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Preventing Burnout among Mental Health Professionals in Charlotte, NC

Robert Marcy

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COUN 6785: Social Change in Action:
Prevention, Consultation, and Advocacy

Social Change Portfolio

Rob Marcy

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OVERVIEW

Keywords: Advocacy, Burnout, Charlotte, Counseling, Counselor, Helping Profession, Mental Health Professionals, MSJCC, Multicultural and Social Justice Competencies, North Carolina, Prevention, SCT, Self-Care, Self-Efficacy, SEM, Social-Ecological Model, Social Cognitive Theory, Structural Theory

Preventing Burnout among Mental Health Professionals in Charlotte, NC

Goal Statement: The goal of this social change project is to find ways of preventing burnout among mental health professionals in Charlotte, North Carolina.

Significant Findings: Burnout among mental health professionals is a critical issue for which prevention strategies can be highly effective. Charlotte, North Carolina, is one of the country's fastest-growing cities, with demand for services, including those provided by mental health professionals, increasing with the growing population. Charlotte's population growth, coupled with the lingering impacts of COVID-19, places Charlotte's mental health professionals at increased burnout risk. Burnout among mental health professionals negatively impacts the individual and the clients and communities they serve. Physical and emotional exhaustion leading to the depersonalization of clients and professional impairment are significant burnout risks for mental health professionals (Posluns & Gall, 2019). Theoretical models such as the social-ecological model, social cognitive theory (SCT), and structural theory help to understand burnout risk and protective factors in the mental health profession. White female mental health professionals are at increased risk of burnout mainly due to their disproportionate representation in the field. Self-care is an essential protective factor against burnout and requires advocacy at

the institutional, community, and public policy levels to be effective among individual mental health professionals. Increasing education and awareness of burnout risks and prevention options is critical to reducing burnout among mental health professionals in Charlotte, North Carolina.

Objectives/Strategies/Interventions/Next Steps: The objective is to prevent burnout among mental health professionals in Charlotte, North Carolina, and ideally among professionals nationwide. Strategies and interventions for reducing burnout risk include 1) advocating for The Council for Accreditation of Counseling and Related Educational Programs (CACREP) to include more specific curriculum requirements related to self-care and burnout prevention; 2) encouraging mental health professional organizations to include burnout education and awareness on their websites and in their programming; 3) understand local, state and federal legislation and voice objections to policies that will increase demand for mental health services; 4) advocate for sufficient funding for mental health services at the state and federal levels; 5) encourage and help implement self-care support and burnout awareness programs at places of employment. It is essential that mental health professionals understand their burnout risks, can recognize burnout in others and have strategies and support in place for mitigating those risks.

INTRODUCTION

Preventing Burnout among Mental Health Professionals in Charlotte, NC

Everyone has probably asked themselves at one point in their lives, “What do I want to be when I grow up?” I doubt anyone has determined they wanted to be a burned-out mental health professional, but sadly, burnout among this group of professionals is a problem. Burnout in mental health professionals includes emotional exhaustion, depersonalization of clients,

including negative and cynical attitudes towards them and the work itself, and feelings of overwhelm and lack of personal accomplishment (Yang & Hayes, 2020). Burnout rates among mental health professionals have been estimated to be between 21% to 67%, with the highest rates in community mental health leaders and community social workers (Rollins et al., 2021). Burnout is a significant problem and can be more difficult to treat among mental health professionals leading to the increased need for prevention (Posluns & Gall, 2019).

PART 1: SCOPE AND CONSEQUENCES

Preventing Burnout among Mental Health Professionals in Charlotte, NC

Charlotte, North Carolina, is a rapidly growing city with diverse industries and populations. Charlotte is one of the fifteen fastest-growing cities, with a population increase of over 27% between 2008-2018 (Hammarberg et al., 2022). Such rapid growth requires increasing services, including those provided by mental health professionals, thus increasing the risk of burnout. The impact of COVID-19 has also increased the risk for burnout (Iovino, 2023), adding additional pressure for Charlotte mental health professionals.

Burnout affects many aspects of a person's life. Physical mental health problems such as headaches, muscular pain, anxiety, and depression are symptoms of burnout which can reduce the therapeutic effectiveness of a mental health professional (Posluns & Gall, 2019). Additional physical signs of burnout include flu-like and gastrointestinal symptoms, sleep issues, and back and neck pain (Yang & Hayes, 2020). The emotional and physical exhaustion and depersonalization of clients seen with burnout can lead to seriously inappropriate behaviors due to professional impairment that can harm clients (Posluns & Gall, 2019). Physical and mental

health challenges impact all aspects of an individual's life, including relationships with friends and family.

Initiatives towards professional development, personal growth, and overall well-being decline for mental health professionals with burnout and affects both the practitioner and the client (Posluns & Gall, 2019). Burnout also contributes to negative job satisfaction and higher turnover in the workplace (Yang & Hayes, 2020). High turnover increases costs to organizations due to the need to rehire and retrain and can negatively impact a professional's income and ability to support their household financially.

Burnout is a significant problem in the workplace and is particularly challenging for mental health professionals. Treating burnout reactively is difficult, increasing the importance of prevention and proactive approaches to addressing burnout (Posluns & Gall, 2019). Mental health professionals in Charlotte, where the population is rising rapidly, are at a greater risk for burnout, indicating a need for effective preventative options. The goal of this social change project is to find ways of preventing burnout among mental health professionals in Charlotte, North Carolina.

PART 2: SOCIAL-ECOLOGICAL MODEL

Preventing Burnout among Mental Health Professionals in Charlotte, NC

To develop a prevention strategy for burnout among mental health professionals, it is essential to understand the factors that put this population at risk. The social-ecological model is a framework that considers the importance of the individual, relationship, community, and societal factors to understand better potential risks and protective factors (CDC, n.d.).

Bronfenbrenner's ecological model theorizes that an individual's development is affected by the many different influences in their life, from their immediate family to the broader society (Guy-

Evans, 2020). The social-ecological model expands Bronfenbrenner's work recognizing the importance of intervening across multiple systems to protect people's physical and mental health (Habeger et al., 2022). Understanding the risks and protective factors of mental health professionals through the lens of the social-ecological model will help to develop prevention strategies better to reduce burnout.

Mental health professionals have characteristics that both increase and decrease their burnout risk. Biology, personal beliefs, education, self-concept, past experiences, and developmental history contribute to the individual's burnout risk factors (Habeger et al., 2022). Factors that can reduce burnout include training, mentorship, mindfulness practice, self-care, and work-life balance (Habeger et al., 2022). Mental health professionals who have successfully and consistently incorporated these elements into their lives have created protective factors that reduce their burnout risk. Conversely, those who have neglected these crucial strategies are at a higher risk for burnout. Professional competence and self-efficacy have been identified as burnout protective factors (Yang & Hayes, 2020). Mental health professionals with trauma histories, other mental health challenges, and distresses in their personal lives are at higher risk for burnout; those who are seeing professional help for their trauma and other personal and mental health concerns reduce their burnout risk (Yang & Hayes, 2020).

Relationships with others play an essential role in an individual's life. Strong connections with others, such as family members and friends, are burnout protective factors at the relationship level (Habeger et al., 2022). Strong relationships with mentors, peers, and supervisors are additional protective factors for mental health professionals (Habeger et al., 2022). Therefore, mental health professionals lacking strong and healthy connections with others are at greater risk for burnout.

Community factors are essential in burnout awareness and prevention. Communities include schools, workplaces, and neighborhoods (CDC, n.d.) For mental health professionals, the setting in which they practice is an important aspect of their community. Organizations that apply burnout prevention techniques such as solid communication pipelines, self-care support, and encouragement of peer relationships provide their mental health professional staff with important protective factors (Habeger et al., 2022). Fast-paced, over-burdened settings and jobs where the mental health professional has less autonomy have been shown to have increased burnout risk (Yang & Hayes, 2020). Mental health professionals working in private practice or settings with more autonomy over their decisions seem to have protective factors against burnout (Yang & Hayes, 2020). High workload has also contributes to burnout for mental health professionals (Yang & Hayes, 2020).

The last level in the social-ecological model is societal influence. Societal factors include social and cultural norms, policies that impact health, economic, educational, and social action (CDC, n.d.). High workloads are a risk factor for mental health professionals, and staffing levels at agencies that are government funded are impacted by policies and funding decisions, which can directly impact a mental health professional's workload. Discriminatory policies such as those enacted against LGBTQ+ people can increase demand for mental health professionals and strain workloads. Focusing on collaborative efforts among community groups and industries creates protective factors against burnout (Habeger et al., 2022).

A variety of factors causes burnout in mental health professionals. Individual, relationship, community, and societal influences all impact burnout in mental health professionals. The social-ecological model provides a solid framework to understand burnout's etiology and develop prevention strategies (Habeger et al., 2022).

PART 3: THEORIES OF PREVENTION

Preventing Burnout among Mental Health Professionals in Charlotte, NC

The social-ecological model provides a framework for better understanding burnout in mental health professionals and helps develop prevention programs to reduce burnout in the profession. Understanding human behaviors and the environments in which they occur is critical for creating programs with successful outcomes (National Cancer Institute, 2005). Theories are abstract yet systemic ways of understanding concepts, definitions, and proposals that can help to explain and predict events (NCI, 2005). Theories provide tools for developing interventions based on understanding behavior rather than just through intuition (NCI, 2005). There are numerous theories that can be used to understand burnout better, two of which are Social Cognitive Theory (SCT) and Organizational Theory.

Social Cognitive Theory (SCT) is one approach to better understanding burnout. SCT looks at the influence that human behavior and personal and environmental factors have on each other and the individual (NCI, 2005). According to Edú-Valsania et al. (2022), SCT emphasizes the roles of self-efficacy, self-confidence, and self-concept in developing burnout. Self-efficacy is a person's confidence in their ability to take action and overcome challenges (NCI, 2005). Burnout is triggered when a worker doubts their effectiveness (Edú-Valsania et al., 2022). An efficacy crisis begins when a person doubts their effectiveness and can lead to low personal realization, emotional exhaustion, and depersonalization (Edú-Valsania et al., 2022). Self-efficacy is critical for mental health counselors, and depersonalization of clients is a significant burnout risk with these professionals. Individuals with self-efficacy believe they can take steps to impact their lives positively (NCI, 2005). They are motivated to take action leading to

change, which positively affects both the environment and the person (NCI, 2005). When examined through an SCT lens, burnout prevention must include improved self-efficacy.

Structural theory is another theoretical lens through which burnout can be better understood. According to Edú-Valsania et al. (2022), structural theory maintains that burnout occurs when an individual's coping strategies for managing work stress fail, leading to a low sense of fulfillment, emotional exhaustion, and professional failures. Ineffective coping strategies are replaced with the depersonalization of clients which negatively impacts the health of both the individual and for organizations (Edú-Valsania et al., 2022). Effective strategies for coping with stress which are vital for mental health counselors, including the reduction of client depersonalization, is a critical component of effective burnout prevention supported by the structural theory.

Burnout in mental health counselors is a growing problem for which prevention programs are needed. In their literature review, Posluns and Gall (2019) conclude that self-care practices are critical to prevent burnout in mental health professionals and create greater well-being, lower stress levels, and higher positive affect levels. Self-care relates to one's ability to reduce stress, anxiety, and emotional reactions and to refuel oneself healthily (Posluns & Gall, 2019). According to Posluns and Gall (2019), "Mental health practitioners often use a variety of self-care practices that address areas of awareness, balance, flexibility, physical health, social support, or spirituality" (p. 4). Self-care has been proven effective by empirical research and is recommended as a preventative approach by occupational researchers, and master therapists (Posluns & Gall, 2019). According to Posluns and Gall (2019), proactive self-care can reduce adverse outcomes for mental health counselors and improve outcomes for client care (Posluns &

Gall, 2019). The criticality of self-care for mental health professionals is supported by reviewing burnout using the socio-ecological model and through SCT and structural theoretical lenses.

PART 4: DIVERSITY AND ETHICAL CONSIDERATIONS

Preventing Burnout among Mental Health Professionals in Charlotte, NC

Mental health counselors in Charlotte and across the United States represent professionals with diverse, intersectional identities. Mental health counselors represent people from different racial, ethnic, socioeconomic, and cultural backgrounds. The profession, however, is disproportionately represented by female practitioners, which is easily verified by any number of internet searches of professional organizations and other repositories, with some statistics showing women representing around 75% of mental health counselors.

Given the disproportionately high number of female mental health counselors, it seems logical to consider the needs of female professionals when planning prevention programs. Existing studies have produced inconsistent results regarding the relationship between gender and burnout, although some evidence suggests women to be somewhat more at risk than men (Yang & Hayes, 2020). According to Edú-Valsania et al. (2022), studies indicate that low professional fulfillment and emotional exhaustion are more common among women than men. Working women responsible for household chores have additional risk factors as they may have more difficulty balancing their personal and professional lives than their male counterparts (Edú-Valsania et al., 2022).

There is also inconclusive evidence correlating other demographic factors to burnout in mental health counselors. Some evidence suggests that non-White professionals experience

lower levels of burnout due to better use of social support systems and better resiliency in facing overall life challenges (Yang & Hayes, 2020). Parental status may be a protective factor as research has shown that having children may lower burnout risk due to the healthier work-life balance required of parents (Yang & Hayes, 2020). Therefore, single, White women seem to be at the highest risk for burnout in the mental health profession, primarily due to their disproportionate representation in the field.

In considering a program to prevent burnout in mental health professionals, it is critical to adhere ACA Code of Ethics standards, with some specific standards being especially relevant. Connection with others is essential to preventing burnout, and counselors understand the importance of support networks in their clients' lives and consider involving them when appropriate (American Counseling Association, 2014, Std. A.1.d). Burnout affects people from all demographic categories, and counselors must communicate information in developmentally and culturally appropriate ways, using clear and understandable language (ACA, 2014, Std. A.2.c). Clients in the program will be mental health professionals, and counselors must consider the risks and benefits of accepting clients with whom they have had a previous relationship (ACA, 2014, Std. A.6.a), including individuals with whom prior professional relationships may exist. Advocacy is expected to be a critical component of the burnout prevention program, and when appropriate, counselors advocate at the individual, group, institutional, and societal levels to benefit client growth (ACA, 2014, Std. A.7.a). Screening individuals for appropriate participation in the program is essential, and counselors must screen prospective participants and select those whose needs and goals are compatible (ACA, 2014, Std. A.9.a).

Beneficence and nonmaleficence are two professional, ethical principles in the ACA Code of Ethics (ACA, 2014). Beneficence requires counselors to work for the good of their

clients and society, and nonmaleficence requires counselors to avoid actions that cause harm (ACA, 2014). A mental health professional in burnout will be challenged to adhere to these principles and may be unintentionally unable to perform in ways that will benefit their clients and ensure no harm is inflicted upon them because of their professional impairment due to their burnout.

Diversity and ethical considerations are critical to take into consideration in developing burnout prevention strategies for mental health counselors. Single, White females are most likely to benefit from prevention programs due primarily to their disproportionate representation in the field. Adherence to the ACA Code of Ethics is essential with several standards that are especially relevant to this prevention portfolio discussed in the previous paragraph.

PART 5: ADVOCACY

Preventing Burnout among Mental Health Professionals in Charlotte, NC

Culturally-competent counselors have long recognized advocacy as a critical aspect of their professional identities. Counselors serve as change agents and advocates, understanding that their clients often need more than what their direct counseling services can provide (Toporek et al., 2009). The ACA recognizes that advocacy is a core part of a counselor's professional identity (Toporek et al., 2009). The Multicultural and Social Justice Counseling Competencies (MSJCC) provide counselors with a framework for integrating multicultural and social justice competencies, including advocacy, into their professional work (Multicultural and Social Justice Counseling Competencies [MSJCC], 2015). According to the MSJCC, three levels at which counselors intervene on behalf of their clients are the institutional, community, and public policy

levels (MSJCC, 2015) effectively preventing burnout in mental health professionals through advocacy needs to happen at all three of these levels.

The institutional level provides excellent opportunities for burnout prevention in mental health professionals. MSJCC's institutional level includes schools (MSJCC, 2015). Colleges and universities that educate mental health professionals are uniquely positioned to provide education on burnout prevention. In fact, given the gatekeeper responsibilities of these institutions, burnout prevention must be included in curriculums for mental health professionals. The Council for Accreditation of Counseling and Related Educational Programs (CACREP) curriculum needs more specific guidance for self-care and wellness strategies to mitigate burnout risk (Harrichand et al., 2021). Harrichand et al. (2021) stress the importance of establishing self-care and wellness requirements CACREP curriculum to instill the importance of these practices in future mental health professionals, highlighting its increased importance due to COVID-19. Harrichand et al. (2021) suggest practices such as student reflection on their wellness routines and creating wellness plans as curriculum requirements. Mental health professionals in Charlotte are educated by CACREP-accredited institutions throughout the country. Increasing the specificity of burnout prevention in the CACREP curriculum is an essential step in preventing burnout in the profession.

The community level of the MSJCC is also critical for effective burnout prevention advocacy. Community reflects societal norms, values, and regulations (MSJCC, 2015). The mental health professional community consists of professionals from a number of different fields, including counseling, social work, psychotherapists, and psychologists. Mental health professionals help clients with burnout, but who helps the mental health professional? Burnout prevention advocacy among mental health professionals is critical. North Carolina Counseling

Association (NCCA) is the state branch of the ACA with members in various work settings in North Carolina. Given the burnout-related risks to mental health professionals and their clients, prevention should be an easily-identifiable resource on NCCA's website or in its publication, Carolina Counselor. NCCA is one example of an organization through which burnout awareness and prevention opportunities and strategies must be promoted.

Public policy has a significant impact on mental health professionals throughout various work environments. In particular, burnout appears to be common and increasing in public mental health settings (Morse et al., 2012). The excessive workloads from high caseloads and paperwork requirements for Medicare reimbursements contribute to burnout risk (Morse et al., 2012). Advocacy for publicly-funded mental health settings is needed to ensure funding levels are sufficient for the agencies to hire and support staffing levels to meet client needs. Ensuring appropriate workloads and adequate mental health funding are steps toward burnout prevention in the field. According to Toporek et al. (2009), many counselors now understand how to impact politics due to having a long history of working on political issues affecting their work. To prevent burnout among their peers, mental health professionals must stay on top of proposed legislation that might impact burnout risk by decreasing mental health funding or increasing stressors on the profession in other ways.

Advocacy is critical in preventing burnout in mental health professionals in Charlotte, NC. It is crucial that advocacy opportunities do not further burden these already stressed professionals. Professional organization involvement and changes to CACREP curriculum requirements are critical in developing prevention strategies to effect change. Professionals must also stay engaged with legislation that impacts their fields and can leverage their professional organizations in doing this.

REFERENCES

- American Counseling Association. (2014). *2014 ACA code of ethics*. Alexandria, VA.
<https://www.counseling.org/resources/aca-code-of-ethics.pdf>
- CDC. (n.d.). *The social-ecological model: A framework for violence prevention*. Retrieved from <https://www.cdc.gov/violenceprevention/about/social-ecologicalmodel.html>
- Edú-Valsania, Sergio, Laguía, Ana, & Moriano, Juan A. (2022). Burnout: A Review of Theory and Measurement. *International Journal of Environmental Research and Public Health*, *19*(1780), 1780. <https://doi.org/10.3390/ijerph19031780>
- Guy-Evans, O. (2020, Nov 09). *Bronfenbrenner's ecological systems theory*. Simply Psychology.
<http://www.simplypsychology.org/Bronfenbrenner.html>
- Habeger, A. D., Connell, T. D. J., Harris, R. L., & Jackson, C. (2022). Promoting Burnout Prevention Through a Socio-Ecological Lens. *Delaware Journal of Public Health*, *8*(2), 70–75. <https://doi.org/10.32481/djph.2022.05.00>
- Hammarberg, R., et al.: ‘Hot cities’ and rapid growth; experiences and responses of urban planning departments. *IET Smart Cities*. *4*(3), 175– 183 (2022). <https://doi.org/10.1049/smc2.12037>
- Harrichand, J. J. S., Litam, S. D. A., & Ausloos, C. D. (2021). Infusing self-care and wellness into cacrep curricula: Pedagogical recommendations for counselor educators and counselors during covid-19. *International Journal for the Advancement of Counselling*.
<https://doi.org/10.1007/s10447-021-09423-3>

Iovino, F. (2023). Beating Burnout at Work: Why Teams Hold the Secret to Well-Being and Resilience. *Academy of Management Learning & Education*, 22(1), 152–154.

<https://doi.org/10.5465/amle.2021.0465>

Morse, G., Salyers, M. P., Rollins, A. L., Monroe-DeVita, M., & Pfahler, C. (2012). Burnout in Mental Health Services: A Review of the Problem and Its

Remediation. *ADMINISTRATION AND POLICY IN MENTAL HEALTH AND MENTAL HEALTH SERVICES RESEARCH*, 39(5), 341–352. [https://doi.org/10.1007/s10488-011-](https://doi.org/10.1007/s10488-011-0352-1)

0352-1National Cancer Institute (2005). *Theory at a glance: A guide for health*

promotion practice . Washington, DC: U.S. Department of Health and Human Services:

National Institutes of Health. <https://cancercontrol.cancer.gov/sites/default/files/2020-06/theory.pdf>

Multicultural and Social Justice Counseling Competencies.. (2015). Retrieved October 27, 2015, from <http://www.counseling.org/docs/default-source/competencies/multicultural-and-social-justice-counseling-competencies.pdf?sfvrsn=20>

Posluns, K., & Gall, T. L. (2020). Dear mental health practitioners, take care of yourselves: A literature review on self-care. *International Journal for the Advancement of Counselling*, 42(1), 1–20. <https://doi.org/10.1007/s10447-019-09382-w>

Rollins, A. L., Eliacin, J., Russ-Jara, A. L., Monroe-Devita, M., Wasmuth, S., Flanagan, M. E., Morse, G. A., Leiter, M., & Salyers, M. P. (2021). Organizational conditions that influence work engagement and burnout: A qualitative study of mental health workers. *Psychiatric Rehabilitation Journal*, 44(3), 229–237.

<https://doi.org/10.1037/prj0000472.supp> (Supplemental)

Toporek, R. L., Lewis, J. A., & Crethar, H. C. (2009). Promoting Systemic Change Through the ACA Advocacy Competencies. *Journal of Counseling & Development*, 87(3), 260–268.

<https://doi.org/10.1002/j.1556-6678.2009.tb00105.x>

Yang, Y., & Hayes, J. A. (2020). Causes and consequences of burnout among mental health professionals: A practice-oriented review of recent empirical literature. *Psychotherapy*, 57(3), 426–436. <https://doi.org/10.1037/pst0000317>

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