus of control. When choosing careers, individuals who select educational audiology may be those who use more active coping styles, easily engage in jobs, enjoy routines, share the values of helping others, possess a strong need to control their environment and have a better sense of their own personal and job autonomy than other workers. These factors would lead to job engagement and satisfaction with their jobs or chosen careers rather than job burnout and dissatisfaction.

The Depersonalization subscale scores for this study were below the mean of the normative data group. The depersonalization subscores were extremely low suggesting that even when educational audiologists report burnout, they are very unlikely to become cynical and start treating students/clients like impersonal objects. The Personal Accomplishment score for this study was above the mean of the normative data. This means that educational audiologists' scores above the mean for Personal Accomplishment represent higher levels of personal accomplishment. It appears that educational audiologists really do get a sense of making a difference in their daily work and report feeling good about the changes they effect in the lives of children, youth and families.

Of concern and interest is the finding that New Professionals (working less than ten years as an educational audiologist) reported the highest levels of Emotional Exhaustion among all the participants. In part this may be the result of high expectations, multi-

skilling needed to work in the schools, or even the scope of the job. Those who have been working in the schools for more than ten years may realize the need for multiple roles and continuing education, and develop systems for dealing with the inevitable workfamily conflicts. Earlier studies (Mowday, Porter & Stone, 1978) showed that employees considered organizational loyalty a strong predictor of job satisfaction. Experienced employees accepted school policies, worked overtime and showed a strong desire to stay within the school district or organization they joined.

Current research shows that although the "baby boomers" will retire at much later dates, the Generation X-ers and the Millennials are going to demand higher pay and different opportunities for promotion and change than their older counterparts (Gandossy, 2006; Voydanoff, 2007). If the best and brightest are leaving the schools at alarming rates, and newly hired educational audiologists are feeling the most exhausted, something needs to be done. Maslach and Leiter (1999) proposed a model of teacher burnout which emphasizes the school setting (teacher autonomy, teacher influence), social support (both actual and perceived from colleagues and supervisors), and task qualities (workload, role ambiguity) to combat the problem. They suggest that mentoring programs can prove extremely effective in assisting younger employees to work through some of these inevitable issues. Job engagement for all workers is not an individual effort, but an organizational commitment to change for all employees to feel a sense of fulfillment and satisfaction in their work.

One other possible explanation for these findings is that as Young Professionals begin to show signs of high burnout, they leave the profession. This could explain the lower rates in the other age categories. In other words, the educational audiologists who stay in the field and continue to work in the schools are less likely to show signs of job dissatisfaction or the need to seek other types of employment.

Training programs should be made aware of these results. Changes in the current model of "on the job" training about the vast amounts of paperwork, administrative activities, counseling issues, and time necessary to provide high quality services to students and their families in the schools need to be implemented. Programs may want to introduce specific courses or modules for graduate students on how to deal with work stress and job pressures, how to build effective transdisciplinary teams, successful strategies for staying current with new technologies and changing legislation, how to develop mentoring relationships, and the influence of work on personal

and/or family dynamics. Again, the data suggest that the "best teachers" are those active educational audiologists who are currently enjoying their chosen professions and making significant contributions.

School districts may be able to provide workshops and educational opportunities on time management, coping with overloads, delegation and relaxation. While these are good places to begin, educational activities are only as good as their implementation and generalization. Without providing the resources or time to build these components into the current organizational structure and job descriptions, a cycle of job-person mismatch leading to burnout will continue. Both organizational and individual interventions need to be developed and implemented to assure that children with hearing disabilities continue to receive the best services in the optimal environments. Further research should examine the efficacy of studies examining the mentor-protégé, novice- expert, rookie-professional partnerships and the moderating effect on job burnout.

Educational audiologists really are engaged in their work and jobs. They report a low susceptibility for job burnout. It is possible that many of the participants in this study already informally participate in engagement activities like mentoring, workshops, and student training. However, with 53% of New Professionals reporting emotional exhaustion, it may be time to formalize some of these activities and develop "best practices" for the next generation of highly skilled and competent educational audiologists.

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