EMOTIONAL INTELLIGENCE AND JOB SATISFACTION AMONG
MENTAL HEALTH PROFESSIONALS

By Deborah J. Pardee

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Approved:

Thomas DeStefano, Ed.D, Chair
Andrew Gardner, Ph.D.
Betsy Kerr, Ed.D.
John McClure, Ph.D.
eugene Moan, Ed.D.
ABSTRACT

EMOTIONAL INTELLIGENCE AND JOB SATISFACTION AMONG MENTAL HEALTH PROFESSIONALS

DEBORAH J. PARDEE

The purpose of this study was to examine the relationship between emotional intelligence and job satisfaction among a population of mental health professionals. Research has indicated that external factors account for a part of the variance of job satisfaction among mental health professionals, but emotional factors, such as emotional intelligence, have not been thoroughly explored. Due to the high turnover and burnout rates in this field, factors relating to job satisfaction are important to identify. Mental health professionals with at least a Bachelor’s degree, and who work at least fifty-one percent of the time in a counseling role, participated in this study. Results suggest that there are no differences in emotional intelligence based upon gender. Further, male job satisfaction appears to be influenced by the ability to be aware of emotions and manage own emotions, while female job satisfaction appears to be influenced solely by the ability to be aware of emotions. Internal factors do appear to play a role in job satisfaction among this population.
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DEDICATION

I dedicate this dissertation to the late Dr. Margaret Ayers, neurofeedback pioneer. You saved my life and, in turn, I have paid that forward many times over. You were my biggest inspiration and the smartest person I ever knew. You were my most beloved mentor, and not a day goes by that I don’t think of you and wish that I could hear your voice. Never the shy one, I’m sure you are in heaven, teaching God how to build a better brain.
CHAPTER ONE

Introduction

Overview

Emotional intelligence has been defined as an ability to recognize, comprehend, regulate and handle the emotions of both the self and others (Caruso & Salovey, 1999; Goleman, 1995; Mayer & Salovey, 1997). It has been measured as both ability (Ciarrochi, Chan & Caputi, 2000; Mayer et al., 1999), as well as trait (Goleman, 1995; Schutte, Malouff, & Hall, 1998). Emotional intelligence has been taught in schools (Goleman, 1995), and has been the focus of employers seeking to enhance skills of workers in various fields (Goleman, 1995; Goleman, Boyatzis, & McKee, 2002). Researchers have suggested that emotional intelligence may play an important role in the success of those in the counseling field (Martin, Easton, Wilson, Takemoto, & Sullivan, 2004; Matthews, Zeidner, & Roberts, 2004). It has also been suggested that emotional intelligence may play a role in job satisfaction (Wright & Cropanzano, 2000). It may be possible, then, that emotional intelligence may play a role in the job satisfaction of mental health professionals.

The focus of this proposed study is to establish a link between emotional intelligence and job satisfaction among a population of mental health professionals. Additionally, it will seek to determine whether or not gender differences exist in both levels of emotional intelligence and job satisfaction among this population.
Intelligence as a Construct

Historically, definitions of intelligence have been suggested by multiple theorists. Thorndike (1927) suggested that intelligence was the ability to learn, and he separated intelligence into three basic categories that included mechanical, abstract and social intelligences (1920). Spearman (1927) presented a two factor theory of intelligence that included a description of a general factor called \( g \), which he believed was involved with all mental tasks. The other factor, \( s \), described abilities that were unique to a given task. Spearman (1927) postulated that \( g \) was involved in deductive operations, such as an ability to determine a relationship between multiple concepts and the ability to continue to make associations between ideas.

Conversely, Thurstone (1938) suggested that there are multiple factors involved in intelligence. Initially questioning the existence of \( g \), Thurstone (1938) later found that the primary factors of his theory did correlate with one another, suggesting support for the possible existence of \( g \). Later, Horn and Cattell (1967) described two types of intelligences – fluid and crystallized. Fluid ability was described as a broad pattern of reasoning, seriation, sorting and classifying; while crystallized ability is a broad pattern of achievements and knowledge that occur due to acculturation (Horn, 1987, p. 220). Horn and Cattell (1967) believed that \( g \) was most related to fluid intelligence.

In the 1980's, Gardner (1983) proposed a theory of multiple intelligences, describing eight categories or “competencies.” These categories included linguistic intelligence, musical intelligence, logical-mathematical intelligence,
spatial intelligence, bodily-kinesthetic intelligence, intrapersonal and interpersonal intelligences, and naturalist intelligence. Gardner (1983) asserted that intelligence is a potential which allows access to thinking that is dependent upon context. Gardner’s (1983) intrapersonal and interpersonal intelligences relate directly to emotional intelligence, as they describe an individual’s ability to understand the self as well as others.

Sternberg (1986) proposed that measures of intelligence would include biological, cognitive, motivational and behavioral factors. He predicted that new measures of intelligence will be based upon theories of information processing, will measure a broader set of abilities and will measure aspects of learning that have not been previously measured (Sternberg, 1986). Sternberg (2003) asserted that while g is a factor in intelligence, other skills also matter. He notes that it is difficult to measure other skills psychometrically, as there are often no right or wrong responses (Sternberg, 2003). Sternberg (2003) suggests that people can select life goals and achieve these goals in keeping with their strengths and weaknesses, thus using intelligence to make choices.

Sattler (2001) emphasized that current theories of intelligence stress the inclusion of g along with the other factors that various theorists have proposed. Matthews, Zeidner, & Roberts (2004) state that “a single factor, psychometric g, is an extremely naïve conceptualization of intelligence” (p. 89).

Emotional Intelligence Defined

Suggesting that intelligence is far more complicated than just g, proponents of the construct of emotional intelligence have pushed it into the forefront of
alternate theories of intelligence, creating attention in the psychological and vocational professions over the past decade (Caruso, Mayer, & Salovey, 2002; Goleman, 1995; Matthews et al., 2004; Mayer & Salovey, 1997). Early researchers initially related emotional intelligence to the construct of social intelligence (Salovey & Mayer, 1990). Goleman (1995) popularized the construct in a book, describing emotional intelligence as a series of abilities that encompass self-control, persistence, recognition of emotions in self and others, and the ability to handle relationships (p. 34). In his book, Goleman (1995) cites the work of researchers Salovey and Mayer, whom he describes as viewing emotional intelligence as an ability to know one’s emotions, manage one’s emotions, motivate oneself, recognize emotions in others and handle relationships (Salovey & Mayer, as cited in Goleman, 1995). Later, Salovey & Mayer (1997) further refined their description of emotional intelligence as an ability to perceive and express emotion, understand emotion, and regulate emotion in one’s self and others. Salovey and Sluyter (1997) clarified emotional intelligence further by defining it as reasoning that takes emotions into account. Bar-On (1997) has described emotional intelligence as a group of non-cognitive traits that include adaptability, intrapersonal and interpersonal skills and overall mood. Unlike other researchers, Bar-On (1997) also includes the ability to manage stress in his description of emotional intelligence. His view of emotional intelligence as both trait and ability has earned the designation of a “mixed model” of emotional intelligence (Bar-On, 1997). Bar-On (1997, 2000) developed the first self-report scale designed to measure emotional intelligence. According to Bar-On (1997),
his scale, called the EQ-i, measures a variety of personality constructs, as well as ability to cope.

Trait models of emotional intelligence emphasize the differences between the Big Five personality traits and emotional intelligence, and they measure emotional intelligence through the use of self-report measures (Chapman & Hayslip, 2005).

Historically, the concept of emotional intelligence had been received with some skepticism, as researchers compared it to E.L. Thorndike’s concept of social intelligence (Thorndike, 1920). Thorndike (1920) proposed that social intelligence, which he described as an ability to understand others, represented a separate intelligence from general intelligence. Thorndike’s concept of social intelligence was rejected by his peers, who believed that it represented a duplication of general intelligence (Matthews et al., 2004). R.L. Thorndike and Stein (1937) noted that there were no means by which to quantify the construct, as it measured a verbal ability. Of interest, Goleman’s (2006) latest book focuses on social intelligence and how it goes “beyond emotional intelligence” (title page).

As noted earlier, an ability model of emotional intelligence was introduced in peer-reviewed psychological journals in the early 1990’s (see Mayer, DiPaolo & Salovey, 1990). The ability model proposes that emotional intelligence resembles other forms of abilities, and consists of a system for the processing of emotional information, resembling aspects of well-established intelligence systems (Matthews et al., 2004). Ability models measure emotional intelligence through the use of performance tests (Chapman & Hayslip, 2005). To distinguish it as a
legitimate form of intelligence, Mayer et al. (1999) proposed that emotional intelligence is based upon three criteria that have defined traditional measures of intelligence: 1) it is capable of being operationalized as an ability; 2) the measure will exhibit a degree of variance from other measures of intelligence; and 3) emotional intelligence will increase with age and experience (pg. 267). Using these three criteria to define emotional intelligence, the authors developed the Multifactor Emotional Intelligence Scale (MEIS), which measured 12 subscales of emotional intelligence. These subscales were subsequently divided into four aspects of abilities, including perception, assimilation, understanding, and management of emotions (Mayer et al., 1999). The authors contend that the MEIS correlates with other ability measures, but not to the degree that it is measuring existing intelligence constructs. Additionally, Mayer et al. (1999) note that the MEIS has modest predictive validity and that adults score higher than adolescents, both aspects consistent with traditional measures of intelligence.

Emotional Intelligence and Gender

Stereotypes abound regarding the emotional behavior of males and females, with men considered to be more rational and women more in tune with emotions. Early studies on social intelligence supported this notion (see Hunt, 1928). Hunt (1928) found that women scored higher than men on a measure of social intelligence used to assist in the selection of vocation. Women were able to demonstrate better judgment in the areas of interpretation of social information and observation of human behavior (Hunt, 1928). Later research by Petrides & Furnham (2000) found no significant gender differences in trait emotional
intelligence, while Lyusin & Favorov (2006) found that women are not as competent as men in control of emotional expression and emotional awareness.

*Emotional Intelligence and the Workplace*

The construct of emotional intelligence has been utilized in an attempt to understand employee functioning within the work setting (Goleman, 1995; Goleman et al., 2002; Kulshrestha & Sen, 2006; Sy, Tramm and O’Hara, 2006; Wright and Cropanzano, 2000). Goleman (1995) and Goleman et al. (2002) suggest that emotional intelligence is the underpinning for learning fundamental skills such as social awareness, self-awareness and self-management. Emotional competence allows one to utilize emotional intelligence. Goleman (1995) asserts that these emotional competencies are learned abilities that can apply to the workplace. Thus, to be successful in the workplace, an employee must possess emotional intelligence and/or possess the requisite ability to develop the competency (Goleman, 1995).

Do employees with higher levels of emotional intelligence experience greater job satisfaction? Kulshrestha and Sen (2006) found a positive correlation between high levels of emotional intelligence and subjective well-being among executives. Sy et al. (2006) found that high levels of emotional intelligence were positively associated with job satisfaction among food service workers. Additionally, they found that the emotional intelligence of the employee’s manager was positively correlated with the job satisfaction of workers with low emotional intelligence. Employees with high levels of emotional intelligence were less influenced by the level of managerial emotional intelligence, suggesting that
employees with higher levels of emotional intelligence may be more likely to
have higher levels of job satisfaction because they are more adept at the appraisal
and regulation of their own emotions as well as the emotions of others. Further,
the results of this study suggest that employees can be positively affected by
managerial emotional intelligence when they are struggling with their own lack of
self-awareness and interpersonal skills (Sy et al., 2006).

Muhammad (2006) measured the effect of emotional intelligence on job
satisfaction with a heterogeneous sample of 200 workers. She found no
correlation between job satisfaction and emotional intelligence among the
participants. Donaldson-Feilder & Bond (2004) also report that emotional
intelligence was not correlated to job satisfaction in a large heterogeneous
population.

Bedwell (2003) has suggested that emotions may affect how individuals make
decisions, plan and organize daily tasks, how they interact with colleagues and
how creative they are in the workplace. Those employees who possess higher
emotional intelligence may represent higher value to the employer, while those
with lower levels of emotional intelligence may actually be detrimental to the
work environment (Bedwell, 2003).

Mental health professionals and emotional intelligence

Zeidner et al. (2004) have suggested that the construct of emotional
intelligence be clarified. Additionally, they express concern that measures of
emotional intelligence are being used to evaluate worker performance in those
employees who are not working in fields where such a skill is desirable or
necessary, although they do not specify what fields would not benefit from this skill. The authors posit that measures of emotional intelligence be used only in jobs where emotional skills such as empathy and conflict resolution are part of the job description. They note that the mental health field is one such arena where it is required that workers possess adequate levels of emotional intelligence in order to perform well in the work environment. Mayer and Salovey (1997) have noted that much of the work of the psychotherapist, trained in recognizing and interpreting emotions, is aimed toward the goal of helping others develop higher levels of emotional intelligence.

Mental health professionals should, according to the U.S. Department of Labor (2007), possess skills that include social perceptiveness, judgment and decision-making. Social perceptiveness is described as “being aware of the reactions of others and understanding why they react as they do” (U.S. Department of Labor, 2007). This description can be directly related to the construct of emotional intelligence, which places emphasis on the meaning of emotions and the ability to respond to emotional issues in an effective manner.

In an examination of the role emotional intelligence plays in counselor self-efficacy, Martin, Easton, Wilson, Takemoto, and Sullivan (2004) measured differences in emotional intelligence between counseling and non-counseling participants. They found that levels of emotional intelligence were significantly higher for professional counselors. The authors suggest that emotional intelligence may be a “core attribute” of professional counselors that distinguishes them from other professions (Martin et al., p. 27). Further, Easton, Martin, &
Wilson (2008) suggest that emotional intelligence may be a significant component in preparation for a counseling career.

**Job Satisfaction among Mental Health Professionals**

Job satisfaction can be described as a positive emotional state resulting from the characteristics and aspects of a work setting (Arches, 1991; Dressel, 1982; Jayaratne & Chess, 1984), and there appears to be multiple factors that influence satisfaction with a job (Acker, 1999). Tett & Meyer (1993) describe job satisfaction as being related to a worker's affective attachment to the job, whether in its entirety or within various aspects. There appear to be multiple aspects of a job that influence satisfaction, including task variety (Butler, 1990), comfort, challenge, role conflict and role ambiguity (Jayaratne & Chess, 1984), and commitment and attitude toward the job (Tett & Meyer, 1993). Aarons & Sawitzky (2006) found that organizational culture and climate affect attitude and turnover in mental health settings.

Burnout is a negative psychological experience related to a job (Daley, 1979; Maslach, 1980). It can contribute to a myriad of physical and emotional problems that can influence job satisfaction. Daley (1980) examined burnout among social service workers. He noted that the common factors of uncomfortable working conditions, barriers to the attainment of goals, ambiguous role prescriptions and the necessity of reconciling incompatible demands (pg. 22) all played a role in the job frustration evidenced by this population. Furthermore, Daley (1980) suggested that exerting more control over the handling of their caseload may lead social service workers to feel less dissatisfied with their work. Daley (1980) also
suggested that those who are not appropriate for this field should be encouraged to seek work that is more suitable to their needs. Karasek (1979) also found that mental health workers who experienced high work demands, low decision latitude and low support at work appeared to be at higher risk of burnout.

The relationship between job satisfaction and burnout appears to be complex. Burned-out mental health professionals may exhibit symptoms of emotional exhaustion and depersonalization (Maslach, 1980). Another factor related to burnout is compassion fatigue. Researchers suggest that it may play a role in the job satisfaction of mental health workers (Bride & Figley, 2007). A study with social workers found that a significant number of participants demonstrated symptoms of compassion fatigue, including anxiety, insomnia, depression, and PTSD. The author notes that researchers have yet to determine how much compassion fatigue enters into a clinician’s decision to leave the field (Bride, 2007). It may prove to be an important factor in job satisfaction as research progresses in this arena.

A study by DeStefano, Clark, Potter, & Gavin (2005) found evidence of higher levels of job satisfaction among psychiatrists, medical doctors, and administrators when compared to therapists, paraprofessionals and social workers. The authors suggest that level of job satisfaction increases with level of education. Additionally, these authors found that geographic location may influence job satisfaction among mental health workers, specifically that mental health professionals in rural settings may experience less job satisfaction than those in more urban settings (DeStefano et al., 2005). The authors also found that there
was no difference in job satisfaction due to years in the profession. However, those who had been with an agency the longest reported greater job satisfaction (DeStefano et al., 2005). Organization, supervision, social status, and moral values also appeared to play an important role in job satisfaction among rural mental health professionals. The authors suggest that improvements in salary, supervision, job security and advancement opportunities may reduce turnover in rural settings (DeStefano et al., 2005).

An additional factor impacting job satisfaction among mental health professionals is that of client population (Acker, 1999). This author found that social workers derived less job satisfaction from working with severely mentally ill clients a large percentage of the time. Additionally, Acker (1999) found that social workers who had been in the field the longest had better success with dealing with this type of work stress (Acker, 1999).

Improvement of staff morale may also be a critical factor in job satisfaction and retention. Managerial attitudes of honesty, worker respect, open communication and integrity were found to be predictors of job satisfaction in a study reported by Aaronson, Sieveking, Laurenceau, & Bellet (2003). Balloch, Pahl, & McLean (1998) found that worker job satisfaction was increased when staff worked as a team and felt challenged in their work. Additionally, the authors found that issues surrounding compensation and opportunity for promotion appear to impact job satisfaction.
Gender and Work

Gender can be defined as a construct consisting of “biological, psychological, and social factors,” and is generally a product of social and cultural factors (Barnett, Marshall, Raudenbush, & Brennan, 1993, p. 795). Beliefs regarding gender influence sex role attitudes and gender specific roles, while sex differences describe innate differences primarily attributed to biology. Thus, a person could be male or female through genetics, while assuming roles contrary to those expected from their biological origin.

In the world of work, gender roles have played an important part in the selection and promotion of workers. Historically, society has viewed male workers as being more aggressive, forceful, independent, and decisive than their female counterparts (Heilman, 2001). Conversely, women have been viewed as being kind, helpful, sympathetic and concerned about others (Heilman, 2001). In a review of the literature spanning several decades, Schein (2001) found that males continue to be judged as emotionally stable, strong, assertive and workplace achievers, while women are viewed as emotionally unstable, weak and timid. DeArmond et al. (2006) found that college aged participants perceived men as being better equipped to handle stressful situations and able to adapt to physical demands of a job, while women were perceived as being better at learning, interpersonal relationships and cultural issues. Male participants rated women less favorably than did female participants in this study. Powell and Butterfield (2002) found that study participants believed that good managers
possess primarily male characteristics. The adage, "think manager – think male" appears to still apply to the modern day workforce (Schein, 2001).

Gender and Job Satisfaction

Studies examining the role of gender as it affects job satisfaction have yielded conflicting results. Frone (2000) examined the role of work to family conflict as it applied to employee psychiatric disorders, and found that gender did not moderate the effects of work to family conflict. Indeed, both males and females reported debilitating psychiatric effects when work problems interfered with family life (Frone, 2000).

Johnson and Spector (2007) examined the behaviors of surface acting and deep acting within the workplace and their role in job satisfaction. Surface acting is defined as expressing company approved feelings only when observed, while deep acting behaviors involve the actual feeling of emotions that are required by the employer. Johnson and Spector (2007) found that surface acting had a negative impact on women, contributing to emotional exhaustion, decreased job satisfaction and reduced affective well-being. This effect was not found for men. The additional factor of job autonomy affected both males and females in terms of a lowered sense of well-being and job satisfaction when jobs did not afford autonomy.

One factor that affects job satisfaction is level of workplace stress (Gonzales-Morales, Peiro, Rodriguez, & Greenglass, 2006). Women who used social support as a means of coping with job stress reported fewer psychosomatic complaints, while both males and females who used direct action as a coping measure
reported less psychological distress at the workplace. The authors suggest that social support may not be as available to males, thus negatively affecting their job satisfaction (Gonzales-Morales et al., 2006). Shinn, Rosario, Myrch and Chestnut (1984) found that social support was more available for female human service workers, thus reducing job strain and increasing job satisfaction. The authors suggest that seeking social support is more comfortable for women than it is for their male counterparts.

Heilman (2001) makes the point that stereotypes are descriptive, as well as prescriptive. Thus, not only do people believe that males and females behave a certain way, those who are the focus of the stereotyping may begin to act in that prescribed fashion, thus perpetuating the stereotype. Women may therefore believe that they have little chance of job growth, and feel inherently less satisfied with their jobs (Heilman, 2001).

*Emotional Intelligence and Job Satisfaction among Mental Health Professionals*

While the examination of emotional intelligence among the mental health worker population is not extensive, there is an abundance of research regarding this population as it relates to job satisfaction. Potter (2006) examined the role of emotional intelligence in the burnout syndrome in his dissertation research. The author found that there appears to be a relationship between the constructs of emotional intelligence and burnout syndrome along multiple dimensions of the Emotional Judgment Inventory (EJI) and the Maslach Burnout Inventory (MBI) within a population of mental health workers.
Is it possible, then, that higher levels of emotional intelligence can increase a mental health professional’s job satisfaction? Odinska-Bulik (2005) examined stress as a contributing factor to job dissatisfaction among human service workers. She found that study participants identified work overload, lack of reward and social relations to be the most stressful components of their jobs. Odinska-Bulik (2005) sought to determine the health consequences of job stress, and found that there was only a slightly significant effect of higher levels of emotional intelligence associated with the perception of occupational stress and the prevention of negative health outcomes. The author does suggest that an ability to effectively deal with emotions in the workplace may directly relate to the stress experienced by human service workers.

Potter (2006) suggests that further research is needed to clarify the role of emotional intelligence in the satisfaction mental health professionals derive from their work. Wong & Law (2002) and Zeidner et al., (2004) suggest that emotional intelligence carries more importance in jobs that require higher levels of emotional functioning. The suggestion that there may be a link between the degree of emotional intelligence and job satisfaction among mental health professionals should be pursued, as it could influence the training of new professionals entering the field, reducing levels of turnover and stress.

Study Rationale

The skills and abilities required of mental health professionals are diverse in nature. Many of them directly relate to emotional intelligence, which requires an ability to perceive and express emotion, assimilate emotion, and regulate emotion.
in oneself and in others (Mayer & Salovey, 1997). The Occupational Information Network (O*NET Online, U. S. Department of Labor, 2004) outlines a number of skills that mental health professionals should possess. These skills include active listening, social perceptiveness and critical thinking. Active listening is defined as the ability to listen to what others are saying and being able to respond appropriately; social perceptiveness requires an awareness of the reactions of others and the reasons behind their reactions; and critical thinking involves using logic and reasoning to identify strengths and weaknesses of alternative solutions or approaches to problems (O*NET Online, U. S. Department of Labor, 2004). If a mental health professional does not possess these abilities, it is possible that they become more susceptible to job stressors and subsequent lack of job satisfaction. Examining the relationship between emotional intelligence and job satisfaction among mental health professionals may offer a new perspective on the significant problems associated with job dissatisfaction. The examination of gender as a factor that influences emotional intelligence and job satisfaction among this profession adds to the depth of the current discussion.

Statement of Purpose

The intent of this study is to establish a conceptual link between the constructs of emotional intelligence and job satisfaction among a population of male and female mental health professionals. It seeks to determine whether higher levels of emotional intelligence can predict a higher level of job satisfaction experienced by mental health professionals, and whether or not gender differences exist in levels of emotional intelligence and job satisfaction within this population.
Clarification of these potential relationships may provide critical information for the training of mental health professionals, with the goal of increasing job satisfaction and reducing the high rate of professional attrition associated with this profession. The construct of emotional intelligence will be measured using the *Emotional Judgment Inventory* (EJI), (Bedwell, 2003). This model hypothesizes that emotional intelligence consists of four dimensions: 1) appraisal and expression of emotions, 2) regulation of emotions, 3) understanding emotions, and 4) using emotions in problem-solving (Salovey & Mayer, 1990). The EJI split the dimensions of appraisal and expression of emotions due to their conceptual distinction (Bedwell, 2003). The EJI utilizes seven subscales that include the following: Being Aware of Emotions, Identifying Own Emotions, Identifying Others’ Emotions, Managing Others’ Emotions, Using Emotions in Problem Solving, and Expressing Emotions Adaptively (Bedwell, 2003).

The *Minnesota Satisfaction Questionnaire* (MSQ), (Weiss, Dawis, England, & Lofquist, 1967) will be used to measure job satisfaction. The MSQ is based upon the Minnesota Theory of Work Adjustment model (Dawis et al., 1964), which posits that job satisfaction is influenced by the relationship between workers’ needs and the reinforcer system in the workplace. The MSQ has twenty subscales with five items in each, measured by a five item scale. There is also an overall job satisfaction score based on twenty items derived from the subscales. The subscales of the MSQ include the following: Ability Utilization, Achievement, Activity, Advancement, Authority, Company Policies and Practices, Compensation, Co-Workers, Creativity, Independence, Moral Values,
Recognition, Responsibility, Security, Social Service, Social Status, Supervision – Human Relations, Supervision – Technical, Variety, Working Conditions, and General Satisfaction. These subscales are further divided into two measures of job satisfaction – intrinsic and extrinsic satisfaction.

Research Questions, Research Hypotheses, and Null Hypotheses

1. Is there a difference between the emotional intelligence of males and females as measured by the seven subscales of the Emotional Judgment Inventory?

Ha₁: There will be a significant difference between the emotional intelligence of males and females as measured by the seven subscales of the Emotional Judgment Inventory.

Ho₁: There will be no significant difference between the emotional intelligence of males and females as measured by the seven subscales of the Emotional Judgment Inventory.

2. To what degree do the seven subscales of the Emotional Judgment Inventory predict job satisfaction among male mental health professionals, as measured by the Minnesota Satisfaction Questionnaire?

Ha₂: The seven subscales of the Emotional Judgment Inventory will significantly predict job satisfaction among male mental health professionals as measured by the Minnesota Satisfaction Questionnaire.

Ho₂: The seven subscales of the Emotional Judgment Inventory will not significantly predict job satisfaction among male mental health professionals as measured by the Minnesota Satisfaction Questionnaire.

3. To what degree do the seven subscales of the Emotional Judgment Inventory
predict job satisfaction among female mental health professionals as measured by the *Minnesota Satisfaction Questionnaire*?

**Ha**3: The seven subscales of the *Emotional Judgment Inventory* will significantly predict job satisfaction among female mental health professionals as measured by the *Minnesota Satisfaction Questionnaire*.

**Ho**3: The seven subscales of the *Emotional Judgment Inventory* will not significantly predict job satisfaction among female mental health professionals as measured by the *Minnesota Satisfaction Questionnaire*.

**Limitations of this Study**

This study will ask participants to rate both levels of satisfaction with their jobs and their perception of their level of emotional intelligence. As such, the first limitation is that of self-report. There is the risk that individuals will misinterpret items or not respond in a forthright manner, resulting in response bias. Additionally, participants may attempt to impress or please the researcher by skewing their responses in a positive direction. Participation in this study will be voluntary and based upon the availability of mental health professionals in varying professional settings. As such, randomization will not be possible, creating the potential for extraneous variables influencing the results.

**Delimitations**

The narrow selection of study participants allows this study to be feasible. The study seeks to include those mental health professionals who have earned a bachelor’s degree or more. The sample population will include a number of mental health professionals who have varying job positions and levels of
education. By focusing on this population, the ability to generalize to a specific mental health professional population may be negatively impacted.

Definition of Terms

Emotional Intelligence: The ability to identify and express emotions, understand emotions, assimilate emotions in thought, and regulate emotions in the self and others.

Being Aware of Emotions: The ability to effectively and accurately assess internal emotional states.

Identifying Own Emotions: Being aware and accurately assessing internal emotional states.

Identifying Others' Emotions: Being aware and accurately assessing the internal emotional states of others.

Managing Own Emotions: The ability to induce effective coping strategies to regulate and maintain internal affective states.

Managing Others' Emotions: The ability to implement strategies to effectively improve or maintain others’ emotions.

Using Emotions in Problem Solving: Effectively identifying and using emotional information in problem solving.

Expressing Emotions Adaptively: The ability to relay internal emotional states in the appropriate manner within social interaction.

Job Satisfaction: Positive emotional state resulting from the appraisal of the job situation.
Mental Health Professional: An individual with a Bachelor's, Master's or Doctoral degree in mental health who is employed at least 51% of the time in a non-administrative position within a setting whose goal is to provide mental health services to clients. This includes social work, counseling and psychology.

Summary

Chapter One has presented an overview of the research under consideration. A review of emotional intelligence and job satisfaction among mental health professionals was presented. Additionally, the role gender may play in this arena was discussed. Measures of the constructs of emotional intelligence and job satisfaction were presented. Research questions, research hypotheses, null hypotheses, limitations, delimitations and definition of terms used in this study were included.
CHAPTER TWO

Review of the Literature

This chapter will provide an overview of the constructs of emotional intelligence and job satisfaction. The first section will briefly discuss the evolution of theories relating to emotional intelligence, and how its definition has caused disagreement among theorists. A discussion of emotions and the link between emotions and intelligence will be discussed. Gender differences within the construct of emotional intelligence will be reviewed. The second section will explore the construct of job satisfaction, with an emphasis on the mental health professional. It will also address any differences between males and females in this arena. The third section will provide an exploration of the relationship between emotional intelligence and job satisfaction, both among the general population as well as mental health professionals.

Evolution of Theories Relating to Emotional Intelligence

*Social Intelligence as a Precursor to Emotional Intelligence*

Thorndike (1927) proposed that there are “clusters” of intelligence that include social, concrete, and abstract intelligence. He described social intelligence as an ability to understand others and act wisely in human relations. His theories were dismissed, in part because he provided no means of empirical measurement of these constructs (Sattler, 2001). However, early theorists found some validity to the construct of social intelligence, particularly as it related to vocational selection. Hunt (1928) examined social intelligence and its differences from personality factors. Measuring social intelligence on the George Washington
Social Intelligence Test, Hunt (1928) found a fifty percent correlation between social and abstract intelligence, and a much lower correlation between mechanical ability and social intelligence. She also found that older people scored higher in areas involving social information, as did men. However, women displayed better judgment in social situations, and performed higher than men in tasks requiring observation of human behavior (Hunt, 1928). She suggested that scales measuring social intelligence should be applied to vocational settings, and used for hiring personnel, as there appeared to be a relationship between social intelligence and job suitability (Hunt, 1928).

Further research on social intelligence (Ford & Tisak, 1983; Keating, 1978) examined Thorndike’s (1920) early model. These researchers used specific indicators of behavioral effectiveness to measure levels of social intelligence. Factor analysis suggested that measures of social intelligence had greater power to predict behavioral measures of social effectiveness, as opposed to measures of academic intelligence (Ford & Tisak, 1983; Keating, 1978). The authors concluded that social intelligence is an empirically valid domain when measures of behavioral effectiveness are utilized.

Salovey and Mayer (1990) initially suggested that the ability to perceive one’s own and other’s emotions, motivations and behaviors was a subset of social intelligence. Additionally, Salovey and Mayer (1990) included the ability to handle interpersonal situations as an aspect of social intelligence. Later, these two researchers would modify their definition and label it “emotional intelligence.”
Of interest, Goleman (2006), who popularized the construct of emotional intelligence, has written a book that examines social intelligence, and describes it as "moving beyond emotional intelligence" (title page). Goleman (2006) states that there are two categories of social intelligence: social awareness and social facility (p. 84). Social awareness is described as sensing another's inner state, understanding feelings and thoughts and understanding complicated social situations. Social facility describes what is done with social awareness, and is described as the ability to interact smoothly with others, present oneself well, influence others and care about others. Goleman (2006) distinguishes emotional and social intelligence by viewing social intelligence as being an "aptitude for relationships" (p. 83).

*Emotions and Intelligence*

Psychologists have long struggled with the concept of emotion. Leeper (1948) summarized the negative view of emotion as suggested by psychologists, noting that emotions were considered to be weak and a sign of disorganization, while logic was viewed as superior. Leeper (1948) proposed that psychology stop viewing emotion in such a negative manner, and understand that it plays a critical role in human behavior.

Goleman (1995) described emotions as "impulses to act, the instant plans for handling life that evolution has instilled in us" (p. 6). He notes that emotions translate into actions, and that each emotion plays a unique role in human behavior (p. 6). Further, Goleman (1995) notes that the biological propensity to
act is influenced by our culture and life experience. As such, emotional reactions to situations may vary between individuals.

Emmerling and Cherniss (2003) have described emotions as being “organized psychological responses to events that include physiological, experiential, and cognitive aspects” (p. 154). The authors emphasize that emotions are important and that emotional reactions play a role in professional life (Emmerling & Cherniss, 2003).

Mayer et al. (1999) have described emotions as “internal events that coordinate many psychological subsystems including physiological responses, cognitions, and conscious awareness,” (p. 267). The fusion of the two words, “emotion” and “intelligence” allowed for a clearer understanding of the two constructs (Mayer, 2001). Ben Ze’ev (2000) suggests that emotional intelligence represents an interplay between intellectual thought and emotion.

Emotional or Social Intelligence?

When psychologists Salovey and Mayer coined the term “emotional intelligence,” they initially considered emotional intelligence to be a subset of social intelligence (Salovey & Meyer, 1990). At the time of its inception, Salovey and Mayer (1990) had defined emotional intelligence as the “ability to monitor one’s own and others’ feelings and emotions, to discriminate among them and to use this information to guide one’s thinking and actions” (p. 189). Mayer and Salovey (1997) later viewed emotional intelligence as an ability to perceive and express emotion, understand emotion, and regulate emotion in one’s self and others. Salovey and Sluyter (1997) clarified emotional intelligence further by
defining it as reasoning that takes emotions into account. Later, Mayer, Salovey & Caruso (2000) expanded their definition of emotional intelligence by describing it as an ability that operates across both cognitive and emotional processes. Mayer et al. (2000) do not believe that emotional intelligence can be changed, and they contend that many components of emotional intelligence are affected by genetic, biological and early learning contributions that interfere with the potential for change.

Mayer et al. (1999) proposed that emotional intelligence is a legitimate, separate intelligence based upon three criteria that define intelligence: 1) it is capable of being operationalized as an ability; 2) the measure will exhibit a degree of variance from other measures of intelligence; and 3) the ability to develop emotional intelligence will be dependent upon age and experience (p. 267). Using these three criteria to define emotional intelligence, the authors developed the Multifactor Emotional Intelligence Scale (MEIS), which measured 12 subscales of emotional intelligence. These subscales were divided into four aspects of abilities, including perception, assimilation, understanding, and management of emotions (Mayer et al., 1999). Based upon use of the MEIS, the authors have concluded that the conventional standards for a separate emotional intelligence have been met. Later, a shorter version of the MEIS, the Mayer-Salovey-Caruso Emotional Intelligence Test (MSCEIT) was developed, which measures ability EI (Mayer, Salovey, & Caruso, 2002a, as cited in Kafetsios & Zampetakis, 2008).
Ciarrochi et al. (2000) evaluated the emotional intelligence construct through the use of the MEIS, and found that emotional intelligence was not related to overall IQ, but did relate to several personality measures, including empathy. Emotional intelligence was also related to life satisfaction, as well as an ability to manage moods. The authors noted that IQ also appeared to be related to the management of moods (Ciarrochi et al., 2000).

Other researchers have presented their definitions of emotional intelligence. Goleman (1995), who is widely credited with popularizing the term, has defined emotional intelligence as including such characteristics as self-awareness, persistence, motivation, social skills, empathy.

Bar-On (1997) has described emotional intelligence as a group of non-cognitive abilities that include adaptability, intrapersonal and interpersonal skills and overall mood. Unlike other researchers, Bar-On (1997) also includes the ability to manage stress in his description of emotional intelligence. His is a mixed model of emotional intelligence, defining EI as a combination of traits and abilities. As noted earlier, Bar-On (1997) developed the EQ:i, the first instrument to measure emotional intelligence.

McCallum and Piper (2000) have defined emotional intelligence as a general construct that includes emotional, personal and social abilities that influence an overall ability to effectively cope with environmental demands and pressures (p. 123).

Bedwell (2003) postulated that emotions may determine how people make decisions, solve problems, and interact with others. Additionally, Bedwell (2003)
has emphasized that emotional intelligence is important within the work setting. In the absence of a concise model of emotional intelligence, Bedwell (2003) developed the *Emotional Judgment Inventory*, which measures an individual’s typical performance in seven different aspects of emotional intelligence.

Mayer et al. (2000) describe emotional intelligence as zeitgeist, noting that it has had enormous impact on popular culture. Matthews et al. (2004) note that “the pendulum has swung toward a view that the intellect has been over-valued, at the expense of emotions, leading to lack of self-understanding and impoverished social relationships” (p. 8).

Nelis, Quoidbach, Mikolajczak and Hansenne (2009) note that research examining emotional intelligence has fallen into two categories. One is ability, which assesses EI through intelligence tests, and the other is the trait model, which evaluates EI through questionnaires. The authors note that ability tests attempt to capture the maximum limits of performance, while trait tests capture the individual’s typical performance. They note that a newer model is emerging, one that includes knowledge, ability and traits (Nelis et al., 2009). Knowledge refers to what people know about emotions, and subsequently ability and traits factor into the individual’s overall response (Nelis et al., 2009).

It is clear that the construct of emotional intelligence continues to undergo refinement. Researchers do seem to agree that it is an important construct, and that it may help psychologists understand how people process and manage emotional content.
Emotional Intelligence and Gender

As noted in a preceding chapter, persistent stereotypes abound regarding the way males and females process and express emotions. A brief review of the literature supported the contention that males and females are viewed as being very different in the workplace, with men perceived as being more rational, and women more emotional. For example, Mehrabian, Young, & Sato (1988) found that women were more empathic than men. According to the authors, empathic persons are more emotional, pleasant, and more verbally expressive regarding their feelings. This stereotype overlaps the literature on gender and emotional intelligence.

In early studies on social intelligence, Hunt (1928) found that women scored higher than men on a measure of social intelligence. While men were better at the interpretation of social information, women scored significantly higher in areas involving judgment in social situations and observation of human behavior (Hunt, 1928).

In a study that examined gender differences in emotional intelligence, Bindu & Thomas (2006) found significant differences in predictor variables for male and female cognition and non-cognition. The authors found interdependency between the cognitive variables of intelligence and creativity, and the non-cognitive variables of emotional intelligence and maladjustment. The authors found a close relationship between maladjustment and dimensions of emotional intelligence across both gender groups. Maladjustment and emotional intelligence were significantly correlated (Bindu & Thomas, 2006). Maladjustment was a
significant predictor of level of IQ, creativity and emotional intelligence for male participants, while intelligence and creativity were unrelated to maladjustment in the female population (Bindu & Thomas, 2006). The authors concluded that females are less affected by the negative consequences of personality problems than are males. Emotional intelligence played a greater role in determining overall levels of creativity and maladjustment among females (Bindu & Thomas, 2006).

Lyusin and Favorov (2006) examined the commonly held belief that women are more competent in the emotional sphere – good at sensing the emotions of others, but not at controlling their own emotions – and found that this is not valid. When comparing gender with measures of personality and emotional intelligence, Lyusin and Favorov (2006) found that men demonstrated a higher correlation between measures of emotional intelligence and Neuroticism. Specifically, men exhibited a higher emotional awareness and control of emotional expression. Lyusin and Favorov (2006) did not find any significant correlations between measures of emotional intelligence and personality factors for women. Neither gender demonstrated significantly better control of emotion or management of emotion than the other.

However, a study by Kafetsios (2004) found that females scored higher on emotion perception than males. Conversely, Petrides and Furnham (2000) gave 260 participants a measure of trait emotional intelligence, and found that self-estimated emotional intelligence was higher among men, while females scored higher on a measure of social skills. Further, the authors did not find a significant gender difference in total measured trait emotional intelligence (Petrides &
Furnham, 2000). Of interest, in this study, women tended to self-derogate their level of emotional intelligence, while men inflated theirs.

Ciarrochi et al. (2000) found that women scored higher on a measure of emotional intelligence and perception than did men. Schutte et al. (1998) also found that women scored higher on a measure of emotional intelligence than did men. Brackett, Mayer, & Warner (2004) found that women scored higher on measures of emotional intelligence than did men, and further noted that males who scored lower on the measure of emotional intelligence were more likely to experience difficulties with illegal drug use, deviant behavior, and relationships in general.

In an article summarizing the more popular measures of emotional intelligence, VanRooy & Viswesvaran (2004) found that females tend to outperform male counterparts on measures of emotional intelligence. For example, women scored higher on the Emotional Judgment Inventory subscales of Being Aware of Emotions and Using Emotions in Problem Solving. Males, on the other hand, scored higher on the Managing one’s Emotions subscale of this instrument (VanRooy & Viswesvaran, 2004).

**Disagreement about the Existence of Emotional Intelligence**

Theorists have had difficulty agreeing on whether or not emotional intelligence exists as a separate intelligence. Matthews et al. (2004) note that psychology has already developed models of cognition and personality that encompass aspects of emotional intelligence. The authors question whether or not a separate construct of emotional intelligence can be adequately developed. Livingstone and Day
(2005) suggest that current methods of measuring emotional intelligence are inadequate, and that the construct cannot be defined appropriately. Further, Livingstone and Day (2005) argue that measures of emotional intelligence are being used to formulate decisions about employment and advancement. These measures, inadequately defined, may create more problems than those they may solve. Matthews et al. (2004) express similar concerns, noting that emotional intelligence may be a skill appropriate only to positions that require a worker to be involved with emotional content.

Summary

Psychology continues to attempt to create a definition of emotional intelligence that is separate from conventional definitions of intelligence. The results of these efforts have been inconclusive. Additionally, debate has continued with regard to which gender possesses higher levels of emotional intelligence. As many theorists believe that EI is important for vocational success, research on emotional intelligence and work has proliferated. The following section explores this application in depth.

Job Satisfaction

Job satisfaction can be described as a positive emotional state resulting from the characteristics and aspects of a work setting (Arches, 1991; Dressel, 1982; Jayaratne & Chess, 1984), and there appears to be multiple factors that influence satisfaction with a job (Acker, 1999). Tett & Meyer (1993) describe job satisfaction as being related to a worker's affective attachment to the job, whether in its entirety or within various aspects. There appear to be multiple aspects of a
job that influence satisfaction, including task variety (Butler, 1990), comfort, challenge, role conflict and role ambiguity (Jayaratne & Chess, 1984), and commitment and attitude toward the job (Tett & Meyer, 1993).

Job Satisfaction among Mental Health Professionals

Glisson & Durick (1988) found that skill variety and job ambiguity were the best predictors of job satisfaction among human service workers. Thus, the workers were most satisfied when there was less confusion about their work responsibilities and when they were allowed to use a variety of skills to complete their work. Further, Glisson & Durick (1988) found that an organization’s leadership and employee age were the two best predictors of a worker’s level of commitment, with older workers more committed to their jobs.

Aarons & Sawitzky (2006) found that organizational culture and climate affect attitude and turnover in mental health settings. The authors defined organizational culture as “norms and expectations of how people behave and how things are done in an organization” (p. 290). Culture affects work attitudes and employee behavior that ultimately contributes to the success or failure of an organization. Aarons & Sawitzky (2006) state that there are two types of organizational cultures in mental health settings: constructive and destructive. Constructive cultures provide support for employees and encourage growth, while destructive cultures stress conformity and are self-protective. The authors found that a constructive culture reduces turnover rates (Aarons & Sawitzky, 2006).

Related to job satisfaction is the concern of employee burnout, which is described as a negative psychological experience related to a job (Daley, 1979;
Maslach, 1980). In her early work on burnout, Maslach (1980) first described burnout as occurring frequently among helping professionals, described as people who are exposed, on a daily basis, to those who have multiple problems. Maslach (1980) believed that burnout could contribute to a myriad of physical and emotional problems that would influence job satisfaction.

Nearly thirty years after Maslach’s early work, burnout continues to be a source of concern for those in the mental health profession. Burnout has been described as a syndrome that involves both emotional and physical exhaustion, resulting in negative feelings about self, one’s clients and one’s job (Maslach, 1982; Maslach & Leiter, 1997; Rosenberg & Pace, 2006). A survey of behavioral health providers indicates that there is a high level of turnover of direct service professionals throughout the field and across multiple geographic locations (National Council of Community Behavioral Healthcare, 2002). Turnover can exceed 25% annually; increasing costs of recruitment and training, and impacting the quality of care (Argote, Insko, Yovetich & Romero, 1995). Turnover reduces staff morale, reduces productivity, and causes services to become inconsistent (Bingley & Westergaard-Nielson, 2004). Multiple studies have examined the role of burnout in the high level of turnover in mental health settings (Aarons, 2006; Aarons & Sawitzky, 2006; Bryant & Constantine, 2006; Evans, Huxley, et. al., 2006; Gilbody et al., 2006; Priebe, Fakhoury, & Hoffman, 2005). Daley (1980) examined burnout among protective service workers. He noted that the common factors of uncomfortable working conditions, barriers to the attainment of goals, ambiguous role prescriptions and the necessity of reconciling incompatible
demands (p. 22) all played a role in the job frustration evidenced by this population. Karasek (1979) also found that mental health workers who experienced high work demands, low decision latitude and low support at work appeared to be at higher risk of burnout. Furthermore, Daley (1980) suggested that exerting more control over the handling of their caseload may lead protective service workers to feel less dissatisfied with their work. Daley (1980) also suggested that those who are not appropriate for this field should be encouraged to seek work that is more suitable to their needs.

The relationship between job satisfaction and burnout appears to be complex. Burned-out mental health professionals may exhibit symptoms of emotional exhaustion and depersonalization (Maslach, 1980). Emotionally drained professionals may experience greater stress in dealing with their jobs. In a study that examined burnout and job satisfaction among social workers in Great Britain, Evans et al. (2006) found that high levels of stress and burnout relate to high demands at work and low decision-making ability. Forty-seven percent of those sampled showed significant levels of stress. The authors compared these results to a study that sampled psychiatrists, who reported significantly less job-related stress. One thought was that psychiatrists may have more decision latitude than line staff social workers, thus reducing their level of job-related stress (Mears, Pajak, & Kendall, 2004).

A study by DeStefano et al. (2005) also found evidence of higher levels of job satisfaction among psychiatrists, medical doctors, and administrators when
compared to therapists, paraprofessionals and social workers. The authors suggest that level of job satisfaction increases with level of education.

An additional factor impacting job satisfaction among mental health professionals is that of client population (Acker, 1999). This author found that social workers derived less job satisfaction from working with severely mentally ill clients a large percentage of the time. Thus, the less time social workers were engaged with severely mentally ill clients, the more satisfied they felt with their jobs. The author suggests that social work training does not prepare professionals for work with this type of client. Further, younger and less experienced social workers were much more likely to leave their jobs or leave the field entirely; suggesting that more seasoned professionals had developed methods of dealing with this type of work stress (Acker, 1999).

Improvement of staff morale may also be a critical factor in job satisfaction and retention. Managerial attitudes of honesty, worker respect, open communication and integrity were found to be predictors of job satisfaction in a study reported by Aaronson, Sieveking, Laurenceau, & Bellet (2003). Balloch, Pahl, & McLean (1998) found that worker job satisfaction was increased when staff worked as a team and felt challenged in their work. Additionally, the authors found that issues surrounding compensation and opportunity for promotion appear to impact job satisfaction. Clarity in organizational purpose and mission is also found to impact job satisfaction for mental health professionals (Balcazar, MacKay-Murphy, & Keys, 1998). The authors reviewed the literature to find common factors that may positively influence worker morale, and determined that
managerial support and on-going supervision appear to be critical to the well-being of mental health staff. The authors also note that the mental well-being of mental health workers has not received a great deal of attention (Balcazar et al., 1998). Gilbody et al. (2006) note that the cost of not attending to the well-being of staff is high when sick leave and turnover are factored into the equation.

Additionally, it has been suggested that those professionals entering the mental health field appear to be highly empathetic and sensitive, but also anxious, introverted and overly enthusiastic (Schaufeli, Maslach, & Marek, 1993). The authors suggest that these characteristics may negatively affect job satisfaction and retention. In another study, Koeske & Kirk (1995) found that those persons with an internal locus of control suffered less burnout and increased job satisfaction.

Geographic location may influence job satisfaction among mental health workers. DeStefano et al. (2005) found evidence that mental health professionals in rural settings may experience less job satisfaction than those in more urban settings. The authors found that 73% of the mental health professionals surveyed had been with their agency less than three years; close to 90% had been at their agency less than seven years. The authors found no difference in job satisfaction due to years in the profession. However, those who had been with an agency the longest reported greater job satisfaction. DeStefano et al. (2005) suggest that such factors as organization, supervision, social status, and moral values play an important role in job satisfaction among rural mental health professionals.
Further research suggested that improvements in salary, supervision, job security and advancement opportunities may also reduce turnover in rural settings (DeStefano, Clark, Gavin, & Potter, 2008).

**Job Satisfaction and Gender**

Multiple stereotypes exist regarding the manner in which males and females respond to emotional situations. These stereotypes persist in the workplace, where good managers are thought to possess male characteristics, rather than female characteristics (Powell, Butterfield, & Parents, 2002). DeArmond et al. (2006) found that men were perceived as being better able to handle stressful situations. However, women were perceived as being better at learning, and at handling interpersonal and cultural matters more effectively than males (DeArmond et al., 2006).

Studies examining the role of gender as it affects job satisfaction have yielded conflicting results. Frone (2000) examined the role of work to family conflict as it applied to employee psychiatric disorders, and found that gender did not moderate the effects of work to family conflict. Indeed, both males and females reported debilitating psychiatric effects when work problems interfered with family life (Frone, 2000).

Johnson and Spector (2007) examined the behaviors of surface acting and deep acting within the workplace and their role in job satisfaction. Surface acting is defined as expressing company approved feelings only when observed, while deep acting behaviors involve the actual feeling of emotions that are required by the employer. Johnson and Spector (2007) found that surface acting had a
negative impact on women, contributing to emotional exhaustion, decreased job satisfaction and reduced affective well-being. This effect was not found for men. The additional factor of job autonomy affected both males and females in terms of a lowered sense of well-being and job satisfaction when jobs did not afford autonomy.

One factor that affects job satisfaction is level of workplace stress (Gonzales-Morales et al., 2006). Women who used social support as a means of coping with job stress reported fewer psychosomatic complaints, while both males and females who used direct action as a coping measure reported less psychological distress at the workplace. The authors suggest that social support may not be as available to males, thus negatively affecting their job satisfaction (Gonzales-Morales et al., 2006). Shinn, Rosario, Myrch and Chestnut (1984) found that social support was more available for female human service workers, thus reducing job strain and increasing job satisfaction. The authors suggest that seeking social support is more comfortable for women than it is for their male counterparts.

Heilman (2001) makes the point that stereotypes are descriptive, as well as prescriptive. Thus, not only do people believe that males and females behave a certain way, those who are the focus of the stereotyping may begin to act in that prescribed fashion, thus perpetuating the stereotype. Women may therefore believe that they have little chance of job growth, and feel inherently less satisfied with their jobs (Heilman, 2001).
Summary

Job satisfaction was explored in this section, with an emphasis on the job satisfaction of those in the mental health field. Key aspects of job satisfaction among this population include burnout and high employee turnover. Multiple hypotheses were suggested to explain high levels of burnout and turnover within this population. Additionally, this section explored gender differences, which appear to affect coping mechanisms with regard to employment.

Emotional Intelligence and Job Satisfaction

Emotional Intelligence and Work

The construct of emotional intelligence has been utilized in an attempt to understand employee functioning within the work setting (Sy, Tramm & O’Hara, 2006; Wright & Cropanzano, 2000). Emotional skill has been determined to be an important asset to an employee. Goleman (1998) identified a large number of work-related competencies, two thirds of which were emotional in nature. High emotional awareness has been considered to be important for the workplace (Goleman, 1998; Salovey et al., 2000). Regulation of emotion in self and others is also an important work-based skill suggested by Goleman (1998). Empathy is another key element of emotional intelligence and may play an important role in the workplace. Matthews et al. (2004) note that empathy can be employed to facilitate an understanding of workplace conflicts and to assist in their resolution. Additionally, Matthews et al. (2004) note that handling the emotions of others is an important part of emotional intelligence, and consists of two sub skills: 1) influencing others, and 2) effectively communicating with others. All of these
components of emotional intelligence allow an employee to function at a distinct advantage over their less emotionally intelligent counterparts (Goleman, 1998). Further, Suliman and Al-Shaikh (2006) found that employees with higher levels of emotional intelligence exhibit higher levels of innovation and lower levels of conflict. Kafetsios and Zampetakis (2007) found that males who used emotion and could regulate emotion were able to express affect at work and experience a higher degree of job satisfaction than females. The authors suggest that emotional awareness and use of emotion can lead to the regulation of stress and negative emotion, so that work performance is enhanced.

Do employees with higher levels of emotional intelligence experience greater job satisfaction? Kulshrestha and Sen (2006) found a positive correlation between high levels of emotional intelligence and subjective well-being among executives. Sy et al. (2006) found that high levels of emotional intelligence were positively associated with job satisfaction among food service workers. Additionally, they found that the emotional intelligence of the employee’s manager was positively correlated with the job satisfaction of workers with low emotional intelligence. Employees with high levels of emotional intelligence were less influenced by the level of managerial emotional intelligence, suggesting that employees with higher levels of emotional intelligence may be more likely to have higher levels of job satisfaction because they are more adept at the appraisal and regulation of their own emotions as well as the emotions of others. Further, the results of this study suggest that employees can be positively affected by managerial emotional
intelligence when they are struggling with their own lack of self-awareness and interpersonal skills (Sy et al., 2006).

Bar-On (1997) sampled 314 participants from a variety of occupations and found that measures of emotional intelligence predicted a slightly significant relationship between total emotional intelligence scores and job satisfaction. Sense of competence on the job appeared to better predict higher levels of emotional intelligence.

Kafetsios and Zampetakis (2008) noted that emotional intelligence may influence job satisfaction due to its potential relationship to emotion awareness and emotional regulation, which may positively affect social relationships at work, thus enhancing work experience.

Emmerling and Cherniss (2003) note that emotions are linked with cognitive processes and therefore have an impact on career decision-making. The authors suggest that emotions may produce better decisions, not worse (Emmerling & Cherniss, 2003). Further, Emmerling and Cherniss (2003) believe that career counselors need to assess levels of emotional intelligence when working with clients, and help clients to work with the emotions surrounding career choices.

In a review of 243 articles found in career counseling journals, Dagley and Salter (2004) found that career decisions are not solely cognitive and that emotion plays a large role in career choice. Interestingly, the authors found that $g$ predicted only 4% of the variance in job performance in this meta-analysis (Dagley & Salter, 2004).
Emotional Intelligence and Job Satisfaction among Mental Health Professionals

Research suggests that emotional intelligence may be relevant to job satisfaction in the general population. But does this apply to mental health professionals? Odinska-Bulik (2005) examined stress as a contributing factor to job dissatisfaction among human service workers. Additionally, Odinska-Bulik (2005) examined the effects of job stress on the health of the workers. She found that study participants identified work overload, lack of reward and difficult social relations to be the most stressful components of their jobs. Results of this study (Odinska-Bulik, 2005) found that higher levels of emotional intelligence had only a slightly significant association with the prevention of stress and negative health outcomes. Odinska-Bulik (2005) suggests that an ability to effectively deal with emotional content in the workplace may directly relate to the level of stress experienced by human service workers. This suggestion is consistent with Kafetsios and Zampetakis (2008), who also suggest that the ability to manage emotional content in the workplace may enhance an employee’s sense of job satisfaction.

As noted earlier, Martin et al. (2004) and Easton et al. (2008) have suggested that emotional intelligence may be a core attribute of mental health counseling, and that teaching emotional intelligence may be of benefit to the field. Wong and Law (2002) suggest that emotional intelligence plays an important role in jobs that require higher emotional functioning. Potter (2006) examined the role of emotional intelligence in the burnout syndrome in his dissertation research. He
found that there appears to be a relationship between the constructs of emotional intelligence and burnout syndrome along multiple dimensions of the *Emotional Judgment Inventory* and the *Maslach Burnout Inventory* (MBI) within a population of mental health professionals. Specifically, Potter (2006) suggested that mental health professionals with lower levels of identifying and managing their own emotions may be more susceptible to emotional exhaustion within the work setting. Further, Potter (2006) found that mental health professionals who had lower levels of identification of own emotions, awareness of own emotions, and expression of own emotions (as measured by EJI subscales) reported a higher level of depersonalization on the MBI. Thus, those workers are more likely to detach from clients and their own feelings, possibly leading to lower levels of job satisfaction and performance. Potter (2006) suggests that further research is needed to determine whether or not higher levels of emotional intelligence play a role in the amount of satisfaction mental health professionals derive from their work.

Since mental health professionals work in the emotional arena, it may be reasonable to expect that if they had higher levels of emotional intelligence, they may also experience higher levels of job satisfaction. Additionally, it has been suggested by Zeidner et al. (2004) that higher levels of emotional intelligence may be more important in employees who work in emotionally-oriented fields such as mental health.
Summary

Chapter two explored the construct of emotional intelligence, its impact on gender, as well as its relationship to job satisfaction, among both the general population and mental health professionals. Research has begun to suggest that emotional intelligence may be positively correlated with job satisfaction. Research is examining whether or not mental health professionals, who by definition are assumed to possess such skills as emotional perceptiveness and empathy, may experience heightened job satisfaction as a result of higher levels of emotional intelligence. Thus far, the research, in early stages, has been inconclusive.
CHAPTER THREE

Methodology

This chapter provides an overview of the current study. An outline of the methodology is presented, including research purpose, design and statistical analyses, instrumentation, and data collection procedures.

Research Purpose

This study addressed three research questions that are pertinent to the relationship between emotional intelligence and job satisfaction among male and female mental health professionals. The purpose of this study was to investigate differences between levels of emotional intelligence among male and female mental health professionals, as well as to investigate whether aspects of emotional intelligence can predict job satisfaction among both male and female participants within this population.

Design and Statistics

This study used a causal-comparative research design (factorial analysis of variance) and a correlational research design (stepwise multiple regression). Gall, Gall and Borg (2003) describe causal-comparative research as a type of nonexperimental investigation in which researchers seek to identity cause and effect relationships by forming groups of individuals in whom the independent variable is present or absent, and then determining whether the groups differ on the dependent variable. The independent variable in causal-comparative research is categorical in nature (p. 296). In the first research question, a 2x7 factorial analysis of variance (ANOVA) was used to determine whether or not gender
exerts influence on emotional intelligence. Gall, Gall, & Borg (2003) note that any inference about causality on the basis of the collected data is necessarily tentative (p. 297).

A correlational research design was used in the second and third research questions, which examined the seven subscales of the EJI and their ability to predict level of job satisfaction for male and female mental health professionals, as measured by the overall job satisfaction scale of the MSQ. A correlational design seeks to discover the direction and magnitude of the relationship among variables (Gall, Gall, & Borg, 2003, p.323). A stepwise multiple regression statistic was used for this study. According to Tabachnick & Fidell (2001), regression analyses are used to predict the relationship between one dependent variable and several independent variables. In a stepwise multiple regression model, each independent variable is evaluated in terms of what it adds to the prediction of the dependent variable that differs from the predictability of the other independent variables (Tabachnick & Fidell, 2001, pg. 131).

Research Questions, Research Hypotheses, and Null Hypotheses

1. Is there a difference between the emotional intelligence of males and females as measured by the seven subscales of the Emotional Judgment Inventory?

H0: There will be a significant difference between the emotional intelligence of males and females as measured by the seven subscales of the Emotional Judgment Inventory.

Ha1: There will be a significant difference between the emotional intelligence of males and females as measured by the seven subscales of the Emotional Judgment Inventory.
Ho2: The seven subscales of the Emotional Judgment Inventory will not significantly predict job satisfaction among male mental health professionals as measured by the Minnesota Satisfaction Questionnaire.

2. To what degree do the seven subscales of the Emotional Judgment Inventory predict job satisfaction among male mental health professionals as measured by the Minnesota Satisfaction Questionnaire?

H\(a_2\): The seven subscales of the Emotional Judgment Inventory will significantly predict job satisfaction among male mental health professionals as measured by the Minnesota Satisfaction Questionnaire.

Ho2: The seven subscales of the Emotional Judgment Inventory will not significantly predict job satisfaction among male mental health professionals as measured by the Minnesota Satisfaction Questionnaire.

3. To what degree do the seven subscales of the Emotional Judgment Inventory predict job satisfaction among female mental health professionals, as measured by the Minnesota Satisfaction Questionnaire?

Ha3: The seven subscales of the Emotional Judgment Inventory will significantly predict job satisfaction among female mental health professionals as measured by the Minnesota Satisfaction Questionnaire.

Ho3: The seven subscales of the Emotional Judgment Inventory will not significantly predict job satisfaction among female mental health professionals as measured by the Minnesota Satisfaction Questionnaire.
Instruments

Demographic Questionnaire. A demographic questionnaire was given to participants. This questionnaire was used to gather data on age, gender, job setting, job title, degree, years in profession, years in current position, licensure status, job responsibilities, and number of clients seen each week.

Emotional Judgment Inventory. Emotional intelligence was measured through the use of the Emotional Judgment Inventory (EJI), whose seven subscales include the following: Being Aware of Emotions, Identifying Own Emotions, Identifying Others’ Emotions, Managing Own Emotions, Managing Others’ Emotions, Using Emotions in Problem-Solving, and Expressing Emotions Adaptively. The EJI was developed by Bedwell (2003), and consists of 80 statements to which participants respond using a scale from 1 to 7, absolutely disagree to absolutely agree. Bedwell (2003) describes the EJI as a self-report instrument based upon the mixed model of emotional intelligence. He notes that the initial theory of emotional intelligence, as introduced by Salovey and Mayer (1990), was used to form the basis for the EJI. Initially, Salovey and Mayer (1990) proposed a three-factor model of emotional intelligence that consisted of (1) appraising and expressing emotions; (2) managing emotions, (3) utilizing emotions (p. 4). Later, Mayer and Salovey (1997) modified their model, adding a fourth dimension of understanding emotions. Bedwell (2003) notes that research suggests that there is a high correlation between the Mayer and Salovey (1997) model of emotional intelligence and self-report measures. To address concern regarding self-report measures, Bedwell (2003) notes that his instrument has a more “narrow scope”
than other measures of mixed models (p. 4). In developing the EJI, Bedwell (2003) refined the Salovey and Mayer (1990) model by further elaborating upon the appraisal factor and separating the expression of emotions from the appraisal of emotions. He further split the identification of emotions and management of emotions, creating seven subscales of emotional intelligence.

Reliability estimates for the EJI range from .75 to .90 in the norm sample, and test-retest estimates ranged from .64 to .83 for the four week interval between testing sessions, and .48 to .69 for the eight week interval (Bedwell, 2003, p. 19). Validity of the test construct was measured on multiple dimensions that support a unitary view of validity (Bedwell, 2003). These include interscale correlations that indicate that the scales of the EJI are positively related to one another, as well as both exploratory and confirmatory factor analyses that supported the validity of a seven factor model of emotional intelligence (Bedwell, 2003). Additionally, patterns of correlations between the EJI and other measures of emotional intelligence, including the Trait-Meta-Mood Scale (Salovey & Mayer, 1990) and the Emotional Intelligence Scale (Shutte et al., 1998) were found, suggesting convergent validity. The scales of the EJI demonstrated no significant correlation with scales of the Wonderlic Personnel test, a test of general cognitive ability, nor with the scales of the Wechsler Abbreviated Scale of Intelligence, a test of intelligence (Bedwell, 2003). The author concluded that the scales of the EJI tend to have low to zero correlations with measures of intelligence (p. 29). Further, Bedwell (2003) asserts that measurement of emotional intelligence with the EJI is
distinguishable from measures of personality constructs such as the 16PF and the Interpersonal personality Item Pool.

_The Minnesota Satisfaction Questionnaire_ (MSQ). The MSQ (Weiss et al., 1967) was used to measure job satisfaction. The MSQ is based upon the Minnesota Theory of Work Adjustment model (Dawis, England, Lofquist, 1964), which posits that job satisfaction is influenced by the relationship between workers' needs and the reinforcer system in the workplace. The MSQ has twenty subscales with five items in each, measured by a five item scale. There is also an overall job satisfaction score based on twenty items derived from the subscales. The subscales of the MSQ include the following: Ability Utilization, Achievement, Activity, Advancement, Authority, Company Policies and Practices, Compensation, Co-Workers, Creativity, Independence, Moral Values, Recognition, Responsibility, Security, Social Service, Social Status, Supervision – Human Relations, Supervision – Technical, Variety, Working Conditions, and General Satisfaction.

Hoyt reliability coefficients indicate an overall .80 or higher reliability of coefficients, with only 2.5% below .70. Stability of scores was measured at a one week interval and then a one year interval. Scores for the one week interval ranged from .66 to .91, with a median coefficient of .83. The one year test-retest correlation coefficients ranged from .35 to .71, with a median coefficient score of .61 (Weiss, Dawis, England, & Lofqust, 1967). Canonical correlation analysis further revealed coefficients of .97 over the one week test-retest period, and .89 over the one year interval.
Evidence for construct validity of the MSQ was derived from comparisons between the MSQ and the Minnesota Importance Questionnaire (MIQ), an earlier measure of vocational needs based on the Theory of Work Adjustment (Weiss, Dawis, England, & Lofquist, 1967).

Factor analyses support the content validity of the MSQ (Weiss et al., 1967), and support the division of the twenty subscales into two satisfaction factors – intrinsic and extrinsic. Intrinsic satisfaction factors include Ability Utilization, Achievement, Activity, Authority, Co-Workers, Creativity, Independence, Moral Values, Recognition, Responsibility, Social Services, Social Status, and Variety. Extrinsic satisfaction factors include Advancement, Company Policies and Practices, Compensation, Supervision in both Human Relations and Technical Arenas, and Working Conditions. For the purpose of this study, the General Satisfaction scale was used for data analysis.

Sample Selection

Based upon the statistics used in this study, a sample size of 200 was initially chosen. The target population for this research paper included members of the mental health profession who had a Bachelor’s degree or above, and who provide counseling services at least 51% of the time. The accessible population included a population of mental health professionals employed within varying settings, including public, non-profit agencies; private, for-profit agencies; private, non-profit agencies; and private counseling practice settings. Mental health professionals throughout northern Arizona were contacted. Public and private sector programs in southern Arizona were also contacted, but only one company
agreed to provide participants, resulting in six completed surveys. The majority of participants came from the northern Arizona region. Participation in this study was voluntary.

Data Collection

Data collection was initiated upon approval from the Northern Arizona University Institutional Review Board. The majority of data collection was conducted in person by the investigator, although some participants completed the surveys and returned them to the investigator via the postal system. Prior to the completion of the surveys, participants were debriefed about the purpose of the study and were assured that their information would be kept confidential. Participants were instructed to refrain from putting their names on the demographic questionnaire, EJI, or MSQ. The informed consent form required participant signature. All other forms were numbered. Participants were instructed to keep their number if they wanted their score on either of the surveys.

Participants then followed standardized instructions and surveys were checked for completeness prior to the investigator's departure. At some of the sites, the investigator had agreed to present a short discussion of emotional intelligence and its relationship to job satisfaction. Participants received CEU credit for their attendance at these presentations. This was very important in the rural areas, as attendance at conferences involves travel expenses, as well as time away from the office. No information that would influence participant response was given prior to data collection.
Approximately thirty surveys were sent out and returned to the investigator. Each survey was accompanied by written instructions so that administration was standardized. Two surveys were returned without signed informed consents, and the investigator contacted participants for their signature.

Description of Sample

A total of 190 surveys were completed. Three participants were excluded. One participant did not complete 11% of the survey questions on the EJI. Two other participants did not meet the criteria for inclusion. One worked as a CFO for an agency and was not trained in mental health, while another did not meet the educational requirement. All of the excluded participants were male. This resulted in a total sample size of 187.

There was a total of 135 (72%) female and 52 (27%) male participants in this study. This ratio of male to female participants appears to be reflective of gender representation in the agencies participating in this study. For example, one agency had one male participant out of a total of 24 participants. Ethno cultural grouping consisted of European American (n = 167, 89.3%), Hispanic American (n = 9, 4.8%), Native American (n = 3, 1.6%), African American (n = 1, .5%) and Asian American (n = 1, .5% each). Six (3.2%) of the participants reported other or no response for ethnicity. One person wrote “human race.”

The average age of participants was 47.33 years. Participants had an average number of 5.27 years in their current position, and an average of 13.20 years in the profession. The majority were not licensed (n = 82, 43.9%), while 34 (18.2%) were licensed Counselors, 24 (12.8%) were licensed Social Workers, 24 (12.8%)
were licensed Psychologists, and 17 (9.1%) were licensed Substance Abuse Counselors. Six (3.2%) of the participants were licensed as Family and Marriage Therapists (LMFT).

Participants reported seeing an average of 16.73 clients per week. The majority of participants worked in publicly-funded agencies (n = 77, 41.2%), followed by private, not for profit agencies (n = 56, 29.9%), private counseling practices (n = 32, 17.1%) and private, for profit agencies (n = 22, 11.8%). Sixty participants (32.1%) were employed as counselors, followed by psychologists (n = 24, 12.8%), case managers (n = 18, 9.6%), and behavioral health technicians (n = 4, 2.1%). Eighty-one (43.3%) of the job titles were categorized as “other.” Job titles in this category included identification as social workers, clinical liaisons, and various other terms specific to their agency. Table 1 summarizes the data obtained from the demographic questionnaires.
<table>
<thead>
<tr>
<th>Table 1</th>
</tr>
</thead>
</table>

*Summary of Demographic Data*

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
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<tbody>
<tr>
<td><strong>Ethnicity</strong></td>
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<td></td>
</tr>
<tr>
<td>Caucasian</td>
<td>167</td>
<td>89.3%</td>
</tr>
<tr>
<td>Other</td>
<td>20</td>
<td>10.7%</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>52</td>
<td>27.8%</td>
</tr>
<tr>
<td>Female</td>
<td>135</td>
<td>72.2%</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21 – 30</td>
<td>22</td>
<td>11.9%</td>
</tr>
<tr>
<td>31 – 40</td>
<td>37</td>
<td>20.0%</td>
</tr>
<tr>
<td>41 – 50</td>
<td>39</td>
<td>21.1%</td>
</tr>
<tr>
<td>51 – Plus</td>
<td>89</td>
<td>48.1%</td>
</tr>
<tr>
<td><strong>Job Title</strong></td>
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<td></td>
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<tr>
<td>Case Manager</td>
<td>18</td>
<td>9.6%</td>
</tr>
<tr>
<td>Behavioral Health Tech</td>
<td>4</td>
<td>2.1%</td>
</tr>
<tr>
<td>Counselor</td>
<td>60</td>
<td>32.1%</td>
</tr>
<tr>
<td>Psychologist</td>
<td>24</td>
<td>12.8%</td>
</tr>
<tr>
<td>Other</td>
<td>81</td>
<td>43.3%</td>
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Continued
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<th>Job Setting</th>
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<td>Public Agency</td>
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<td>41.2%</td>
</tr>
<tr>
<td>Private, for Profit</td>
<td>22</td>
<td>11.8%</td>
</tr>
<tr>
<td>Private Practice</td>
<td>32</td>
<td>17.1%</td>
</tr>
<tr>
<td>Private, non-Profit</td>
<td>56</td>
<td>29.9%</td>
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<table>
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<tr>
<th>Years/Profession</th>
<th>Frequency</th>
<th>Percentage</th>
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</thead>
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<tr>
<td>0 – 10</td>
<td>96</td>
<td>51.9%</td>
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<tr>
<td>10 – 20</td>
<td>48</td>
<td>25.9%</td>
</tr>
<tr>
<td>21 – 30</td>
<td>27</td>
<td>14.6%</td>
</tr>
<tr>
<td>30 plus</td>
<td>16</td>
<td>8.6%</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Years/Present Job</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 – 10</td>
<td>162</td>
<td>87.6%</td>
</tr>
<tr>
<td>11 – 20</td>
<td>16</td>
<td>8.6%</td>
</tr>
<tr>
<td>21 plus</td>
<td>9</td>
<td>4.8%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Professional Degree</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bachelors</td>
<td>60</td>
<td>32.1%</td>
</tr>
<tr>
<td>Masters</td>
<td>94</td>
<td>50.3%</td>
</tr>
<tr>
<td>Doctorate</td>
<td>31</td>
<td>16.6%</td>
</tr>
</tbody>
</table>
Table 1

*Summary of Demographic Data, Continued*

<table>
<thead>
<tr>
<th>Professional Degree</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other</td>
<td>2</td>
<td>1.1%</td>
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</table>

<table>
<thead>
<tr>
<th>Clients per Week</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 – 10</td>
<td>76</td>
<td>41.1%</td>
</tr>
<tr>
<td>11 – 20</td>
<td>47</td>
<td>25.4%</td>
</tr>
<tr>
<td>20 plus</td>
<td>64</td>
<td>34.6%</td>
</tr>
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<table>
<thead>
<tr>
<th>Licensures</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>82</td>
<td>43.9%</td>
</tr>
<tr>
<td>Counselor</td>
<td>34</td>
<td>18.2%</td>
</tr>
<tr>
<td>Social Worker</td>
<td>24</td>
<td>12.8%</td>
</tr>
<tr>
<td>Psychologist</td>
<td>24</td>
<td>12.8%</td>
</tr>
<tr>
<td>Substance Abuse Counselor</td>
<td>17</td>
<td>9.1%</td>
</tr>
<tr>
<td>LMFT</td>
<td>6</td>
<td>3.2%</td>
</tr>
</tbody>
</table>
Data Analysis

Analyses of the data were conducted using the Statistical Program for Social Sciences (SPSS), Version 16. The statistical analyses included a 2 x 7 factorial repeated measures analysis of variance (ANOVA) and stepwise multiple regression. The ANOVA statistic is a procedure for determining whether the difference between the mean scores of two or more groups on a dependent variable is statistically significant (Gall, Gall, & Borg, 2003, p. 618). A stepwise multiple regression was used to predict the relationship between one dependent variable and multiple independent variables. In a stepwise multiple regression, each independent variable is evaluated in terms of what it adds to the prediction of the dependent variable that differs from the predictability of the other independent variables (Tabachnick & Fidell, 2001, p. 131).

Summary

This chapter outlined the methodology that was followed in completing this study. Sampling selection was defined and described. Statistical analyses were defined and described. Instrumentation was defined, as were data collection procedures. The sample selection and sample demographics were described. The statistical procedures used to analyze data were discussed.
CHAPTER FOUR

Results

The purpose of this study was to investigate differences between emotional intelligence and job satisfaction among male and female mental health professionals. Additionally, it sought to investigate whether aspects of emotional intelligence can predict job satisfaction among both male and female mental health professionals.

This chapter presents the results of the data that was collected for this study. Included in this chapter are a discussion of the data screening procedures, descriptive statistics and the results pertaining to each null hypothesis.

Data Screening

Scores were examined for accuracy of data entry, missing data, and fit between their univariate distributions and the assumptions of multivariate analyses. A second party reviewed the data entry to assist in the verification of accuracy. A total of 190 people participated in this research study. Two participants were excluded because they did not meet study criteria due to educational background and job categorization. A third participant’s Emotional Judgment Inventory could not be scored because he did not provide an adequate number of responses. All of the excluded data were from male participants. The resulting total N for this study was 187 (52 males, 135 females). Raw scores, rather than standardized scores, were used in this study.
Univariate Underlying Assumptions. Data were screened for normality, linearity, and homogeneity of variance. To identify potential outliers, normality plots were visually inspected and considered acceptable. No out of range values were noted. Means and standard deviation values were plausible. Normality graphs, skewness and kurtosis values were obtained. Skewness and kurtosis values were transformed into z-scores to assist in the analysis of the distribution, highlighting scores less than $z = -3.29$ or $z = 3.29$. Z-scores were calculated for the seven subscales of the EJI and the general satisfaction scale of the MSQ for the identification of potential outliers. Tabachnick & Fidell (2001) describe outliers as being standardized scores that fall below -3.29 or above 3.29 the mean. Multiple z scores were negatively skewed, as were scores measuring kurtosis. One z score for kurtosis, Number of Clients per week, had a value of 3.657, while all other scores were within normal range. This value is not considered to have a significant bearing on normality; as there was significant variability in the number of clients participants saw per week (range of 0 to 50).

Homogeneity of variance was assessed through Box’s Test of Equality of Covariance Matrices and Levene’s Test for Homogeneity of Variance. Results of both tests were non-significant, indicating homogeneity of variance.

Multivariate Underlying Assumptions. The data were screened for multivariate underlying assumptions of linearity, homoscedasticity, case to variable ratio, multicollinearity and singularity. There was no evidence to suggest nonlinearity.

Homoscedasticity, according to Tabachnick and Fidell (2001), assumes that the variability in scores for one continuous variable is roughly the same at all
values of another continuous variable (p. 79). Homoscedasticity is a measure of normality, in that when the assumption of multivariate normality is met, relationships between variables are considered to be homoscedastic (Tabachnick & Fidell, 2001). Initial screening was completed and visual inspection of residual scatterplots was done to assess for linearity, homoscedasticity, and multivariate normality. It was determined that assumptions of normality, homoscedasticity, and linearity were met.

The data were screened for multicollinearity and singularity through correlation matrices. Tabachnick and Fidell (2001) state that when predictor variables are highly correlated ($r > .90$), multicollinearity becomes an issue, as it is an indicator of redundancy among variables. If tolerance values are too low, (less than .20) or if the condition index is greater than 30, multicollinearity is present (Tabachnick & Fidell, 2001). A perfect correlation ($r = 1.0$) creates a condition for singularity. Neither of these concerns was noted in this study.

To screen for multivariate outliers, the Mahalanobis Distance for scores on the data set was computed, and all values were under the cutoff $X^2 > 24.322$. Therefore, none of the variables approached or exceeded this value, suggesting that multivariate outliers are not an issue in this data set.

In research question 1, a 2 X 7 factorial analysis of variance (ANOVA) was chosen to compare two groups on the seven subscales of the EJI. A stepwise (statistical) multiple regression analysis was the chosen statistic for research questions 2 and 3. Tabachnick and Fidell (2001) suggest the rule of thumb of $N > 50 + 8 (m)$, where $m$ is the number of independent variables. Thus, an $N$ of 106
would be adequate for a standard multiple regression. The authors suggest a higher ratio of cases per IV, 40 per case, for the stepwise regression (Tabachnick & Fidell, 2001). This condition was met.

*Descriptive Statistics*

Demographic factors were identified in Table 1 of chapter three. A total of 187 mental health professionals participated in this study. Participant age ranged from 23 to 72 years. The majority of participants reported European American (n=167, 89.3%) as their ethnicity. Fewer than 10% of participants indicated that they were non-European American. Six participants did not indicate ethnicity or gave multiple ethnicities, and one participant wrote “human race.” The majority of participants (n=94.50, 3%) held masters degrees, while 31 (16.6%) held a doctorate degree. The remaining held a bachelors degree (n=63, 33.7%). Length of time in the profession ranged from under one year to 35 years. Years in current position ranged from under one year to 36 years. The majority of female participants (n=121, 64.7 %), as well as male participants (n=21, 11.2 %), were in the profession less than ten years. Nine males (4.8 %) and 7 females, 3.7%) were in the field over 30 years. The number of clients seen per week ranged from 0 to 50 plus. Those who indicated that they saw no clients were those working in case management-type jobs within a mental health setting where they managed cases but did not perceive their primary job responsibility as a counseling function. Sixty participants (32.1%) identified counseling as their job title, 24 (12.8%) indicated that they were psychologists, 18 (9.6%) identified case manager as their job title, 4 (2.1%) were behavioral health techs, and 81 (43.3%) were categorized as...
as "other." These terms were part of the lexicon of certain agencies, and involved a diversity of tasks, including aspects of counseling.

**MSQ Descriptives**

The MSQ General Satisfaction scale was used to measure job satisfaction. This scale uses items from each of the twenty scales, resulting in a raw score of 20 to 100. For the purpose of the present study, raw scores were used to measure participant overall job satisfaction.

The mean score for female job satisfaction (n=135) was 78.02, while the mean score for male job satisfaction (n=52) was 76.92. Males over the age of 60 had the highest level of job satisfaction among their peers (X=81.77), while females ages 41-50 had the highest level of job satisfaction among the sample of female participants (X=80.41).

Males 31 to 40 years of age had the lowest level of job satisfaction (X=71.70), followed by ages 41 to 50 (X=72.14). For females, participants from 21 to 30 years of age had the lowest level of job satisfaction (X= 76.40). Mean satisfaction scores were close on all other age groups for females.

Table 2 summarizes the MSQ mean scores and standard deviations for male and female participants.

**EJI Descriptives**

The EJI has seven subscales and does not yield an overall score. Raw scores were used for analysis of the present data. Table 3 presents the means and standard deviations for both male and female participants on the subscales of the EJI.
Table 2

*Mean Scores and Standard Deviations for Males and Females on the MSQ*

<table>
<thead>
<tr>
<th>Gender</th>
<th>N</th>
<th>Age Grouping</th>
<th>Mean Score</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>2</td>
<td>20 – 30</td>
<td>74.50</td>
<td>3.536</td>
</tr>
<tr>
<td></td>
<td>10</td>
<td>31 – 40</td>
<td>71.70</td>
<td>10.995</td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>41 – 50</td>
<td>72.14</td>
<td>14.112</td>
</tr>
<tr>
<td></td>
<td>20</td>
<td>51 – 60</td>
<td>78.30</td>
<td>9.246</td>
</tr>
<tr>
<td></td>
<td>13</td>
<td>60 plus</td>
<td>81.77</td>
<td>6.547</td>
</tr>
<tr>
<td>Total Male</td>
<td>52</td>
<td></td>
<td>76.92</td>
<td>10.119</td>
</tr>
<tr>
<td>Female</td>
<td>20</td>
<td>20 – 30</td>
<td>76.40</td>
<td>9.394</td>
</tr>
<tr>
<td></td>
<td>29</td>
<td>31 – 40</td>
<td>77.72</td>
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<tr>
<td></td>
<td>32</td>
<td>41 – 50</td>
<td>80.41</td>
<td>9.517</td>
</tr>
<tr>
<td></td>
<td>36</td>
<td>51 – 60</td>
<td>77.50</td>
<td>9.679</td>
</tr>
<tr>
<td></td>
<td>18</td>
<td>60 plus</td>
<td>77.11</td>
<td>10.932</td>
</tr>
<tr>
<td>Total Female</td>
<td>135</td>
<td></td>
<td>78.02</td>
<td>9.726</td>
</tr>
</tbody>
</table>
### Table 3

*Mean Scores and Standard Deviations for Males and Females on the EJI*

<table>
<thead>
<tr>
<th>EJI Scales</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N = 52</td>
<td>N = 135</td>
</tr>
<tr>
<td>AE</td>
<td>Mean</td>
<td>SD</td>
</tr>
<tr>
<td></td>
<td>57.35</td>
<td>6.762</td>
</tr>
<tr>
<td>IO</td>
<td>49.58</td>
<td>8.096</td>
</tr>
<tr>
<td>IOT</td>
<td>46.58</td>
<td>6.232</td>
</tr>
<tr>
<td>MO</td>
<td>44.04</td>
<td>9.269</td>
</tr>
<tr>
<td>MOT</td>
<td>56.29</td>
<td>5.675</td>
</tr>
<tr>
<td>UPS</td>
<td>56.40</td>
<td>7.502</td>
</tr>
<tr>
<td>Ex</td>
<td>46.31</td>
<td>7.398</td>
</tr>
</tbody>
</table>

AE (Being Aware of Emotions); IO (Identifying Own Emotions); IOT (Identifying Others' Emotions); MO (Managing Own Emotions); MOT (Managing Others' Emotions); UPS (Using Emotions in Problem-solving); EX (Expressing Emotions Adaptively)
**Null Hypotheses Results**

A discussion of each null hypothesis and accompanying results will be presented in this section.

**Null Hypothesis 1.**

**H01**: There will be no difference between the emotional intelligence of males and females as measured by the seven subscales of the *Emotional Judgment Inventory*.

A 2 X 7 factorial analysis of variance (ANOVA) was completed. No significant differences between genders on any of the seven subscales of the EJI were noted. The null hypothesis was therefore not rejected in research question 1.

**Null Hypothesis 2**

**H02**: The seven subscales of the *Emotional Judgment Inventory* will not significantly predict job satisfaction among male mental health professionals as measured by the *Minnesota Satisfaction Questionnaire*.

A step-wise multiple regression analysis was conducted to determine the best model to predict the effect of the seven EJI subscales (Being Aware of Emotion, Identifying Own Emotion, Identifying Others’ Emotions, Managing Own Emotions, Managing Others’ Emotions, Using Emotions in Problem Solving, and Expressing Emotions Adaptively) on job satisfaction, as measured by the MSQ, for male participants. Model two was the best model, in which the independent variables of Being Aware of Emotions and Managing Own Emotions significantly predicted job satisfaction among male mental health professionals, $R=.530$, $R^2=.281$, $F(2, 49) =9.575, p=.000$. The two independent variables in this model
explained 28.1% of the variability of job satisfaction for male participants in this study. No other subscale significantly predicted job satisfaction for male participants.

**H03: The seven subscales of the Emotional Judgment Inventory will not significantly predict job satisfaction among female mental health professionals as measured by the Minnesota Satisfaction Questionnaire.**

A step-wise multiple regression was used to analyze data and results indicated that the independent variable, Being Aware of Emotions, was a significant predictor of job satisfaction for female participants, $R = .253$, $R^2 = .064$, $F(1,133) = 9.076$, $p = .003$. The independent variable of Being Aware of Emotions explained 6.4% of the variability of job satisfaction for female participants in this study.

Table 4 summarizes the significant relationships between the independent variables and the dependent variables, for both male and female mental health professionals, based upon the results of the stepwise multiple regression analyses.
Table 4

*Summary of Significant Predictive Relationships between Independent and Dependent Variables*

<table>
<thead>
<tr>
<th>Independent Variables</th>
<th>Male</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>AE* (Being Aware of Emotions); MO* (Managing Own Emotions)</td>
<td>AE*</td>
<td>MO*</td>
<td>AE*</td>
</tr>
<tr>
<td>MSQ General Satisfaction Score</td>
<td>( p = .001 )</td>
<td>( p = .000 )</td>
<td>( p = .003 )</td>
</tr>
</tbody>
</table>

N=52 Males, N=135 Females

Summary

The results of this study were reviewed and discussed in this chapter, and include data screening procedures, descriptive statistics, and results pertaining to each respective null hypothesis. A summary of significant findings was discussed in this chapter.
CHAPTER FIVE

Discussion

Overview

Is emotional intelligence an important attribute of those who work in the mental health field? Would a deficit in this skill limit a professional’s satisfaction at work? When one reviews O*NET (U.S. Department of Labor, 2004) criteria for skills required for those in the counseling field, social perceptiveness, active listening, and critical thinking are emphasized. Social perceptiveness is defined as the ability to be aware of the reactions of others and the reasons behind their reactions; active listening is described as the ability to listen to what others are saying and being able to respond appropriately; and critical thinking involves the use of logic and reasoning to identify strengths and weaknesses of potential solutions in problem-solving. If a mental health professional does not possess these skills, would it be possible for them to become more susceptible to job stressors and subsequently become dissatisfied with their job? Could lack of these skills contribute to the staggering level of burnout and turnover among employees in this field?

The purpose of this study was to establish a conceptual link between the constructs of emotional intelligence and job satisfaction among a population of male and female mental health professionals. It sought to determine whether higher levels of emotional intelligence can predict higher levels of job satisfaction experienced by mental health professionals, and whether or not gender differences influence levels of emotional intelligence and job satisfaction among this
population. It was hoped that clarification of these potential relationships would provide critical information for the training of mental health professionals, with the goal of increasing job satisfaction and reducing the high rate of attrition within this population.

Research Question 1

Results for this first question indicated that there was no significant difference in emotional intelligence between male and female participants. Current literature has yielded varying results when gender is the independent variable among varying participant populations (Ciarrochi et al., 2000; Hunt, 1928; Mehrabian et al., 1988; Petrides & Furnham, 2000). Bedwell (2003), author of the EJI, found a significant difference between levels of emotional intelligence between genders on the Being Aware of Emotions subscale. In this study, females scored higher on this scale than did their male counterparts. VanRooy & Viswesvaran (2004) also found that females outperformed males on the EJI subscale of Being Aware of Emotions, and, additionally, on the Using Emotions in Problem Solving subscale. In the same study, males scored significantly higher on the Managing Own Emotions subscale. Examining an ability model, Brackett, Rivers, Shiffman, Lerner & Salovey (2006) found that females performed better than males on the Mayer-Salovey-Caruso Emotional Intelligence Test (MSCEIT), while male estimation of performance on the MSCEIT was significantly higher than that of their female counterparts. The authors suggest that women tend to underestimate their abilities, while men overestimate theirs (Brackett et al., 2006).
The question of whether either gender possesses greater levels of emotional intelligence has been raised multiple times and there appears to be no definitive result, regardless of testing with ability or self-report measures. Earlier, this study reviewed the stereotypes about male and female emotional intelligence, but the review of the literature demonstrated that results are mixed. These studies typically do not use mental health professionals as participants. However, there are a few studies that have focused on the mental health professional. Martin et al. (2004), comparing professional counselors and counseling students to a normative sample on measures of emotional intelligence and counselor self-efficacy, found that emotional intelligence distinguished counselors from non-counselors. Additionally, the authors found that group EI means of professional counselors and counseling students were significantly higher than the group means of the normative sample. Thus, professional counselors had higher levels of EI than counseling students, who, in turn, had higher levels of EI than participants in a normative sample. Additionally, Easton et al. (2008) suggest that emotional intelligence may be a core attribute for the counseling profession, enhanced with training and experience.

Mental health professionals use skills relating to emotional intelligence on a daily basis, thus allowing them to have more practice and confidence in this arena. Due to the nature of their work, it is possible that differences between the emotional intelligence of male and female mental health professionals may be insignificant because of training and skill development over time. Martin et al (2004) found that emotional intelligence predicted counseling self-efficacy of
both counseling students and professionals, lending further weight to the notion that counseling skills training, with its emphasis on social perceptiveness, judgment, decision making, and active listening, may facilitate the development of emotional intelligence within this professional population. Easton et al. (2008) suggested that training in emotional intelligence be incorporated into counseling courses. Furthermore, it may be that those entering the counseling field may possess higher levels of emotional intelligence than those who self-select to other professions.

Research Questions 2 and 3

The results of research question two, which sought to determine which scales of the EJI may predict job satisfaction for male participants, indicates that both Being Aware of Emotions and Managing Own Emotions are significant predictors of job satisfaction for this population. Specifically, Being Aware of Emotions most significantly predicts this relationship (20.8% of variance), followed by Managing Own Emotions (7.3% of variance). For female mental health professionals, Being Aware of Emotions was the only significant predictor of job satisfaction, accounting for 6% of the variance. No other subscale predicted job satisfaction for this group in the current study.

Bedwell (2003) describes emotional awareness (measured as Being Aware of Emotions on the EJI) as the ability to attend to emotions in oneself and others (p. 5). Thus, a person who scores high in this dimension believes that they are emotionally sensitive, values their own and other’s emotions, and devotes effort to understanding emotion. Managing emotions, also a subscale of the EJI, is
defined as the ability to access, generate, and express appropriate emotions when needed to regulate positive emotions, as well as the ability to handle unpleasant emotions (Bedwell, 2003, p. 5). Those with this ability are adept at adjusting after a negative experience, as well as being able to construct feelings in order to alter their mood (Bedwell, 2003).

Bedwell (2003) incorporated Salovey and Mayer’s (1990) model of emotional intelligence, which includes four levels of ability: perceiving emotion, using emotion, understanding emotion, and managing emotion, when developing the EJI. The four emotional abilities are arranged from basic psychological processes (perceiving emotion) to more advanced processes (managing emotion). Mayer and Salovey (1997) state that there is a progression from one level of EI to the next, and that one level depends, in part, upon mastery at the lower levels. They also state that EI changes and develops with age and experience. Being aware of emotions is a basic EI skill that involves the identification of emotions in self and others, and may be more passive in nature, while managing own emotions may require more active participation in evaluating how to proceed with emotional content.

Results from this study suggest that job satisfaction, for both genders, is influenced by the ability to perceive emotion, while male job satisfaction is additionally influenced by the ability to manage own emotions. It is unclear why male job satisfaction is influenced by the ability to manage one’s emotions.

Emotional intelligence and its relationship to job satisfaction have been extensively reviewed in earlier chapters. Kafetsios and Zampetakis (2008) note
that a worker’s EI may influence job satisfaction because, on an interpersonal level, emotion awareness and regulation associated with EI are expected to positively affect social relationships, influencing the experience of emotion and stress at work. On an intrapersonal level, use of emotion and being aware of one’s own emotions can facilitate the regulation of stress and negative emotion, enhancing work performance (p. 713). Being Aware of Emotion was a significant predictor of job satisfaction for both males and females in this study, and, as suggested by Kafetsios and Zampetakis (2008), it appears to play a role in the regulation of stress and negative emotion, reducing negative work experience. Kafetsios and Zampetakis (2008) also found that males used emotions and emotion regulation to mediate affect at work, thus enhancing job satisfaction, while for females, perceiving others’ emotions was associated with job satisfaction.

The results of the current study are consistent with the conclusions drawn from the Kafetsios and Zampetakis (2008) study in terms of gender, EI and job satisfaction. As noted earlier, within the general population, there is evidence that higher levels of emotional intelligence may predict job satisfaction (Bar-On, 1997; Kulshrestha & Sen, 2006; Sy et al., 2006). The differences between genders is not clearly understood.

The question of whether or not emotional intelligence and burnout are correlated has been the focus of several studies. It is thought that job satisfaction among mental health professionals may be impacted by burnout. Is it possible, therefore, that low levels of EI could impact the development of burnout, which
in turn may influence job satisfaction? You, Lee and Lee (1999) found a relationship between lower levels of EI and burnout. Among mental health professionals, who experience high levels of burnout and turnover, Wong and Law (2002) suggested that workers with higher levels of emotional intelligence felt a greater sense of commitment and job satisfaction. Potter (2006) also found that the constructs of emotional intelligence and burnout may be related within the mental health population, and suggested that further research is needed to clarify a possible relationship. Zeidner et al. (2004) suggest that emotional intelligence may be more important for those working in the mental health field, as emotional understanding is a major part of the job. This skill may reduce burnout and lead to greater satisfaction with emotionally-laden work (Zeidner et al., 2002).

Limitations

Limitations of this study include: 1) the use of self-report for measurement of both constructs; 2) the ratio of male to female participants; 3) data collection in a primarily rural area, and 4) lack of random assignment.

Self-report instruments, while convenient, may lend themselves to biased responses, as participants may have a skewed view of their skills and attributes. Paulhus (1991) noted that self-reports may facilitate socially desirable responses which are inherently biased, in an effort to look good to the researcher. Additionally, Brackett et al. (2006) suggests that women tend to underestimate their abilities, while men tend to embellish theirs.

One concern was that participants in this study may have been reluctant to indicate how truly dissatisfied they are with their jobs out of fear of retaliation.
The investigator found, in certain agencies, that there was a great deal of concern regarding confidentiality of participant responses. Some participants underlined sections of their informed consent and repeatedly asked the researcher what would happen to their data. Once their concerns were addressed, in detail, most agreed to the research. Several, however, refused.

Secondly, 27% of the participants were male, while 73% were female. Indeed, in one agency with over twenty employees, there were no male staff members. This under representation of male staff may affect the generalizability of the study results. It is unclear why males are under represented in this sample.

Data was primarily collected in rural settings. Flagstaff had the largest population. Six people from Phoenix completed surveys. Most agencies in Phoenix and Tucson refused, while one Phoenix-based agency agreed to participate, but never returned the surveys. DeStefano et al. (2005) found that mental health professionals in rural areas were less satisfied with their jobs. Certainly participants voiced concerns about lack of training opportunities in their area, having to travel to Phoenix for training, and lacking access to privacy. It is possible that the results of this study were influenced by this factor.

Participants were not randomly assigned to groups, which also reduces generalizability of the results.

Implications for Practice

As noted in the literature review, job satisfaction among mental health professionals is a complicated issue. Task variety (Butler, 1990), comfort, challenge, role conflict and role ambiguity (Jayaratne & Chess, 1984) and
commitment and attitude toward the job (Tett & Meyer, 1993) are just some of the factors that mental health professionals note when discussing job satisfaction. Glisson and Durick (1988) found that the leadership within an organization and the age of the employee were two factors that influenced job satisfaction, with older workers more committed to their jobs. DeStefano et al. (2005) found that levels of job satisfaction increased with level of education. Additionally, in a subsequent study, DeStefano et al. (2008) found that mental health professionals in rural settings were less satisfied with their jobs than those in less rural locations. The authors also found that those who had been with an agency the longest experienced the greatest amount of job satisfaction. Factors such as organization, supervision, social status and moral values also played an important role in job satisfaction among mental health professionals in this study (DeStefano et al., 2008). These factors are external in nature, and do not explain all of the variance in job satisfaction among this population (DeStefano et al., 2008). Intrinsic factors, such as emotional intelligence or emotional management, may play a role in job satisfaction among this population.

Martin et al. (2006) and Easton et al. (2008) suggest that emotional intelligence may play a significant role in counselor self-efficacy, and may be an important element in counselor training. Nelis et al. (2009) found that emotional intelligence can be successfully taught to college students, and that these changes persisted after six months post-training.

It may therefore be important for counselor training programs to more clearly define elements of emotional intelligence and teach skill development in this
arena. Such programming could be labeled as emotional skills training, with standardized curricula that focuses on the core attributes of emotional intelligence (awareness of emotions in self and others; managing own and others' emotions; using emotions effectively). Training in this arena could begin at the Bachelors level, and be enhanced as a student progresses to the masters and doctoral levels of education. A baseline measure of emotional intelligence upon admission would assist in the assessment of skill development as the student progresses. There are aspects of emotional intelligence being taught in counseling programs, but they are not labeled as such. A more formal approach to teaching emotional intelligence may help to better define the construct within the educational setting.

**Recommendations for Future Research**

Results from this study indicate that emotional factors account for 28% of the variance for job satisfaction among males, while they account for 6% of the variance for job satisfaction among female participants. Further research is needed to identify potential factors that influence job satisfaction among female mental health professionals, as emotional intelligence does not appear to influence job satisfaction as it appears to do for males.

Additionally, further research may focus on the pre and post measurement of emotional intelligence among those entering and subsequently completing college programs in the human service field. This measurement would allow students to determine whether emotional intelligence had been enhanced through higher education, and would assist university program development in the helping professions.
And, finally, it seems important that further research identify the potential role of emotional intelligence in the burnout syndrome, which seems to have an impact on job satisfaction among mental health professionals. Potter (2006) found correlations between subscales of the EJI and the MBI, suggesting that the two constructs may be related.
References


relationships. New York: Bantam.


APPENDICES
Appendix A

Demographic Questionnaire

Project Title: Emotional Intelligence and Job Satisfaction among Mental Health Professionals

Participant Information
The purpose of this study is to examine the relationship between the constructs of emotional intelligence and job satisfaction as they apply to male and female mental health professionals. Your response is completely confidential. Please answer the questions thoughtfully and completely. Do not write your name on this document.

Number:

1. __Male   __Female
2. Age____
3. Which one of the following best describes you?
   ___African American   ___Asian American   ___European American
   ___Hispanic American   ___Native American
4. Professional Degree
   ___BA   ___BSW   ___MA   ___MED   ___MSW   ___PhD   ___EdD
   Other (Please Specify)________________________
5. Employment Setting
   ___Publicly-funded Agency
   ___Private, for profit Agency
   ___Private Counseling Practice
6. Job Title
   ______________________________

97
7. Years in Current Position

8. Years in the counseling profession

9. Licensure or certification

10. Briefly describe job responsibilities

11. How many clients do you see per week?

Thank you for your participation!
Appendix B

Informed Consent

NORTHERN ARIZONA UNIVERSITY

COLLEGE OF EDUCATION
Educational Psychology
P O Box 5774
Flagstaff, AZ 86011-5774

Project Title: Emotional Intelligence and Job Satisfaction among Mental Health Professionals

Dear Participant,

You are being asked to participate in a project conducted through the College of Education, Counseling Psychology program, at Northern Arizona University by Deborah Pardee that involves research. The researcher is required to receive your informed consent before you participate in this project.

The Investigator will explain to you in detail: (a) the purpose of the project, (b) the research procedures to be used and what you will be asked to do, (c) how long your participation will last, (d) how your personal information, if collected, will be kept confidential, (e) the potential benefits and possible risks of participation, and (f) if you will receive any compensation.

Your participation in research is voluntary. If you refuse to participate there are no penalties or loss of benefits or services that you are otherwise entitled. If you decide to participate and then withdraw or skip a question there are also no penalties or loss of benefits or services.

Whether or not you choose to participate in this project will have no effect on your relationship with NAU now or in the future.

A basic explanation of the project is written below. Please read this explanation and discuss it with the Investigator. You may ask any questions you have to help you understand the project.

After any questions you may have are answered and you decide to participate in the research, please sign on the last page of this form in the presence of the person who explained the project to you. A copy of this form will be given to you for you to keep.

1. PROJECT PURPOSE: The purpose of this study is to establish a conceptual link between the constructs of emotional intelligence and job satisfaction among a population of mental health professionals. It seeks to determine whether higher levels of emotional intelligence can predict a higher level of job satisfaction, and whether or not gender differences exist in levels of emotional intelligence and job satisfaction within this population.

2. EXPLANATION OF PROCEDURES: Participants will be asked to complete a demographic questionnaire, the Emotional Judgment Inventory, and the Minnesota
Satisfaction Questionnaire. The surveys will take approximately 45 minutes to complete. Completed survey protocols will be reviewed for completeness, and the data will be analyzed utilizing SPSS software.

3. CONFIDENTIALITY: You are requested to not put your name on any of the forms. Each set of three questionnaires will have a number assigned to them. Your responses will be completely confidential. Completed forms will be used for data entry, and the data will then be stored in a locked cabinet for a period of at least 3 years.

4. COMPENSATION: There will be no compensation for participation in this study.

5. BENEFITS: The role of emotion and emotional intelligence in job satisfaction among mental health professionals is not clearly understood. This study seeks to further this understanding, with the potential to lead to improved training for people going into this field. Clients of professionals with enhanced training will become the beneficiaries of providers with these skills.

6. RISKS: The questionnaires that you will complete will measure personal levels of emotional intelligence and job satisfaction. Taking the tests may activate thoughts and feelings about the self and others. There may therefore be some level of discomfort and possible feelings of vulnerability associated with participation in this project.

7. CONSENT: I have read the above information about Emotional Intelligence and Job Satisfaction among Mental Health Professionals and have been given an opportunity to ask questions. I agree to participate in this project, and I have been given a copy of this consent document.

________________________  Date ____________
Signature of Participant

________________________  Date ____________
Printed Name of Participant

________________________  Date ____________
Signature of Research Representative

________________________
Printed Name of Research Representative

There is a dated approval stamp on this consent form (below). The stamp indicates that this project has been reviewed and approved by the Northern Arizona University Institutional Review Board (IRB) for the Protection of Human Subjects in Research. Contact the Human Research Protections Office at 928-523-4340 if you have any questions about: (1) the conduct of the project, or (2) your rights as a research participant, or (3) a research-related injury. Any other questions about the research project should be directed to:

Investigator(s) Deborah Pardee, LCSW
University or Business Address: 636 N. Main Street, Cottonwood, AZ 86326
Business Phone/E-mail: 928-301-9604

Name of Faculty Sponsor/Institute Supervisor/Other Supervisor: Thomas DeStefano, Ed.D
Phone/E-mail: Thomas.DeStefano@nau.edu
Sponsoring Department/Institute/Organization
Institute/Organization: College of Education, Educational Psychology
Appendix C

Institutional Review Board Approval

KEEP THIS NOTICE UNTIL May 18, 2009

To: Deborah Pardee and Thomas Destefano
From: Paula Garcia McAllister
Approval Date: May 19, 2008

Project: Emotional Intelligence and Job Satisfaction among Mental Health Professionals
Project Number: 08.1213
Approval Expiration Date: May 18, 2009

Your research protocol has been approved by the Human Subjects Committee/Institutional Review Board (IRB) at NAU under the category of EXPEDITED review. If you need to continue your research beyond that date, you must file a request for continuation 30 days prior to the expiration of your approval (see forms at http://www.research.nau.edu/vpr/IRB/index.htm).

A copy of your informed consent forms, which has been approved and stamped by the IRB, must be given to each study participant as appropriate.

As you conduct your research, please remember that:
1. Participants are volunteers or are involved in regular educational programs; they are free to withdraw from the research at any time without penalty.

2. Participants must be informed through written or oral explanation and must sign or approve electronically an informed consent form (for minors and children the parent or guardian must sign, and, in medically related cases, a physician must sign for consent).

3. The participants’ anonymity and confidentiality must be protected. They should not be able to be identified through the responses. The presentation of the data should not put them at risk of any negative consequences. Access to the data is specified and restricted by the researcher and the department.

If any irregularities or unexpected events occur, please report those immediately to the IRB Office.

Additional IRB information may be found at http://www.research.nau.edu/vpr/IRB/index.htm
Appendix D

Letter of Agreement from Scott Bedwell for use of the *Emotional Judgment Inventory*

Email received July 1, 2008

Hi Debbie,

I did get your qualification form, thanks. I have attached the research agreement for your project. Please print and sign two copies of the agreement and return them to me at:

Scott Bedwell

IPAT

1801 Woodfield Drive

Savoy, IL 61874

Once I have a signed copy of the agreement I will mail out the EJI materials to you. If you would like, you can also fax or E-mail me a scanned copy of the signed agreement. This way I can send the materials sooner, without having to wait for the mail to deliver the printed copies. My fax number is listed below in my signature.

Please note that there is no need for Dr. Moan to sign the agreement. Also since you are qualified to use the EJI, if he has not completed a qualification form, he does not need to do so now.

If you have any questions, please do let me know.

Best,

-Scott
Appendix D

Instructions to Participants

My name is Debbie Pardee and I am completing my PhD in Counseling Psychology from NAU. Thank you in advance for completing these surveys. I have summarized instructions below. I encourage you to contact me on my cell if you have any questions. That number is 928-301-9604.

I wish to stress that this is an anonymous survey. I am not interested in your name, except on the informed consent page. Your employer will not receive individual results from your response. Data will be analyzed anonymously.

Informed Consent
Please sign and print your name where indicated. Separate it from your packet when you turn it in.

Demographic Questionnaire
Please complete both sides, front and back. Do not put your name on this document.

Emotional Judgment Inventory
This instrument has 80 items. Please indicate your response by marking the correct circle with pencil. Do not make any marks in the EJI question booklet.

On the front side, please indicate your gender. You do not need to answer any other questions. Do not put your name on the EJI answer sheet.

Minnesota Satisfaction Questionnaire
This instrument has 100 items. Mark your responses in the booklet. There is no separate answer sheet. Answer as quickly as possible – there is no need to dwell on each item. If a question does not apply to you, respond by indicating “neutral.”

There are no right or wrong responses. We want your assessment of your situation only!

Thank you!!