Success is not final, failure is not fatal: it is the courage to continue that counts.

– Winston S. Churchill
INTERESTED IN BECOMING AN EDITORIAL BOARD MEMBER?
If you are interested in becoming an Editorial Board Member for the Virginia Counselors Journal, please send your name, contact information, and specific areas of interest and expertise to the Editor at vcjeditor@gmail.com.
FROM THE CO-EDITORS

We are pleased to present you with Volume 35 of the Virginia Counselors Journal (VCJ). We want to take this opportunity to thank the many authors who have contributed to the Volume's content and our Editorial Board members for their work over the past year and a half to ensure that the content of the Volume is relevant and of the highest possible quality.

More manuscripts were received for Volume 35 than were received for any previous volume during our years as co-editors, and we hope that this is an indication that the VCJ is being increasingly recognized as a desired publication venue. Our receipt of submissions from authors across the country seems to be another indication of the Journal's growing visibility and recognition among professional publications.

As with any professional journal, the ongoing existence and quality of the VCJ is dependent upon the willingness of individuals to serve as Editorial Board members. Typically, VCJ Editorial Board members will be asked to review two to three manuscripts per year and to make recommendations regarding the suitability of those manuscripts for publication. Having a sufficient number of editorial board members ensures that the review process can be completed in a timely manner and that individual board members are not overtaxed with excessive requests for manuscript reviews. If you have interest in serving as a member of the VCJ Editorial Board, we encourage you to contact the Editor at vcjeditor@gmail.com.

Volume 35 will be the last volume of VCJ to be published under our co-editorship. As we depart, we want to thank all of the authors, Editorial Board members, and the VCA Board and staff (Vicky Wheeler) for their ongoing support of our efforts for over five years to maintain and build upon the positive standing as a state journal that VCJ had enjoyed for many years. We are also grateful to long-time Editorial Board member, Nadine Hartig, for her willingness to step up and assume the position of VCJ Editor beginning with Volume 36. Given Nadine's Editorial Board experience and demonstrated commitment to the quality of the VCJ, we depart with confidence that the change in editorship will be a seamless one. We look forward to the publication of Volume 36!

Rip McAdams
Victoria Foster
Co-Editors, The Virginia Counselors Journal
# TABLE OF CONTENTS

## INTERVIEW

An Interview with Eleanor Saslaw ................................................................. 6  
Kevin Doyle

## RESEARCH

An Investigation of Perceived Ethical Infractions Among Peers and Supervisors in the Counseling Profession .......................................................... 13  
Eleni Honderich, Jessica Lloyd-Hazlett, & Charles Gressard

Compassion Fatigue and Satisfaction Among Critical Incident Stress Management (CISM) Providers: A Study on Risk and Mitigating Factors ........................................ 20  
Lisa Compton, Sherry Todd, & Corie Schoeneberg

Knowledge and Practice: Exploring the Integration of Screening, Brief Intervention, and Referral (SBIRT) in Clinical Internship Settings in Virginia ........................................ 28  
Amy Williams & Jill Russett

The Impact of Emotional Intelligence on Counselor Burnout ......................... 40  
John Harrichand, Anita Knight, & Dorin Captari

Theoretical Preferences of Counselor Education and Social Work Students ............ 48  
Gregory Hatchett & Jennifer Sharp

## THEORY AND PRACTICE

Building Family Bridges: A Professional Development Module for Professional School Counselors .............................................................. 57  
Richelle Joe, Pamela Harris, & Amy Williams

Multiculturally Competent Assessment: Guidelines for Multicultural Interviewing ................................. 66  
Seungbin Oh, K. Dayle Jones, & Ann Shillingford-Butler

Creating Safer Schools for LGBTQ+ Students ............................................. 76  
Mark Jones & Claire Merlin

Incorporating Therapeutic Movement Techniques into School Counseling .................. 83  
Amanda Craft & Nadine Hartig
The Impact of Emotional Intelligence on Counselor Burnout

John J. S. Harrichand, Anita M. Knight & Dorin Captari
Liberty University

Abstract
Research on the relationship between mental health counselors’ burnout and emotional intelligence has been limited. This article highlights the role of burnout for counselors-in-training and the impact of emotional intelligence, bringing needed attention to the ways in which mental health professionals can utilize emotional intelligence practices as a potential buffer against burnout.

Keywords: emotional intelligence, counselor burnout, TEIQue

Emotional Intelligence Models

According to Petrides, Pita, and Kokkinaki (2007) EI is defined as traits or self-perceptions related to emotion. The research literature contains competing models on conceptualizing EI: the trait-based model (Petrides & Furnham, 2000) and the ability based model (Mayer & Salovey, 1997). Mayer, Caruso, and Salovey (2000) define EI as an individual’s ability to recognize, reason, and problem-solve in personal relationships based on the meanings of emotion. Petrides et al. (2007, p. 273) conceptualize the difference between ability-based and trait-based models primarily by the method of measurement; they indicate “Trait EI (or trait emotional self-efficacy) concerns emotion-related dispositions and self-perceptions measured via self-report, whereas ability EI (or cognitive-emotional ability) concerns emotion-related cognitive abilities measured via performance-based tests.” For this study, EI is defined as: one’s self-perception of a set of 15 attitudes and abilities that are associated with the regulation of emotions and sub-divided primarily into four factors including: 1) wellbeing; 2) self-control; 3) emotionality; and 4) sociability (Petrides & Furnham, 2003).

Burn-out

One of the challenges of the helping profession has been referred to as burnout, which is defined as a multifaceted occurrence observed across three dimensions: emotional exhaustion, reduced personal accomplishment, and depersonalization (Maslach, Jackson, & Leiter, 1996), and manifesting in feelings of helplessness, powerlessness, inflexibility, and/or being emotionally exhausted (Lee et al., 2007). According to Oser and colleagues, burnout not only impacts the counselor, but his/her place of employment and clients also suffer (Oser, Biebel, Pullen, & Harp, 2013). Counselors who experience burnout suffer from mental and physical health problems such as anxiety, depression, headaches, insomnia, low self-esteem, and lower quality of life. For counseling agencies, this leads to low productivity, higher interpersonal conflict, nonattendance, and turnover resulting in the spending of financial resources to recruit and train new counselors. For clients, this translates into premature termination, dissatisfaction with care and service, and lower levels of commitment to treatment and recovery (Oser et al., 2013).
Burnout and EI  
Research by Platsidou (2010) on special education teachers found that those reporting high scores in the four trait EI dimensions and overall EI perceived themselves as doing well and/or moderately well in: (a) managing self-relevant information; (b) regulating emotions; and (c) managing others’ emotions. However, burnout has ethical implications for counselors who are unable to meet the psychological needs of their clients due to a depletion of their own emotional reserves (Maslach et al., 1996). The ACA Code of Ethics states, “counselors monitor themselves for signs of impairment from their own physical, mental, or emotional problems and refrain from offering or providing professional services when impaired” (ACA, 2014, p. 9).

EI & Clinical Mental Health Counseling  
Clinical mental health counselors use emotions to inform their work on a daily basis in therapy (Eatough & Smith, 2006). EI is a construct that may act as a protective factor helping counselors regulate emotion as other helping professionals, such as teachers, have found it useful (Platsidou, 2010). Resilient clinicians have a firm sense of self and faith, exhibiting clinical expertise, being confident, flexible, insightful, willing to advocate for others, empathic, humanistic, and engaging in self-care practices (Edward, 2005).

People in helping capacities, particularly counselors, continue to struggle with problems related to the regulation of emotion such as burnout (Lent & Schwartz, 2012; Sangganjanavanich & Balkin, 2013). Blankertz and Robinson (1997) reported that 50% of mental health workers surveyed were between “somewhat” and “highly likely” to leave the field within the next two years, and turnover rates in professions such as community mental health, social work and child welfare consistently range from 30% to 60% in any given year. High turnover rates prevent agencies from providing the services that are required to fulfill state mandates to prevent institutionalization of individuals and protect the communities in which they live (Paris & Hoge, 2010). A leading cause of job dissatisfaction for mental health professionals is related to the increasing difficulty of interpersonal interactions with clients and the lack of positive feedback in regard to competency and outcomes (Rössler, 2012). More so, researchers (Lent & Schwartz, 2012; Sangganjanavanich & Balkin, 2013) have commented on factors leading to burnout, including but not limited to: (a) stress, (b) introversion, (c) neuroticism, (d) being a new counseling professional, (e) poor health practices, (f) unrealistic expectations, (g) working long hours, and (h) difficult work settings.

Burnout can also impact counselors-in-training leading to a reluctance engaging with clients on multiple levels, including a hesitancy to see clients, struggling to build rapport, avoidance of emotionally charged issues, and an unwillingness to experience high levels of affect in relation to the client’s therapeutic process (Romero & Pinkney, 1980). Research conducted by Potter (2006) indicated that there are significant correlations between EI, measured by the Emotional Judgment Inventory, and burnout, as measured by the Maslach Burnout Inventory sub-scales. However, Potter also indicated more research is needed to replicate and clarify the relation between these variables using participants in their work environment. This study extends Potter’s research by examining EI using a sample of clinical mental health counselors-in-training participating in a practica experience. It also employs a measure of burnout specifically designed for those in the counseling field rather than a more general measure of burnout. Bogs (2011) also confirmed the need for more studies on EI and burnout in mental health workers who constantly experience high stress based on their work environment and clientele. Bogs advocated for educating mental health workers on the impact of stress and the use of EI to lower stress. The work of Lent and Schwartz (2012) further illustrates this gap. They investigated the correlations among burnout, clinical work setting, demographic characteristics and personality factors and found that counselors with higher levels of certain traits such as agreeableness and conscientiousness experienced lower levels of some dimensions of burnout (such as depersonalization and emotional exhaustion). They also emphasized a gap in the literature and stated that, “because burnout is a common phenomenon affecting clinicians and secondarily their clientele … further investigations of this phenomenon can help predict and possibly reduce burnout through increasing the awareness, knowledge, and skills of clinicians, supervisors, and educators” (Lent & Schwartz, 2012, p. 369).

Testa and Sangganjanavanich (2016) indicated that more research is needed to investigate burnout among counseling students; thus, empirical research explaining the correlation between burnout and
emotional intelligence among mental health professionals and counseling students remains sparse and more research is needed (Bogs, 2011; Lent & Schwartz, 2012; Testa & Sangganjanavanich, 2016). The purpose of this study is to examine perceived emotional intelligence (EI; trait-based) and its relationship with counselor burnout among 167 counselors-in-training. The variables are EI as measured by the TEIQue-SF (Petrides & Furnham, 2006), the SSEIT (Schutte et al., 1998), and counselor burnout as measured by the CBI (Lee et al., 2007).

The researchers’ hypotheses are as follows: (a) Hypothesis one: There will be a statistically significant positive correlation between trait-based EI and self-reported ability-based EI; (b) Hypothesis two: There will be a statistically significant negative correlation between self-reported ability-based EI and counselor burnout; (c) Hypothesis three: There will be a statistically significant negative correlation between self-reported trait-based EI and counselor burnout using the dimensions of counselor burnout and trait-based EI; (d) Hypothesis four: There will be a statistically significant negative correlation between the factors of trait-based EI and counselor burnout; (e) Hypothesis five: The four factors of trait EI and global trait EI will have statistically significant negative correlations with the five dimensions of counselor burnout.

Method

Participants

Participants were recruited through online announcements and were participating in practica experience, which included conducting practice-counseling sessions in triads with two other students. Approximately 320 students were invited to participate in the study using a convenience sample. Of those invited, 167 completed the study. The 167 participants were counselors-in-training (e.g., graduate students) enrolled in a private, mid-sized university. Participants included 39 male and 128 female counseling students, between the ages of 20-69 years old; the average age range was 30-39. There were 104 Caucasian, 48 African American, five Latino, one Asian-American, and eight Other Ethnicity. From the sample of counseling students available, 90 participants identified as being employed full-time, 47 participants identified as being employed part-time, and 30 participants were unemployed.

Measures

Participants completed the Schutte Self-Report Emotional Intelligence Test (SSEIT; also known as SSREIS) (Schutte et al., 1998), the Trait Emotional Intelligence Questionnaire – Short Form (TEIQue-SF; Petrides & Furnham, 2006), and the Counselor Burnout Inventory (CBI; Lee et al., 2007). The use of the aforementioned assessments was based on the fact that they were psychometrically sound, and freely accessible to the public.

SSEIT. A 33-item self-report trait EI tool with a five-point Likert scale (1-strongly disagree to 5-strongly agree). The SSEIT is said to have an internal reliability alpha coefficient of .87, and a test-retest reliability of .78 (Schutte et al., 1998, p. 186).

TEIQue-SF. A 30-item self-report questionnaire on a seven-point Likert scale (1-completely agree to 7-completely disagree). It provides a global trait EI score, and scores for each of its four factors; higher scores indicate higher trait EI (Pertides, 2010). The alpha internal reliability ranges from .81 to .89 (Petrides & Furnham, 2006).

CBI. A 20-item self-report measure using a five-point Likert type scale (1-never true to 5-always true); higher scores indicate higher levels of burnout. It has an internal reliability of .88-.94, a test-retest reliability of .81, and convergent validity of .73 with the Maslach Burnout Inventory-Human Services Survey Emotional Exhaustion subscale (Lee et al., 2007).

Procedures

Participants were recruited through an announcement made in each of the five sections of the counseling practica intensive class. This online announcement was followed-up by an email to each student, which included a secure link to Google Surveys. Willing participants completed an informed consent form. Of the 320 students invited to participate, 167 completed the study, resulting in a response rate of approximately 52%. Once the survey was completed, data was de-identified and statistical analysis was performed using IBM SPSS Statistics version 23.
Results

In order to evaluate Hypothesis One, a Pearson’s $r$ correlation was performed between levels of self-reported EI measured using the SSEIT (Schutte et al., 1998) and TEIQue-SF (Petrides & Furnham, 2006). The correlation between SSEIT and TEIQue-SF was positive and statistically significant, $r(167)= +.70$, $p<.01$ (one-tailed) in support of the researcher’s Hypothesis One. The $p$ value for this study was set at .05. Overall, there was a strong positive correlation between self-reported ability-EI (SSEIT) and trait-EI (TEIQue-SF), i.e., increases in self-reported ability-EI (SSEIT) were correlated with increases in trait-EI (TEIQue-SF). The reliability coefficients for the 33-item SSEIT and the 30-item TEIQue-SF were calculated to be $\alpha = .84$ and .89, respectively, meeting alpha values similar to initial studies of these assessments.

In order to address, Hypothesis Two, Pearson’s $r$ correlations were performed between EI measured by SSEIT (i.e., SSEIT Total) and counselor burnout using the CBI (i.e., CBI Total), and its five subscales (Lee et al., 2007). All six correlations were negative, and statistically significant, particularly, the correlation between SSEIT Total and CBI Total, $r(167)= -.36$, $p<.008$ (one-tailed), supporting researchers’ Hypothesis Two. The CBI subscales correlations were: -.22; -.22; -.34; -.25; -.25, $p<.008$ (one-tailed) for Exhaustion, Incompetence, Negative Work Environment, Devaluing Client, and Deterioration of Personal Life, respectively. This means that as self-reported ability-EI (SSEIT) score increased, counselor burnout (CBI) scores on each of the CBI dimensions decreased. The Bonferroni approach was used to control for Type I error across the six correlations, a $p$ value of less than .008 (.05/6 = .008) was required for significance. All six correlations were statistically significant, $p=.001$. In general, the correlation matrix results suggest that if an individual has a low burnout score in one domain, they tend to also have low burnout scores in other domains.

Hypothesis Three was addressed using Pearson’s $r$ correlations between EI measured by TEIQue-SF (i.e., TEIQue Total) and counselor burnout using the CBI (i.e., CBI Total), and its five subscales (Lee et al., 2007). The six Pearson’s correlations are reported in Table 1.

<table>
<thead>
<tr>
<th>CBI Dimensions</th>
<th>Correlations with TEIQue Total Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Score on CBI</td>
<td>-.561**</td>
</tr>
<tr>
<td>CBI Exhaustion Total</td>
<td>-.409**</td>
</tr>
<tr>
<td>CBI Incompetence Total</td>
<td>-.340**</td>
</tr>
<tr>
<td>CBI Negative Work Environment Total</td>
<td>-.426**</td>
</tr>
<tr>
<td>CBI Devaluing Client Total</td>
<td>-.354**</td>
</tr>
<tr>
<td>CBI Deterioration of Personal Life Total</td>
<td>-.480**</td>
</tr>
</tbody>
</table>

Note: **: Correlation is significant at the 0.008 level (1-tailed) and $N=167$. 
The Bonferroni approach was used to control for Type I error across the six correlations, a $p$ value of less than .008 (.05/6 = .008) was required for significance. All six correlations were negative, and statistically significant, particularly, the correlation between TEIQue Total and CBI Total, $r(167) = -.56$, $p < .008$ (one-tailed), supporting Hypothesis Three. The variables had an inverse correlation, this means that as self-reported trait-EI (TEIQue-SF) increased, counselor burnout (CBI) decreased. The results of Hypothesis Two and Three led the researchers to conclude that EI measured by TEIQue-SF has a stronger relationship with counselor burnout than EI measured using SSEIT.

Hypothesis Four was evaluated by examining the relationship of each of the four TEIQue-SF factors and Global Trait EI with CBI Total. The five Pearson's $r$ correlations are reported in Table 2.

<table>
<thead>
<tr>
<th>CBI Dimensions</th>
<th>Correlations with TEIQue Total Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well-being Trait EI Factor</td>
<td>-.440**</td>
</tr>
<tr>
<td>Self-control Trait EI Factor</td>
<td>-.523**</td>
</tr>
<tr>
<td>Emotionality Trait EI Factor</td>
<td>-.370**</td>
</tr>
<tr>
<td>Sociability Trait EI Factor</td>
<td>-.318**</td>
</tr>
<tr>
<td>Global Trait EI Factor</td>
<td>-.459**</td>
</tr>
</tbody>
</table>

Note: ** Correlation is significant at the 0.01 level (1-tailed) and N=167.

All five correlations were negative, and statistically significant, indicating that as participants' scores on each Trait EI factor increased their CBI Total Score decreased. Using the Bonferroni approach, all five correlations were identified as being statistically significant, i.e., having a $p$ value of less than .01 (.05/5 = .01). This suggests that if an individual has a low EI in one domain, they end to also have low EI scores in other domains.

In order to examine Hypothesis Five, the researchers analyzed the TEIQue Factors and Global Trait EI, with each of the CBI sub-scales/dimensions. Pearson's $r$ correlations were performed; all twenty-five correlations were negative, and statistically significant. The Self-Control Factor had the largest correlations with three of the five CBI sub-scales/dimensions (Exhaustion Total: $r(167) = -.48$, $p < .002$; Negative Work Environment Total: $r(167) = -.34$, $p < .002$; and Deterioration of Personal Life Total: $r(167) = -.48$, $p < .002$; all one-tailed). The exceptions being the CBI Incompetence Total, which correlated highest with the Global Factor EI, $r(167) = -.40$, $p < .002$ (one-tailed), and Devaluing Client Total, which correlated highest with the Emotionality Factor, $r(167) = -.31$, $p < .001$ (one-tailed). Therefore, as participants' scores on each Trait EI factor increased their scores on the CBI dimensions decreased. Using the Bonferroni approach, out of 25 correlations, 23 were identified as being statistically significant, i.e., having a $p$ value of less than .002 (.05/25 = .002). The two that were not significant include CBI Exhaustion with Sociability Trait EI, and CBI Incompetence with Emotionality Trait EI. The highest negative correlations were among Deterioration of Personal Life and Self-Control and the second highest was the negative correlation between Exhaustion and Self-Control. If an individual has high scores in one trait-EI factor, they tend to also have high scores on other trait-EI factors.

Discussion

Results supported all five of the researchers' hypotheses, leading them to identify EI as being correlated with counselor burnout. These findings are consistent with the findings of other researchers.
investigating the relationship between the general constructs of EI and burnout (Moon & Hur, 2011; Testa & Sangkanjanavanich, 2016). This study extends and specifies the nature of the correlation looking at perceived ability-based EI, perceived trait-based EI, and counselor burnout. The statistical analyses conducted between counselor burnout (CBI) and EI (TEIQue-SF) resulted in statistically significant negative correlations after controlling for family wise error with the Bonferroni approach, see Tables 1 and 2. Thus, these findings provide some support for cultivating EI as a strategy against counselor burnout. The trait EI factor of self-control, which is comprised of three subscales (Petrides, 2010): emotion regulation, stress management, and low levels of impulsiveness may be associated with the largest decreases in burnout. Therefore, counselor educators may design EI training programs focusing on the development of the trait EI factor of self-control and its subscales. Based on the correlational analyses conducted, TEIQue’s self-control factor evidenced strong correlations with dimensions of the CBI. Using Petrides’ (2009) description of individuals high on this factor to interpret these correlations, one sees that counselors-in-training who are capable of controlling their urges and desires are better able to function under stress. However, some dimensions of trait EI had lower correlations with total burnout scores such as sociability and emotionality. This information may be helpful for counselor educators and supervisors wishing to provide training and support to counselors in burnout prevention. If EI training is limited by time constraints there is some evidence to suggest allocating more time to the trait EI factors of self-control and well-being since they were most highly correlated with counselor burnout. EI training sessions may be tailored to the development of self-control with time dedicated to strategies for emotion regulation, stress management, and decreasing impulsivity. Sessions may also focus on activities that facilitate increases in well-being, specifically on strategies aimed at increasing self-esteem, enhancing trait happiness, and trait optimism (Petrides, 2010). For example, one intervention to enhance a dimension of self-control, stress management, could be experiential exercises aimed at identifying and reducing negative self-talk and enhancing positive self-talk (Seligman, 1991).

Implications

These findings have significant implications for current and future counseling professionals (including supervisors and counselor educators). Counseling programs and agencies can work towards developing and implementing emotional management or EI workshops to educate counselors-in-training and practicing counselors on the dangers of burnout and provide strategies to cultivate traits negatively correlated with burnout (Bogs, 2011). Interventions focused on EI enhancement (e.g., mindfulness) can be implemented in counseling programs and agencies. The perception of one’s EI abilities was not as strongly related to one’s level of burnout as the perception of one’s traits and abilities. Counselor educators could perhaps implement psycho-educational programs for counselor trainees focusing on the development of one’s perception of his or her traits and abilities (since perceptions of both are more highly inversely correlated with burnout).

Limitations and Future Research

The researchers acknowledge the following limitations to the study. First, the instruments used to obtain data were self-report measures. Second, the samples used to collect EI and burnout data were convenience samples; a student population was recruited. However, the researchers did not account for the impact of school stressors on burnout, which may be a contributing factor (IsHak et al., 2013). Third, it is possible that social desirability was at work during the data collection process, influencing the results; for example, some students might have wanted to appear “mentally healthy” when they were, in fact, burned out. Fourth, is the likelihood that individuals who were already burned out chose not to participate in this study. Given these limitations, the researchers caution readers seeking to interpret the findings reported.

Future research could focus on developing a comprehensive model of intervention for mental health counselors to prevent and/or buffer burnout taking a two-pronged approach emphasizing both EI abilities and traits; both are correlated with counselor burnout. Research should also test the efficacy of such models with pre and post measures, using longitudinal designs. The study should be replicated with counselors in practicum, internships,
residency, and full-time practice using non-self-report ability based EI measures (i.e., MSCEIT). Researchers should also examine whether EI training (such as Caruso’s ability based training) could be developed and implemented for Petrides’ trait based EI to see if counselors-in-training efforts to increase EI would be associated with subsequent decreases in burnout. Finally, future research should also focus on hypothesizing and testing mediating models of EI and burnout.

Conclusion

In spite of the limitations of this study, the results provide some information that may be useful to counselors-in-training, counselors, counselor educators, supervisors, and program administrators in understanding the nature of the relationship between EI and counselor burnout. Results suggest that increases in EI specifically self-control and wellbeing factors may be associated with decreases in counselor burnout. Future research should seek to replicate findings with a more heterogeneous sample. In addition, research should focus on the development of programs curriculums specifically for counselors, to enhance these EI factors. Subsequent research could also test the efficacy of such EI training programs aimed at enhancing EI and decreasing counselor burnout.

Author Note

John J. S. Harrichand is a Doctoral Student and Graduate Teaching Assistant in the Department of Counselor Education and Family Studies (DCEFS) at Liberty University. Anita M. Knight is an Associate Professor in the DCEFS at Liberty University. Dorin Captari is a former graduate counseling student at Liberty University. Correspondence regarding this article should be directed to John Harrichand at jharrichand@liberty.edu

References


