

Examining School Counselors' Wellness and its Contribution to their Levels of

Altruism and Burnout

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Abstract

We examined 437 school counselors' levels of wellness and its relationship with altruism and burnout. Our results support the inverse relationship of wellness and burnout, but school counselors experiencing higher levels of wellness had higher levels of altruism. Our implications highlight the importance of school counselors advocating for their role as it relates to wellness, burnout and altruism.

Keywords: wellness, altruism, burnout, school counseling

Examining School Counselors' Wellness and its Contribution to their Levels of Altruism and Burnout

School counselors are ethically obligated to practice wellness and self-care (American School Counselor Association [ASCA], 2016; Lawson & Venart, 2005) and to monitor themselves for signs of impairment to avoid potential harm to students as a result of practicing while impaired (American Counseling Association [ACA], 2014). As part of these obligations, school counselors must take steps to avoid burnout, a state of physical and emotional exhaustion that leads to: (a) negative self-image, (b) poor outlook on one's job, and (c) having a negative impact on one's clients (Pines & Maslach, 1978). Researchers have considered the construct of burnout in multiple studies related to school counselors' job satisfaction (Baggerly & Osborn, 2006; Butler & Constantine, 2003; Curry & Bickmore, 2012; Lambie, 2007; Rayle, 2006; Wilkerson & Bellini, 2006; Young & Lambie, 2006). Baggerly and Osborn (2006) found that 90% of school counselors experience job-related stress, which is positively correlated with burnout (Skovholt, 2001) and attrition (Baggerly & Osborn, 2006) among school counselors. Minimizing burnout may reduce school counselor attrition, and identifying preventive measures to avoid burnout may also reduce the negative logistical and financial implications that counselor attrition has on school systems (i.e., hiring and training). Most importantly, minimizing school counselor burnout is beneficial in protecting the wellbeing and development of students, and school counselor's implementing self-care is important modeling for students.

Several external factors are related to burnout among school counselors, such as student-counselor ratios and years of experience (Butler & Constantine, 2003;

Wilkerson & Bellini, 2006). However, only Lambie (2007) identified the relationship between a specific counselor attribute (ego development) and burnout. Therefore, school counselors have limited information available when considering the intersection of their personal traits and risks of burnout (Wilkerson & Bellini; Young & Lambie, 2006). Several authors have suggested wellness as a preventive or responsive factor for burnout (Flynn & Black, 2011; Wilkerson & Bellini; Young & Lambie), but researchers have not examined the direct relationship between these constructs in the counseling field, specifically in school counselors.

In considering the construct of wellness, one may also consider the association between wellness and altruism. Scholars have traditionally viewed wellness and altruism as dichotomous. The former signifies self-interest (Flynn & Black, 2011) and the latter represents social interest (Penner et al., 2005). However, Rogers (1957) and Maslow (1956) recommended a balance between altruism and wellness in order for counselors to be most effective. Krebs and Van Hesteren (1994) stated that altruistic acts should contain a balance of social interest and self-interest, further signifying a possible relationship between these constructs. Furthermore, Flynn and Black (2011) proposed an emergent theory of self-interest and altruism. Flynn and Black (2011) disputed the idea of a dichotomous relationship between altruism and wellness, stating that the participants identified altruism and wellness as “two sides of the same coin”(p.465). This finding supports the notion that that there is a false dichotomous relationship between altruism and wellness, and further investigation, specifically quantitative support, is needed. Additionally, (AUTHORS) found that school counselors who were more altruistic experienced lower levels of burnout. Therefore, our current

study is an exploratory examination of the relationship amongst wellness, altruism, and burnout, which is lacking in the counseling literature (Young & Lambie, 2006), specifically with regard to school counseling.

Wellness

The World Health Organization (WHO; 1976) provided one of the earliest definitions of wellness, describing it as the absence of disease. Rather, this construct includes a holistic perspective of physical, mental, and social wellbeing (WHO). Witmer (1985) first introduced wellness to the counseling field, and later Myers (1992) advocated for wellness to be major paradigm within the profession. Counselors initially interpreted this as a focus on the client's wellness; however, the profession later shifted to a focus on counselor wellness (Witmer & Young, 1996). Over time, wellness became so significant in the field, that the American Counseling Association developed a task force to promote wellness and prevent burnout (Lawson & Verant, 2005). Today, wellness is described as the appropriate form of self-interest within the counseling field (Flynn & Black, 2011) and wellness models and their emphasis on the whole client rather than on a diagnosis or pathology is often what sets the counseling field apart from other helping professions (Granello & Young, 2018; Ohrt, 2019)

There is not yet an agreed upon model of wellness within the counseling field. However, in a review of wellness models, Roscoe (2009) found three themes common among existing models: (a) the idea that wellness is multidimensional, (b) wellness is best represented on a continuum, and (c) wellness is more than just the absence of illness. Myers, Sweeney, and Witmer's (2000) Indivisible Self Wellness Model (IS Wel Model) is an evidence-based model of wellness and the most commonly known and

used in counseling. It is a multidimensional model consisting of an overall factor of wellness and five secondary factors: (a) essential self, (b) social self, (c) physical self, (d) creative self, and (e) coping self (Myers & Sweeney, 2004). This model is based in Adler's (1976) social interest theory of three life tasks (love, work, and friendship) and Dreikuss's (1967) two life tasks (social and spiritual). The authors developed the IS Wel Model using factor analysis from a previous model, the Wheel of Wellness (Sweeney & Witmer 1991; Witmer & Sweeney, 1992). While both the Wheel of Wellness and the IS Wel Model are originally influenced by individual psychology, the IS Wel Model takes a more interdependent, holistic approach where each piece of the model is integrated into the other (Myers & Sweeney, 2004).

The secondary factors of the IS Wel Model consists of components that synthesize each factor. The essential self is made up of four aspects: (a) spirituality, (b) self-care, (c) gender identity, and (d) cultural identity. Activities that engage the essential self include engaging in a community with similar spiritual beliefs (i.e., church groups), massages, physical activity, and finding networks and social gatherings that embrace and celebrate one's gender and cultural identities. Adler (1964) first defined the creative self as a combination of attributes that a person forms to find a unique place within the social interactions that take place in one's life. The creative self is comprised of five components: (a) thinking, (b) emotions, (c) control, (d) positive humor, and (e) work. The creative self includes activities such as seeking out positive humor, expressing emotion to a supportive system or journaling, expressing them through art, dance, or some other form, and framing life's experiences with positive thoughts and taking control of what one engages with on a daily basis. The coping self revolves

around the core beliefs that one holds, stress-management, their sense of self-worth. Example of activities related to this component are: journaling; time-management strategies; creating personal boundaries; goal setting). The social self only contains two components: friendship and love. While the social self exists on a spectrum, through the exploration of friendships to intimate relationships, it's clear that relationships enhance the quality and length of one's life. Participating in prosocial events like meetings, attending trainings, organizations, or sporting events are activities that empower the social self. Lastly, the physical self includes exercise and nutrition. This component of self cannot over dominate the others, this component is a crucial aspect throughout the lifespan due to the physical and mental changes that occur (Myers & Sweeney, 2004). However, activities such as participating in sports, group fitness, yoga, or keeping a food journal to understand how the body responds best to dietary needs employs the physical self.

Altruism

Scholars have debated about the existence of pure altruism and struggled to agree on a definition. Rushton (1981) stated that altruism is a behavior that benefits others. However, Piliavin and Charng (1990) later suggested that there are two components of altruism: behavior and motivation; these components are the core of debates related to the existence and definition of altruism. Eisenberg (1999) and Krebs and Van Hesteren (1994) stated that if one's motivation behind an action is the expectation of a reward or if the beneficial act is accidental, then the act is not altruistic. Krebs and Van Hesteren (1994) defined altruism as "self-sacrificial beneficence carried out without any anticipation of internal or external rewards" (p. 104). Furthermore,

willingness of self-sacrifice is altruistic and is inevitable and altruistic acts may benefit both self and others (Eisenberg, 1999; Krebs & Van Hesteren, 1994). However, Wakefield (1993) stated that a genuine concern for another's wellbeing is altruistic and an act can be altruistic even if it does receive an award (i.e. compensation; feeling good about oneself). Others (Krebs & Van Hesteren, 1994) stated that altruism is more accurately described as being on a continuum. On one end of the continuum is the idea that a true altruistic act cannot exist because the individual always received something because of the act (Rushton, 1982). On the other end of the continuum is the combination of the behavior and the motivation of the act, and the notion that one receives something as a result of the act, but that he or she does not expect this (Eisenberg, 1999). Considering the continuum of the definition and the theories that support the development of altruism, the following operational definition of altruism is used in our study: "behavior motivated by the concern for others or by internalized values, goals, and self-rewards rather than by the expectation of concrete or social rewards, or the desire to avoid punishment or sanctions" (Eisenberg et. al., 1999, p. 1360). We chose this definition for the present study because it incorporates both altruistic behavior and altruistic motivation.

Burnout

Maslach and Jackson (1986) found three factors that contribute to burnout: (a) emotional exhaustion, (b) depersonalization, and (c) reduced personal accomplishment. Maslach (1976) conducted exploratory qualitative studies to understand the phenomenon of burnout within human services; specifically, she wanted to further understand the responses to burnout. Maslach (1982) identified three themes related to

how people respond to burnout: (a) emotional exhaustion, (b) depersonalization, and (c) reduced personal accomplishment. Using these themes, Maslach (1982, 1998) developed the multidimensional theory of burnout. Emotional exhaustion is an individual's stress response to burnout. Depersonalization occurs when an individual has an increase cynicism and detaches on an interpersonal level to clients, students, or co-workers. Reduced personal accomplishment is an individual's decreased level of self-efficacy and self-evaluation and is related to feeling unproductive and incompetent. For the purposes of our study, we use Pines and Maslach (1978) definition of burnout: "condition of physical and emotional exhaustion, involving the development of negative self-concept, negative job attitude, and a loss of concern and feeling for clients" (p. 234).

Burnout and School Counselors

Previous researchers identified several factors within school counseling related to burnout, such as (a) student-counselor ratio, (b) years of experience, and (c) role discrepancies (Butler & Constantine, 2003; Wilkerson & Bellini, 2006). Baggerly and Osborn (2006) found that stress negatively correlates with: (a) job satisfaction and (b) commitment, and (c) burnout. According to Lambie (2007), school counselors experiencing burnout may exhibit symptoms such as hopelessness, be absent from work frequently, and a negative impact on students. Moyer (2011) examined three predictor variables (non-counseling activities, school counselor supervision, counselor-to-student ratio) of a school counselor's role and if these variables are predictors of burnout among school counselors. Moyer found that non-counseling duties accounted for a significant amount of variance in predicting exhaustion $R^2=.047$; negative work

environment $R^2=.064$; incompetence, $R^2=.04$; deterioration in personal life, $R^2=.034$; devaluing clients, $R^2=.013$; and total burnout, $R^2=.073$. Therefore, we sought to identify school counselor personal characteristics that contribute to burnout and ways to prevent school counselor burnout.

Altruism, Burnout, and Wellness

Altruism, burnout and wellness are all states or personal characteristics a school counselor may exhibit or experience, and there is limited research on the relationships between these three constructs. Researchers have examined burnout in the school counseling literature, but have not directly identified its relationship with altruism or wellness. The relationship between altruism and wellness may seem dichotomous considering the former is related to social interest and the latter is reflective of self-interest. However, the operational definition of wellness we use in our study includes self-improvement as a component of altruism (Eisenberg, 1999). Rogers (1957) suggested that counselors need a balance between taking care of themselves and caring for others. Furthermore, Maslow (1967) indicated that those who are self-actualized are both altruistic and well. Being altruistic is an essential attribute of a counselor, and one cannot provide care to others without caring for themselves (Skovholt et al., 2001). Individuals who do altruistic acts and expect something in return may have higher levels of burnout due to the disappointment or rejection associated with not receiving something in return, rather than from the altruistic act itself (Piliavin & Charng, 1990). Therefore, describing this relationship will provide more insight of attributes of school counselors that prevent burnout.

Wellness and burnout have been the focus of many research studies in the counseling field; however, no research was found to clarify the direct relationship between the two.

Multiple scholars have suggested wellness as a way for preventing burnout (Myers & Sweeney, 2008; Flynn & Black, 2011). Young and Lambie (2006) suggested that persons with higher levels of wellness will have lower levels of burnout. Skovholt and colleagues (2001) stated that burnout is the lack of wellness in a counselor's life. However empirical support for these assumptions is not available. Given the proposed relationship between altruism, burnout and wellness in the literature, we used three research questions to examine the relationships:

Research Question 1: What is the relationship between school counselor's self-reported wellness and their levels of burnout?

Research Question 2: What is the relationship between school counselor's self-reported wellness and their levels of altruism?

Research Question 3: What is the relationship between school counselor's self-reported wellness activities and their levels of burnout and altruism?

Method

Participants

We contacted a national sample via email of 3,013 practicing school counselors to ensure that a minimum sample of 382 participants (Krejcie & Morgan, 1970); 437 practicing school counselors participated. Most of the participants were female ($n = 380$, 87%), compared to those who identified as male ($n = 57$, 13%). Among participants who reported their age ($n = 435$), the mean age was 44.77 years ($SD = 10.82$, range = 24 to

74, *Mdn* = 44). Among participants who reported their ethnicity or race, the majority were white ($n = 386$, 88.3%), followed by black ($n = 24$, 5.5%), Hispanic/Latino ($n = 14$, 3.2%), and other races/ethnicities ($n = 12$, 2.6%). In regard to participants' professional experience and preparation, the majority of the school counselors ($n = 380$, 87%) indicated their highest degree earned was a Master's, 8.2% ($n = 36$) earned an Education Specialist degree (Ed.S), 4.1% ($n = 18$) earned a doctoral degree, and 0.7% ($n = 3$) reported having only a Bachelor's degree. Most of the participants reported holding membership in ASCA ($n = 344$, 78.7%) as compared to the counselors who were not members ($n = 93$, 21.3%). The mean years of experience as a school counselor were 11.46 years ($SD = 7.84$, range = 1.0 to 43.0, *Mdn* = 10.0). Participants identified the level at which they worked; the sample included high school counselors, 35.9% ($n = 157$) high school counselors ($n = 157$, 35.9%), elementary school counselors ($n = 145$, 33.2%), middle school counselors ($n = 103$, 23.6%), and counselors working within other school configurations (i.e. K – 8 schools; $n = 32$, 7.3%). The environmental setting of the participants' schools were suburban ($n = 181$, 41.4%), rural ($n = 165$, 37.8%), ($n = 80$, 18.3%), and 2.5% ($n = 11$) other settings ($n = 11$, 2.5%). Among participants who reported the classification of their schools ($n = 435$), most worked in public schools ($n = 418$, 95.7%) with others working in private schools ($n = 13$, 3%) and in other school settings ($n = 4$, 0.9%) Participants reported a mean caseload of 428.11 students ($SD = 201.72$, range = 72 1,741, *Mdn* = 400).

Instrumentation

We used four instruments to measure the constructs of interest in our study: (a) the *Heintzelman Inventory* (Kuch & Robinson, 2008) to measure altruistic motivation, (b)

the *Self-Report Altruism Scale* ([SRA-Scale]; Rushton et al., 1981) to measure altruistic behavior, (c) the *Maslach Burnout Inventory-Educator Survey* ([MBI-ES]; Maslach et al., 1996) to measure levels of burnout, and (d) a survey of Likert scale items to measure wellness.

Heintzelman Inventory

The *Heintzelman Inventory* (Kuch & Robinson, 2008) is used to measure altruistic motivation. The *Heintzelman Inventory* is a self-report questionnaire. The instrument consists of 40 items that are divided into five subscales: (1) positive future expectation; (2) self-efficacy; (3) personal growth; (4) early caretaker experience; and (5) counselor identity formation. Each item contains a five-point Likert scale ranging from (a) “not at all an influence” to “a very strong influence”, (b) “not at all satisfying” to “very satisfying”, or (c) “strongly disagree” to “strongly agree”. Additionally, each section contains a “not applicable or irrelevant” category. The internal consistencies of the five subscales are: (1) .97 for positive future expectations, (2) .85 for self-efficacy, (3) .88 for personal growth, (4) .88 for early caretaker experience, and (5) .83 for counselor identity formation. A strong positive correlation (investigated using the Pearson product-moment correlation coefficient) was found between all five factors on the test-retest mean interval of two weeks: (1) positive future expectations, $r = .72$, (2) self-Efficacy, $r = .77$ (3) personal growth, $r = .70$, (4) early caretaker experience, $r = .85$ and (5) counselor identity formation, $r = .82$.

Self-Report Altruism Scale (SRA)

The *Self-Report Altruism Scale* (SRA; Rushton et al., 1981) is a 20-item self-report instrument focusing on altruistic behavior of a participant and it assesses the

frequency with which a respondent participates in an altruistic act. Participants are asked to rate the frequency of which they engage in specific altruistic behaviors using five categories: (1) never, (2) once, (3) more than once, (4) often, and (5) very often. Examples of specific altruistic behaviors include 'I have helped carry a stranger's belongings (e.g. books, parcels, etc.)', 'I have helped an acquaintance to move', and 'I have volunteered for a charity'. Researchers have tested the internal consistency of this instrument with five different populations, and the internal consistency has been above .70 with all populations. The convergent validity of the *SRA* has been associated with other prosocial assessments and it has shown strong results. The creators of this instrument also assessed for social desirability using a socially desirable response measure and found that those who responded to this instrument were not doing in a socially desirable way.

Maslach Burnout Inventory-Educator Survey (MBI-ES)

The *Maslach Burnout Inventory-Educator Survey* (MBI-ES; Maslach et al., 1986, 1996) measures participant's level of burnout determined by three subscales: Emotional Exhaustion (EE), Depersonalization (DP), and Reduced Personal Accomplishment (PA). The MBI-ES is a self-report instrument with 22 questions. The MBI-ES is an adapted version of the *MBI-Human Services Survey* (MBI-HSS; Maslach & Jackson, 1981, 1996) survey, but was created specifically for use in educational environments (e.g., schools). Emotional exhaustion is measured by nine items; such as, 'I feel emotionally drained from work'. Depersonalization is measured by five items; such as, 'I feel I treat some students as if they were impersonal objects', and personal accomplishment is measured by eight items; such as, 'I can easily understand how my

students feel about things'. The reliability coefficients of the *MBI-ES* are strong: (a) Emotional Exhaustion, $\alpha = .90$; (b) Depersonalization, $\alpha = .79$; and (c) Personal Accomplishment, $\alpha = .71$. Maslach and colleagues (1996) examined the validity of the *MBI-HSS* by assessing convergent validity and discriminant validity. Convergent validity is supported two ways: (a) external validation and (b) examining dimensions of job experiences and their relationship with burnout. External validation was demonstrated by a correlation between self-rating on the *MBI-HSS* and other's behavioral rating of the same individual. Correlations were also found between job experiences (i.e., large number of clients and providing direct services) positively correlated with dimensions of burnout. Additionally, discriminant validity is demonstrated by comparing scores on the *MBI-HSS* and dissatisfaction of a job, as measured by the job satisfaction scale on the *Job Diagnostic Survey* (JDS; Hackman & Oldham, 1975).

Wellness & Wellness Activities

We developed the general demographic survey to collect information about our participants, specifically related to wellness. The survey is a researcher created questionnaire, which is a self-report of participants' demographic information (e.g., gender, age, ethnicity, level of education, years of experience as a school counselor, geographic location etc.). In addition, we provided participants with our operational definition of wellness (i.e., Myers et al., 2000) and asked them seven Likert scale questions related to their wellness. Five Likert scaled questions were developed to ask participants to rank from 1 (*not well*) to 5 (*well*), components of their personal wellness (i.e., emotional, social, physical, spiritual, occupational), one question about their overall levels of wellness, and one question about their levels of stress on the job. To assess

participant's specific wellness activities, we asked them an open-ended question about their wellness activities, "What do you currently do to take care of yourself?" We coded each answer using the secondary factors of the *IS WeI Model* (creativity, coping, social, essential, physical). The survey was reviewed by a panel of experts (e.g., counselor education faculty, experts in wellness within counseling) and was administered to colleagues for review, supporting the readability and face validity of the assessment.

Results

Research Question 1: Self-Reported Wellness and Burnout

To explore the relationship between school counselors' self-reported wellness and burnout, we conducted a Spearman rho correlation. The analyses supported a relationship between all dimensions of burnout and all types of self-reported wellness. Table 1 provides the correlations. To further explore the relationships between wellness and burnout, we used a simultaneous multiple regression to predict the influences of the different types of wellness and dimensions of burnout. Each analysis was observed for violations of the assumptions of normality (outliers, normality, linearity, and homoscedasticity). In this case, normality was violated, which may hinder the results of the regression analyses. In assessing the prediction of the independent variables (self-reported wellness) to the dependent variables (dimensions of burnout), we entered all independent variables simultaneously. Overall, the linear composite of the variables entered in the regression procedure explained approximately 49% ($R^2 = .49$) of the variation in emotional exhaustion scores, $F(7, 429) = 58.12, p < .001$; 18% ($R^2 = .18$) of the variation in depersonalization scores, $F(7, 429) = 13.234, p < .001$; and 20% ($R^2 = .20$) of the variation in personal accomplishment scores $F(7, 429) = 15.047, p < .001$.

Further inspection of the beta weights indicated that occupational wellness, spiritual wellness, and current level of stress on the job had statistically significant beta coefficients for emotional exhaustion and depersonalization. Additionally, emotional wellness, occupational wellness and spiritual wellness had significant beta coefficients for personal accomplishment. Current level of stress on the job had the highest beta value (beta = $-.408$, $p < .001$) for emotional exhaustion, occupational wellness had the highest beta value for depersonalization (beta = $-.238$, $p < .001$), and personal accomplishment (beta = $.332$, $p < .001$).

Research Question 2: Self-Reported Wellness and Altruism

We also conducted a Spearman rho correlation to explore the relationship between school counselors' altruism and their self-reported wellness (see Table 2). There was a small relationship between *Positive Future Expectations* and emotional wellness ($r_s = .150$, $p < .05$); social wellness ($r_s = .139$, $p < .05$); spiritual wellness ($r_s = .121$, $p < .05$); occupational wellness ($r_s = .238$, $p < .001$); and overall wellness ($r_s = .158$, $p < .001$). However, we found no relationship between *Positive Future Expectations* and physical wellness and level of stress at work. Additionally, the analyses supported the results of a small statistically significant relationship between *Self-Efficacy* and all types of self-reported wellness: emotional wellness ($r_s = .251$, $p < .001$); social wellness ($r_s = .274$, $p < .001$); physical wellness ($r_s = .123$, $p < .05$); spiritual wellness ($r_s = .237$, $p < .001$); occupational wellness ($r_s = .233$, $p < .001$); overall wellness ($r_s = .249$, $p < .001$); and level of stress at work ($r_s = .212$, $p < .001$). Furthermore, a small significant relationship was found between *Personal Growth* and spiritual wellness ($r_s = .105$, $p < .05$); and overall wellness ($r_s = .096$, $p < .05$). However,

no relationships were found between *Personal Growth* and emotional, social, physical, occupational, or levels of stress at work for these data. There was a small negative relationship found between *Early Caretaker Experience* and levels of stress at work ($r_s = -.105, p < .05$); however, there was no relationship found between *Early Caretaker Experience* and the other types of self-reported wellness. *Counselor Identity Formation* related positively with spiritual wellness ($r_s = .100, p < .05$); occupational wellness ($r_s = .149, p < .05$); and overall wellness ($r_s = .104, p < .05$); however, it did *not* relate identified between *Counselor Identity Formation* and the other types of wellness. Altruistic behavior related to all of the self-reported types of wellness except physical and level of stress at work: emotional wellness ($r_s = .124, p < .05$); social wellness ($r_s = .097, p < .05$); spiritual wellness ($r_s = .163, p < .001$); occupational wellness ($r_s = .096, p < .05$); and overall wellness ($r_s = .104, p < .05$). Table 29 provides a representation of the correlation results.

Research Question 3: Self-Reported Wellness Activities and Burnout

To examine the relationship between school counselors' wellness activities and their levels of burnout, we conducted a Spearman rho correlation. As seen in Table 3 social self-care activity was negatively correlated with Emotional Exhaustion and Depersonalization, and positively correlated with Personal Accomplishment. Essential self-care activity was negatively correlated with Emotional Exhaustion. No other correlations were significant at the $p < .05$ level. Although there were correlations between wellness activities and burnout, their effect sizes were all small (Cohen, 1988).

Discussion

Most school counselors experience job-related stress, which can lead to burnout and attrition (Baggerly & Osborn, 2006; Skovholt, 2001). Self-care has become a critical component of counselor wellness that has been found to prevent burnout by helping counselors manage physical and emotional exhaustion (Pines & Maslach, 1978). Although several factors can affect burnout, counselor wellness, connected with altruism, may be a preventative intervention for counselor burnout. However, minimal evidence within the counseling literature supports the direct relationship between wellness and burnout. Within our study, we compared the factors of burnout (i.e., emotional exhaustion, depersonalization, and reduced personal accomplishment) and different components of wellness (emotional, social, physical, spiritual, occupational, and overall) with level of stress at work. We found that participants that had higher levels of occupational wellness and spiritual wellness had lower levels of emotional exhaustion and depersonalization, and stress at work which is similar to Young, and Lambie's (2006) argument that wellness activities were a preventative measure to burnout. Emotional, spiritual, and occupational wellness were positively associated with personal accomplishment, which aligns with Roscoe's (2009) assertion that wellness is a multidimensional component. When participants completed a wellness activity, the relationship between engagement in wellness activities and burnout was analyzed. Social self-care had a negative correlation with emotional exhaustion and depersonalization but was positively correlated with personal accomplishment. Although these correlations had small effect sizes, these results align with the literature that when counselors engage in self-care (social and essential) they have decreased emotional

exhaustion and depersonalization and have an increase in personal accomplishment. Previous researchers have identified factors related to school counselor burnout (student-counselor ratio, years of experience, and role discrepancies), but many of these factors are outside of the school counselor's control (Butler & Constantine, 2003; Wilkerson & Bellini, 2006). However, the relationship between altruism and wellness as a preventative intervention may help school counselor's increase self-efficacy and decrease stress levels.

Implications for School Counselors

Based on our findings, school counselors must practice advocacy for their position and appropriate duties. We found significant relationships between school counselor's self-efficacy and all types of self-reported wellness which implies that which school counselors feel as though they are able to work within the role that they are trained for as a school counselor, their overall wellness benefits. Advocating to principals and other administrative staff for appropriate role assignments will have a positive influence on the school counselor not only as a professional, but as a well individual. These findings also place emphasis on the relationship that school counselors have with the roles that they are assigned or required to do. How school counselors view the roles or activities that they partake in can positively or negatively impact their levels of burnout and their perspective on their ability to partake in altruistic tasks. Although the ASCA National Model recommends that school counselors have a caseload ratio of 1:250, many school counselors have a caseload that exceeds that (ASCA, 2019). When school counselors have a higher caseload, they have more students to serve, this limits the school counselor's ability to engage in altruistic tasks

due to the increased responsibility to serve a larger number of student's social/emotional, academic, and career development. Lastly, school counselors should place an emphasis on their own personal wellness, finding activities and support networks that will assist them in finding a balance between the demands of their role and taking time to separate themselves with work-life boundaries.

Implications for Counselor Education

Considering altruistic behavior can increase counselor wellness and may prevent school counselor burnout, counselor education programs can incorporate a wellness model into school counseling curriculum that includes increasing altruistic behavior. Wellness interventions can be added into several course curricula. Additionally, within specific courses (e.g., Introduction to School Counseling, Practicum, and Internship) projects can be focused on advocacy and wellness, which can be implemented once they are in working as a school counselor. Yager and Tovar-Blank (2007) suggested 10 interventions for addressing wellness within counselor education, including: educating new graduate students about the importance of wellness, emphasizing the relationship between wellness, self-awareness and self-growth; faculty modeling, and integration of wellness into courses. For integration into the course curriculum, Yager and Tovar-Blank (2007) recommend having graduate students complete the Myers et al. (1998) WEL inventory, develop their own self-care plan to implement during the semester, and re-take the WEL inventory at the end of the semester to track progress. In addition, Chi Sigma Iota chapters could plan self-care and/or community events to promote wellness and altruism within counselor education programs outside of the classroom (Yager & Tovar-Blank, 2007). Because 90% of school counselors report experiencing job-related

stress (which is associated with counselor burnout and attrition), counselor education programs incorporating a wellness model and altruistic activities into the curriculum may help prepare future school counselors to develop their own wellness models as a preventative measure to burnout (Baggerly & Osborn, 2006; Skovholt, 2001). Although counselor education programs could improve their curricula by incorporating altruism and wellness into their course design, counselor educators must also advocate for school counselors in the field. Myers et al., (2002) noted that while the counseling profession has prioritized advocacy for clients and marginalized people groups, advocacy for counselors themselves and the profession itself is still necessary. Burnout factors for school counselors have been noted in high student-to-school counselor ratio, ambiguity in job role, lack of supervision, and non-counseling activities (Moyer, 2011). Counselor educators have a responsibility to advocate for local school districts and individual state departments of education to meet ASCA's national standards for school counselors in school policies. Additionally, counselor educators could advocate for current school counselors by providing continuing education workshops to local school districts to educate school administrators on updates to ASCA's national standards and the school counseling profession as a whole. Counselor educators may also provide programs to promote altruism and wellness to current school counselors within their local communities as a measure to prevent burnout for school counselors.

Limitations of the Study

In interpreting the results of our study, one must consider its limitations. The constructs of the study (i.e., burnout, wellness, altruism) may lend themselves to participants who want to portray an image of idealized behavior that differs from their

real-life actions and, in turn, respond in a socially desirable way. While the developers of one of our instruments, the *SRA* (Rushton et al., 1982), accounted for social desirability in developing the instrument, this was not true of all the measures we used in this study. Furthermore, mitigating the risk of socially desirable responses does not guarantee participants will not give ingenuine responses. Therefore, it is important to acknowledge that data was based on self-report, which increases the risk of social desirability bias. Additionally, there was a low overall response rate, although we made efforts to increase it as recommended by Dillman et al., (2014). Furthermore, while the items we used to measure wellness were based on wellness literature, this was not an established or psychometrically tested instrument. Finally, as the assumptions of normality were violated in this study, it is possible that school counselors who are more altruistic and experiencing lower levels of burnout and higher levels of wellness may be more likely to complete the survey than school counselors who do not exhibit those characteristics.

Recommendations for Future Research

When considering future exploration in this area, a thorough investigation of school counselors' levels of burnout when they are given time to do altruistic acts could give insight into future training for counselor educators, emphasize the importance of school counselors advocating for their position and appropriate roles, and act as a way to educate school administration (i.e., principals and district administration) on the relevance of the ASCA Model's recommendations of roles, caseload ratios (1:250), and potential overall retention of school counselor's within the school system. Additionally, future research may address the ways that counselor educators can infuse and

emphasize the importance of performing and/or making time for altruistic tasks to act as a protective factor to protect against school counselor's levels of burnout, wellness, and levels of stress at work.

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Appendix

Table 1

Correlations between Burnout and Self-Reported Wellness

Self-reported Wellness	Types of Burnout		
	Emotional Exhaustion	Depersonalization	Personal Accomplishment
Emotional	$r_s = -.361$ $p < .001$	$r_s = -.251$ $p < .001$	$r_s = .300$ $p < .001$
Social	$r_s = -.350$ $p < .001$	$r_s = -.232$ $p < .001$	$r_s = .265$ $p < .001$
Physical	$r_s = -.290$ $p < .001$	$r_s = -.202$ $p < .001$	$r_s = .182$ $p < .001$
Spiritual	$r_s = -.328$ $p < .001$	$r_s = -.250$ $p < .001$	$r_s = .275$ $p < .001$
Occupational	$r_s = -.497$ $p < .001$	$r_s = -.283$ $p < .001$	$r_s = .392$ $p < .001$
Overall Wellness	$r_s = -.459$ $p < .001$	$r_s = -.270$ $p < .001$	$r_s = .294$ $p < .001$
Level of Stress at Work	$r_s = -.581$ $p < .001$	$r_s = -.261$ $p < .001$	$r_s = .143$ $p < .05$

Table 2*Correlations between Altruism and Self-Reported Wellness*

Wellness Activity	Altruism					
	Positive Future Expectations	Self-Efficacy	Personal Growth	Early Caretaker Experience	Counselor Identity Formation	Altruistic Behavior
Emotional	$r_s = .150$ $p < .05$	$r_s = .251$ $p < .001$	NS	NS	NS	$r_s = .124$ $p < .05$
Social	$r_s = .139$ $p < .05$	$r_s = .274$ $p < .001$	NS	NS	NS	$r_s = .097$ $p < .05$
Physical	NS	$r_s = .123$ $p < .05$	NS	NS	NS	NS
Spiritual	$r_s = .121$ $p < .05$	$r_s = .237$ $p < .001$	$r_s = .105$ $p < .05$	NS	$r_s = .100$ $p < .05$	$r_s = .163$ $p < .001$
Occupational	$r_s = .238$ $p < .001$	$r_s = .233$ $p < .001$	NS	NS	$r_s = .149$ $p < .05$	$r_s = .096$ $p < .05$
Overall Wellness	$r_s = .158$ $p < .001$	$r_s = .249$ $p < .001$	$r_s = .096$ $p < .05$	NS	$r_s = .104$ $p < .05$	$r_s = .105$ $p < .05$
Level of Stress at Work	NS	$r_s = .212$ $p < .001$	NS	$r_s = -.105$ $p < .05$	NS	NS

Table 3*Correlations Between Wellness Activity and Burnout*

Wellness Activity	Types of Burnout		
	EE	DP	PA
Creativity	-.03	-.04	.06
Coping	.05	.02	.05
Social	-.12*	-.17*	.14*
Essential	-.09*	-.07	.09
Physical	-.08	-.04	.07

Note. EE = Emotional Exhaustion Burnout Scale; DP Depersonalization Burnout Scale; PA = Personal Accomplishment Burnout Scale; Items labeled with * were significant at $p < .05$.