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DOES SPIRITUALITY REDUCE THE EFFECTS OF BURNOUT?

A Project

Presented to the

Faculty of

California State University,

San Bernardino

In Partial Fulfillment

of the Requirements for the Degree

Master of Social Work

---

by

Andrew Jacob Godoy

Nathan Allen

June 2017

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ABSTRACT

Burnout is a topic that is drawing an increasing amount of attention in the social work field. The compassion and emotional energy that is used daily by these service providers can cause them to experience emotional exhaustion, depersonalization, and reduced personal accomplishment. The effects of burnout are detrimental on several levels. Staff will experience decreased interest and efficiency in their work and may even leave their place of employment. Clients will not receive the help that they require and agencies will suffer from staff turnover and lowered productivity. Utilizing a survey including a burnout inventory and spirituality inventory, data was gathered regarding burnout and the spiritual attitudes and practices of 133 service providers. Results show that there is a negative significant relationship between depersonalization and spirituality. There was a positive significant relationship between personal accomplishment and spirituality. The correlation showed that personal accomplishment was negatively related to emotional exhaustion as well as depersonalization. These results are consistent with the literature in the way that it demonstrates that the use of spiritual beliefs and practices can reduce the effects of burnout on social workers.

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CHAPTER ONE

INTRODUCTION

This chapter introduces the research focus and discusses the prevalence of the issue of burnout amongst social service providers. Spirituality in social work practice is also introduced. Finally, justifications for the study and the potential contributions to the social work field are explored.

Problem Statement

Staff burnout is increasingly viewed as a concern in the field of social work. Burnout can be described as emotional exhaustion, depersonalization, and reduced personal accomplishment that is experienced by people who work in a helping capacity (Maslach, 1992). Not only is the prevalence of burnout a concern for the service providers affected by it, but is also a huge concern for the clients accessing the services and the organizations that provide them. Burnout is the cause of a range of negative outcomes for staff, organizations, and consumers. Many studies have demonstrated this widespread issue among social workers (Lizano, 2015; Siebert, 2005). Employees often struggle with large caseloads, excessive paperwork, and emotional strain from constantly handling client problems. Social workers are continuously listening to the feelings and hardships of others. They are responding to crisis situations and are responsible for providing interventions to at-risk individuals. The continual use of empathy and concern for other human beings can be enormously draining on the service provider. Staff burnout decreases the quality of the services provided to clients,

and turnover decreases the availability that these service providers have in order to see clients (Siebert, 2005).

After speaking with several case managers and clinical therapists in a behavioral health agency, it has become apparent through observation and conversation of one of the authors that burnout is an issue for many workers in the field. Some employees reported that many their coworkers have demonstrated a decrease in empathic responses, exhaustion, lack of interest in the job, and a tendency to do the bare minimum to assist their clients. This has negatively affected the quality and duration of client recovery and care. It also causes other staff to have to work harder to compensate for the lack of attention that the clients are getting. Coworkers have expressed concern about the apathy that they see in the services provided by some employees. Clients have also reported a dissatisfaction with the services that have been provided because they feel that the employee is unfocused and uncommitted.

These employee concerns are consistent with descriptions from Wagaman, Geiger, Shockley, & Segal (2015), where low work performance, higher levels of isolation, high work demands, and difficulties with people were reported as burnout workplace behaviors. In public organizations especially, burnout can be very costly and puts a burden on the budget, especially given the cost of training new employees when burnout causes turnover. In a study by Acker (2012), more than half of the respondents indicated having a high level of emotional exhaustion (56%), role stress (73%), and an intent to quit their jobs

(50%). As explained to one of the authors, certain staff members at the previously mentioned agency have taken the initiative to develop self-care trainings, but these are not mandatory for employees to attend. Self-care can be expressed in a variety of ways depending on an individual's interests or belief systems. In observing the number of individual service providers who acknowledge a religious or spiritual belief system, it would make sense to access this as an avenue for the prevention and intervention of burnout.

Spirituality and religion within the social work and mental health fields are being increasingly encouraged to be used in interventions with clients. Oxhandler and Pargament (2014) report spiritualty and religion as wellness components that clients desire to have integrated into their treatment as part of the healing process. This emphasis on the importance of spirituality and religion on client wellness could equally be applied to the wellness of social workers and other service providers. Spirituality in this context was looked at as inclusive of institutional religions (Christianity, Catholicism, Islamic, Buddhist, Bahá'í, etc.) as well as less defined spiritual components, such as seeking purpose in life greater than the self, transcendence, seeking inner peace, and attribution of significant life events with a higher power.

According to the NASW code of ethics, social workers should not allow their own personal problems, psychosocial distress or mental health difficulties to "interfere with their professional judgment and performance or to jeopardize the best interests of people for whom they have a professional responsibility"

(National Association of Social Workers [NASW], 2008). Even with all the research and proposals that have been done on the effects and interventions of burnout, it remains an issue in the field. This study aimed to further understand the topic of burnout with a focus on the spirituality of social workers and the possible spiritually based interventions that can be used to reduce burnout. It will be useful to research the ways in which personal spiritual practices have helped to alleviate burnout as opposed to those who do not have strong spiritual practices.

Purpose of the Study

The purpose of the study was to examine the potential of spirituality in assisting social workers and other service providers to combat the experience of burnout. Attitudes towards spirituality as a component of self-care among social workers and other service providers was also explored. It was hypothesized that the positive effects that are often associated with individuals having some form of spiritual connection would help to reduce the deleterious effects that burnout can have on employees within the social work field.

Burnout is an ever-important factor that individuals across many disciplines encounter and must overcome. Burnout is characterized as a reaction to the chronic stress that is experienced by people helping others (Wilski, Chmielewski, & Tomczak, 2015). Thus, it is reasonable to assume that social workers and other service providers would be especially susceptible to experiencing burnout due to the nature of the field and the in-depth interactions

that often occur with clients. Though not all concentrations within social work include micro-practice components on a regular basis, most social workers will work with clients in their local communities, and perhaps even the broader society, at some point in their careers. This consistent interaction with clients can be considerably draining on the helping professional, especially when taking large caseloads into account that constantly bring new clients that have new needs and challenges that must be addressed by the service provider.

To explore spirituality's impact on the experience of burnout, a mixed-methods approach was utilized. Participants of the study completed a self-administered survey.

Significance of the Study for Social Work

Empirical research on the connection between burnout and spirituality among social workers and other service providers is lacking. Interestingly, much of the easily accessible research addressing spirituality and social work comes from a single publication. Further, the articles in this publication advise social workers and other service providers to include spirituality into practice (Oxhandler & Paragment, 2014) and encourages them to consider spirituality as a component of self-care (Dombo & Gray, 2013; Collins, 2005). The downfall of these articles is that their research is largely based on the work of others and they do not include any empirical study conducted by the researchers themselves. They also emphasize spirituality as a self-care activity but do not observe spirituality's impact on burnout, as this study assumed. Further

exploration of spirituality components among social workers and other service providers would demonstrate not only if there is a link between burnout and spirituality within this population, but would also explore if the link has a reducing property on burnout.

The findings of this type of study potentially have an impact social work practice in general in a few ways. Rather than simply suggesting practitioners and other service providers apply spirituality as a self-care strategy, this study sought to produce empirical support of the potential benefits of employing spirituality components as a self-care strategy. Additionally, this study provided empirical support for practitioners to consider incorporating spirituality components into their practice. The view in the present study of spirituality as non-exclusive to practices of an organized religion is like Crisp's (2008) proposal of spirituality in social work as a lived experience. Through demonstrating the benefits against the deleterious effects of experiencing burnout, practitioners may become open to incorporating spirituality with clients, especially if the clients openly discuss the topic. In this way, providers have an additional tool to employ when working with their clients to improve the client's life. In summary, the goal of this study was to examine if participant's level of spirituality has an impact on their self-reported experience of burnout and, more specifically: does having a higher level of spirituality help to reduce the experience of burnout among social workers and other service providers?

CHAPTER TWO

LITERATURE REVIEW

Introduction

This chapter focuses on current research that explores both burnout and spirituality within the social work field. Spirituality as a component of self-care is also introduced. Gaps in the literature are discussed as well as the respective study's methodological limitations. Finally, the author's theoretical orientations are explored.

Support for the Proposal

When looking at the issue of burnout in helping professions, there appears to be a wealth of research conducted on the topic, especially in the medical field (Davis, Lind, & Sorensen, 2013). When looking specifically at the social work field there is a reasonable amount of literature on burnout, the reasons for burnout, and the suggested solutions for minimizing burnout (Kim, Ji, & Kao, 2011; Ray, Wong, White, & Heaslip, 2013).

Burnout

Maslach's definition of burnout as the experience of emotional exhaustion, depersonalization, and reduced personal accomplishment among individuals working in the helping profession (Maslach, 1992, p. 3) is supported by Ray et

al., (2013) who discuss that feelings leading to burnout usually have a gradual onset. They can be revealed in the feeling that the efforts of the service provider are not making a difference, or the stress that is related with a very high workload or a non-supportive work environment. To elaborate further on the reasons that burnout is so prevalent among social workers, a recent national study demonstrated that social workers are dealing with increasing levels of paperwork and inadequate supervision (Whitaker, Weismiller, & Clark, 2006). Overwhelmed by constant shortages and turnover in staff, there is a tendency for social workers to be overworked and are often asked to take on large client caseloads. While it is more common for studies to focus on the work environment to assess factors causing burnout, it can also be argued that both situational factors and personality factors contribute to burnout (Golden, Piedmmont, Ciarrocchi, & Rodgerson, 2004). For example, Siebert (2005) conducted a study with a sample of 751 social workers and found that approximately three-quarters of them reported having experienced a struggle with burnout at some point in their careers. Anderson (2000) conducted a study with a sample of 151 frontline child protective services workers and found that more than half of the participants were experiencing high levels of emotional exhaustion. Kim et al. (2011) conducted a study with 285 social workers, majority working in the mental health field, and there was a clear connection identified between burnout and physical health problems. The relationship between social workers and their clients can be affected by health issues, especially because it can impede the development

of an empathic relationship with the client. Furthermore, it can negatively affect job performance, absenteeism and turnover which will obviously diminish the quality and stability of services.

Preventions and Interventions

Due to the prevalence of burnout in the social work field, an emphasis has been put on developing prevention and intervention strategies to reduce burnout. To date, burnout intervention studies have primarily focused on preventive efforts (Kim et al. 2011). These findings support the need for both burnout prevention and recovery interventions. This is supported by Dombo and Gray (2013) who stress that a model of self-care must be holistic and target multiple levels to have positive results. The literature reveals an abundance of preventative strategies that are suggested to avoid burnout, including educational interventions to increase the capacity of workers to cope with stressors (Moore, Bledsoe, Perry, & Robinson, 2011). It is also maintained that social work education programs should develop knowledge of burnout symptoms and contain curriculum focused on preventative strategies, such as communication techniques and coping skills. This includes the ability for organizations to take more proactive steps to address the burnout issue through in-services and trainings (Kim et al. 2011). A study conducted by Davis et al. (2013) revealed that the two most frequently used coping strategies among oncology nurses were spirituality and relationships with coworkers. Moore et al. (2011) studied the journals of social work students and

created different coping categories from the entries. In the mental and emotional self-care category, activities with children was the highest reported activity, followed by daily devotional, prayer, Bible study and attending church service. These came before taking time off work and school. The high ranking of the spiritually-based activities in these journals furthers the belief that spirituality serves as a key component to social worker's well-being.

Burnout recovery interventions can be similar to the prevention methods, but are not mentioned as often as prevention in the research (Kim et al., 2011). Therefore, administrators and supervisors are encouraged to play a crucial role in supporting employees who are currently experiencing burnout symptoms. Encouraging self-care and aiding service providers to find satisfaction and rewards in their work appears to protect workers from burnout (Ray et al., 2013). Self-help groups or social networks can provide service providers with avenues to share their experiences and offer mutual support. In settings that generate the greatest risk of burnout, screening tools and interventions could be developed and tailored to social workers (Kim et al., 2011). One of the main challenges with implementing prevention and intervention strategies is the cost. Acker (2010) makes the argument that supervision and other opportunities for professional development such as workshops, continuing education, and stress management programs are dwindling because they are too expensive to implement.

Spirituality as an Intervention

Compared to the literature that was available regarding burnout, the literature referring to spirituality in service providers was less obtainable. This demonstrates a pitfall, considering that in over 200 survey responses gathered from mental health workers (Parkes, Milner, & Gilbert, 2010), about 60 percent agreed that their personal sense of spirituality influenced their daily working life. Recent literature promotes the integration of spirituality into the biopsychosocial context of social work education and practice; however, there has been no consistent model developed that would accommodate for different belief systems while adhering to social work values (Moore et al., 2011). Moore et al. (2011) also point out that studies show a considerable number of spirituality-based client interventions are being used by social workers in the United States. Golden et al. (2004) surveyed 321 United Methodist clergy in the United States and found that there is a correlation between the individual's self-perceived quality of spirituality and burnout. It was argued that the less connection that individuals feel to a higher power, the greater the likelihood of burnout. They concluded that studying personality and work environment alone do not give the same results. This claim is supported by Ramsey (2001), who recommends utilizing spiritual values and practices to reduce the harm of work-related stress and to increase the effectiveness of self-care. Davis et al.'s study on oncology nurses (2013) demonstrates Ramsey's claim, wherein nurses who implemented self-

transcendence, the concept of finding meaning in life and death, were less likely to experience burnout.

The literature supports the recognition of the value of spirituality to help with self-care and to ultimately provide better care for individuals accessing services. Parkes et al. (2010) explain that the idea of recovery has changed to emphasize the importance of psychological and spiritual health such as self-esteem and developing a meaning/purpose in life. Clients are calling for services that give attention to their holistic care, including spiritual needs. Parkes et al. (2010) bring a new concept to the table, arguing that staff should develop their own sense of spirituality so that they can fully appreciate the spiritual needs and feelings of service users. This will enable staff to better empathize with the client and to better utilize the client's spiritual identity in their treatment. Some suggested specific spiritual practices to reduce burnout. Collins (2005) proposed practices that had specific Christian undertones, although many aspects of the practices can be effectively used by people with a range of religious or spiritual belief systems. Such practices include Sabbath keeping, finding holy silence, expressing gratitude, expressing spiritual essence, developing a sense of compassion, and embracing a principle of stewardship. On the other hand, Dombo and Gray (2013) recommend more generalized spiritual self-care meditation practices. These include spiritual reading, meditation, prayer, attending religious services, or anything that helps the social worker to find meaning beyond self, meaning in relationships, and meaning in clinical practice.

Gaps in Literature and Conflicting Findings

After researching literature regarding spirituality in social workers, the gaps in the available studies emphasize the need for the proposed research question. While some articles came close to addressing the issue such as the survey of mental health workers conducted by Parks et al. (2010) and the connection between burnout and spiritual strength in the clergy (Golden et al., 2004), there was no literature located that identified a connection between burnout and the religious or spiritual beliefs of social workers. It would be very useful to study the rates of burnout among those with strong spiritual practices as compared to those who do not have a strong belief system or conduct spiritual practices. In this way, this study built on the current literature in a valuable, yet different approach.

Most of the literature supported the value of spiritual practices, both for the self-care of the service providers and the clients or patients. There were not any specifically conflicting ideas identified in the literature; however, there is an argument that previous research on the causes of burnout is limited in its approach. Golden et al. (2004) claim that present research in burnout must consider both situational factors and personality factors. This does not match with the idea proposed by Maslach and Leiter (1997), where they emphasize that burnout is a problem of the environment in the workplace rather than the people themselves. The possibility that both situational factors and personality factors contribute to burnout should be considered.

Methodological Limitations

Although the analyses provided in the literature provide several interesting findings, there are limitations in the methodology of some of the studies. Moore et al. (2011) admit that the sample they used is a small convenience sample and the results cannot be used to represent all graduate students in social work. Using qualitative data leaves results open to poor interpretation or even dishonesty which can negatively impact the findings. In the study conducted by Kim et al. (2011), the sample was taken from registered social workers in California, which limits how well the findings can be generalized to social workers in other parts of the United States. Ray et al. (2013) reports an imbalance in the sample regarding gender which could limit the analysis of the results. Acker (2010) has the same issue with the homogeneous sample of social workers that were used for the study. The research conducted by Davis et al. (2013) involved a relatively small sample of nurses from only one medical center located in the northwest region of the United States which prevents these findings from being generalizable to a greater population of oncology nurses. Davis et al. also divulges that The Nursing Satisfaction and Retention Survey used in their study had not undergone reliability or validity testing and must be interpreted with caution.

Theories Guiding Conceptualization

Multidimensional Theory of Burnout

Maslach's Multidimensional Theory of Burnout provides the theoretical framework for many of the burnout related studies, including Davis et al. (2013) and Acker (2010). Maslach (1992) described the concept of burnout as a chronic response to interpersonal job-related stressors. The burnout syndrome is characterized by three dimensions: emotional exhaustion, depersonalization, and reduced personal accomplishment. This theory was used to develop the concept of this study, with connections being made between the effects of spirituality on the dimensions of burnout.

Person-in-Environment

The person-in-environment theory appears to be a common theme in the literature regarding burnout. This perspective requires social workers to be attentive to the role of the environment in which they practice (Dombo & Gray, 2013). The social worker needs to focus not only on the micro functions that are eliciting certain reactions to the work, but they also need to pay attention to the macro level functioning such as the impact of the physical setting, the availability of resources, and the practices of the organization.

Locus of Control

Wilski, Chmielewskim, and Tomczak (2015) describe the locus of control as how much an individual attributes his/her own ability to control the events in their lives and to control external environmental factors. They further explain the two types of locus of control: internal and external. Individuals with an internal locus of control perceive themselves to be in control of their own lives and that

their behaviors have directly related consequences as a result. Individuals that exhibit an external locus of control view their lives as largely dominated by outside forces and take a more passive role in their own lives.

While Wilski, Chmielewskim, and Tomczak (2015) go on to further explore how work-related locus of control impacts burnout, this study focuses on the traditional notions of locus of control, especially with respect to spirituality. Since spirituality encompasses a search for meaning beyond the self, it stands to reason that individuals with an external locus of control would perceive themselves to be more spiritual. Spirituality carries a notion that events that occur were meant to happen; conversely, when things do not work out the way an individual would want, it is attributed to an external force that prevented the phenomenon to occur. Therefore, the notion of an external locus of control contributed to this study's theoretical framework through the perspective that the emotional experiences that a social worker or other service provider may encounter were meant to happen for that practitioner. If practitioners perceive that the experience was brought on by forces beyond their control, the way spirituality would explain, this property may demonstrate spirituality's ability to reduce burnout.

Summary

This chapter included a discussion of support for the present study. Burnout and spirituality were introduced along with early explorations of spirituality an intervention against burnout. The gaps in the literature exploring

this link were discussed along with the study's methodological limitations. Finally, the theoretical approaches that are guiding the present study were discussed.

CHAPTER THREE

METHODS

Introduction

This study aimed to identify whether the spiritual practices of service providers help to reduce burnout while working in a helping role. This chapter will outline the range of methods that were used in conducting this study. The items discussed in this chapter include: the study design, sampling, data collection and instruments, procedures, protection of human subjects, and data analysis.

Study Design

The purpose of this study was to explore potential effects of spiritual practices of service providers in reducing their self-reported level of burnout. The aim was to determine whether the use of spiritual practices reduces burnout. Other studies have shown that people identify spirituality as a way of coping with certain kinds of stress. However, there is a lack of research on spiritual practices in the social work field. This study used quantitative research methods to gather data to obtain a deeper understanding of the interaction spiritual practices have on providers to cope with burnout in the social services field. It was hypothesized that the higher a participant self-rated as being spiritual, regardless of their spiritual practices, the lower they will rate themselves as feeling burned out.

Using a quantitative approach was an efficient way to quickly identify any correlation between spiritual practices and burnout. This approach eliminated the

difficulty with individual interviews that are more direct and intrusive by using an anonymous survey. Interviews may also be more difficult to schedule and often take more time. Using a quantitative approach provided a more definitive correlation. It was hypothesized that the higher a participant's self-rated level of spirituality, the lower they will rate themselves as being burned out.

Sampling

A nonprobability availability sampling was used to locate participants for this study. This method was used because of time constraints and the access that the authors had to certain service providers. A survey was distributed to social workers who attended a two-day seminar at California State University, San Bernardino as part of the requirements for their agency to receive a social work intern for the 2016-2017 academic year. A raffle ticket for one of ten $25 gift cards was offered as an incentive for potential participants to complete the survey. Responses were collected from those who choose to complete the provided survey. All respondents were over the age of 18. The aim was to receive 100 completed surveys; the final total of completed surveys was 133.

Data Collection and Instruments

This study utilized a quantitative and instrument to collect data. There were two quantitative survey instruments that appeared appropriate to combine to generate a valid and reliable analysis of the effects of spirituality on burnout.

The first survey used was the Maslach Burnout Inventory (MBI) (Maslach, Jackson, & Leiter, 1996) (See Appendix A), which is the instrument most widely used to study burnout. It contains 22 items that address three domains of burnout: emotional exhaustion, depersonalization, and personal accomplishment. The validity and reliability have been proven in many studies and across many cultures, including Italy, South Africa and America (Loera, Converso, & Viotti, 2014; Morgan, de Bruin, and de Bruin, 2014; Maslach, Jackson, & Leiter, 1996). The authors decided to only use the questions which showed greater significance across many studies. The Hatch Spiritual Involvement and Beliefs Scale (SIBS) (See Appendix B) investigates broad aspects of spirituality, acknowledging that spirituality incorporates both attitudes and practice (Hatch, Burg, Naberhaus, & Hellmich, 1998). It consists of 26 questions that address broad aspects of spirituality, including: (1) internal beliefs, such as one's concept of God; (2) external practices, including how often one worships; (3) personal humility, which is a relational quality; and (4) existential beliefs, including the nature of a “spiritual force that influences my life.” Hatch, Burg, Naberhaus, & Hellmich (1998) tested the SIBS instrument and found that it had high internal consistency and strong test-retest reliability, which demonstrates good overall validity and reliability. They also stated the SIBS provides several advantages over other instruments that test spirituality including the use of culturally and religiously unbiased language and the inclusion of questions that measure both beliefs and practices.

In addition, a demographic form (see Appendix C) was administered with the survey so that other factors can be accounted for, such as: the number of years worked in the field, employee age, the specific population that is being worked with, and the position held in the agency. The dependent variables included the level of burnout that is being experienced by the individual and the spiritual practices that are being utilized.

Procedures

To gather participants for this study, an announcement was made at the start of the second day of the participant's two-day training. The announcement consisted of an explanation of the study and its purpose, along with information on the gift card incentives for participation. Once a participant elected to be included in the study, they were presented with an informed consent disclosure along with details on how to proceed with the survey. Once they began, the total time to complete the study was projected to be between ten and fifteen minutes. After the survey, participants were instructed to submit their completed survey to one of the principal researchers at a table outside the seminar conference room, at which point they were given a raffle ticket to drop into the container of the gift card of their choosing.

Protection of Human Subjects

Confidentiality and anonymity of participants were of the utmost importance. Those individuals who chose to participate in the survey portion were not asked for any personally identifying information beyond their general demographics (age, sex, gender identification, ethnicity, etc.). The survey was accessible to participants through a printed document that was kept in a locked storage box upon being submitted. One year after the completion of the data collection phase of the study, participant responses were securely shredded and destroyed. Prior to proceeding with the survey, participants needed to agree with the informed consent information that was presented at the start of the survey. An “X” served as an anonymous signature since no identifying information, such as participant names, were collected.

Data Analysis

Due to the quantitative nature of the survey, correlational data indicated a relationship between the participant’s self-reported level of spirituality and their experience of burnout in the social service field. With respect for cultural competency, spirituality was treated as a nominal independent variable to allow participants a broader range of possible responses concerning their self-reported spirituality. Self-reported levels of burnout are inherently categorical in that one’s experience of this phenomena can be vastly different from the experience of another in the same circumstances, creating variation in how positively or

negatively a participant will rate their level of burnout. Therefore, the participant's self-reported level of burnout was considered as an interval dependent variable towards investigating the previously stated hypothesis. To compare these two categorical variables, a linear regression was implemented.

Summary

The present study was developed to explore the possible reducing property of spirituality against burnout for social service providers. The study hypothesized that through surveys given to these social service providers, a more clearly defined correlation between spirituality/spiritual practice and burnout would be empirically demonstrated. The quantitative method used in this study best facilitated this process.

CHAPTER FOUR

RESULTS

Introduction

The following chapter presents the results of the statistical analyses that were conducted on the survey data. The first section details the descriptive statistics which includes gender, ethnicity, average age of the participants, and average length of time worked in the field. The second section outlines the inferential analyses that were conducted which includes a correlational study on the age, field of practice, length of practice, emotional exhaustion scale, depersonalization scale, personal accomplishment scale, and spirituality scale. The section will also discuss the regression analyses that were conducted on the length of practice in the field, the spirituality scale and one of the three burnout scales; emotional exhaustion, depersonalization, and personal accomplishment.

Presentation of the Findings

Descriptive Statistics

A large majority of the survey participants identified as women as presented in Table 1 (n=113, 85 %) and 20 (15 %) of the participants identified as being male. The most common field of practice was in mental health and consisted of 51 participants (38.3%). This was followed by education (n=20, 15%), medical (n=19, 14.3 %), child welfare (n=19, 14.3 %) multiple fields (n=16,

12%), gerontology (n=3, 2.3%), substance abuse (n=3, 2.3%), prison (n=1, 0.8%) and forensics (n=1, 0.8%). Ethnic identification had participants selecting non-Hispanic White (n=60, 45.1%), followed by Hispanic/Latino (n=47, 35.3%), African American (n=25, 18.8%), Asian American/Pacific Islander (n=6, 4.5%), American Indian/Alaskan Native (n=3, 2.3%), and other (n=1, 0.8%). It should be noted that participants were able to select more than one ethnicity. The mean age of the participants was 43.73 years old with a standard deviation of 10.33 and the mean length of employment was 162.34 months with a standard deviation of 113.22.

Table 1. Demographic Characteristics of Study Sample

	N	%	M	S.D.
Gender				
Male	20	15		
Female	113	85		
Total	133	100		
Field of Practice				
Gerontology	3	2.3		
Mental Heath	51	38.3		
Child Welfare	19	14.3		
Education	20	15		
Medical	19	14.3		
Forensics	1	0.8		
Substance Abuse	3	2.3		
Prison	1	0.8		
Multiple Fields	16	12		
Total	133	100		

Ethnicity				
African-American	25	18.8		
Non-Hispanic White	60	45.1		
Hispanic/Latino	47	35.3		
Asian-American/Pacific Islander	6	4.5		
American Indian/Alaska Native	3	2.3		
Other	1	0.8		
Total	142			
Age			43.73	10.33
Length of Employment			162.34	113.22

Inferential Analysis

A Pearson correlation analysis was conducted to examine the correlation between age, field of practice, length of practice, emotional exhaustion, depersonalization, personal accomplishment, and spirituality (See Table 2). Age, field of practice, and length of practice are considered by the authors to be key categories that could potentially impact the level of burnout.

The age of the participant had a significant correlation to all variables except for field of practice and emotional exhaustion. Age had a significant negative correlation to depersonalization (r = -.25, $p \leq .01$). Age was positively correlated with personal accomplishment (r = .20, $p \leq .05$) and spirituality (r = .22, $p \leq .05$).

Personal accomplishment was significantly correlated with the field of practice that the participant was employed in (r = .20, $p \leq .05$). The length of practice was related to a higher sense of personal accomplishment (r = .29, p ≤

.01). Depersonalization was positively correlated with emotional exhaustion (r = .45, p ≤ .01) but personal accomplishment was negatively related to emotional exhaustion (r = -.44, p ≤ .01).

Depersonalization had a significant negative correlation with personal accomplishment (r = -.33, p ≤ .01) and spirituality (r = -.21, p ≤ .05). Finally, spirituality had a significantly positive correlation with personal accomplishment (r = .26, p ≤ .01).

Table 2. Correlation Matrix Central Study Variables

	1	2	3	4	5	6	7
1. Age	1						
2. Field of Practice	0.05	1					
3. Length of Practice	.57**	0.17	1				
4. Emotional Exhaustion Scale	-0.13	-0.09	-0.04	1			
5.Depersonalization Scale	-.26**	-0.10	-0.15	.45**	1		
6. Personal Accomplishment Scale	.20*	.21*	.29**	-.44**	-.33**	1	
7. Spirituality Scale	.23*	0.05	0.14	-0.15	-.21*	.26**	1

Multiple regression analysis was used to examine the relationship between spirituality and the three separate burnout measurements: emotional exhaustion, depersonalization, and personal accomplishment. It should be noted that the final three measurements on the spirituality scale were discarded for this analysis. Table 3 presents the number of years worked in the field and the spirituality scale regressed on emotional exhaustion. The data indicates that there is no significant relationship between length of practice and emotional exhaustion ($b = -0.01$, $t = -0.07$, $p = .95$) or spirituality and emotional exhaustion ($b = -0.11$, $t = -1.52$, $p = .13$). The results indicate that the predictors explain 2.2% of the variance ($R^2 = .022$) in emotional exhaustion.

Table 3. Emotional Exhaustion

	b	SE	β	t	p
(Constant)	28.60	6.39		4.47	0
Length of practice in the field (months)	-0.01	0.01	-0.01	-0.07	0.95
Spirituality Scale	-0.11	0.07	-0.15	-1.52	0.13

Table 4 shows the number of years worked in the field and the spirituality scale regressed on depersonalization. The data indicates that there is a significant negative relationship between depersonalization and spirituality ($b = -0.05$, $t = -2.04$, $p = .04$) meaning that the higher the spirituality, the lower the

depersonalization. There is no significant relationship between length of practice and depersonalization (b = -0.01, t = -0.89, p = 0.38). The results indicate that the predictors explain 4.7% of the variance (R^2=.04) in depersonalization.

Table 4. Depersonalization

	b	SE	β	t	p
(Constant)	7.75	2.07		3.75	0
Length of practice in the field (months)	-0.01	0.01	-0.08	-0.89	0.38
Spirituality Scale	-0.05	0.02	-0.19	-2.04	0.04

Table 5 shows the number of years worked in the field and the spirituality scale regressed on personal accomplishment. The data indicates that there is a significantly positive relationship between personal accomplishment and spirituality (b = 0.08, t = 2.12, p = .04) meaning that increasing spirituality will increase personal accomplishment. There is also a positive significant relationship between length of practice and personal accomplishment (b = 0.01, t = 2.51, p = .01). The results indicate that the predictors explain 11.2% of the variance (R^2=.11).

Table 5. Personal Accomplishment

	b	SE	β	t	p
(Constant)	31.44	3.35		9.36	0
Length of practice in the field	0.01	0.01	0.23	2.51	0.01

(months)					
Spirituality Scale	0.08	0.04	0.20	2.12	0.04

CHAPTER FIVE

DISCUSSION

Introduction

This chapter presents a discussion of the findings that resulted from the present study. Limitations of the study will be explored, along with recommendations for social work practice, policy, and future research. The chapter will conclude with final thoughts on new insights gained on spirituality within the social work field.

Discussion

The purpose of the study was to explore the potential of spirituality in assisting social workers and other service providers to combat the experience of burnout. The results yielded findings that higher self-ratings of spirituality are associated with higher levels of personal accomplishment. This means that people who have spiritual beliefs and practices feel more personally rewarded by their work than people who do not endorse spiritual beliefs. Based on spirituality's significant, positive correlation with personal accomplishment, it stands to reason that increased spiritual involvement would further induce feelings of personal accomplishments. Personal accomplishment yielded a strong, negative correlation with emotional exhaustion and depersonalization; therefore, increased spiritual involvement could reduce an individual's experience of emotional exhaustion and depersonalization indirectly. Indeed, the results of

the present study yielded findings of higher levels of spirituality directly associated with lower levels of depersonalization. These results are consistent with findings from a similar study within another profession (Doolittle, Windish, & Seelig, 2013).

Another notable finding is that age was not significantly correlated to the emotional exhaustion component of burnout, nor to the field of practice. However, age was positively correlated to length of practice, personal accomplishment, and spirituality. Given that age and length of practice had a strong, positive correlation, it can be inferred that these social workers have worked in the field for long periods within their careers'. Taking this correlation into consideration, it stands to reason that a longer time in the field would provide ample opportunity for a social worker to experience meaningful interactions through their work with clients, potentially accounting for the positive correlation of age and personal accomplishment.

Limitations

An important limitation of the study to note was the position of participants within their organization. The study was conducted utilizing a convenience sampling method of social work field instructors attending a two-day training to receive a student for placement in their organization as an intern. The field instructors in this sample were about 43 years of age and had approximately 13 years of work experience, on average (See Table 1). Given this average age and length of time in the social work field, it can be inferred that these field instructors

carry more administrative responsibility and supervisory duties through advancement within their roles at their agencies than those social workers who are newer to the field. Therein lies a potential limitation of the present study on capturing newer social worker's experience of the three components of burnout as these social workers were not statistically represented in our data.

Another limitation of the present study was the lack of opportunity for an in-depth examination of items such as spiritual practices of each participant. Due to the quantitative method utilized in the present study, participants were provided with pre-determined questions and potential ratings on their questionnaire's derived from established inventories and scales. One such participant provided handwritten feedback questioning the omission of a "transgender" option within the demographics portion of the survey. A mixed methods questionnaire that incorporated a section for participants to provide additional comments and feedback would have allowed for a qualitative examination of each participant's perception of spiritualty.

Recommendations for the Social Work Practice, Policy & Research

The researchers of the present study anticipated finding empirical evidence in support of utilizing spiritualty as a mitigating factor against burnout in the social work field. The study's results did indeed support the hypothesis that higher levels of spirituality would reduce a social worker's experience of burnout. More specifically, through identifying a significant correlation of spirituality as it

relates to the individual components of burnout (emotional exhaustion, depersonalization, and personal accomplishment), a potential for implementation of spiritual components in practice extends beyond the social workers themselves, but could extend into practice with clients as well.

In working with individuals and groups, recognizing spirituality's ability to increase such things as a sense of personal accomplishment provides a practitioner yet another perspective to guide client interaction. Should a client bring up spiritual aspects in session, social workers can use spirituality as a method of exploring the client's holistic well-being in treatment for such diagnoses as major depressive disorder or substance use disorder, as clinically appropriate. For those service providers who are open to fostering their own spiritual growth, spiritual development can potentially be used as a training tool for self-care. This could be the formation of a forum, either online or in person, where spiritually inclined social workers can share their beliefs and remind each other of the strength that is provided through their beliefs. On an agency/organizational level, employers could implement policy that provides religious-neutral settings where employees can engage in spiritual practices. This could take the form of a "meditation room" wherein employees can pray, meditate, read spiritual texts and materials, or otherwise engage in their preferred spiritual practices without otherwise imposing on other employees or the agency.

In future studies, research should focus on the experience of burnout among social workers from varying roles within an agency. While the present study captured data from participants from a wide variety of areas of specialization, focusing on entry-level social workers in addition to those in positions that afford them the role of field instructor would reduce the potential to misrepresent the social work field at large. Additional research could focus on replicating the study in different educational institutions. This type of study could potentially provide insights into the level of acceptance of use of spirituality in practice as taught in social work education programs. Openness to incorporating spiritual aspects as a client wishes speaks to the social work value of dignity and worth of the person (NASW, 2008), wherein a practitioner is mindful of the individual differences and cultural diversity of their clients. This takes the form of respecting the client's right to self-determination; should the client choose to include spirituality into their holistic treatment, social workers are ethically bound to respect this desire and proceed with treatment and services as clinically appropriate.

Conclusion

Spirituality can be an effective intervention framework for social workers and clients alike. Findings in the present study demonstrate spirituality's reducing effect against components of burnout, both directly and indirectly as it were. Recommendations for use of spirituality in the micro, mezzo, and macro level of

social work have been outlined to provide optimal implementation for work with clients, as well as the social workers themselves, to increase the quality of life for all who access this validated tool against burnout.

APPENDIX A

DATA COLLECTION INSTRUMENT

WELL-BEING WORKFORCE STUDY

I. DEMOGRAPHIC CHARACTERISTICS
Please indicate your demographic characteristics below.
1. Gender: ☐1 Male ☐2 Female 2. Age:
3. Race/Ethnicity (please check all that apply): ☐1 African American/Black ☐2 Non-Hispanic White ☐4 Hispanic/Latino(a) ☐3 Asian American/Pacific Islander ☐5 American Indian/Alaska Native ☐6Other:
4. Do you have a Bachelor's degree? ☐0 No ☐1 Yes , (If yes, in what field of study?:)
5. Do you have a graduate degree?: ☐0 No ☐1 Yes, (If yes, in what field of study?:)
6. What field do you work in (e.g. Mental health, child welfare, medical, educational)?:
7. What populations do you serve in your work (e.g. children, the elderly, youth, prisoners, families)?:
8. How long have you been working in your professional field of practice? _____ months _____year(s)
9. How long have you been working in your current place of employment?: _____ months _____year(s)
10. Which of the following best describes your position in the organization where you are employed: ☐1 Manager/Supervisor ☐0 Direct service provider
11. What type of organization do you work for?: ☐1 Private non-profit ☐2 Governmental/Public
12. Does your organization have any employee wellness programs?: ☐0 No ☐1 Yes (If yes, do you use the employee wellness program services?: ☐1 Yes ☐0 No)

III. WORKPLACE ATTITUDES							
Mark the box that most accurately reflects your response. Use a scale where 0= never and 6=everyday. Please check only one box for each statement.							
	Never	A few times per year	Once a month	A few times per month	Once a week	A few times per week	Every day
	(0)	(1)	(2)	(3)	(4)	(5)	(6)
EE1. I feel emotionally drained by my job.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
EE2. At the end of the workday I feel used up.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
EE3. I feel fatigued when I get up in the morning and have to face another day on the job.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
EE4. Working with people all day long requires a great deal of effort.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
EE5. I feel burned out from my work.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
EE6. I feel frustrated by my work.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
EE7. I feel I work too hard at my job.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
EE8. It stresses me too much to work in direct contact with people.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
EE9. I feel like I'm at the end of my rope.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
DP1. I feel I treat some clients impersonally, as if they are objects.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
DP2. I have become more insensitive to people since I've been working.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
DP3. I'm afraid that this job is hardening me emotionally.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
DP4. I really don't care about what happens to some of my clients.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
DP5. I have the impression that my clients make me responsible for some of their problems.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
PA1. I am easily able to understand what my clients feel.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
PA2. I look after my clients' problems very effectively.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
PA3. Through my work, I feel that I have a positive influence on people.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
PA4. I feel full of energy.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
PA5. I am easily able to create a relaxed atmosphere with my clients.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
PA6. I feel refreshed when I have worked closely with my clients.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
PA7. I accomplish many worthwhile things in this job.	(0)	(1)	(2)	(3)	(4)	(5)	(6)
PA8. In my work, I handle emotional problems very calmly.	(0)	(1)	(2)	(3)	(4)	(5)	(6)

V. SPIRITUALITY					
Please indicate how much you agree with the following statements. Use a scale where 1 = strongly disagree, 3 = neutral, and 5 =strongly agree. Please check only one box for each statement.					
	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
S1. In the future, science will be able to explain everything.	(1)	(2)	(3)	(4)	(5)
S2. I can find meaning in times of hardship.	(1)	(2)	(3)	(4)	(5)
S3. A person can be fulfilled without pursuing an active spiritual life.	(1)	(2)	(3)	(4)	(5)
S4. I am thankful for all that has happened to me.	(1)	(2)	(3)	(4)	(5)
S5. Spiritual activities have not helped me become closer to other people.	(1)	(2)	(3)	(4)	(5)
S6. Some experiences can be understood only through one's spiritual beliefs.	(1)	(2)	(3)	(4)	(5)
S7. A spiritual force influences the events in my life.	(1)	(2)	(3)	(4)	(5)
S8. My life has a purpose.	(1)	(2)	(3)	(4)	(5)
S9. Prayers do not really change what happens.	(1)	(2)	(3)	(4)	(5)
S10. Participating in spiritual activities helps me forgive other people.	(1)	(2)	(3)	(4)	(5)
S11. My spiritual beliefs continue to evolve.	(1)	(2)	(3)	(4)	(5)
S12. I believe there is a power greater than myself.	(1)	(2)	(3)	(4)	(5)
S13. I probably will not re-examine my spiritual belief	(1)	(2)	(3)	(4)	(5)
S14. My spiritual life fulfills me in ways that material possessions do not.	(1)	(2)	(3)	(4)	(5)
S15. Spiritual activities have not helped me develop my identity.	(1)	(2)	(3)	(4)	(5)
S16. Meditation does not help me feel more in touch with my inner spirit.	(1)	(2)	(3)	(4)	(5)
S17. I have a personal relationship with a power greater than myself.	(1)	(2)	(3)	(4)	(5)
S18. I have felt pressured to accept spiritual beliefs that I do not agree with.	(1)	(2)	(3)	(4)	(5)
S19. Spiritual activities help me draw closer to a power greater than myself.	(1)	(2)	(3)	(4)	(5)
S20. When I wrong someone, I make an effort to apologize.	(1)	(2)	(3)	(4)	(5)
S21. When I am ashamed of something I have done, I tell.	(1)	(2)	(3)	(4)	(5)
S22. I solve my problems without using spiritual resources.	(1)	(2)	(3)	(4)	(5)
S23. I examine my actions to see if they reflect my values.	(1)	(2)	(3)	(4)	(5)

S24. During the last WEEK, I prayed…(*only check one*):	S25. During the last WEEK, I meditated… (*only check one*):	S26. Last MONTH, I participated in spiritual activities with at least one other person…(*only check one*):
____ 10 or more times	____ 10 or more times	____ More than 15 times
____ 7-9 times	____ 7-9 times	____ 11-15 times
____ 4-6 times	____ 4-6 times	____ 6-10 times
____ 1-3 times	____ 1-3 times	____ 1-5 times
____ 0 times	____ 0 times	____ 0 times

Data collection instrument is adapted from the following sources:

Workplace Attitudes:

Burnout: Maslach, C., & Jackson, S. E. (1981). The measurement of experienced burnout. Journal of Organizational Behavior, 2(2), 99-113.

Spirituality Index:

Hatch, R. L., Burg, M. A, Naberhaus, D. S., & Hellmich, L. K. (1998). The spiritual involvement and beliefs scale: development and testing of a new instrument. *Journal of Family Practice, 46*(6), 476-486

APPENDIX B

INFORMED CONSENT

CALIFORNIA STATE UNIVERSITY
SAN BERNARDINO

California State University, San Bernardino
Social Work Institutional Review Board Sub-Committee
APPROVED 8/10/2016 VOID AFTER 8/9/2017
IRB# SW1687 CHAIR

College of Social and Behavioral Sciences
School of Social Work

INFORMED CONSENT

A Workforce Study of Engagement, Spirituality, and Well-being among Social Work Field Instructors

You are invited to participate in a research study conducted by Erica Lizano, Ph.D., Andrew Godoy, Nathan Allen, and Damian Pisapia from California State University, San Bernardino School of Social Work. This study has been approved by the School of Social Work subcommittee of the California State University, San Bernardino Institutional Review Board. You were selected as a participant because you are participating in the 4th Annual CSUSB BASW and MSW Field Instructor Training. Your participation is completely voluntary and you must be over 18 in order to be eligible. This form provides you with information about the study. Please read the information below and ask questions about anything you don't understand before deciding whether or not to take part in the study. I will be available to answer any questions you may have about the study.

PURPOSE:
The purpose of this study is to understand more about the relationship between workplace factors (e.g. burnout, workload, engagement) and individual characteristics such as spirituality and healthy behaviors (e.g. exercise, diet, sleep habits).

PROCEDURES:
If you volunteer to participate in this study, I will ask you to complete a survey. Some of the survey items include the following statements and I will ask you if you agree or disagree with them:

- I am satisfied with my job
- I feel emotionally drained from my work
- My spiritual life fulfills me in ways that material possessions do not.
- I make healthy food choices

It should take you about 15-20 minutes to complete the survey. There are several ways to return your survey. You can return the survey to myself or to the research assistants who are located in the lobby of the San Manuel Student Union. If you are unable to complete the survey before leaving the training, you can request a stamped envelope from the research assistants that is addressed to myself. You may submit the survey via US mail. PLEASE RETURNED THIS FORM WITH THE CONSENT BOX MARKED ALONG WITH YOUR SURVEY.

POTENTIAL RISKS:
Some of the questions asked in the survey may be potentially distressing since they involve personal matters. You do not need to answer any questions that you may find uncomfortable.

POTENTIAL BENEFITS TO SUBJECTS AND/OR TO SOCIETY:
You may not directly benefit from your participation in the study. Your participation will help improve the understanding of the relationships between workplace well-being, feeling engaged at work, and spirituality.

PAYMENT/COMPENSATION FOR PARTICIPATION:

909-537-5584
5500 UNIVERSITY PARKWAY, SAN BERNARDINO, CA 92407-2393

CALIFORNIA STATE UNIVERSITY
SAN BERNARDINO

College of Social and Behavioral Sciences
School of Social Work

If you choose to participate, you will be eligible to enter a drawing for a $25 dollar gift card. Ten gift cards will be drawn at the end of the training day. The gift cards will vary (e.g. Starbucks, Cheesecake Factory, AMC Movie Theater, Target, Macy's). Please submit your survey to a myself or one of the research assistants with your completed drawing ticket. You must be present for the drawing at the end of the training day to be eligible to participate. Those who submit their survey via US mail will not be eligible for the drawing.

PARTICIPATION AND WITHDRAWAL:
You can choose whether to be in this study or not. If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you don't want to answer and still remain in the study.

RIGHTS OF RESEARCH SUBJECTS:
You may withdraw your consent at any time and discontinue participation without penalty. You are not waiving any legal claims, rights or remedies because of your participation in this research study. If you have questions regarding your rights as a research subject, contact the Prof. Janet Chang, Ph.D., Social Work IRB Sub-Committee Chair, (909) 537-5184, jchang@csusb.edu.

IDENTIFICATION OF INVESTIGATORS:
If you have any questions or concerns about the research, please feel free to contact Dr. Erica Lizano at: California State University, San Bernardino, 5500 University Parkway, San Bernardino, CA 92407, tel: 909-537-5584, email: elizano@csusb.edu

CONFIDENTIALITY:
As the Principal Investigator, I will keep all personal information strictly confidential. Any findings that I will report will be in aggregate form, which means everyone's answers will be put together. Your name will not be used or placed with your answers. I hope this helps you to feel comfortable. The information collected will be stored on my computer which is password protected. When the results of the research are published or discussed in conferences, no information will be included that would reveal your identity. Additionally, the specific location of the data collection will not be included in any presentation or publications. All of the data will be kept in a locked cabinet in my locked work office at California State University, San Bernardino and will be destroyed three years after the study has been completed.

RESEARCH PARTICIPANT CONSENT

☐ By checking this box I agree to participate in this study. Date: _____

909-537-5584
5500 UNIVERSITY PARKWAY, SAN BERNARDINO, CA 92407-2393

The California State University. Bakersfield · Channel Islands · Chico · Dominguez Hills · East Bay · Fresno · Fullerton · Humboldt · Long Beach · Los Angeles · Maritime Academy · Monterey Bay · Northridge · Pomona · Sacrament · San Bernardino · San Diego · San Francisco · San Jose · San Luis Obispo · San Marcos · Sonoma · Stanislaus

APPENDIX C

IRB APPROVAL LETTER

CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO
SCHOOL OF SOCIAL WORK
Institutional Review Board Sub-Committee

Researcher(s) Erica Lizano, Andrew Godoy, Nathan Allen, and Damian Pisap

Proposal Title A Workforce Study of Engagement, Spirituality, and Well-Being Among Social Work Field Instructors

SW 1687

Your proposal has been reviewed by the School of Social Work Sub-Committee of the Institutional Review Board. The decisions and advice of those faculty are given below.

Proposal is:

✓ approved

_____ to be resubmitted with revisions listed below

_____ to be forwarded to the campus IRB for review

Revisions that must be made before proposal can be approved:

_____ faculty signature missing

_____ missing informed consent _____ debriefing statement

_____ revisions needed in informed consent _____ debriefing

_____ data collection instruments missing

_____ agency approval letter missing

_____ CITI missing

_____ revisions in design needed (specified below)

_____

_____

_____

_____

_____

_____

Committee Chair Signature — Date 8/10/2016

Distribution: White-Coordinator; Yellow-Supervisor; Pink-Student

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ASSIGNED RESPONSIBILTIES

This project was a collaborative effort between two researchers. These responsibilities were assigned as follows:

1. Data Collection: Andrew Godoy and Nathan Allen
2. Data Entry and Analysis: Andrew Godoy and Nathan Allen
3. Writing Report and Presentation of Findings
    a. Introduction: Andrew Godoy
    b. Literature Review: Nathan Allen
    c. Methods: Andrew Godoy
    d. Results: Nathan Allen
    e. Discussion: Andrew Godoy
4. Supplemental Materials
    a. Informed Consent: Andrew Godoy and Nathan Allen
    b. IRB Application: Andrew Godoy and Nathan Allen
    c. Creation of Interview Guide and Demographic Questions Andrew Godoy and Nathan Allen
5. Formatting: Andrew Godoy and Nathan Allen