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Emotional and Spiritual Intelligence, Psychological Ownership, Burnout, and Well-Being's Effect on College Counselor Self- Efficacy

Lola Nixon Johnston
Walden University

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Lola N. Johnston

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Walden University
2021

Abstract

Emotional and Spiritual Intelligence, Psychological Ownership, Burnout, and Well-Being's Effect on College Counselor Self-Efficacy

by

Lola N. Johnston

MS, Jacksonville State University, 2010

BS, Berry College, 1990

Dissertation Submitted in Partial Fulfillment
of the Requirements for the Degree of
Doctor of Philosophy
Counselor Education and Supervision

Walden University

May 2021

Abstract

College counselors provide individual and group counseling, consultation and educational outreach services, and supervision for counseling interns as well as serving on committees. As a result, college counselors are at risk of burnout, which could affect self-efficacy. The purpose of this quantitative study was to assess the roles of emotional intelligence, spiritual intelligence, psychological ownership, burnout, and well-being in predicting counseling self-efficacy of college counselors, as emotional intelligence, spiritual intelligence, and psychological ownership have been shown to reduce burnout by enhancing well-being. Using Neuman's system model as a theoretical guide, this study used a quantitative approach using a cross-sectional survey methodology for data collection, and correlational design with multiple regression for data analysis. Participants were recruited using email listservs from various organizations and social media announcements aimed at counselors practicing on college campuses. 143 respondents were measured using the TEIQue-SF, SISRI 24, Psychological Ownership Scale, Counselor Burnout Scale, the sub-scale Well-being from the TEIQue-SF, and CASES. The results of this study affirmed that emotional intelligence positively influenced college counselors' self-efficacy and well-being while negatively influencing burnout. This study provides data on burnout and well-being in college counselors that can be used to inform administrators in higher education on how to improve counselor self-efficacy and reduce potential for burnout. This study has potential for social change by emphasizing the benefits of emotional intelligence in college counseling and the need to support development of emotional intelligence in counselor trainees.

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Dedication

I would like to dedicate this dissertation to my mother, Marlene Nixon. She has modeled for me what it means to be a strong, resilient woman and a servant leader, and I am eternally grateful for her love and support.

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Chapter 1: Introduction to the Study

The mission of college counseling is to foster student development (American College Counseling Association [ACCA], n.d.). College counselors are expected to provide mental health support to college students with individual counseling, mental health educational programs, workshops, and consultations to faculty, staff, and various organizations across campus (Bohner, 2018). In the early years of college counseling on campuses, the counselors were available to students to assist with lifespan adjustments (Meilman, 2016). However, college counseling centers have seen an increase in students seeking counseling services for mental health concerns (Lipson et al., 2019). College counselors now face students with issues such as anxiety, depression, eating disorders, self-harm, post-traumatic stress disorder, borderline personality disorder, sexual assault, and suicidal ideation (Meilman, 2016). Additionally, college counselors assist students in dealing with economic concerns, weather-related disasters, social and racial unrest, and global pandemics. As with other counseling occupations where there is long-term exposure to secondary trauma and mental disorders, college counselors are at risk for burnout. Qualities that have been studied in helping professionals in relationship to burnout include (a) emotional intelligence, (b) spiritual intelligence, (c) psychological ownership, and (d) wellness, or well-being.

To summarize, emotional intelligence indicates the ability to recognize, understand, and manage the emotions of self and others. It includes such factors as empathy, stress management, and self-awareness (Goleman, 2006). Spiritual intelligence involves the inner link of life, soul, and mind to the external world of the individual,

adding meaning and value to personal beliefs. Spiritual intelligence is a core ability and guides other abilities, especially that of emotional intelligence, which reduces potential for burnout (Kaur et al., 2013). Psychological ownership addresses personal attitudes and behaviors within the workplace. It is how people feel about the work they do.

Psychological ownership is both cognitive and affective, reflecting a relationship between individuals and their work that influences self-concept (Su & Ng, 2019). Counselor self-efficacy refers to their ability to conduct counseling sessions involving behaviors, techniques, and clinical management between the counselor and the client (Lent et al., 2003). Counselor self-efficacy is positively correlated with counselor performance (Kissil et al., 2015).

This study addressed the relationships of emotional intelligence, spiritual intelligence, psychological ownership, burnout, and well-being on the self-efficacy of college counselors. This research addressed a gap in the literature and will positively influence social change by drawing attention to college counselors' risk of burnout and its possible impact on clients. The results of this study could help inform education and training efforts to reduce college counselors' burnout, thereby increasing overall well-being and strengthening counselor self-efficacy. In this chapter I introduce the study along with a brief description of the background, problem statement, purpose of the study, research questions (RQs) and hypotheses, theoretical framework, nature of the study, definitions of terms, assumptions, limitations, delimitations, and significance of the study. The chapter ends with a chapter summary.

Background

In this research study I analyzed the relationship between (a) emotional intelligence, (b) spiritual intelligence, (c) psychological ownership, (d) burnout, and (e) well-being and counselor self-efficacy. The following sections cover each of these concepts.

Burnout

“Burnout syndrome” is an official medical diagnosis (Kirsch, 2019). Defined as a condition resulting from unmanaged, ongoing stress in the workplace, burnout is made up of three dimensions: (a) mental exhaustion, (b) mental distancing or feeling negatively toward their job, and (c) diminished professional efficiency and feelings of value. Burnout often starts with long-term exposure to difficult and personal issues and results in emotional exhaustion, co-occurring with other job responsibilities and occupational stressors, which leads to counselors’ diminished sense of personal accomplishment (Howard & Navega, 2018; Robino, 2019).

Burnout can be found in all occupations but most often occurs in the helping professions. Helping professionals are exposed to the sufferings of their clients or patients, which often leads to compassion fatigue and vicarious trauma (Blount & Lambie, 2018). Though professionals employ coping strategies that are problem-focused, emotion-focused, or meaning-focused (Howard & Navega, 2018), prolonged exposure to such events put helping professionals at risk for impairment due to burnout (Blount & Lambie, 2018).

Counselor burnout can be detrimental not only to the counselor but to the counseling relationship with the client (Hunter, 2016). However, there have been limited studies focused on burnout in college counselors. From my search, one study showed that increased student caseloads and severity of students' mental health concerns increased burnout in addition to low pay and length of work experience (Wilkinson et al., 2017).

Self-Efficacy

Broadly defined, self-efficacy is a personal judgement, or confidence, of how well an individual can perform actions needed to deal with potential situations (Bandura, 1977). Self-efficacy is an individual's perception of what they know how to do versus what they actually do and is employed across multiple helping professions (Larson et al., 1992). A strong self-efficacy is evidenced by four main sources of information: performance achievements, vicarious experience, verbal influence, and physiological conditions (Bandura, 1977). Self-efficacy is widely accepted as a foundational element of counseling training and development (Lent et al., 2003). Counselor burnout can negatively impact counselor self-efficacy, which may impair the effectiveness of the therapy (Aliyev & Tunc, 2015). Thus, self-efficacy in counseling is considered an essential element of the helping profession. In addition to counselors, psychotherapists, social workers, physicians, nurses, and other helping professionals rely on a strong self-efficacy to provide excellent service to their patients or clients.

Well-Being

Well-being is an overarching concept that includes both hedonic and eudaimonic well-being (Feldman, 2018). Hedonic well-being is associated with subjective emotions

such as happiness and satisfaction with life, whereas eudaimonic well-being involves sense of purpose, talents, and potential. Additionally, well-being is made up of both subjective and objective domains that assess indicators of life satisfaction (Feldman, 2018). Well-being as an overarching concept also includes wellness in addition to perceived happiness. Wellness is an integral part of overall well-being (Mishra, 2018); when personal wellness is not attended to, well-being may suffer, and burnout can occur.

Wellness is a central element of the counseling profession. More than the absence of illness, it encompasses the whole person to address the physical, mental, and social aspects of an individual (Roscoe, 2009). Many professional counseling theories use a wellness approach to therapy, incorporating multiple facets to encourage healing in their clients (Global Wellness Institute, n.d.). Though counselors have knowledge and awareness of the importance of wellness and incorporate it into their practice with clients, sometimes that knowledge does not translate into personal practice. Stressors of daily life, such as heavy workload, take a toll on personal wellness (Blount et al., 2016). Other stressors include lack of control, unsupportive work peers, and poor supervision (Lawson, 2007).

Counselor wellness is an essential component in the counselor profession (Lawson, 2007); counselors who are not well cannot provide high levels of services and risk harm to their clients. Qualities that make up wellness are the qualities that counselors seek to promote in their clients: gratitude, hope, and spirituality as being important to overall wellness (Browning et al., 2019). The consideration of counselor well-being is predictive of perceived wellness and essential to counselor self-efficacy.

Emotional Intelligence

Emotional intelligence includes the ability to discern the meanings of emotions in relationships (Schulte et al., 2004), which can be characterized by empathy, warmth, and social skills (Goleman, 2006). Emotional intelligence is (a) knowing and managing personal emotions, (b) recognizing the emotions of others, (c) motivating oneself, and (d) having the ability to handle relationships competently (Goleman, 2008). Having high emotional intelligence enables a person to develop connections with others through social awareness, showing empathy and concern for the welfare of others (Hacker & Washington, 2017).

Emotional intelligence has been widely studied in numerous occupations and shown to be an effective indicator of success in the workplace. Saklofske et al. (2012) studied undergraduate students and found that emotional intelligence supported positive coping mechanisms and mitigated stress, thereby increasing the likelihood of academic achievement. In the field of healthcare, Habib et al. (2012) found that emotional intelligence is a predictor of life satisfaction in nursing and plays a role in spiritual intelligence. Additionally, emotional intelligence aids in impulse control. Further, Guitierrez et al. (2017) explored emotional intelligence in counselor trainees, noting that effective counselors can monitor their emotions and stress while maintaining empathy. Odaci et al. (2017) also studied the emotional intelligence levels and counseling skills of prospective counselors and showed that higher levels of emotional intelligence promoted greater emotional reflection statements and counseling skills.

Managing emotions is an essential skill when dealing with others and is inherent in those who have high emotional intelligence. Thus, counselors naturally exhibit qualities of emotional intelligence; they have a warm regard for others and show empathy and compassion to those who come to them for help (Gutierrez & Mullen, 2016). In addition to increasing job success, research has positively linked high emotional intelligence as a factor in prevention of burnout in helping professionals such as counselors, doctors, nurses, social workers, and teachers (Bidlan & Sihag, 2014; Gutierrez & Mullen, 2016; Kaur et al., 2013; Pishghadam & Sahebjam, 2012).

Spiritual Intelligence

Another facet of intelligence is spiritual intelligence. Though emotional intelligence addresses the expression of personal characteristics, it is spiritual intelligence that provides the wider foundation that supports both emotional intelligence and intellectual intelligence. Spiritual intelligence is a matter of how the internal world of mind and spirit interacts with the outer world, incorporating the heart, mind, and soul, which provides multiple perspectives (Vaughn, 2002). Spiritual intelligence involves using personal values and meaning to guide thoughts and actions between cognitive intelligence and emotional intelligence (Pant & Srivastava, 2019) as well as holistic, higher-level thinking. Thus, spiritual intelligence is the individual's capability to use multiple approaches to solve problems (Sisk, 2016).

High spiritual intelligence is associated with better mental health (Dash & Patnaik, 2015), and those with high spiritual intelligence are better problem solvers and report an elevated sense of personal wholeness (Mukherjee, 2018). Additionally, those

with high spiritual intelligence tend to be more satisfied in their job and have healthier and happier work lives (Mukherjee, 2018). In short, spiritual intelligence involves inner existence and speaks to values, meaning, and purpose in relationship to the world.

Spiritual intelligence has been studied in nurses, students, and pastors. For example, Sahebalzamani et al. (2013) studied the relationship between spiritual intelligence with psychological well-being and life purposes in nurses and discovered a positive association between psychological well-being and spiritual intelligence. Furthermore, spiritual intelligence enhanced daily life and health through values and meaning, adaptability, and non-materialistic characteristics. Bolghan-Aladi et al. (2014) also studied university students and found a positive relationship between spiritual intelligence and quality of life as well as good mental health. Spiritual intelligence has also been an intrinsic factor in the reduction of compassion fatigue among pastors (Snelgar et al. 2017). Spiritual intelligence can be obtained through the desire to change, personal reflection, and remaining open to new possibilities (Snelgar et al., 2017).

Psychological Ownership

New to the field of college counseling is the construct of psychological ownership, which is a sense of responsibility and feelings of protection for persons or for an organization that shapes behavior (Kaur et al., 2013). Psychological ownership predicts positive outcomes on job satisfaction, commitment, retention, and overall behavior (Liu et al., 2012). Psychological ownership may be a method by which job resources may prevent burnout and increase work engagement (Su & Ng, 2019). For example, Olckers and Enslin (2016) studied psychological ownership in relation to

workplace trust and turnover intent. They defined psychological ownership as being a state of mind where the individual feels an attachment to an object, which is associated with positive emotions and attitudes and can result in greater job engagement and commitment. People who perceive psychological ownership tend to stay at their place of employments and report greater satisfaction trust. Additionally, spiritual intelligence was shown to influence job engagement (Torabi & Nadali, 2016), and research has shown a positive relationship between spiritual intelligence, emotional intelligence, and psychological ownership on caring behaviors (Kaur et al., 2013).

There has been no research discovered examining the role of (a) emotional intelligence, (b) spiritual intelligence, (c) psychological ownership, (d) burnout, and (e) well-being in relation to the counseling self-efficacy of college counselors. This research is needed because of the increased need for services on college campuses. According to the ACCA (n.d.-b), college counselors address and advocate for students of color, those with financial needs, those with mental disorders, and those with histories of traumatic events. This increases the risk of college counselor burnout and may impair self-efficacy, thereby affecting the counseling outcome with the student.

Problem Statement

College counselors are at risk of burnout. Researchers have addressed the reasons for escalating college counselor burnout and its effects (Bohner, 2004; Lin, 2012; Wilkinson et al. 2017), which includes increases in the number of students seeking appointments, increases in the number of students with severe mental disorders, and lack of available resources, particularly when they need to refer students to higher levels of

care. Long-term exposure to difficult and personal issues also results in emotional exhaustion and a diminished sense of personal accomplishment (Wilkerson et al., 2017). Therefore, college counselors are at risk of suffering stress and burnout, which may negatively impact client outcome (Slone, 2015).

Evidence has shown that counselors who experience burnout are unwell (Blount et al., 2016; Lawson, 2007; Lawson & Myers, 2011; Roscoe, 2009). Because wellness is a central element of counseling, it is essential that counselors seek to develop wellness behaviors and habits to offset factors that lead to burnout. However, few studies have been performed on burnout in college counselors. An extensive literature review revealed no studies of burnout in college counselors from the perspective of wellness and internal self-regulation factors such as emotional intelligence, spiritual intelligence, and psychological ownership. This study filled a gap in the literature by providing data on burnout and well-being in college counselors that can be used to inform administrators in higher education on how to address the needs of their counseling staff to improve counselor self-efficacy.

Purpose of the Study

The purpose of this quantitative study was to assess the roles of (a) emotional intelligence, (b) spiritual intelligence, (c) psychological ownership (d) burnout and (e) well-being in predicting counseling self-efficacy of college counselors. This study addresses a largely unexamined population of counselors facing new demands for mental health services on campuses and increasingly at risk for burnout. In studies of other populations emotional intelligence, spiritual intelligence, and psychological ownership

have been shown to enhance the well-being and daily functioning of individuals, and improve job satisfaction and work behaviors, which can reduce the potential for burnout (Odaci et al., 2017; Pant & Srivastava, 2019). Thus, I examined these constructs in relation to counselor burnout. Better understanding of how these self-regulated constructs influence burnout and well-being could lead to greater counselor self-efficacy, which could lead to a more positive therapeutic outcome for the client.

Research Questions

The following exploratory RQs guided this investigation:

RQ1: Do emotional intelligence, spiritual intelligence, psychological ownership, burnout, and well-being predict counselor self-efficacy?

H₀1: Emotional intelligence, spiritual intelligence, psychological ownership, burnout, and well-being do not predict counselor self-efficacy.

H_a1: Emotional intelligence, spiritual intelligence, psychological ownership, burnout, and well-being predict counselor self-efficacy.

RQ2: Do emotional intelligence, spiritual intelligence, and psychological ownership predict well-being?

H₀2: Emotional intelligence, spiritual intelligence, and psychological ownership, do not predict well-being.

H_a2: Emotional intelligence, spiritual intelligence, and psychological ownership, predict well-being.

RQ3: Do emotional intelligence, spiritual intelligence, psychological ownership, and well-being predict burnout?

H₀₃: Emotional intelligence, spiritual intelligence, psychological ownership, and well-being do not predict burnout.

H_{a3}: Emotional intelligence, spiritual intelligence, psychological ownership, and well-being predict burnout.

As a correlational study, this research focused on relationships among the variables to determine how the predictor variables explained the variance in the outcome variables. Predictor variables included (a) emotional intelligence, (b) spiritual intelligence, (c) psychological ownership, (d) burnout, and (e) well-being. The outcome variable was counselor self-efficacy. As this research study employed a quantitative approach, all variables were measured using standardized assessment instruments as follows:

1. Emotional intelligence was measured using the Trait Emotional Intelligence Questionnaire–Short Form (TEIQue–SF, Petrides, 2009).
2. Spiritual intelligence was measured using the Spiritual Intelligence Self-Report Inventory (SISRI; King & DeCicco, 2009).
3. Psychological ownership was measured using the Psychological Ownership Scale (Dyne & Pierce, 2004).
4. Burnout was measured by the Counselor Burnout Inventory (CBI; Lee et al., 2017).
5. Well-being was measured by the factor sub-scale “well-being” in the TEIQue–SF (Petrides, 2009).

6. Counselor self-efficacy was measured using the Counselor Activity Self-Efficacy Scale (CASES; Lent et al., 2003).

Theoretical Framework

Betty Neuman's (2011) systems model guided this study. Using a systems perspective allowed multiple viewpoints of the individual, environment, and the entities that encompass the environment. The model offers a full explanation of how individuals adapt and respond to environmental stressors (Kaur et al., 2013), helping to view individuals holistically and emphasizing the roles of mind, body, and spirit in adaptation to stress and maintenance of wellness. Originally designed as a nursing model, the Neuman systems model has been used in other fields such as business, education, research, and administration (Gonzalo, 2019).

In the Neuman systems model for nursing, patients are assessed based on physiological, psychological, sociocultural, spiritual, and developmental variables, which are inter-connected. The environment is assessed, and consideration is given to how it affects the overall health of the patient. Neuman suggested that both internal and external environments affected the health and well-being of the patient. When stressors overcome the patient's internal tolerance, or line of defense, the patient is vulnerable to illness. This potential can be prevented through intervention, such as through identification of stressors, evaluation of symptoms and strengthening resources, and adjustment to avoid recurrences (Samonte & Vallente, 2020).

For this study, college counselors were identified in the role of the patient system. The Neuman system model fits well into counseling research, and this research in

particular, as offering a systematic view of variables within individuals and inherent to their environments that speak to abilities to resist stress and maintain well-being. It proposes a holistic view of individuals addressing the physiological, psychological, sociocultural, spiritual, and developmental factors, which aligns with counseling's wellness models (Neuman, 2011; Samonte & Vallente, 2020). This study addressed these internal variables within college counselors' (a) wellness (physiological, psychological, and spiritual), (b) emotional intelligence (psychological), (c) spiritual intelligence (spiritual), and (d) psychological ownership (psychological and sociocultural). The Neuman system model provided a theoretical framework for progressive study of the phenomena of burnout in college counselors, with this research focusing on the first phase of how college counselors' internal states may influence their wellness and abilities to create a strong self-efficacy.

Nature of the Study

The nature of this study was exploratory, correlational, quantitative research with a cross-sectional survey design for data collection, with multiple regression data analysis. This type of design allowed a snapshot of college counselors' perceptions at a moment in time, to ascertain perceived emotional intelligence, spiritual intelligence, psychological ownership, burnout, well-being, and counselor self-efficacy, which was the focus of this study. Use of a survey design enabled reaching a greater number of people efficiently, allowed for rapid turnaround of data collection and results, and was cost effective (Creswell & Creswell, 2018).

Using the commercial survey system, Qualtrics, informed consent, a demographic questionnaire, and the standardized assessment instruments described above was provided via email listservs and social media used by various professional associations for college counselors and college administrators. Members of the ACCA, Association for University and College Counseling Center Directors (AUCCCD), and the Alabama College Counseling Association was recruited as the sample for this research. Members of these organizations represent a diverse population, including two-year community colleges, public and private four-year colleges and universities, and historically black universities. The recruitment information also encouraged these college counselors to make the survey available to their peer college counselors who were not members of one of these professional associations. As a member, I placed the survey on an email listserv, and on private Facebook group pages. The first page of the survey stated its purpose and provided the opportunity for respondent's informed consent to use their data.

The dependent variable was counselor self-efficacy, as defined by the CASES. Independent variables were emotional intelligence, as defined by the TEIQue-SF, spiritual intelligence, as defined by the SISRI, psychological ownership as defined by the Psychological Ownership Scale, burnout, as defined by the CBI, and well-being as defined by the factor sub-scale "well-being" of the TEIQue-SF. Demographic data was collected as well and was the basis for descriptive statistics.

These survey questionnaires yielded various rating scales, providing data captured largely at the interval/ratio level. I used the Statistical Package for the Social Sciences (SPSS) statistical software program to analyze the data. The data analysis included both

descriptive and inferential statistics, with multiple regression analysis being used to address the primary RQs. It was anticipated that the results of this study would show the roles that emotional intelligence, spiritual intelligence, psychological ownership, burnout, and wellness play in the self-efficacy of counselors on college campuses.

Definitions

Burnout: A state of mental, emotional, and physical exhaustion caused by prolonged stress. Symptoms include feeling overwhelmed, despondent, lack of energy, and cynicism toward self, others, and work responsibilities (Howard & Navega, 2018).

College counselor: A licensed mental health professional that works in the field of higher education (Bohner, 2018).

Counselor self-efficacy: The belief of the counselor in their own ability to perform counseling-related tasks and behaviors (Bagheri et al., 2011).

Emotional intelligence: The ability to understand, use, and manage emotions in self and others (Goleman, 2018).

Psychological ownership: The feeling that something belongs to you. It is typically related to positive outcomes of motivation and loyalty to a company, business, or organization (Kaur et al., 2013).

Self-efficacy: The belief of an individual in their own ability to perform behaviors essential to deliver specific performance achievements (Bandura, 1977).

Spiritual intelligence: The ability to perceive higher meanings, values, and purpose in one's life. Able to self-reflect to obtain self-awareness and insight (Pant & Srivastava, 2019).

Well-being: The perception of contentment, satisfaction, and happiness with life, along with the absence of negative emotions such as depression and anxiety. Includes physical, economic, social, psychological, and emotional factors in addition to fulfillment in work activities and purpose (Centers for Disease Control and Prevention [CDC], n.d.).

Wellness: More than an absence of illness, wellness is a state of physical, mental, and social well-being. It is associated with a holistic state of being well (Blount et al., 2016).

Assumptions

The important variables in this study were constructs that are widely used in the helping professions. It was assumed that these constructs exist and can be captured quantitatively via psychometrically sound standardized assessment instruments. It was also assumed that the respondents were trained and educated mental health counselors providing mental health services on college and university campuses. It was assumed that the respondents provided honest and accurate answers to the self-reported assessments. Finally, results provided by Qualtrics and analysis provided by the SPSS software program were assumed correct.

Scope and Delimitations

This study was the first phase of a larger research agenda. Working from the Neuman systems model, this research focused on assessing counselors' psychological, sociocultural, and spiritual variables. Results of this study are applicable to college counselors. The important variables of the study were selected as being capable of self-regulation. Self-regulation can be taught, so counselor educators and higher education

administrators may also find the results useful. However, the focus of the study was on internal states of college counselors and did not address external factors in their work environments or other variables that might influence their work with clients. Variables such as availability of resources, student presentations of concerns, diversity, and counselor education were not under consideration in this study. These variables may be appropriate for consideration in further research.

Contact with the potential sample was made through email listservs and social media available to members of professional associations for college counselors and administrators. These individuals were encouraged to make the survey available to their college counselor peers who might not be members of any professional associations, but it was anticipated the sample was largely members of professional associations. However, not all college counselors are members of organizations, so it was understood that these organizations may not reach the entire intended population.

Limitations

This study was potentially limited by both internal and external validity. Internal validity limitations include potential mortality due to the number of assessments involved in the survey. Additionally, as the primary researcher, I did not provide any reimbursement as incentive to complete the surveys, which may have disinclined some to participate (Kang, 2016). An external validity concern is that this research was limited to college counselors who are members of the ACCA, AUCCCD, and the Alabama College Counseling Association. Results cannot be generalized to other counseling specialties and settings. The study was also limited by the unknown factors of participant environment,

which could influence attitude and mood of the respondents (Wargo, 2015). However, the variables chosen were not particularly volatile, so they were not easily influenced by changes in mood and attitude. Another potential limitation was the choice of measurement instruments. Though all instruments present evidence of being psychometrically sound, no study was discovered using the psychological ownership scale and spiritual intelligence with a counselor population and in a counseling setting.

Significance

Counselor wellness and overall well-being is essential to prevent impairment (Robino, 2019). The American Counseling Association *Code of Ethics* (2014) mandates that counselors monitor themselves for signs of possible impairment to reduce potential for harm to the client. Counselors who are well are more apt to have stronger self-efficacy. Insights from this study may be useful to counselors in college settings and student affairs administrators by increasing awareness of college counselors' perceived personal burnout and wellness, how those are influenced by emotional intelligence, spiritual intelligence, and psychological ownership, and how they influence self-efficacy. The results of this research could inform a paradigm shift of training in wellness promoting activities, such as ways to implement self-care into daily routines, and maintain or improve the counselor's "emotional, physical, mental, and spiritual well-being to meet their professional responsibilities" (American Counseling Association, 2014, p. 8).

Summary

This chapter introduced the distinctive role college counselors have on college campuses. It is college counselors who faculty, staff, and administration turn to when faced with struggling students. Yet few studies have been performed on how college counselors are faring amid the increasing demand for their services. This study focused on how emotional intelligence, spiritual intelligence, psychological ownership, burnout, and wellness influence counselor self-efficacy. Chapter 2 will provide an overview of prior research that formed the basis for identification of the gap this study addresses.

Chapter 2: Literature Review

Counselor self-efficacy describes the view counselors have of their skills and abilities to successfully help their client (Ender et al., 2018). Counselor self-efficacy involves three factors: (a) perceived competence in helping skills, (b) effective management of sessions, and (c) the ability to navigate difficult situations. Therefore, counselor self-efficacy is a vital part of the therapeutic process (Lent et al., 2003). Yet counselor burnout can impair self-efficacy. Counselor burnout can occur from both external factors, such as heavy workload and poor work relationships, and internal factors such as emotional exhaustion and compassion fatigue. The helping professions such as doctors, nurses, emergency personnel, teachers, psychologists, social workers, counselors, and counseling students have been widely studied (Bearse et al., 2013; Gutierrez & Mullen, 2016; Howard & Navega, 2018; Kaur et al., 2013; Thompson et al., 2014; Wardle & Mayorga, 2016) due to the prevalence of burnout in these occupations. But few studies have addressed burnout in college counselors (Bohner, 2018; Lin, 2012; Wilkerson & Wacha-Montes, 2017).

The purpose of this study is to assess the roles of (a) emotional intelligence, (b) spiritual intelligence, (c) psychological ownership, (d) burnout, and (e) well-being in predicting the strength of counselor self-efficacy among college counselors. There are ways to mitigate burnout, which would enhance counselor self-efficacy. A better understanding of how these self-regulating factors influence counselor self-efficacy could lead to more effective counseling outcomes between counselor and client and potentially increase counselor well-being.

This chapter will address how I conducted a literature search and my theoretical foundation. Additionally, I provide information related to other studies on the variables of counselor self-efficacy, burnout, well-being, emotional intelligence, spiritual intelligence, and psychological ownership. This literature examination led me to the discovery of a gap in information and directed the purpose of my study.

Literature Search Strategy

To obtain a comprehensive review of the literature, my search strategy included the use of commercial databases. These included Academic Search Complete, APA PsychInfo, ERIC, ScienceDirect, SocINDEX with Full Text, Thoreau Multi-database, SAGE Journals, and Google Scholar. In the interest of discovery, no limit was placed on years searched, and included both peer- and non-peer-reviewed articles. Words searched included *self-efficacy, counselor self-efficacy, burnout, emotional intelligence, trait emotional intelligence, spiritual intelligence, psychological ownership, compassion fatigue, burnout, counselor burnout, wellness, well-being, colleges or universities, counseling services, college mental health, and student affairs in higher education*. This search led me to identifying the gap in the literature on burnout and its impact on the self-efficacy in college counseling.

Theoretical Foundation

This study was guided by the Neuman systems model, which was originally developed this as a nursing model (Neuman, 2011). The Neuman systems model advocated that patients be assessed based on physiological, psychological, sociocultural, spiritual, and developmental variables, which are interconnected and can affect a

patient's vulnerability to illness (Samonte & Vallente, 2020). It has since found its way into other fields of study, such as business, education, research, and administration. A systems perspective provides an opportunity for multiple viewpoints, including individual, the environment, and things included in the environment. For instance, the model helps explain how people respond to the environmental stressors in their workplace (Kaur et al., 2013). The Neuman systems model provides a framework that emphasizes the whole person, where the roles of mind, body, and spirit are considered in relation to stressors and personal adaptations to well-being.

For this study, the Neuman system model provided the framework for a systematic view of variables within individuals (college counselors) and inherent to their environments (counseling services). This model helped identify the abilities of counselors to resist stress and maintain well-being. It provided a holistic observation of individuals by addressing the physiological, psychological, sociocultural, spiritual, and developmental factors in keeping with counseling's wellness models (Neuman, 2011; Samonte & Vallente, 2020). Specifically, this model helped identify college counselor (a) well-being (physiological, psychological, and spiritual), (b) emotional intelligence (psychological), (c) spiritual intelligence (spiritual), and (d) psychological ownership (psychological and sociocultural). Therefore, this model guided how college counselor well-being affects their ability to create and maintain a strong counselor self-efficacy.

Literature Review Related to Key Variables

Self-Efficacy: Background

Self-efficacy refers to the belief a person has as to their capabilities to perform or execute actions needed in certain situations (Gunduz, 2012), which facilitates better performance, conscientiousness, and commitment to the job at hand (Iarussi et al., 2013). A person's self-efficacy belief is based not only on their knowledge or skillsets but on their expectation that they can overcome any obstacles or difficulties that they may face. People with positive self-efficacy believe that they can successfully accomplish hard things under pressure and in stressful circumstances, whereas a lack of self-efficacy could mean a person would not attempt a task because they do not believe they can do it (Gunduz, 2012).

Counseling self-efficacy is rooted in Bandura's (1977) theory of self-efficacy (Chandler, 2011). It indicates a counselor's confidence in their ability to work effectively with their client and achieve satisfactory results (Barnes, 2004). Bandura (1977) stated that self-efficacy is guided by four factors: (a) mastery experiences, (b) vicarious learning, (c) verbal persuasion, and (d) emotional arousal. In counseling, mastery experiences involve counseling sessions with clients, and counselor self-efficacy is often higher in those with more experience (Iarussi et al., 2013). Vicarious learning is accomplished through observation; thus, modeling good counseling behaviors enhances the self-efficacy, especially in the early stages of counselor development (Barnes, 2004). Verbal persuasion involves feedback by clients as to the effectiveness of the sessions and the identification of how things can be improved. Emotional arousal speaks to the level of

anxiety the counselor has while engaging in the counseling session. High anxiety hinders a positive self-efficacy (Barnes, 2004).

Counselors with greater self-efficacy tend to perform better, using higher levels of counseling skills (Barnes, 2004). They can form stronger working alliances and more readily see meanings in the client's statements (Barnes, 2004). This ability to execute counseling micro-skills and attending behaviors enhances their effectiveness in goal setting and achievement (Barnes, 2004). This, in turn, increases counselor self-confidence and self-esteem, which reduces their level of anxiety and stress (Iarussi et al., 2013).

Counselor Self-Efficacy: Importance

There have been consistent links between a strong counselor self-efficacy and positive therapeutic outcomes (Chandler et al.2011). Though counseling techniques and theories are important, a strong counseling self-efficacy is essential in comprehending how other people think, feel, self-motivate, and behave (Chandler et al., 2011). Thus, high self-efficacy is an important asset of counselors. It is the belief that they can do what they know how to do and what their training has taught them to do. Counselor self-efficacy involves competence in helping skills, the ability to manage counseling sessions, and the ability to navigate difficult counseling situations (Lent et al., 2003).

Counselor Self-Efficacy: Damages to Counselor Self-Efficacy

Lack of counselor self-efficacy adversely affects counseling sessions with the client. This may occur when the counselor is caught up in the maladaptive behaviors or attitudes of the client or when the client feels that the counselor is not meeting their needs

(Ender et al., 2019). Typically, this leads to increased anxiety that may affect the level of counselor performance and decrease clinical judgement (Schiele et al., 2014)

Counselor Self-Efficacy: Populations Studied

Counselor self-efficacy has been studied in various populations and settings. Iarussi et al. (2013) examined motivational interviewing as a counseling style with graduate-level counseling students, noting that this technique increased their self-efficacy because it can be used to enhance a client's motivation to change. Kissil et al. (2015) examined foreign-born therapists to determine perception of supervisors' multicultural competence and how that influenced counseling self-efficacy. Findings suggested that the more foreign-born therapists felt connected to the U.S. culture, the greater clinical self-efficacy they reported. This was directly related with the confidence they had in their supervisor's multicultural competence; the more they considered their supervisor competent, the higher they perceived their self-efficacy. Also studying counselor supervision, Barnes (2004) described two approaches of self-efficacy theory that can be useful in planning and designing counselor training and supervision interventions. The first approach is the self-efficacy enhancement approach, which uses mastery experiences, including role play; vicarious learning or observing others; verbal persuasion or communicating feedback to trainees; and perceptions of emotional arousal or level of trainee anxiety. The second approach is self-efficacy in context approach, which involves self-reflection training, cognitive and affective experiences, and ability to execute counseling skillsets. Counselor educators and supervisors should seek out their

trainee's level of self-efficacy so that the best approach could be taken to enhance training opportunities.

Among substance abuse counselors, Chandler et al. (2011) found that they rated their self-efficacy high in their ability to recognize and treat clients with substance use disorders, though many counselors referred clients or did not recognize the problem. This may be due to their rate of success or experience in their practice, or some client needs may have been dismissed. Therefore, there is a need for additional Council for Accreditation of Counseling and Related Educational Programs standards on substance abuse that would require stronger training in counselor education curriculum.

Other research has focused on constructs related to self-efficacy. Aliyev and Tune (2014) studied the role of organizational psychological capital, job satisfaction, and burnout in the self-efficacy of counselors. Results of the study indicated a significant, positive correlation between self-efficacy and job satisfaction and a significant, negative correlation between self-efficacy and burnout. However, no difference was found between job satisfaction and burnout, or between psychological capital and burnout. Butts and Gutierrez (2018) also studied mindfulness as it relates to counselor self-efficacy among counselor trainees. Results showed that internal dispositional mindfulness can positively affect counselor self-efficacy, whereas situational distress can negatively impact perceived self-efficacy. The researchers suggested that counselor educators should have awareness of the counseling student's dispositional mindfulness and level of personal distress so that they can influence self-efficacy.

Researchers have also examined self-efficacy among school counselors. Gunduz (2012) examined self-efficacy and burnout in professional school counselors, finding that counselors who do not receive social support and lack job satisfaction are at risk for higher burnout, whereas those who receive support and feedback and have high job satisfaction have higher self-efficacy and less burnout. Also studying burnout in school counselors, Ender et al. (2019) sought to determine whether mindful awareness was effective on hope, burnout, and self-efficacy in school counselors in Turkey. Results showed that counselor burnout and hope facilitated the relationship between counselor self-efficacy and mindfulness. Those who could control their emotions and remain in the present moment during sessions where they were at risk for compassion fatigue or burnout fared better than those without the use of mindfulness. Past failures may have a harmful influence on counselor self-efficacy, so the use of present-moment thinking can positively impact the counseling session and improve counselor self-efficacy. Further, Schiele et al. (2014) studied counseling self-efficacy, quality of assessment and intervention, and knowledge of counseling practices in school mental health and found that counselor self-efficacy predicts the quality of practice and knowledge of evidenced-based practices.

Specific to the university setting, Hu (2017) sought to assess college career counselors' perceived multicultural self-efficacy. As a leader in higher education, the United States has seen an increase in the number of international student enrollment. However, these students face complex challenges. Career counselors should have the knowledge, skills, and abilities to address these challenges. Results of the study showed

moderate self-efficacy among college career counselors, suggesting that additional multicultural training is warranted.

Counselor Self-Efficacy: Relevance to Current Study

Self-efficacy in counseling is considered a vital component of a successful counseling session. A strong self-efficacy can positively influence client outcome, which increases their self-efficacy. However, anxiety and burnout can negatively impact self-efficacy, which could affect the counseling relationship and the overall success of the counseling sessions (Schiele et al., 2014). Because college counselors must have a strong self-efficacy to provide their student clients with the best therapy, this variable was relevant to the current study.

Burnout: Background

The term “burnout” emerged in the 1970s and resonated with those who were experiencing this job-related concept (Schaufeli et al., 2008). Particularly prevalent in the helping professions, burnout got its name from the similarity of the smothering of a candle flame, which cannot burn brightly without the resources needed to keep it replenished. First studied by Freudenberger in 1974, burnout was originally thought to result from feeling exhausted by the cares and concerns of dealing with those in need (Mullen et al., 2017). Later, burnout was defined as emotional exhaustion as well as reduced personal accomplishment among those who work with people (Schaufeli et al., 2017, p. 206). As burnout was studied more in-depth, researchers discovered that the loss of meaning among those experiencing burnout was the most significant, since those in the helping professions find personal satisfaction from helping those in need, and it gives

their life meaning and value. Having a term for what they felt gave a voice to their emotions (Schaufeli et al., 2008).

Burnout: Populations Studied

One of the helping professions often studied for burnout is nursing. Loeff et al. (2018) examined burnout in forensic psychiatric nurses in relation to their personality, emotional intelligence, and client aggression. Both physical and verbal aggression experienced by nurses at the hand of patients have negative psychological affects, but only physical aggression led to burnout. The nurses' ability to manage job stress through social support was believed to be the reason verbal aggression was a lower risk for burnout. Kaur et al. (2013) sought to discern the relationships between spiritual intelligence, emotional intelligence, psychological ownership, and burnout on caring behavior of nurses. Their research indicated that the interaction between the variables did have a role on caring behavior, which would in turn improve patient satisfaction and well-being.

Burnout has also been widely studied in the field of counseling. Copley (2013) described burnout and compassion fatigue in the counseling field as being the result of highly stressful and traumatic work conditions. Further, counselors take on the struggles of their clients, which accumulate over time and affects them through what is known as secondhand depression (Hunter, 2016). Burnout wears down confidence and self-esteem, creating a barrier that makes it difficult to maintain empathy with clients (Hunter, 2016). Not only can burnout negatively affect counselors' mental, emotional, and physical health, it can lead to counselor impairment. Counselors should learn to recognize the

signs of burnout before impairment occurs. Left unchecked, impairment can damage the counseling relationship, which is an ethical concern.

Lee et al. (2010) discussed different burnout types in counselors. They described burnout as being a process of prolonged stress at work. Using a newly developed inventory, CBI, the study measured burnout in five dimensions: (a) exhaustion, (b) incompetence, (c) negative work environment, (d) devaluing client, and (e) deterioration of personal life. It identified job satisfaction, self-esteem, and locus of control as variables and determined that using a typological approach better assessed the cause of counselor burnout, which could then be used to determine a treatment plan.

Thompson et al. (2014) used personal characteristics of counselor gender, years of experiences, perceived working conditions, personal resources of mindfulness, use of coping strategy, and compassion satisfaction to predict counselor compassion fatigue and burnout. They found that working conditions, such as counselor peer support and work atmosphere, had a negative relationship with burnout, as did compassion satisfaction, which cushioned the effects of compassion fatigue.

Gutierrez and Mullen (2016) described counselor burnout as it relates to trait emotional intelligence. Using mental health counselors and marriage and family counselors as a population, the study found that trait emotional intelligence is a negative predictor of burnout. This means that the higher the counselor self-assessed on trait emotional intelligence, the less likely they were to experience burnout.

Sprang et al. (2007) studied how compassion satisfaction, compassion fatigue, and burnout are factors in mental health providers' quality of life. Finding that training

could potentially protect against burnout, sprang et al. (2007) advocated for counselor self-efficacy through continuing education opportunities.

Wardle and Mayorga (2016) explored burnout in future professional counselors with the intention of determining training needs for the development of self-awareness in counselor education programs. Results indicated that students should be aware of the signs of burnout and encouraged to put their own mental health needs as a priority. Being exposed to burnout through counselor education curriculum aids future professional counselors to become proactive in their own health and wellness.

Wilkinson et al. (2017) found that greater student caseloads and more intensive mental health concerns signaled a likelihood of burnout in college counselors. Additionally, many college counselors required a second job due to low pay, and the longer they worked in the college counseling center, the more likely it was for them to suffer from burnout.

In his dissertation, Bohner (2018) examined the relationship between college counselor work responsibilities and burnout. Acknowledging that college counseling is a unique field of counseling, Bohner explored external characteristics such as a lack of resources and training in the role of burnout. Adding to this is work overload resulting from non-counseling activities on campus. Bohner hoped his research on burnout and work responsibilities would help establish best practices within the field of college counseling.

Burnout: Relevance to Current Study

Burnout is more widely understood in today's workplace than in years previous. Yet, that does not change the vulnerability to it for those in helping professions. According to Schaufeli et al. (2008), burnout has two contributing factors: (a) increase of demand over resources, and (b) motives instead of energy. College counselors are increasingly asked to treat students with severe psychopathological disorders (Lipson et al, 2019). More and more students are utilizing their college counseling center for problems such as depression, anxiety, adjustment problems, low self-esteem, and relationship problems (Huenergarde, 2018). This increase in demand for services, along with a rise in the severity of psychological and behavioral disorders, creates a potential for burnout in college counselors.

Well-Being: Background

Well-being and wellness are both studied at length and are both related to a person's overall health. However, well-being also considers the factor of individual happiness (Holdsworth, 2019). Happiness has been a topic of interest since the 1960s with over 3000 publications on the topic across a multiple of disciplines (Smith & Reid, 2018). Economic status, inequality, and general life satisfaction all play a role in a person's happiness, as well as their physical and mental health (Smith & Reid, 2018).

Well-being relates to how a person perceives their position in life (Ungvarsky, 2019). It is all encompassing, and involves physical, mental, emotional, and spiritual health (Ungvarsky, 2019). Additionally, it involves a person's social connections, financial status, and positive outlook. A positive perspective on personal well-being tends

to provide more happiness and satisfaction, whereas a person with a negative sense of well-being may limit a person's ability to flourish (Ungvarsky, 2019). Well-being in an individualistic concept, with some people thriving amidst difficult circumstances while others struggle with few obstacles in their way.

Well-Being: Populations Studied

The CDC (n.d.) has studied well-being concepts through the Health-Related Quality of Life Program since 2007, with various well-being measures on the 2010 Behavioral Risk Factor Surveillance System. Additionally, the CDC providing guidance on well-being and the quality of life for the Healthy People 2020 initiative. General findings have shown that well-being requires good physical health and positive social relationships in addition to the basic needs of food, shelter, safety, and income (CDC, n.d.).

Longo et al. (2016) sought to bring clarity to the concept of well-being and examined six widely used perspectives by looking at what each had in common versus differences. As a result, Longo identified fourteen distinct attributes of well-being:

- Happiness
- vitality
- calmness
- optimism
- involvement
- awareness
- acceptance

- self-worth
- competence
- development
- purpose
- significance
- congruence
- connection

Noting that well-being had previously been split between subjective (hedonia) and psychological (eudaimonia), Longo determined that variance in well-being could be effectively explained using one factor. This perceived wellness, or well-being, refers to how people perceive their overall well-being versus their aspiration of well-being (Blount et al., 2016). Those who adopt a wellness-oriented lifestyle and have insight into their behaviors can effectively navigate personal growth and have a greater chance of increasing their personal well-being (Blount et al., 2016).

Well-being has been studied in populations such as that of employees (Pfeffer, 2018; Mishra, 2018), and students (Schwager et al., 2020; Bernstein et al., 2020). Additionally, it has been studied in the general population on topics such as human development (Anand, 2016), human geography (Smith & Reid, 2018), and public policy and economics (Holdsworth, 2019). These studies have each sought to discover and understand the roles that wellness and well-being play in an individual's daily life, and ultimately how they can impact the communities and societies in a positive way.

Well-Being: Relevance to Current Study

Merryman et al. (2015) studied the relationship between psychological well-being and perceived wellness in online graduate counselor education students. Noting that counselor impairment may occur in the absence of wellness practices and overall well-being, they advocated for training programs in counselor self-care be taught in the graduate counseling programs. Dye et al. (2020) suggested this as well, advocating for the use of mindfulness techniques to reduce stress and anxiety and increase mood and positive feelings among counselors in training. Dose et al. (2019) in their study of happiness in counselors, discovered that counselor self-esteem, peer support, and supervisory support are crucial for the overall well-being of counselors. Noting that burnout is a hindrance to effective counseling strategies, Friedman (2017) discussed the connection between a counselor's well-being, self-care, and quality of care provided to clients. Therefore, well-being is an integral factor in a counselor's overall effectiveness. It should be studied in the field of college counseling, as counselors who are happier and have greater overall wellness will better help the students they serve.

Emotional Intelligence: Background

The concept of emotional intelligence originated with Howard Gardner's Theory of Multiple Intelligences. Gardner published his theory in 1983, and in it, he challenged the notion that intelligence was constructed on one factor: a person's intelligence quotient (IQ). Building on Gardner's theory, Daniel Goleman wrote a book titled "Emotional Intelligence" in 1995, and it was an academic and media sensation. Purporting that, rather than IQ being the most important attribute of a person, Goleman promoted emotional

intelligence as being the factor that is most predictive of success. Goleman explained that emotional intelligence is made up of four elements: (a) self-awareness (b) social awareness (c) self-management and (d) relationship management (Goleman, 2006).

Emotional Intelligence: Populations Studied

Managing emotions is a crucial skill when working with others and is an innate characteristic in those who have high emotional intelligence. Schulte et al. (2004) defined emotional intelligence as the ability to understand the meanings of emotions in relationships. Goleman (2006) added the traits of empathy, warmth, and social skills to his definition of emotional intelligence. Emotional intelligence has been extensively studied in numerous professions and shown to be a valuable indicator of success in the workplace.

Saklofske et al. (2012) studied undergraduate students and the relationship of personality, affect, emotional intelligence, and coping on student stress and academic success. This study reinforced that emotional intelligence was foundational to positive coping skills and alleviated stress, thereby increasing student potential for academic achievement. Another study on undergraduate students analyzed emotional intelligence and personality traits to determine prediction of well-being. In this study, Landa et al. (2010) described how the management of emotions is vital for psychological health. Results confirmed the importance of emotional intelligence and advocated for training in emotional skills for students to improve their mental well-being.

In the study by Pishghadam and Sahebjam (2012), emotional intelligence and personality are found to be predictors of teacher burnout. People with low scores of

extraversion and high scores in neuroticism were found to have low scores of personal accomplishments and high scores in emotional exhaustion. Neurotic people tend to worry more, experience anxiety, and have a tendency toward depression. High scores in depersonalization, an indicator of burnout, were associated with low agreeableness, which results in cynical, rude, and uncooperative behavior. Another study on teachers analyzed the relationship between emotional intelligence, affect balance, and burnout (Landa et al., 2012). Since teachers experience emotional demands in a challenging work environment, they are at risk of burnout. Emotional intelligence attributes of problem-solving, adapting to the environment, and the ability to recognize emotions in self and in others are key methods of managing the stressors teachers experience.

Emotional intelligence has been studied in the field of healthcare. According to Habib et al. (2012), emotional intelligence is a predictor of life satisfaction in nursing and plays a role in spiritual intelligence. Additionally, emotional intelligence is used as a coping mechanism for stress and aids in impulse control. The nursing profession requires nurturing and empathy, which can be emotionally draining. Those with higher levels of emotional intelligence are better able to cope and have positive predictions of life satisfaction. Bidlan and Sihag (2014) described how occupational stress, burnout, coping, and emotional intelligence vary by gender in healthcare professionals. Believing that emotional intelligence assisted the healthcare professional in problem-solving and coping skills to mitigate burnout, they discovered that work environment was a significant impact on occupational stress that leads to burnout. Additionally, significant differences were found by gender in coping, self-control, self-awareness, and empathy, with females

scoring higher than males. According to Kherirkhah et al. (2018), midwives who have a higher emotional intelligence score experiences less stress than those with lower scores. Those with high emotional intelligence were able to resist problems, have greater potential for leadership, had greater self-esteem, and were able to fulfill their responsibilities in a more efficient manner.

Emotional intelligence is essential to good relationships. High emotional intelligence lends itself to better relationships. Moron (2020) described how affect balance and depressiveness acted as mediators between trait emotional intelligence and life satisfaction. Individuals who have higher levels of emotional intelligence tend to have more satisfying relationships with others due to their innate ability to resolve conflicts and utilize social support during difficult times. Furthermore, depressiveness was negatively linked with emotional intelligence, indicating that individuals who have high emotional intelligence can control their feelings and emotions and maintain affect balance. According to Wollny et al. (2020), those with high emotional intelligence have higher quality romantic relationships. These individuals can cope with hardships and endure stress through adaptation. Day et al. (2005) described how emotional intelligence can predict psychological health. Since emotions influence how a person behaves, emotional intelligence is an essential component of daily life. Emotional intelligence is a determining factor in personal and occupational success and increases the satisfaction in relationships while also creating better psychological health.

Emotional intelligence has also been studied by those who advocate for spiritual disciplines such as yoga and meditation. Seena et al. (2017) examined emotional

intelligence, spiritual intelligence, and well-being among yoga practitioners. Their study showed that those who practice yoga tend to have higher emotional intelligence and well-being than those who do not practice yoga. According to Choi et al. (2018) those who practice meditation have higher levels of emotional intelligence than those who do not practice meditation. This translates to the individual's greater abilities to control emotions, improve negative mood, and reduce stress. Those who are high in emotional intelligence exhibit a greater ability to cope and have better interpersonal skills.

Many studies have been conducted showing the correlation between high emotional intelligence and increased counseling skills and abilities. Gutierrez et al. (2018) studied the contributions of trait emotional intelligence on burnout in addiction counselors. As with other studies in other occupations, high emotional intelligence was found to reduce potential for burnout, even with the increased stressor of addiction counseling. Several implications for counseling were noted in this study, including that of the importance of wellness and self-care for professional counselors. Guterrez et al. (2017) explored emotional intelligence in counselor trainees. Noting that effective counselors have awareness of how their emotions affect their stress level and ability to maintain empathy, it is essential to assess the emotional intelligence of the counseling student. Like other studies, results showed a correlation between empathy and high emotional intelligence. Also, high emotional intelligence indicated lower stress levels and distress. This study also indicated that high emotional intelligence was significantly related to good counseling skills. Therefore, the researchers determined that counselor education programs should consider administering the emotional intelligence assessment

throughout their educational programs. This suggestion was seconded by Odaci et al. (2017), who studied the emotional intelligence levels and counseling skills of prospective counselors. They found that increased levels of emotional intelligence fostered greater personal reflection statements and counseling techniques. They advocated for a balance of lessons in both theoretical and applied counseling skills to better prepare students for success after graduation.

Emotional Intelligence: Relevance to Current Study

Having high emotional intelligence imputes many characteristics conducive to a good counselor. According to Martin, Jr. et al. (2004) emotional intelligence is closely linked with counselor self-efficacy. Since basic counseling skills include attending behaviors such as rapport building, reflection of feeling and meaning, and recognizing and managing emotions, emotional intelligence could aid in the counselor's ability to develop the counseling relationship. Maintaining effective counseling skills elevates the self-esteem of counselors, creating a sense of rightness and confidence in their career decision to be become a professional counselor.

Spiritual Intelligence: Background

Zohar is credited with first using the term "spiritual intelligence" in 1997 (Skrzypińska, 2020). Also, in 1997, Ken O'Donnell used the term in his book *Endoquality - the emotional and spiritual dimensions of the human being in organizations*. In 2000, Emmons suggested that spiritual intelligence was a foundational concept to understanding psychological determinants of human behavior. Since then, researchers have attempted to fully understand the construct.

Spiritual Intelligence: Populations Studied

Vaughn (2002) described spiritual intelligence as the interaction between the inner world of mind and spirit and the outer world. It is a deeper facet of intelligence that comprises the heart, mind, and soul. Spiritual intelligence allows for the seeing of multiple perspectives. It is what brings meaning and purpose to difficult times. Vaughn (2002) further stated that spiritual intelligence is living harmoniously with one's values and core beliefs, creating a sense of purpose and gratitude.

While emotional intelligence allows for the expression of personal characteristics, it is spiritual intelligence that supports the broader foundations of both emotional intelligence and intellectual intelligence. According to Sisk (2016), spiritual intelligence is the individual's ability to use various ways to solve problems. These many approaches include intuition, meditation, and visualization to draw from inner resources. Components of spiritual intelligence include a concern for existential issues, with core values of unity, compassion, responsibility, and service. People who have high levels of spiritual intelligence tend to seek truth and have concern for others. They are often creative and use symbolism such as metaphors, poetry, music, and dance. According to Sisk (2016), spiritual intelligence can be taught, and should be an essential focus of leadership in education and business development.

It is from the perspective of leadership that spiritual intelligence has emerged as a new paradigm of intelligence. Zohar (2005) described spiritual intelligence as "spiritual capital," stating that spiritual capital reflects what both an individual and an organization values and aspires to. Zohar further described spiritual intelligence as the ability to

achieve higher meanings and reach unconscious realms of self to live more fulfilling lives. Individuals with high spirituality can problem-solve by thinking outside the box, celebrate diversity, exhibit behaviors such as humility, are compassionate, and have self-awareness (Zohar, 2005).

Hacker and Washington (2017) described spiritual intelligence as going beyond intellectual knowledge and emotional intelligence to make resilient leaders. While recognizing that emotional intelligence is the ability to work well with others, they state that spiritual intelligence is a broadening approach that alters the perspective to include self-reflection and awareness of one's own personal goals, mission, values, and meanings. Those with high spiritual intelligence tend to have an inner strength that helps them sustain creativity and personal growth (Hacker & Washington, 2017).

Dash and Patnaik (2015) stated that spiritual intelligence is involved in both emotional intelligence and mental health. While emotional intelligence is the ability to understand and manage emotions, it is spiritual intelligence that determines the reason for the emotion. The results of their study indicated that those with high spiritual intelligence also had high emotional intelligence and experienced better mental health.

In addition to business, spiritual intelligence has studied in nurses, students, and pastors. Sahebalzamani et al. (2013) studied the relationship between spiritual intelligence and psychological well-being in nurses. They discovered that there was a positive association between psychological well-being and spiritual intelligence. Furthermore, spiritual intelligence emerged as a crucial intelligence, indicating that values and meaning, adaptability, and non-materialistic characteristics enhance the

individual's daily life and health. Well-being, or quality of life, was also studied in university students by Bolghan-Aladi et al. (2014). Finding a positive relationship between spiritual intelligence, quality of life, and good mental health. Spiritual intelligence was also found to be an inherent factor in the decrease of compassion fatigue among pastors (Snelgar et al., 2017). Snelgar et al. (2017) stated that spiritual intelligence can be acquired through the desire to change, personal reflection, and willingness to be open to new possibilities.

Spiritual Intelligence: Relevance to Current Study

Emmons (2000) stated that spiritual intelligence is an integral part of a person's physical health and psychological well-being. He advocated that individuals possess a set of skills and abilities linked with spirituality that are pertinent to intelligence, and that individual differences in spiritual skill sets make up basic features of the person. Emmons (2000) further stated that personal spiritual intelligence is an active construct and provides an avenue to interpreting and navigating the demands of everyday life. According to Zohar (2005), spiritual intelligence allows the individual to access higher meanings, purpose, and values. It is spiritual intelligence that encourages creative thinking and energy to serve other (Zohar, 2005). For these reasons, spiritual intelligence was relevant to this study on the self-efficacy of college counselors.

Psychological Ownership: Background and Relevance

As early as 1967, Holmes studied the differences between what employees "felt" they owned versus what was legally owned. Furby (1980) described psychological ownership as being a sense of possession of an object or entity. Furby (1980) further

explained that feelings of ownership can prompt a sense of responsibility for the target or object. Pierce et al. (2003) expanded this notion as being an attitude containing both affective and cognitive attributes. Feelings of possession regarding organizational behavior was studied by Van Dyne and Pierce (2004) and results increased understanding in psychological ownership regarding employee satisfaction, commitment, self-esteem, and workplace behaviors. These attributes and behaviors are still studied today and are why this variable is relevant for this study.

Psychological Ownership: Populations Studied

Spiritual intelligence has a mediating effect on psychological ownership. Olckers and Enslin (2016) defined psychological ownership as being a state of mind where the individual feels an attachment to an object. It is linked with positive attitudes and emotions resulting in stronger job commitment. People with greater levels of psychological ownership tend to stay at their place of employments longer and are more satisfied in their work (Olckers & Enslin, 2016).

According to Liu et al. (2012), psychological ownership satisfies the basic need to have a sense of belonging. When individuals feel ownership at work, they develop a higher level of commitment and see it as “home” where they are comfortable and have meaning and value. Psychological ownership can be used to determine an individual’s level of commitment and can be strengthened through providing a self-management team climate and participative decision making (Liu et al., 2012).

Wang et al. (2019) described psychological ownership in relation to positive and negative work environments and job engagement. They discovered that individuals who

are personally engaged and committed to their work, and who have strong psychological ownership, have better work performance and workplace behaviors. People use different terms to describe themselves. Some may define themselves through what they have, but many people define themselves by what they do, making psychological ownership an interesting concept (Wang et al., 2019).

As previously noted, Kaur et al. (2013) explored the effect of spiritual intelligence, emotional intelligence, psychological ownership, and burnout on the caring behavior of nurses. Feelings of positive psychological ownership affect work attitudes and behaviors, which reduces the possibility for burnout. Additionally, Kaur et al. (2013) discovered a positive relationship between spiritual intelligence, emotional intelligence, and psychological ownership on caring behaviors. This information served as a guide to the present study on well-being of college counselors.

Relating the Variables to the Research Questions and Hypotheses

There is an association between high emotional intelligence and increased counseling abilities and attributes (Guitierrez et al., 2017; Guitierrez et al., 2018; & Odaci et al., 2017). While emotional intelligence is the ability to understand and manage emotions, it is spiritual intelligence that discerns the origin of the emotion and is the foundation for higher meaning (Dash & Patnaik, 2015). Additionally, there is an association between psychological well-being and spiritual intelligence (Dash & Patnaik, 2015). Spiritual intelligence has a mediating effect on psychological ownership, whereby spiritual intelligence was found to influence job engagement, especially when dealing with job stress (Torabi & Nadali, 2016). Feelings of psychological ownership reduces the

potential for burnout and increases positive attitudes and behaviors (Kaur et al., 2013).

Burnout has the potential to impair counselor self-efficacy, which is a crucial part of the counseling process. Therefore, the study of how emotional intelligence, spiritual intelligence, psychological ownership, burnout, and well-being influence self-efficacy was relevant and beneficial to counselors in college and university settings.

It was hypothesized that emotional intelligence, spiritual intelligence, psychological ownership, and well-being will predict counselor self-efficacy. I also believed, and hypothesized, that emotional intelligence, spiritual intelligence, and psychological ownership would predict well-being. Additionally, I believed that emotional intelligence, spiritual intelligence, psychological ownership, and well-being would predict burnout.

Summary and Conclusions

College counselors are at risk of burnout due to increasing demands for services, particularly considering the recent coronavirus pandemic. Counselor burnout has been shown to negatively affect counselor self-efficacy. Emotional intelligence, spiritual intelligence, and psychological ownership may help mitigate counselor burnout and improve overall well-being, which would help improve counselor self-efficacy. This chapter has provided information on the literature search strategy, which led to the discovery of the gap in research. The problem and purpose of this study is re-examined in Chapter 3, along with the methodology for conducting the research.

Chapter 3: Research Method

The purpose of this quantitative study was to assess the roles of (a) emotional intelligence, (b) spiritual intelligence, (c) psychological ownership (d) burnout, and (e) well-being in predicting the strength of self-efficacy among college counselors. In this chapter I will provide information on the research design and rationale for the study. Additionally, I will detail the methodology so that the study could be replicated by future researchers. The methodology will cover the target population, sampling and sampling procedures, procedures for recruitment, participation, instruments used for data collection, data analysis, threats to validity, and ethical precautions taken throughout.

Research Design and Rationale

I used a quantitative approach to conduct this exploratory research study. Additionally, I used a cross-sectional survey method for data collection and multiple regression data analysis to identify correlations among the variables. Cross-sectional survey methods were appropriate for data collection, providing a “snapshot” of college counselors’ perceptions at a moment in time. These methods allowed for data collection as well as quantification of the variables through operationalization via standardized assessment instruments (Creswell & Creswell, 2018). Exploratory, correlational research identifies the relationships among the important variables. Although such analysis does not address cause and effect, it does result in understanding the influences, positive or negative, of multiple variables on an outcome (Creswell & Creswell, 2018). The primary outcome variable was counselor self-efficacy, as operationalized and measured by the CASES. Predictor variables were:

- Emotional intelligence, as defined by the TEIQue–SF
- Spiritual intelligence, as defined by the SISRI
- Psychological ownership as defined by the Psychological Ownership Scale
- Burnout, as defined by the CBI
- Well-being defined by the factor subscale “well-being” in the TEIQue–SF

Methodology

Population

The population for this study was college counselors who provide developmental, career, and mental health counseling services to college students. These individuals were graduates of training programs at the master’s level or above. The participants were both licensed or unlicensed and were also social workers and psychologists in addition to counselors. Using this population supported a non-probability sampling and allowed for inferential statistics that were used to discern and analyze the research results (Groves et al., 2009).

Sampling and Sampling Procedures

I used non-probability, cross-sectional, convenience sampling due to lack of an available sampling frame. The potential participants were recruited using email listserv announcements from the ACCA, the AUCCCD, and the Alabama College Counseling Association. These organizations have a membership of approximately 2,600 professionals. Other social media aimed at college counselors, such as Facebook groups, were also used to recruit the sample. Participants were encouraged to share the links with peers who may not be a member of these organizations but work as college counselors.

G*Power software is a power analysis program that is helpful in designing and evaluating research studies (Mayr et al., 2007). An a priori power analysis for a multiple regression, using G*Power software, with a level of significance of .05, a beta of .80, and assuming a medium effect size, indicated that a sample size of 138 was needed for the most reliable and valid results of significance. As this study attempted to reach all members of two national organizations and one state organization, I received enough responses to satisfy the power needed to generate significant results.

Procedures for Recruitment, Participation, and Data Collection

The survey respondents were recruited via an invitational announcement on listservs made available to members of the ACCA, the AUCCCD, and the Alabama College Counseling Association. The invitation to complete the survey was also provided on social media organizational groups. The announcement included specifics of the study, including the purpose and a link to the online survey. The instruments used to gather data were presented as a survey via Qualtrics, a commercial survey software system. Delivering the data collection via Qualtrics allowed respondents to complete the instruments via mobile devices as well as laptops and desktop computers.

Informed consent was provided in text at the start of the survey. Respondents were reminded of the purpose of the survey and were informed that the data collected would be anonymous and the instruments would take about 20 minutes to complete. Demographic information was collected at the beginning of the survey. This information included the respondent's age, identified gender, race, type of license, years of college counseling experience, size of institution, and size of counseling center.

There was no follow-up procedure, since names and emails were not captured to ensure privacy and confidentiality. When the survey closed, the results were formatted to a spreadsheet that was uploaded into SPSS for additional analysis. All data collected from the survey were downloaded on a password-protected personal computer and saved both on a hard-drive and Microsoft One Drive cloud storage.

Instrumentation and Operationalization of Constructs

In keeping to the quantitative approach to answer the RQ of how emotional intelligence, spiritual intelligence, psychological ownership, burnout, and well-being predict the self-efficacy of college counselors, published standardized assessment instruments were selected to measure each variable. Permission to use the instruments was obtained through emails requesting permission of the author of the instruments. Two instruments required no permission, per their website. Copies of emails, website notifications, and permissions granted are included in Appendix A. The psychometric qualities of the instruments used in this study are presented in the following sections.

Trait Emotional Intelligence Questionnaire–Short Form

Emotional intelligence was measured using the TEIQue–SF (Petrides, 2009). The TEIQue–SF is an openly accessible instrument, developed by Konstantinos Vassilis Petrides in 2009, and required no permission for academic research. The TEIQue–SF is a 30-item, self-report questionnaire, where the respondent chooses the best option from a 7-point Likert scale ranging from “1” being *completely disagree* to “7” being *completely agree*. Examples of questions include “Expressing my emotions with words is not a problem for me” and “I can deal effectively with people.”

The TEIQue–SF has a Cronbach’s alpha internal consistency score of .81, with test-retest reliability of .86. The scale consists of 30 items with 15 facets, four factors, and a global trait score (Deniz et al., 2013). Per the TEIQue–SF scoring key, obtained from Petrides’ university laboratory website, Items 3, 14, 18, and 29 only contribute to global trait emotional intelligence and not to any of the four factors. Therefore, these items were only used to calculate global trait emotional intelligence scores. The four factors include (a) well-being, (b) self-control, (c) emotionality, and (d) sociability. The predictor variable “well-being” was measured via the TEIQue–SF subscale “well-being.” A high score on well-being indicates an individual who is positive, happy, and fulfilled (Petrides, 2001).

Confirmatory factor analysis indicated a good fit for derived data. According to Cooper (2010), item response theory analysis showed that the TEIQue–SF has good reliability and validity psychometric properties, with inventory items containing good discrimination and threshold parameters and good precision across latent trait range. There were, however, some items with poor psychometric properties (Items 4,7,23, 25).

The TEIQue–SF has also been validated in various research studies (Gutierrez et al., 2019; Gutierrez & Mullen, 2016; Wollny et al., 2020) with diverse populations such as addiction counselors, mental health counselors, marriage and family counselors, and the general public. Additionally, it has been used to study secondary traumatic stress and burnout in refugee resettlement workers (Akinsulure-Smith et al., 2018) and executive functioning in young people (Alavi et al., 2019). The TEIQue–SF was chosen for this

study because of good reliability and validity, and the short time to complete it, which helped reduce survey fatigue.

Spiritual Intelligence Self Report Inventory

Spiritual intelligence was measured by the SISRI 24. The SISRI 24 is an openly accessible instrument, developed by David King in 2009, and required no permission for academic research. It was developed, using sample of psychology students, for the purpose of constructing a self-report assessment to measure spiritual intelligence. The SISRI 24 contains 24 items measuring a global spiritual intelligence score and four different subscale factors: (a) critical existential thinking; (b) personal meaning making; (c) transcendental awareness; and (d) conscious state expansion. Descriptions for these factors can be found in Appendix A. As a self-report inventory, the respondent chose the best option from a 5-point Likert scale ranging from “0” being *not at all true of me* to “5” being *completely true of me*. Sample questions included “I recognize qualities in people which are more meaningful than their body, personality, or emotions” and “I define myself by my deeper, non-physical self” (King, 2009).

King (2009) reported the SISRI 24 has a Cronbach’s alpha internal consistency of 0.92. Construct and criterion-related validity was established through correlational analyses using measures of meaning, metapersonal self-construal, mysticism, religiosity, and social desirability constructs. Test-retest reliability was established by the administration of the inventory to a small number of participants four months apart, and subscale bivariate correlations were calculated to determine the measure’s adherence to the criterion and showed significant strength. Exploratory and confirmatory factor

analysis indicated and supported a 24-item, four-factor model (critical existential thinking; personal meaning making; transcendental awareness; conscious state expansion) that showed appropriate fit to the data (King, 2009), making this instrument appropriate for use in this study.

The SISRI 24 has also been validated through use in research studies on compassion fatigue (Snelgar et al., 2017), mental health (Dash & Patnaik, 2015), general health and happiness (Amirian & Fazilat-Pour, 2016), and citizenship behavior (Anwar & Osman-Gani, 2015). It has been used on populations ranging from company employees to students to pastors. The SISRI 24 measures the variable of spiritual intelligence and is widely accepted as a reliable and valid instrument (Zulkifli et al., 2017).

Psychological Ownership Scale

Psychological ownership was measured by the Psychological Ownership Scale developed by Van Dyne and Pierce (2004). The scale is a proprietary instrument and permission was granted by the primary author, Van Dyne, for this academic research (see Appendix A). It was developed, using a sample of employees working in the United States, for the purpose of constructing a self-report attitudinal assessment to demonstrate that psychological ownership can predict employee commitment, satisfaction, performance, and organizational self-esteem and citizenship behavior. The Psychological Ownership Scale contains seven items measuring an individual's overall sense of ownership. As a self-report inventory, the respondent chose the best option from a 7-point Likert scale ranging from "1" being *completely disagree* to "7" being *completely*

agree. Sample questions include “This is MY organization” and “I feel a very high degree of personal ownership for this organization” (Van Dyne & Pierce, 2004).

Van Dyne and Pierce (2004) indicated the Psychological Ownership Scale was developed using three different testing samples. Cronbach’s alpha indicated internal consistency reliability of 0.87, 0.90, and 0.93 in the separate samples. Test-retest reliability was assessed in sample three using a 3-month interval between samples and found to be moderate. Content validity was established using organizational behavior faculty. No items were identified as being outside the theoretical framework and no additional items were proposed to cover missing aspects. Therefore, no contamination or deficiencies were discovered (Van Dyne & Pierce, 2004).

Counselor Burnout Inventory

Counselor burnout was measured using the CBI, which is a proprietary instrument developed by Lee et al. in 2007. Permission was granted by the primary author for academic research (see Appendix A). It was developed for the purpose of measuring burnout in counselors from both an individual and an organizational perspective. The inventory consists of 20 items measuring a global score, with 5 different facets, or dimensions: (a) exhaustion, (b) incompetence, (c) negative work environment, (d) devaluing client, and (e) deterioration in personal life. As a self-report inventory, the respondent chose the best option from a 5-point Likert scale ranging from “1” being *never true* to “5” being *always true*. Sample questions include “Due to my job as a counselor, I feel tired most of the time.” and “I feel bogged down by the system in my workplace.” (Lee et al., 2007).

The CBI has a Cronbach's alpha internal consistency of 0.90. Test-retest reliability was established at .81, using a small sample of 18 participants at a 6-week interval, and subscale test-retest reliability estimates ranged from .72 to .85 (Bardhoshi et al., 2018). Convergent comparisons were robust across 10 instruments. Exploratory and confirmatory factor analysis indicated and supported a 20-item, five-factor construct that showed appropriate fit to the data, making this instrument valid and appropriate for use in this study (Bardhoshi et al., 2018). Convergent validity for the CBI results was analyzed through the correlations with the Maslach Burnout Inventory–Human Services Survey (MBI-HSS) subscale scores. There was a positive association between the Emotional Exhaustion subscales of the MBI-HSS and the CBI exhaustion subscale ($r=.73$). The positive correlation continued with the CBI subscales of Negative Work Environment ($r = .62$), Deterioration in Personal Life ($r = .62$), Devaluing Client ($r = .31$), and Incompetence ($r = .30$). The Depersonalization subscale of the MBI-HSS was positively associated with the CBI Devaluing Client subscale ($r = .56$), followed by the CBI subscales of Incompetence ($r = .35$), Negative Work Environment ($r = .27$), Exhaustion ($r = .23$), and Deterioration in Personal Life ($r = .22$). On the other side, the Personal Accomplishment subscale of the MBI-HSS was negatively correlated with the CBI subscales of Incompetence ($r = -.38$), Devaluing Client ($r = -.23$), and Exhaustion ($r = -.18$) (Lee, 2007).

Counselor Activity Self-Efficacy Scale

Counselor self-efficacy was measured using the CASES. The Counselor Activity Self-Efficacy Scale is a proprietary instrument, developed by Lent et al. in 2003, and

permission was granted by the primary author, Lent, for academic research (See Appendix A). The CASES was based on Bandura's (1977) theory of self-efficacy. It was developed for the purpose of measuring counselor self-efficacy for performing helping skills, management of the counseling process, and dealing with difficult situations between counselor and counselee. The inventory consists of 41 items measuring a global score with 6 different subscales: (a) Exploration Skills, which measures communication abilities, attending behaviors, and reflection capabilities (b) Insight Skills, which attends to the counselor's perception of ability to challenge, interpret, and immediate statements (c) Action Skills, which measures the clinician's perception of ability to provide appropriate intervention, such as guidance and homework, (d) Session Management, which indicates perceived ability to facilitate the therapy process, (e) Client Distress, which measures the counselor's perceived ability to handle clients with complicated presenting problems, and (f) Relationship Conflict, which reflects how the counselor sees tension or differences with their client. As a self-report inventory, the respondent chose the best option from a 10-point Likert scale ranging from "*No Confidence at All*" to "*Complete Confidence*". Sample questions include "How confident are you that you could use these general skills effectively with most clients over the next week?" and "How confident are you that you could do these specific tasks effectively with most clients over the next week?" (Lent et al., 2003).

The Counselor Activity Self-Estimate Scale has a Cronbach's alpha internal consistency of 0.97. The CASES has high reliability, with test-retest of 0.75. Construct validity shows good correlation with other self-efficacy measures, such as the Counseling

Self-Estimate Inventory ($r = 0.76$). Higher scores on the CASES suggests greater self-confidence, confirming construct validity (Kissil et al., 2015). Factor analysis findings suggest some subscales represent overlapping, yet distinct, aspects of counseling self-efficacy (Lent et al., 2003). The scale total was clearly related to each of its subscale (Lent et al., 2003).

Counselor self-efficacy is a judgment of how a counselor perceives what they know how to do versus what they actually do (Larson et al., 1992). High counselor self-efficacy is essential to a positive counseling outcome (Larson et al., 1992). Good self-efficacy indicates that the counselor has confidence in their abilities to help their client, manage the counseling session, and use appropriate skills in the counseling process (Lent et al., 2003). All these instruments have well-established psychometric qualities and were suitable for measuring the important variables in this study.

Data Analysis Plan

The following exploratory RQs guided this investigation:

RQ1: Do emotional intelligence, spiritual intelligence, psychological ownership, burnout, and well-being predict counselor self-efficacy?

H₀: Emotional intelligence, spiritual intelligence, psychological ownership, burnout, and well-being do not predict counselor self-efficacy.

H_a: Emotional intelligence, spiritual intelligence, psychological ownership, burnout, and well-being predict counselor self-efficacy.

RQ2: Do emotional intelligence, spiritual intelligence, and psychological ownership predict well-being?

H₀: Emotional intelligence, spiritual intelligence, and psychological ownership, do not predict well-being.

H_a: Emotional intelligence, spiritual intelligence, and psychological ownership, predict well-being.

RQ3: Do emotional intelligence, spiritual intelligence, psychological ownership, and well-being predict burnout?

H₀: Emotional intelligence, spiritual intelligence, psychological ownership, and well-being do not predict burnout.

H_a: Emotional intelligence, spiritual intelligence, psychological ownership, and well-being predict burnout.

To ascertain the research outcome, Qualtrics formatted the results to a spreadsheet, allowing for easy identification of missing or incomplete data, which was then discarded. Remaining data that was deemed clean and complete was then uploaded into SPSS for analysis. I used descriptive statistics to describe the sample. All RQs were analyzed using multiple regression analysis. Further exploration of the demographic data included analysis using analyses of variance (ANOVAs) as appropriate. Results of the multiple regression analysis included the coefficient of multiple determination and the significance of the model. Results were presented in a regression table. This table identified the predictor and outcome variables, the betas (i.e., standardized coefficients), the standard error, t values, p value, and the confidence intervals.

Threats to Validity

Validity in research involves drawing meaningful inferences from the results of the study (Creswell & Creswell, 2018). Internal validity involves the procedure of the research, whereas external validity involves generalization of the sample population or drawing inaccurate conclusions from research data (Creswell & Creswell, 2018). This study was limited by both internal and external validity.

Internal validity limitations included mortality due to the number of assessments involved in the survey. This survey questionnaire had a total of 122 items, with an estimated time of completion being 20 minutes. As a result, some respondents dropped out, possibly due to the number of items and length of time to completion. Also, as the primary researcher, I did not provide any reimbursement as incentive to complete the surveys, which may have disinclined some to participate (Kang, 2016).

The choice of measurement instruments presented another potential problem. While all instruments presented evidence of being psychometrically sound, no study was discovered using the psychological ownership scale and spiritual intelligence with a counselor population and in a counseling setting.

An external validity concern was that of self-selection (Creswell & Creswell, 2018). This research was limited to counselors practicing in settings of higher education who are members of the ACCA, AUCCCD, and the Alabama College Counseling Association. Therefore, results cannot be generalized to counselors in other counseling specialties and settings. The study was subject to the interaction of setting and treatment. Participant environment could have potentially influenced attitude and mood of the

respondents (Wargo, 2015). However, the variables chosen for this study were not known to be easily swayed by changes in attitude or mood. While no study can eliminate all threats to validity, care was taken to ensure quality of research design and execution.

Ethical Procedures

The American Counseling Association's Code of Ethics provides guidance on conducting research in counseling. It is expected that counselors will conduct research that adds to professional knowledge to forward the betterment of society while adhering to ethical and legal standards. This is for the protection of the participant and to maintain the integrity of the research study (American Counseling Association, 2014).

This study met the requirements of the institutional review board of Walden University (approval #12-15-20-0669102). Respondents were invited to participate by email listservs and through postings on social media organizational groups. The email listserv invitation was issued to members of the ACCA, the Association of University and College Counseling Center Directors, and the Alabama College Counseling Association.

The email contained information about the study's purpose and a link to the Qualtrics questionnaire. The participants were required to accept the informed consent prior to taking the survey. I used the informed consent form suggested by Walden University Center for Research Quality (Walden, 2018). This sample form was customized to my specific study and helped ensure all required information was covered. Notice was provided instructing participants of their right to end the survey at any time should they become uncomfortable or triggered in any way by the questionnaire.

While the data was being collected, it was stored on the Qualtrics infrastructure. According to their website, Qualtrics safeguards all confidential data by controlling users, providing multiple data centers with back-up resources that are compliant with network security, and are Health Insurance Portability and Accountability Act compliant (<https://www.qualtrics.com>). This study did not include personal health information, but this standard also protected other personal demographic information. Information that was downloaded from the Qualtrics site was saved on my password-protected personal computer that is in my home. Since I am gathering data anonymously, there was no issues of breach of confidentiality.

Summary

The methods section of a research study report is a vital part of the overall study, for without it, the study cannot be conducted, nor the results reported appropriately (Kallet, 2004). Additionally, the method section should be written in such a way that the study can easily be followed and reproduced (Kallet, 2004). As it is the methods section that best determines the overall quality of the study, this chapter reviewed and addressed research design and rationale, the target population and sampling procedures, instruments of measurement, data collection and analysis, threats to validity, and ethical considerations. I will describe the results in Chapter 4.

Chapter 4: Results

Burnout among college counselors can lead to reduced effectiveness in working with clients and employment turnover, but it may be prevented or diminished by various self-controlled psychological characteristics (Bohner, 2017; Wilkinson et al., 2017). I examined the understudied population of college counselors, examining (a) emotional intelligence, (b) spiritual intelligence, (c) psychological ownership (d) burnout and (e) well-being in predicting counselor self-efficacy. Emotional intelligence was measured using the TEIQue–SF (Petrides, 2009)., spiritual intelligence was measured using the SISRI (King & DeCicco, 2009)., psychological ownership was measured using the Psychological Ownership Scale (Dyne & Pierce, 2004), burnout was measured by the CBI (Lee et al., 2017)., well-being was measured by the factor subscale “well-being” in the TEIQue–SF (Petrides, 2009), and counselor self-efficacy was measured using the CASES (Lent et al., 2003).

In Chapter 4, I will provide a detailed description of the data collection process, results, and data analysis. The results section will also provide descriptive statistics of my population. I collected demographic information on the respondents, including age, gender, race, level of education, type of institution, size of department and institution, and years of service as a college counselor.

Data Collection

After institutional review board approval, the data collection for this research was supported by the commercial survey software, Qualtrics. The survey included (a) informed consent, (b) demographics, (c) the self-efficacy scale, (d) the counselor burnout

inventory, (e) the emotional intelligence scale, (f) the spiritual intelligence scale, and (g) the psychological ownership scale. To combat survey fatigue, at the end of each individual assessment, the survey included encouraging messages such as “Great job! Keep going!” There was no incentive provided to complete the survey. The survey was launched for data collection on January 4, 2021 and the data collection ended February 12, 2021.

Overall, the data collection was accomplished as planned. To recruit college counselors, I emailed invitations with the electronic link to the survey to the following professional association list services and social media:

1. Alabama Counseling Association
2. Alabama College Counseling Association
3. ACCA
4. AUCCCD
5. National Career Development Association
6. Walden Counselor Education and Supervision Connection
7. Dissertation Struggle Bus
8. Path to Dissertation
9. Jacksonville State University Counseling
10. Personal LinkedIn Profile

Repeated requests for participation were posted on January 19th and 27th and February 7th and 12th. Of the 195 total respondents, 13 indicated that they were not counselors in a college setting, and an additional 12 did not provide informed consent, which removed

them from the survey. This left 170 respondents, of which 27 started but did not complete the total survey and were removed, leaving 143 complete responses.

Description of the Sample

Most of the sample were White females between the ages of 26 and 50 with a master's degree in counseling and licensed, working at a public, 4-year institution with a student population of over 5,000. Most had between one and five counselors in their department and had 5 or fewer years of service. These descriptive data are shown in Table 1.

Table 1*Basic Demographics*

Variable	Number	Percentage
Gender		
Male	21	14.7%
Female	121	84.6%
Prefer not to answer	1	0.7%
Age		
18-25	4	2.8%
26-30	17	11.9%
31-35	24	16.8%
36-40	25	17.5%
41-45	15	10.5%
46-50	23	16.1%
51-55	11	7.7%
56-60	16	11.2%
61-65	5	3.5%
18-25	4	2.8%
65+	3	2.1%
Race		
Asian	6	4.2%
Black / African American	11	7.7%
Hispanic / Latino	10	7.0%
White / Caucasian	110	76.9%
Other	5	3.5%
Prefer not to answer	1	0.7%
Education		
Masters / Counseling, no License	9	6.3%
Masters / Counseling, Licensed	64	44.8%
Doctorate / Counseling, no License	1	0.7%
Doctorate / Counseling, Licensed	8	5.6%
Masters / Social Work, no License	3	2.1%
Masters / Social Work, Licensed	21	14.7%
Doctorate / Social Work, Licensed	2	1.4%
Masters / Psychology, no License	1	0.7%
Masters / Psychology, Licensed	4	2.8%
Doctorate / Psychology, no License	4	2.8%
Doctorate / Psychology, Licensed	20	14.0%
Other	6	4.2%
Years of Service		
0-5	72	50.3%
6-10	34	23.8%
11-15	19	13.3%
16-20	7	4.9%
21-24	6	4.2%
25+	5	3.5%
Institution		
Public, 2-year college	18	12.6%
Private, 4-year college or university	42	29.4%
Public, 4-year college or university	82	57.3%
Historically black college or university	1	0.7%

(table continues)

Variable	Number	Percentage
Size of Institution		
2,000-4,999	24	16.8%
5,000-9,999	40	28.0%
10,000+	51	35.7%
Size of Department		
1-5	79	55.2%
6-10	33	23.1%
11-15	10	7.0%
16-20	10	7.0%
21-25	4	2.8%
25+	7	4.9%

Representation of Demographic

Even though the data were collected from multiple participants working in varied sizes of departments and institutions, these demographic results were a representative sample of the population of interest, as indicated by a survey conducted by the AUCCCD (LeViness et al., 2018). The sample was further supported as representing the population of college counselors due to similarities of the demographics in a study on members of the ACCA (Smith et al., 2019)

Results

Descriptive Statistics

Of the 195 respondents who began the survey, 143 produced usable data and all fully completed the measuring instruments to yield scale and global scores. Examining the descriptive data of the measuring instruments shows the distribution for each instrument were negatively skewed. For the measures of (a) emotional intelligence, (b) well-being, (c) spiritual intelligence, and (d) psychological ownership, the skew statistic exceeded 1, indicating the distribution exceeded the parameters for being considered approximately normal (see Table 2).

Table 2*Descriptive Statistics for Dependent and Independent Variables*

Variable*	Possible Range	Actual Range	Mode	Median	Mean	SD	Skewness
Emotional intelligence (IV)	0 - 210	0 - 206	173	165.00	163.20	22.531	-2.763
Well-being (IV)	0 - 42	0 - 42	40	36.00	35.35	5.873	-1.994
Spiritual intelligence (IV)	0 - 96	0 - 92	66**	66.00	62.94	19.532	-1.396
Psychological ownership (IV)	0 - 49	0 - 31	21	20.00	18.83	6.472	-1.005
Counselor burnout (IV)	0 - 100	0 - 84	41	46.00	46.15	11.760	-0.037
Global self-efficacy (DV)	0 - 369	177 - 368	302	295.00	293.10	39.522	-0.486

Note. IV = independent variable, DV = dependent variable.

*For all variables $N = 143$ (no missing cases)

** Multiple modes exist. The smallest value is shown

Demographic Variables as Controls

To determine if the demographic variables demonstrated significant differences across the outcome variables, ANOVA were conducted. The results are included in the following sections.

RQ1 Outcome: Self-Efficacy

A one-way analysis of variance showed that there were significant differences in counselor self-efficacy across the variable of age. The means tables are presented in Tables 3–5. As the Levene's test yielded significant results ($p = .001$), the robust Welch's results are reflected here, $F(9, 30.008) = 5.408$, $p = .0001$, $\eta^2 = .202$. The effect size was large. Counselors in the age category of 61-65 reported the greatest amount of self-

efficacy. A Games Howell post hoc revealed differences were between the age groups of 18–25, 26–30, 26–40, and 61–65.

Table 3

Global Self-Efficacy: Age

Age	<i>N</i>	Mean	<i>SD</i>
18-25	4	250.25	22.765
26-30	17	271.9	47.122
31-35	24	295.38	29.501
36-40	25	289.88	36.272
41-45	15	281.27	55.541
46-50	23	311.52	39.554
51-55	11	292.73	22.041
56-60	16	301.19	34.722
61-65	5	322.80	11.476
65+	3	309.33	6.658
Total	143	293.10	39.522

The variable, race, yielded a significant result, $F(5, 137) = 2.814$, $p = .019$, $\eta^2 = .165$, with a medium effect size. The means table is presented below. A post-hoc test could not be performed due to less than 2 people being in a category.

Table 4

Global Self-Efficacy: Race

Race	<i>N</i>	Mean	<i>SD</i>
Asian	6	298.00	49.291
Black/Af. Amer	11	315.82	41.009
Hispanic/Latino	10	282.10	49.131
White/Caucasian	110	292.86	36.793
Other	5	287.80	26.939
Prefer Not Ans	1	177.00	
Total	143	293.10	39.522

An analysis of variance showed that there were significant differences in counselor self-efficacy across the variable of years of service. The means are presented in

Table 5. As the Levene's test yielded significant results ($p = .003$), the robust Welch's results are reflected here, $F(5, 25.577) = 5.038$, $p = .002$, $\eta^2 = .163$. The effect size was large. A Games Howell post hoc revealed differences were between those who had between (a) 0 to 5 years of services and those with (b) 6 to 10 and (c) 25+ years of service.

Table 5

Global Self-Efficacy: Years of Service

Years of Service	<i>N</i>	Mean	<i>SD</i>
0-5	72	283.03	44.577
6-10	34	305.03	31.418
11-15	19	304.37	32.872
16-20	7	278.29	24.185
21-24	6	316.33	30.975
25+	5	307.20	4.147
Total	143	293.10	39.522

As significant differences for self-efficacy were found for counselors' (a) age, (b) race, and (c) years of service, these were entered into the multiple regression as control variables for the first RQ. It should be noted that these, being categorical variables, were dummy coded.

RQ2 Outcome: Well-Being

The variable, size of institution, yielded a significant result, $F(2, 112) = 4.624$, $p = .012$, $\eta^2 = .076$, with a medium effect size. The means table is presented below. An LSD post-hoc test revealed that counselors in smaller institutions (sizes 2,000 – 4,999) had lower levels of well-being ($M = 32.9$) than those in moderately sized (5000 to 9,999; $M=36.9$) or larger institutions (10,000+; $M=35.6$). Consequently, the variable, size of institution, was dummy coded as a control variable in the multiple regression for the

second RQ. There were no significant differences in the variables of (a) age, (b) gender, (c) race, (d) level of education, (e) type of institution, (f) size of department, or (g) years of service on well-being.

Table 6

Global Self-Efficacy: Size of Institution

Size of Institution	<i>N</i>	Mean	<i>SD</i>
2,000 – 4,999	24	32.96	6.118
5,000 – 9,999	40	36.95	4.373
10,000 +	51	35.55	5.257
Total	115	35.55	5.257

RQ3 Outcome: Burnout

The variable, size of institution, yielded a significant result, $F(2, 112) = 4.528$, $p = .013$, $\eta^2 = .075$, with a medium effect size. The means table is presented below. An LSD post-hoc test revealed that counselors in institutions of 5,000 – 9,999 report lower levels of burnout ($M=42.63$) than those in sizes 2,000 – 4,999 ($M=50.33$) or those of over 10,000 ($M=47.14$). Consequently, the variable, size of institution, was dummy coded as a control variable in the multiple regression for the third RQ. The variables of (a) age, (b) gender, (c) race, (d) level of education, (e) type of institution, (f) size of department, or (g) years of service yielded no significant differences on counselor burnout.

Table 7

Counselor Burnout: Size of Institution

Size of Institution	<i>N</i>	Mean	<i>SD</i>
2,000 – 4,999	24	50.33	8.698
5,000 – 9,999	40	42.63	10.350
10,000 +	51	47.14	10.982

Total	115	46.23	10.643
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Assumptions

As the purpose of this study was to determine if emotional intelligence, spiritual intelligence, psychological ownership, burnout, and well-being predict counselor self-efficacy among college counselors, it was appropriate to use a multiple regression data analysis. As I conducted this study by survey, independence of cases was assumed. There was no reason to think any single college counselor took the survey multiple times or that any counselor's responses influenced those of another counselor. For this study, both predictor and outcome variables were captured at the interval/ratio level, so were continuous. To test this model fit, certain assumptions were met.

1. **Linearity.** The linear multiple regression assumes the outcome is linearly related to the predictors and the predictors have an additive effect, that is each predictor should contribute to explaining the variance in the outcome. To verify linearity, I conducted a P-Plot. A normal distribution was noted on all three multiple regressions, as the clusters fell along the horizontal line. This can be seen in Appendix B, Figures B1–B3.
2. **Normally distributed residuals.** To further verify linearity, I performed a plot of residuals against predictor variables. As it was difficult to determine linearity with this standard plot, I performed a non-linear best fit line known as the Loess Curve through the scatterplot to see if I could detect any nonlinearity. From the Loess curve, it appeared that for all three multiple regressions the relationship of standardized predicted to residuals was roughly

linear around zero. As a result, I concluded that the relationship between the response variable and predictors was zero since the residuals seemed to be randomly scattered around zero. This plot also supported the assumption of linearity for the three multiple regressions conducted for this study. This can be seen in Appendix B, Figures B4–B6.

3. Homoscedasticity means the predictor variables have similar variance of error terms. The variability in scores for the independent variables are the same at all values of the dependent variables. Homoscedasticity can be determined by looking at the same scatterplot as for linearity. For this study, the residuals plot for self-efficacy and counselor burnout was rectangular, with a concentration of points along the center. This showed that the residuals met the assumptions of homoscedasticity. For well-being, the residuals plot was less defined, yet ignoring one outlier allowed the assumption to be met. This can be seen in Appendix B, Figures B4–B6.
4. No multi-collinearity. The predictor variables should be independent of each other. I tested for multi-collinearity by running the co-efficients with collinearity statistical test in SPSS. This showed no multi-collinearity, since the variance inflation factor was less than 10 for all variables in all three multiple regressions, and the tolerance was above 0.1. This can be seen in Appendix B, Tables B1–B3.
5. No Autocorrelation. Auto-correlation is a concern that the residuals of two observations in a regression model are correlated. To check for this, I used the

Durbin Watson test in SPSS. Results for the three multiple regressions fell within the range of 0 – 4, suggesting no autocorrelation. This can be seen in Appendix B, Tables B4–B6.

Supporting documentation that all three multiple regressions conducted for this study met the assumptions can be found in Appendix B.

Answering the Research Questions

RQ1: Do Emotional Intelligence, Spiritual Intelligence, Psychological Ownership, Burnout, and Well-Being Predict Counselor Self-Efficacy?

A forced choice multiple linear regression analysis was used to analyze the first RQ. A significant regression model was found ($F(15, 142) = 5.233, p < .001$), with an adjusted R^2 of .382. This means that 38% of the variance in self-efficacy was explained by the variance in emotional intelligence, spiritual intelligence, psychological ownership, counselor burnout, and well-being with age, race, and years of services as control variables. The results reflected that burnout significantly predicted self-efficacy ($p = .002$). For every unit increase in burnout, self-efficacy will decrease by -.812. The results also reflected that emotional intelligence significantly predicted self-efficacy ($p = .042$). For every unit increase in emotional intelligence, self-efficacy will increase by .506. The remaining variables of spiritual intelligence ($p = .107$), psychological ownership ($p = .275$), and well-being ($p = .993$) did not significantly contribute to predicting self-efficacy.

RQ2: Do Emotional Intelligence, Spiritual Intelligence, and Psychological Ownership Predict Well-Being?

A forced choice multiple linear regression analysis was used to answer the second RQ. A significant regression equation was found $F(5, 114) = 43.873, p < .001$, with an adjusted R^2 of .668. This means that 66% of the variance in well-being was explained by the variance in emotional intelligence, spiritual intelligence, and psychological ownership when size of institution was considered as a control variable. Emotional intelligence was the only variable that significantly ($p = .001$) predicted well-being. For every unit increase by emotional intelligence, well-being will increase by .225. The remaining variables of spiritual intelligence ($p = .659$) and psychological ownership ($p = .202$) did not significantly contribute to well-being.

RQ3: Do Emotional Intelligence, Spiritual Intelligence, Psychological Ownership, and Well-Being Predict Burnout?

A forced choice multiple linear regression analysis was used to analyze the third RQ. The regression model found $F(4, 114) = 10.27, p < .001$, with an adjusted R^2 of .363. This means that 36% of the variance in burnout is explained by the variance in emotional intelligence, spiritual intelligence, psychological ownership, and well-being when size of institution is held as a control variable. Emotional intelligence yielded significant results ($p = .001$). With each unit increase of emotional intelligence, burnout decreased by -.320. The other predictors did not significantly contribute: spiritual intelligence ($p = .970$), psychological ownership ($p = .100$) and well-being ($p = .603$).

Summary

In this study, I examined if various psychological constructs predicted (a) self-efficacy, (b) well-being, and (c) burnout among college counselors. Survey research methods were used, and the data collection went as planned. The demographics of the sample of 143 aligned with other research studies focusing on college counselors suggesting the sample was similar to the general population.

The demographics were analyzed using ANOVAs, which revealed significant differences among the different outcomes. For the outcome of self-efficacy, significant differences were found for the variables of (a) age, (b) race, and (c) years of service. Consequently, these were considered control variables for the first RQ. For the second and third RQs, size of institution was considered a control variable in the multiple regressions.

I used multiple regressions to respond to the RQ, which yielded significant models. Only the predictor variable of burnout contributed to understanding the variance in college counselors' self-efficacy. Burnout negatively influenced self-efficacy. The variables of (a) spiritual intelligence, (b) psychological ownership, and (c) well-being did not contribute to understanding the variance in self-efficacy. Emotional intelligence predicted (a) well-being and (b) burnout. Emotional intelligence supported self-efficacy and well-being but acted as a counter to burnout. Spiritual intelligence and psychological ownership did not contribute to understanding the variance in well-being nor in burnout.

Chapter 5: Discussion, Conclusions, and Recommendations

College students seek counseling from their college or university's counseling center for various reasons; however, most students come to counseling for symptoms relating to anxiety and depression (LeViness et al., 2019). Additionally, counseling centers have recently noticed a trend in college students presenting with more severe diagnoses, such as bipolar disorder, attention-deficit hyperactivity disorder (ADHD), self-harm, eating disorders, traumatic experiences, and suicide ideations (Abrams, 2020). Not only do college counselors provide individual and group counseling to students, but they also provide consultation and educational outreach services to faculty, staff, and student organizations. They serve on campus and community committees, and many provide supervision for counseling interns. As a result, college counselors are at risk of burnout (Blount & Lambie, 2018), which can impact self-efficacy.

This study was conducted to discern whether emotional intelligence, spiritual intelligence, psychological ownership, burnout, and well-being could predict college counselor self-efficacy. Among these constructs, only emotional intelligence positively predicted counselor self-efficacy and well-being, while having a negative relationship with burnout. Additionally, burnout predicted lower self-efficacy. In checking the assumptions for the multiple regression, other findings arose from the demographic variables of the study. ANOVA revealed significant differences in college counselors' self-efficacy across the variables of (a) age, (b) race, and (c) year of service. ANOVAs also indicated that there were significant differences in well-being and burnout based on

the size of the employing institutions. These were considered as control variables for the multiple regression analysis.

Interpretation of Findings

The population of interest for this study was college counselors; the variables of emotional intelligence, spiritual intelligence, psychological ownership as related to self-efficacy, burnout, and well-being had not been previously studied in this population. The results of this study aligned with previous studies of mental health counselors and other helping professionals. For instance, Gutierrez (2016), studying mental health counselors and marriage and family counselors, concluded that emotional intelligence has a significant relationship with counselor burnout, with those of higher emotional intelligence having lower levels of burnout. Additionally, Easton et al. (2008) studied counselors-in-training and professional counselors and discovered a connection between high emotional intelligence and high counselor self-efficacy. The ability to correctly identify emotions was directly correlated with skills related to counseling. The results of the current study also affirmed emotional intelligence positively influenced college counselors' self-efficacy and well-being while negatively influencing burnout.

Further, in this study, college counselor self-efficacy was significantly different across the variables of age, years of service, and race. College counselors over the age of 56 indicated higher levels of self-efficacy than those who were younger, with those in the age range of 61–65 having the greatest amount of self-efficacy. Years of service aligned with the results of age; college counselors having more years of service had higher self-

efficacy. Higher levels of self-efficacy were also reported by college counselors who identified as Black/African American.

These findings add to the literature, as previous studies have shown mixed results. For example, Lam et al. (2013) found significant differences in counselor self-efficacy based on age and race, with those 30–39 ranking highest in total self-efficacy, while those in the age category of 40+ ranked slightly lower, which they attributed to being concerned with creativity and meaningful work versus being likely to be in a career change. Regarding the differences in self-efficacy due to race, both bi-racial and African American participants reported higher means on total self-efficacy than Latino, White, or Asian participants (Lam et al., 2013). Even though the counseling profession is dominated by White counselors who are trained in the theories, concepts, and methods based on the Western culture, results showed that they do not have higher counseling self-efficacy than counseling students from minority groups. In contrast, Aliyev and Tunc (2015) did not find significant results related to age, though they did report differences in self-efficacy across years of service. These differences were in the 6–10 year category and over 11 years, showing that those with longer years of service experienced greater counselor self-efficacy. These results aligned with the findings in the current study.

Limitations of the Study

This study had a few limitations. The survey instrument was lengthy and a self-report, convenience sampling was employed, and data were collected in the midst of an unprecedented global pandemic. The survey instrument was 122 items, which may have resulted in some respondents experiencing survey fatigue. Survey fatigue may have

caused some respondents to become bored, lose interest, or speed through questions (Davies, 2019). There were over 40 surveys that were not fully completed and had to be eliminated from the sample due to a lack of usable data.

The instruments used were all self-report and there were no items to check for bias, such as social desirability, in responses. It was assumed that respondents were responding honestly. However, it is possible that individuals may have over-estimated or under-estimated variables such as self-efficacy or burnout. Another possible limitation was the use of a convenience sample which may have introduced sampling error. Counselors experiencing burnout may not have responded due to the effort required to complete the survey instrument.

The ongoing pandemic dramatically changed working conditions for many people. Many shifted to teleworking, caseloads were impacted, and it is likely the types of cases and expectations around college counseling services by college administrators, college counselors, and college students were impacted. There is no reckoning how this threat of history may have influenced this study.

Recommendations for Future Research

Given that this research took place in the midst of a global pandemic, a qualitative study could be conducted to see how college counselor self-efficacy was affected by changes in operations. Another quantitative study on burnout in college counselors during the pandemic would also be helpful in understanding how to promote well-being among college counselors. Since studies have indicated that college counselors are at risk for burnout (Bohner, 2018; Lin, 2012; Wilkerson & Wacha-Montes, 2017), yet this study

showed no significant predictor other than size of institution, additional studies should be conducted to add to the knowledge of burnout in the college counselor. Counselor self-efficacy could be further explored with regard to age, years of service, and race. This knowledge would fuel continuing education efforts and counselor training programs. Lastly, further study is needed on emotional intelligence in counselors. It would be helpful to see a comparison of emotional intelligence assessments for students versus counselors who are already in practice. Additionally, emotional intelligence in gatekeeping could be explored. Furthermore, not only could emotional intelligence be examined in counselor trainees and counselors in practice, the use of emotional intelligence in the therapeutic relationship could be researched.

Implications

The American Counseling Association *Code of Ethics* (2014) mandates that counselors monitor themselves for signs of possible impairment to reduce potential for harm to the client. Counselors who are well are more apt to have stronger self-efficacy. Emotional intelligence is crucial to counselor competence, as evidenced by appropriate attending behaviors, reflection of feeling and meaning, and identification of emotions in self and others (Easton et al., 2008). Results of this study underline the importance of emotional intelligence in supporting self-efficacy and well-being and in diminishing burnout in college counselors. These results indicate that counselor education and training efforts in support of greater development of emotional intelligence in trainees is likely to have beneficial results long term over counselors' careers. Given that emotional literacy can be taught, counselor education curriculum could incorporate and emphasize

the value of increasing emotional intelligence in counselors. This fits well with Council for Accreditation of Counseling and Related Educational Programs standards, Section 2, Professional Counseling and Identity. To meet these accreditation standards, counselor education programs must document where each of the required standards are covered in the educational curriculum. Counselor characteristics and behaviors that influence the counseling process are listed as one of the core curriculum requirements of these standards under Counseling and Helping Relationships.

Martin et al. (2004) discovered that counseling students and professional counselors had higher levels of emotional intelligence than the general population. If emotional intelligence assessments were used in counselor education programs, it is possible that individuals scoring at mid-levels, or those closer to the norm, would not find counseling a good fit for them, and they could be redirected to a career better suited to them. Catching this early in their program could prevent unnecessary time, energy, and finances being mis-spent.

Addressing the importance of emotional intelligence could strengthen and evolve the counseling profession. For example, counselors could incorporate interventions to increase emotional intelligence, such as reading articles or books, listening to podcasts, watching various videos, and attending seminars. For college counselors, student affairs administration could provide budgetary resources for counselors on staff to be members of their local, state, and national organizations. This would provide much needed resources on topics relative to their particular counseling environment. Money, time, and encouragement to attend conferences would provide college counselors with networking

and learning opportunities. College counselors who have high emotional intelligence are accurate in understanding their strengths and limitations and tend to have greater self-efficacy, fully able to appreciate their contributions to their work and in their personal lives (Stein, Book, & Kanoy, 2013).

Conclusion

This study examined if emotional intelligence, spiritual intelligence, and psychological ownership were predictors of college counselor burnout, well-being, and self-efficacy. Emotional intelligence was a significant predictor of self-efficacy and well-being, and negatively predicted burnout. Spiritual intelligence and psychological ownership did not contribute to understanding the variance in self-efficacy, well-being, or burnout.

The role of emotional intelligence is crucial in counseling, as understanding the emotions and affect of the client can improve the therapeutic outcome (Easton et al., 2008). College counselors' emotional intelligence positively influenced their self-efficacy and well-being while diminishing burnout. This study has potential for social change by emphasizing the benefits that emotional intelligence produces for college counselors, providing evidence for counselor training programs to support development in counselor trainees. Counselors in practice may also find it helpful to seek out means to furthering their development of emotional intelligence to promote both their well-being and self-efficacy and reduce the likelihood of burnout.

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Appendix A: Instruments Used with Permissions

Trait Emotional Intelligence Questionnaire Short Form (TeiQue-SF).
TEIQue-SF

Instructions: Please answer each statement below by putting a circle around the number that best reflects your degree of agreement or disagreement with that statement. Do not think too long about the exact meaning of the statements. Work quickly and try to answer as accurately as possible. There are no right or wrong answers. There are seven possible responses to each statement ranging from 'Completely Disagree' (number 1) to 'Completely Agree' (number 7).

1 2 3 4 5 6 7
 Completely Disagree Completely Agree

1. Expressing my emotions with words is not a problem for me.	1	2	3	4	5	6	7
2. I often find it difficult to see things from another person's viewpoint.	1	2	3	4	5	6	7
3. On the whole, I'm a highly motivated person.	1	2	3	4	5	6	7
4. I usually find it difficult to regulate my emotions.	1	2	3	4	5	6	7
5. I generally don't find life enjoyable.	1	2	3	4	5	6	7
6. I can deal effectively with people.	1	2	3	4	5	6	7
7. I tend to change my mind frequently.	1	2	3	4	5	6	7
8. Many times, I can't figure out what emotion I'm feeling.	1	2	3	4	5	6	7
9. I feel that I have a number of good qualities.	1	2	3	4	5	6	7
10. I often find it difficult to stand up for my rights.	1	2	3	4	5	6	7
11. I'm usually able to influence the way other people feel.	1	2	3	4	5	6	7
12. On the whole, I have a gloomy perspective on most things.	1	2	3	4	5	6	7
13. Those close to me often complain that I don't treat them right.	1	2	3	4	5	6	7
14. I often find it difficult to adjust my life according to the circumstances.	1	2	3	4	5	6	7
15. On the whole, I'm able to deal with stress.	1	2	3	4	5	6	7
16. I often find it difficult to show my affection to those close to me.	1	2	3	4	5	6	7
17. I'm normally able to "get into someone's shoes" and experience their emotions.	1	2	3	4	5	6	7
18. I normally find it difficult to keep myself motivated.	1	2	3	4	5	6	7
19. I'm usually able to find ways to control my emotions when I want to.	1	2	3	4	5	6	7
20. On the whole, I'm pleased with my life.	1	2	3	4	5	6	7
21. I would describe myself as a good negotiator.	1	2	3	4	5	6	7
22. I tend to get involved in things I later wish I could get out of.	1	2	3	4	5	6	7
23. I often pause and think about my feelings.	1	2	3	4	5	6	7
24. I believe I'm full of personal strengths.	1	2	3	4	5	6	7
25. I tend to "back down" even if I know I'm right.	1	2	3	4	5	6	7
26. I don't seem to have any power at all over other people's feelings.	1	2	3	4	5	6	7
27. I generally believe that things will work out fine in my life.	1	2	3	4	5	6	7
28. I find it difficult to bond well even with those close to me.	1	2	3	4	5	6	7
29. Generally, I'm able to adapt to new environments.	1	2	3	4	5	6	7
30. Others admire me for being relaxed.	1	2	3	4	5	6	7

Trait Emotional Intelligence Questionnaire – Short Form (TEIQue-SF). This 30-item form includes two items from each of the 15 facets of the TEIQue. Items were selected primarily on the basis of their correlations with the corresponding total facet scores, which ensured broad coverage of the sampling domain of the construct. The –SF can be used in research designs with limited experimental time or wherein trait EI is a peripheral variable. Although it is possible to derive from it scores on the four trait EI factors, in addition to the global score, these tend to have somewhat lower internal consistencies than in the full form of the inventory. The –SF does not yield scores on the 15 trait EI facets.

Scoring information for the TEIQue-SF is available at: <http://www.psychometriclab.com/Home/Default/14>. Please note that we cannot provide any advice on how to run the syntax in SPSS or other statistical software.

Please make sure you read the FAQ section at <http://www.psychometriclab.com/Home/Default/18>. In particular, note that we do not provide free information regarding norms or free feedback reports. Norms and reports are available for a fee (email admin@teique.com for quotes).

Reference for the TEIQue-SF: Petrides, K. V. (2009). Psychometric properties of the Trait Emotional Intelligence Questionnaire. In C. Stough, D. H. Saklofske, and J. D. Parker, *Advances in the assessment of emotional intelligence*. New York: Springer. DOI: 10.1007/978-0-387-88370-0_5

For more information about the trait emotional intelligence research program go to: www.psychometriclab.com

Please note that any and all commercial use of this instrument, or any adapted, modified, or derivative works thereof, is strictly prohibited.

Permission to use the TEIQue-SF is not required, as per the website:

substantively different from the plethora of models in the fields of intelligence, personality, and emotional intelligence.

A general reference that can be used for all TEIQue instruments is:

Petrides, K. V. (2009). Psychometric properties of the Trait Emotional Intelligence Questionnaire. In C. Stough, D. H. Saklofske, and J. D. Parker, *Advances in the assessment of emotional intelligence*. New York: Springer. DOI: 10.1007/978-0-387-88370-0_5 [[pdf](#)]

Below are the original English versions of the instrument. For adaptations in other languages, click [here](#).

All TEIQue forms, versions, and translations are available free of charge for academic research purposes only. Provided there is no commercial usage, TEIQue instruments can be used for research purposes without permission. Please do not email us to request permission for usage in academic or medical research, as this is unnecessary. However, any commercial or quasi-commercial usage of any TEIQue instrument or related materials is **strictly prohibited, unauthorized and illegal**. For commercial applications, click [here](#).

Please note that we cannot provide additional information or support for the TEIQue, other than what is currently available in the relevant scientific publications, the website, and the technical manual. Norms and reports are not necessary for research purposes and can only be made available for a fee. We do not provide free access to norms or reports.

Please avoid emailing us unless it is essential. Before emailing, read the information in the website, including the [FAQ](#).

Spiritual Intelligence Self-Report Inventory (SISRI-24)

SISRI-24

The Spiritual Intelligence Self-Report Inventory © 2008 D. King

Age? (in years) _____

Sex? (circle one) M F

The following statements are designed to measure various behaviours, thought processes, and mental characteristics. Read each statement carefully and choose which **one** of the five possible responses best reflects you by circling the corresponding number. If you are not sure, or if a statement does not seem to apply to you, choose the answer that seems the best. Please answer honestly and make responses based on how you actually are rather than how you would like to be. The five possible responses are:

0 – Not at all true of me | 1 – Not very true of me | 2 – Somewhat true of me | 3 – Very true of me | 4 – Completely true of me

For each item, circle the one response that most accurately describes you.

1. I have often questioned or pondered the nature of reality.	0	1	2	3	4
2. I recognize aspects of myself that are deeper than my physical body.	0	1	2	3	4
3. I have spent time contemplating the purpose or reason for my existence.	0	1	2	3	4
4. I am able to enter higher states of consciousness or awareness.	0	1	2	3	4
5. I am able to deeply contemplate what happens after death.	0	1	2	3	4
6. It is <i>difficult</i> for me to sense anything other than the physical and material.	0	1	2	3	4
7. My ability to find meaning and purpose in life helps me adapt to stressful situations.	0	1	2	3	4
8. I can control when I enter higher states of consciousness or awareness.	0	1	2	3	4
9. I have developed my own theories about such things as life, death, reality, and existence.	0	1	2	3	4
10. I am aware of a deeper connection between myself and other people.	0	1	2	3	4
11. I am able to define a purpose or reason for my life.	0	1	2	3	4
12. I am able to move freely between levels of consciousness or awareness.	0	1	2	3	4
13. I frequently contemplate the meaning of events in my life.	0	1	2	3	4
14. I define myself by my deeper, non-physical self.	0	1	2	3	4
15. When I experience a failure, I am still able to find meaning in it.	0	1	2	3	4
16. I often see issues and choices more clearly while in higher states of consciousness/awareness.	0	1	2	3	4
17. I have often contemplated the relationship between human beings and the rest of the universe.	0	1	2	3	4
18. I am highly aware of the nonmaterial aspects of life.	0	1	2	3	4
19. I am able to make decisions according to my purpose in life.	0	1	2	3	4
20. I recognize qualities in people which are more meaningful than their body, personality, or emotions.	0	1	2	3	4
21. I have deeply contemplated whether or not there is some greater power or force (e.g., god, goddess, divine being, higher energy, etc.).	0	1	2	3	4
22. Recognizing the nonmaterial aspects of life helps me feel centered.	0	1	2	3	4
23. I am able to find meaning and purpose in my everyday experiences.	0	1	2	3	4
24. I have developed my own techniques for entering higher states of consciousness or awareness.	0	1	2	3	4

The Spiritual Intelligence Self-Report Inventory (SISRI-24)

Scoring Procedures

Total Spiritual Intelligence Score:

Sum all item responses or subscale scores (after accounting for *reverse-coded item).

24 items in total; Range: 0 – 96

4 Factors/Subscales:

I. Critical Existential Thinking (CET):

Sum items 1, 3, 5, 9, 13, 17, and 21.

7 items in total; range: 0 - 28

II. Personal Meaning Production (PMP):

Sum items 7, 11, 15, 19, and 23.

5 items in total; range: 0 - 20

III. Transcendental Awareness (TA):

Sum items 2, 6*, 10, 14, 18, 20, and 22.

7 items in total; range: 0 - 28

IV. Conscious State Expansion (CSE):

Sum items 4, 8, 12, 16, and 24.

5 items in total; range: 0 - 20

*Reverse Coding: Item # 6 (response must be reversed prior to summing scores).

Higher scores represent higher levels of spiritual intelligence and/or each capacity.

Permissions for Use

Use of the SISRI is unrestricted so long as it is for academic, educational, or research purposes. Unlimited duplication of this scale is allowed with full author acknowledgement only. Alterations and/or modifications of any kind are strictly prohibited without author permission. The author would appreciate a summary of findings from any research which utilizes the SISRI. Contact details are below.

Permission to use the SISRI-24, per website:

February 11, 2019

To whom it may concern:

Re: Permission to use SISRI-24

This letter is to certify that the Spiritual Intelligence Self-Report Inventory (SISRI-24), as published in King and DeCicco (2009), is free for unlimited use by students, researchers, and practitioners, so long as the scale is referenced properly (see below) and not altered in any way, shape, or form without the authors' permission. Translation into other languages is also permitted, although some caution and care are suggested given the wording of the scale (e.g., the word consciousness can be translated in different ways that can possess meaning which is unintended by the authors).

APA reference: King, D. B., & DeCicco, T. L. (2009). A viable model and self-report measure of spiritual intelligence. *The International Journal of Transpersonal Studies*, 28, 68-85.

All the best in your endeavor,



David King, PhD

Psychological Ownership Scale:

Table 1. Psychological ownership items

Psychological ownership

Instructions: Think about the home, boat or cabin that you own or co-own with someone, and the experiences and feelings associated with the statement 'THIS IS MY (OUR) HOUSE!' The following questions deal with the 'sense of ownership' that you feel for the organization that you work for. Indicate the degree to which you personally agree or disagree with the following statements.

Item

1. This is MY organization.
2. I sense that this organization is OUR company.
3. I feel a very high degree of personal ownership for this organization.
4. I sense that this is MY company.
5. This is OUR company.
6. Most of the people that work for this organization feel as though they own the company.
7. It is hard for me to think about this organization as MINE. (reversed)

Permission to use the Psychological Ownership Scale per email from Dr. Van Dyne:

Hello Lola,

You have my permission to use our psychological ownership scale in your research.

See page 449 in the attached article.

It provides the instructions and lists the items.

I recommend that you use a Likert scale, ranging from disagree to agree.

You should average the items and use this average in your statistical analysis.

I strongly recommend that you use TWO surveys to provide a more rigorous research design. That way you can measure the predictors at T1 and the outcomes at T2.

Even separating the surveys by 2-3 weeks would make a big difference and since you aim to have a large sample, you should still have an adequate number participants with matched T1-T2 data.

Best wishes

Linn

Counselor Burnout Inventory

32

Counselor Burnout Inventory

Instructions: This questionnaire is designed to measure the therapist's burnout level. There are no right or wrong answers. Try to be as honest as you can. Beside each statement, circle the number that best describes how you feel.

	1 Never True	2 Rarely True	3 Sometimes True	4 Often True	5 Always True
1. Due to my job as a therapist, I feel tired most of the time.	1	2	3	4	5
2. I feel I am an incompetent therapist.	1	2	3	4	5
3. I am treated unfairly in my workplace.	1	2	3	4	5
4. I am not interested in my clients and their problems.	1	2	3	4	5
5. My relationships with family members have been negatively impacted by my work as a therapist.	1	2	3	4	5
6. I feel exhausted due to my work as a therapist.	1	2	3	4	5
7. I feel frustrated by my effectiveness as a therapist.	1	2	3	4	5
8. I feel negative energy from my supervisor.	1	2	3	4	5
9. I have become callous toward clients.	1	2	3	4	5
10. I feel like I do not have enough time to engage in personal interests.	1	2	3	4	5
11. Due to my job as a therapist, I feel overstressed.	1	2	3	4	5
12. I am not confident in my therapeutic skills.	1	2	3	4	5
13. I feel hogged down by the system in my workplace.	1	2	3	4	5
14. I have little empathy for my clients.	1	2	3	4	5
15. I feel I do not have enough time to spend with my friends.	1	2	3	4	5
16. Due to my job as a therapist, I feel tightness in my back and shoulders.	1	2	3	4	5
17. I do not feel like I am making a change in my clients.	1	2	3	4	5
18. I feel frustrated with the system in my workplace.	1	2	3	4	5
19. I am no longer concerned about the welfare of my clients.	1	2	3	4	5
20. I feel I have poor boundaries between work and my personal life.	1	2	3	4	5

Permission to Use the Counselor Burnout Inventory per email from Dr. Lee:

From: 이상민(교수 / 교육학과 [redacted])
Sent: Saturday, June 20, 2020 6:33 PM
To: Lola Johnston; [redacted]
Subject: Re: Permission to Use the Counselor Burnout Inventory

Here you go.

2020년 6월 21일 (일) 오전 12:44, Lola Johnston <[redacted]>님이 작성:
Survey Usage Request: The Counselor Burnout Inventory

June 20, 2020

Dr. Sang Min Lee
Counseling Program, College of Education
Korea University
Seoul, South Korea

Contact information via email: [redacted]

Dear Dr. Lee:

My name is Lola Johnston. I am a doctoral student from Walden University School of Counselor Education and Supervision. I am writing my quantitative dissertation tentatively entitled *Examining the Contributions of Emotional and Spiritual Intelligences, Psychological Ownership, Burnout, and Wellness on the Working Alliance in College Counselors* under the direction of my dissertation committee chair by Dr. Arden Gale.

I am writing to obtain your permission to use The Counselor Burnout Inventory in my research study. I would like to use an electronic version of your survey, and will adhere to the following conditions:

- I will use this survey for only my research study and will not use or sell it with any compensated or curriculum development activities.
- I will include the copyright statement/source indication on all copies of the instrument.
- I will send my research study and copy of the results to you. Additional, to the degree possible, I will send articles and the like that make use of the survey data promptly to your attention.

Counselor Activity Self-Efficacy Scale (CASES)

COUNSELING ACTIVITY SELF-EFFICACY SCALES

General Instructions: The following questionnaire consists of three parts. Each part asks about your beliefs about your ability to perform various counselor behaviors or to deal with particular issues in counseling. I am looking for your honest, candid responses that reflect your beliefs about your current capabilities, rather than how you would like to be seen or how you might look in the future. There are no right or wrong answers to the following questions. Using a dark pen or pencil, please fill in the number that best reflects your response to each question.

Part I.

Instructions: Please indicate how confident you are in your ability to use each of the following helping skills effectively, over the next week, in counseling most clients.

	No confidence			Some confidence				Complete confidence		
	0	1	2	3	4	5	6	7	8	9
How confident are you that you could use these general skills effectively with <u>most</u> clients over the next week?										
1. Attending (orient yourself physically toward the client).	0	1	2	3	4	5	6	7	8	9
2. Listening (capture and understand the messages that clients communicate).	0	1	2	3	4	5	6	7	8	9
3. Restatements (repeat or rephrase what the client has said, in a way that is succinct, concrete, and clear).	0	1	2	3	4	5	6	7	8	9
4. Open questions (ask questions that help clients to clarify or explore their thoughts or feelings).	0	1	2	3	4	5	6	7	8	9
5. Reflection of feelings (repeat or rephrase the client's statements with an emphasis on his or her feelings).	0	1	2	3	4	5	6	7	8	9
6. Self-disclosure for exploration (reveal personal information about your history, credentials, or feelings).	0	1	2	3	4	5	6	7	8	9
7. Intentional silence (use silence to allow clients to get in touch with their thoughts or feelings).	0	1	2	3	4	5	6	7	8	9

8. **Challenges** (point out discrepancies, contradictions, defenses, or irrational beliefs of which the client is unaware or that he or she is unwilling or unable to change). 0 1 2 3 4 5 6 7 8 9
9. **Interpretations** (make statements that go beyond what the client has overtly stated and that give the client a new way of seeing his or her behavior, thoughts, or feelings). 0 1 2 3 4 5 6 7 8 9
10. **Self-disclosures for insight** (disclose *past* experiences in which you gained some personal insight). 0 1 2 3 4 5 6 7 8 9
11. **Immediacy** (disclose *immediate* feelings you have about the client, the therapeutic relationship, or yourself in relation to the client). 0 1 2 3 4 5 6 7 8 9
12. **Information-giving** (teach or provide the client with data, opinions, facts, resources, or answers to questions). 0 1 2 3 4 5 6 7 8 9
13. **Direct guidance** (give the client suggestions, directives, or advice that imply actions for the client to take). 0 1 2 3 4 5 6 7 8 9
14. **Role-play and behavior rehearsal** (assist the client to role-play or rehearse behaviors in-session). 0 1 2 3 4 5 6 7 8 9
15. **Homework** (develop and prescribe therapeutic assignments for clients to try out between sessions). 0 1 2 3 4 5 6 7 8 9

Part II.

Instructions: Please indicate how confident you are in your ability to do each of the following tasks effectively, over the next week, in counseling most clients.

	No confidence			Some confidence				Complete confidence		
	0	1	2	3	4	5	6	7	8	9
How confident are you that you could do these specific tasks effectively with <u>most</u> clients over the next week?										
1. Keep sessions "on track" and focused.	0	1	2	3	4	5	6	7	8	9
2. Respond with the best helping skill, depending on what your client needs at a given moment.	0	1	2	3	4	5	6	7	8	9
3. Help your client to explore his or her thoughts, feelings, and actions.	0	1	2	3	4	5	6	7	8	9
4. Help your client to talk about his or her concerns at a "deep" level.	0	1	2	3	4	5	6	7	8	9
5. Know what to do or say next after your client talks.	0	1	2	3	4	5	6	7	8	9
6. Help your client to set realistic counseling goals.	0	1	2	3	4	5	6	7	8	9
7. Help your client to understand his or her thoughts, feelings, and actions.	0	1	2	3	4	5	6	7	8	9
8. Build a clear conceptualization of your client and his or her counseling issues.	0	1	2	3	4	5	6	7	8	9
9. Remain aware of your intentions (i.e., the purposes of your interventions) during sessions.	0	1	2	3	4	5	6	7	8	9
10. Help your client to decide what actions to take regarding his or her problems.	0	1	2	3	4	5	6	7	8	9

Part III.

Instructions: Please indicate how confident you are in your ability to work effectively, over the next week, with each of the following client types, issues, or scenarios. (By “work effectively,” I am referring to your ability to develop successful treatment plans, to come up with polished in-session responses, to maintain your poise during difficult interactions and, ultimately, to help the client resolve his or her issues.)

	No confidence			Some confidence				Complete confidence		
	0	1	2	3	4	5	6	7	8	9
How confident are you that you could work effectively over the next week with a client who...										
1. ...is clinically depressed.	0	1	2	3	4	5	6	7	8	9
2. ...has been sexually abused.	0	1	2	3	4	5	6	7	8	9
3. ...is suicidal.	0	1	2	3	4	5	6	7	8	9
4. ...has experienced a recent traumatic life event (e.g., physical or psychological injury or abuse).	0	1	2	3	4	5	6	7	8	9
5. ...is extremely anxious.	0	1	2	3	4	5	6	7	8	9
6. ...shows signs of severely disturbed thinking.	0	1	2	3	4	5	6	7	8	9
7. ...you find sexually attractive.	0	1	2	3	4	5	6	7	8	9
8. ...is dealing with issues that you personally find difficult to handle.	0	1	2	3	4	5	6	7	8	9
9. ...has core values or beliefs that conflict with your own (e.g., regarding religion, gender roles).	0	1	2	3	4	5	6	7	8	9
10. ...differs from you in a major way or ways (e.g., race, ethnicity, gender, age, social class).	0	1	2	3	4	5	6	7	8	9
11. ...is not “psychologically-minded” or introspective.	0	1	2	3	4	5	6	7	8	9
12. ...is sexually attracted to you.	0	1	2	3	4	5	6	7	8	9

13. ...you have negative reactions toward (e.g., boredom, annoyance).	0	1	2	3	4	5	6	7	8	9
14. ...is at an impasse in therapy.	0	1	2	3	4	5	6	7	8	9
15. ...wants more from you than you are willing to give (e.g., in terms of frequency of contacts or problem-solving prescriptions).	0	1	2	3	4	5	6	7	8	9
16. ...demonstrates manipulative behaviors in-session.	0	1	2	3	4	5	6	7	8	9

Note. Permission to use this measure was granted by R. W. Lent, C. E. Hill, and M.A. Hoffman. The article about the measure was "Development and validation of the Counselor Activity Self-Efficacy Scales" by R. W. Lent, C. E. Hill, and M. A. Hoffman, 2003, *Journal of Counseling Psychology*, 50, pp. 97-108.

Permission to use the CASES per email from Dr. Lent:

Re: Permission to Use CASES

Lola

From: Robert W. Lent [REDACTED]
Sent: Tuesday, September 15, 2020 7:46 PM
To: Lola Johnston [REDACTED]
Subject: Re: Permission to Use CASES

See attachments. You can find scoring information in the 2003 article. No need to copy me on your findings.

Best wishes,
 Dr. Lent

On Tue, Sep 15, 2020 at 4:06 PM Lola Johnston [REDACTED] wrote:
 Survey Usage Request: Counselor Activity Self-Efficacy Scale

September 15, 2020

Dr. Robert Lent
 Professor, Counseling Psychology Program, College of Education
 University of Maryland
 College Park, MD

Contact information via email [REDACTED]

Dear Dr. Lent:

My name is Lola Johnston. I am a doctoral student from Walden University School of Counselor Education and Supervision. I am writing my quantitative dissertation tentatively entitled *Examining the Contributions of Emotional and Spiritual Intelligences, Psychological Ownership, Burnout, and Well-being on the Self-Efficacy of College Counselors* under the direction of my dissertation committee chair, Dr. Arden Gale.

I am writing to obtain your permission to use the Counselor Activity Self-Efficacy Scale in my research study. I would like to use an electronic version of your survey, and will adhere to the following conditions:

- I will use this survey for only my research study and will not use or sell it with any compensated or curriculum development activities.
- I will include the copyright statement/source indication on all copies of the instrument.
- I will send my research study and copy of the results to you. Additional, to the degree possible, I will send articles and the like that make use of the survey data promptly to your attention.

Appendix B: Data Analysis Figures and Tables

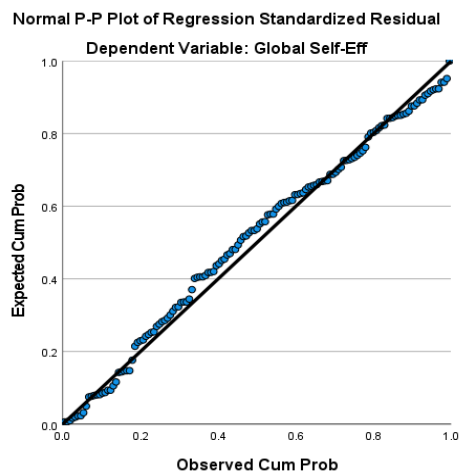
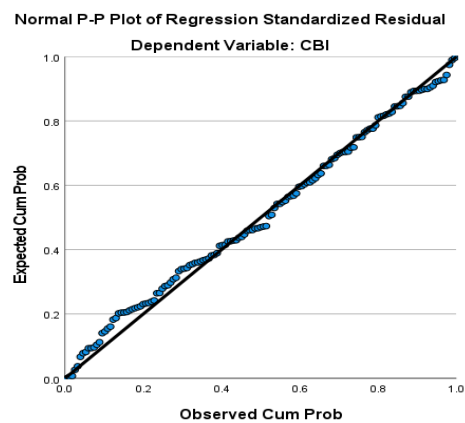
Figure B1*P-P Plot for Global Self-Efficacy***Figure B2***P-P Plot for Counselor Burnout Inventory*

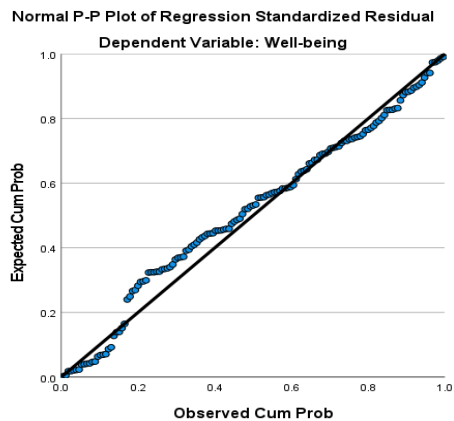
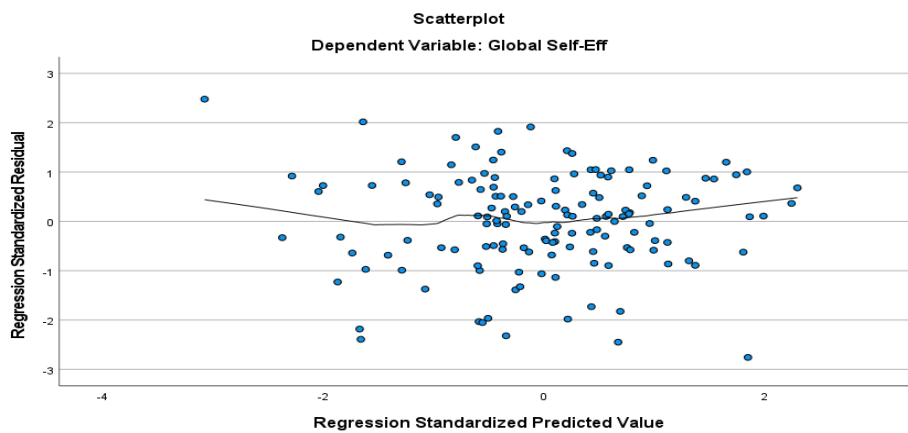
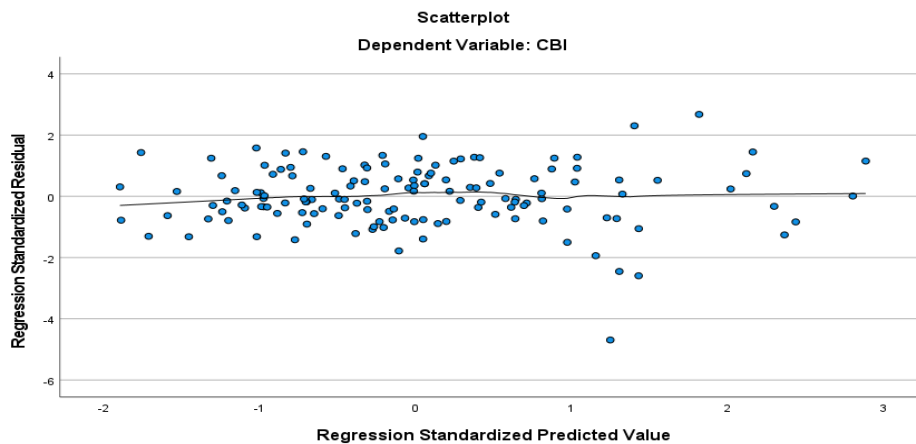
Figure B3*P-P Plot for Well-Being***Figure B4***Scatterplot for Global Self-Efficacy*

Figure B5

Scatterplot for Counselor Burnout Inventory

**Figure B6**

Scatterplot for Well-Being

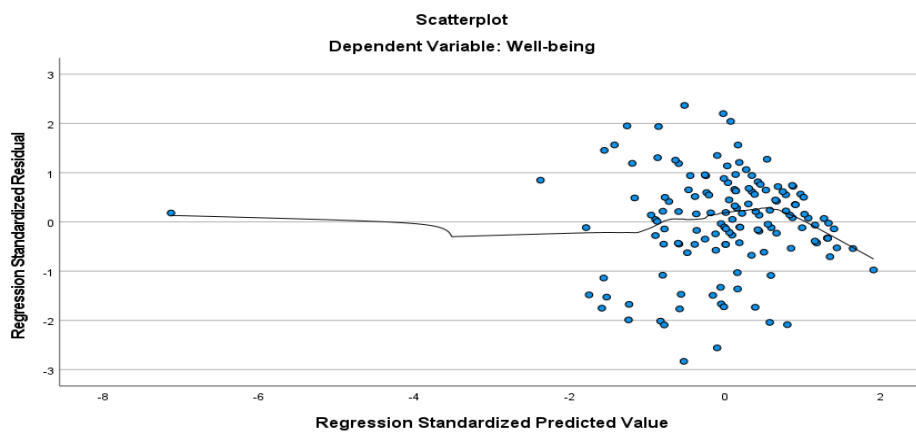


Table B1*Multicollinearity for Global Self-Efficacy*

Model		Unstandardized Coefficients		Coefficients ^a			Collinearity Statistics	
		B	Std. Error	Standardized Coefficients Beta	t	Sig.	Tolerance	VIF
1	(Constant)	231.213	27.113		8.528	.000		
	EI	.607	.252	.346	2.413	.017	.262	3.812
	SI	.291	.180	.144	1.624	.107	.686	1.457
	PsyOwn	-.580	.529	-.095	-1.095	.275	.719	1.391
	CBI	-.906	.256	-.270	-3.536	.001	.929	1.076
	Well-being	-.081	.963	-.012	-.084	.933	.264	3.794

Note. a. Dependent variable = global self-efficacy

Table B2*Multicollinearity for Counselor Burnout Inventory*

Model		Unstandardized Coefficients		Coefficients ^a			Collinearity Statistics	
		B	Std. Error	Standardized Coefficients Beta	t	Sig.	Tolerance	VIF
1	(Constant)	81.081	8.162		9.934	.000		
	EI	.012	.082	.023	.146	.884	.252	3.973
	SI	.029	.058	.048	.501	.617	.675	1.482
	PsyOwn	-.318	.167	-.175	-1.898	.060	.731	1.368
	Global Self-Eff	-.092	.026	-.310	-3.536	.001	.808	1.238
	Well-being	-.160	.307	-.080	-.522	.603	.264	3.787

Note. a. Dependent variable = Counselor Burnout Inventory

Table B3*Multicollinearity for Well-Being*

Model		Coefficients ^a					Collinearity Statistics	
		Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Tolerance	VIF
		B	Std. Error	Beta				
1	(Constant)	-.356	2.975		-.120	.905		
	EI	.214	.014	.822	15.790	.000	.710	1.409
	SI	.007	.016	.024	.448	.655	.675	1.483
	PsyOwn	.055	.047	.061	1.172	.243	.720	1.390
	Global Self-Eff	-.001	.008	-.004	-.084	.933	.740	1.351
	CBI	-.012	.024	-.025	-.522	.603	.853	1.172

Note. a. Dependent variable = well-being

Table B4*Model Summary for Global Self-Efficacy*

Model	R	R Square	Model Summary ^b		
			Adjusted R Square	Std. Error of the Estimate	Durbin-Watson
1	.510 ^a	.260	.233	34.617	2.309

a. Predictors: (Constant), Well-being, CBI, PsyOwn, SI, EI

b. Dependent Variable: Global Self-Eff

Table B5*Model Summary for Counselor Burnout Inventory*

Model	R	R Square	Model Summary ^b		
			Adjusted R Square	Std. Error of the Estimate	Durbin-Watson
1	.386 ^a	.149	.118	11.047	1.918

a. Predictors: (Constant), Well-being, PsyOwn, Global Self-Eff, SI, EI

b. Dependent Variable: CBI

Table B6*Model Summary for Well-Being*

Model Summary^b					
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Durbin-Watson
1	.858 ^a	.736	.727	3.070	2.091

a. Predictors: (Constant), CBI, SI, Global Self-Eff, PsyOwn, EI

b. Dependent Variable: Well-being