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Implicit Motivations in Personality Systems Interactions Predictive of Burnout in Mental Health Professionals

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Walden University
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Abstract

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by

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MS, Walden University, 2017

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Dissertation Submitted in Partial Fulfillment

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Abstract

Burnout among mental health professionals (MHPs) has been of interest to scholars and practitioners since the 1970s. For MHPs, burnout leads to less effective client treatment outcomes, increased turnover rate, and decreased overall wellbeing. Despite a significant body of literature on MHP burnout, there is little literature on how MHPs' implicit motivations (IMs) may influence and contribute to their burnout. Understanding how IMs correlate with burnout may help with self-awareness and specific therapeutic treatments, both of which are important in preventing and alleviating burnout. Grounded in motive disposition theory, personality systems interaction theory, and theory on dimensions of burnout, this quantitative study contributes to the understanding of IMs as they relate to MHP burnout, thus addressing the lack of literature on this relationship. The study's purpose was to examine whether there is a predictive relationship between an MHP's IMs (*n*Achievement, *n*Affiliation/Intimacy, *n*Power, and *n*Autonomy) and the dimensions of burnout (Emotional Exhaustion, Depersonalization, and Low Personal Accomplishment). MHPs were given the Operant Motive Test to examine the degree of their IMs and the Maslach Burnout Inventory–Humans Services Survey to examine their degree of burnout on each burnout dimension. Multiple regression analysis was used to examine whether a predictive relationship exists between any of the distinct IMs and the dimensions of burnout. The results may provide MHPs with a framework for self-awareness and specific approaches in the prevention and treatment of burnout. Potential implications for effecting social change include improvement of client treatment outcomes, reduced turnover rate among MHPs, and increased overall well-being of MHPs.

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Dedication

This work is dedicated to God, who has first loved me and sent His son, Jesus Christ, as a sacrifice for me. This work is dedicated to His universal church and all those who are sacrificially living out His image and work. This work is dedicated to all the mental health and social services professionals who burn their fires so that the fires of others do not burn out.

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"But God, being rich in mercy, because of the great love with which he loved us, even when we were dead in our trespasses, made us alive together with Christ- by grace you have been saved- and raised us up with him and seated us with him in the heavenly places in Christ Jesus, so that in the coming ages he might show the immeasurable riches of his grace in kindness toward us in Christ Jesus. For by grace you have been saved through faith. And this is not your own doing; it is the gift of God, not a result of works, so that no one may boast. For we are his workmanship, created in Christ Jesus for good works, which God prepared beforehand, that we should walk in them."

Words cannot express the gratitude I have for my God and His grace in my life. No good fruit in my life is without this grace of God and all the glory belongs to Him. I would like to acknowledge my Lord and Savior Jesus Christ for His love and sovereignty in my life, for the work that He has begun and the work that He will bring to completion. I would like to acknowledge my parents Frank Hung (father) and Tina Liu Hung (mother), for their unfathomable love, sacrifice, and support. This work is the result of all their hard work, all that they have had to sacrifice, and all the care that they have provided for me in my life. I would like to acknowledge my grandparents, Ming-Tang Liu (maternal grandfather), Chiung Huang Liu (maternal grandmother) Yu-Chun Hung (paternal grandfather), Chiang-Tsao Hung (paternal grandmother), those present and those whom have passed on, for the support, dreams, and belief that they have placed in me. I would like to acknowledge Kari Rauh, my love, for her affirmations of love, joy, and significance in my life. I would like to acknowledge all those whom God has placed

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Chapter 1: Introduction to the Study

Burnout was first introduced as an idea by Herbert Freudenberger in 1974, who described it as a condition of both physical and mental exhaustion that was the result of an individual's professional life. He ascribed this phenomenon primarily to those who were in the human services profession (Freudenberger, 1974; O'Conner et al., 2018). Subsequent research extended burnout to other professions and found three major dimensions that contributed to burnout, including emotional exhaustion (EE), low personal accomplishment (LPA), and depersonalization (DP; Maslach, 2017; Maslach, et al., 2018). The uniqueness of burnout especially in the mental health context that makes it stand out from other types of work stress is that it is the result of the social interaction that occurs between someone in the helping position and a recipient (Maslach, 2003). As such, while the research has been extended to other professions, burnout for mental health professionals (MHPs) continues to be a major area of concern given that it contributes to decreased wellbeing of MHPs, increased turnover rate, and less effective client treatment outcomes (Cieslak, 2016; Delgadillo et al., 2018; Gutierrez & Mullen, 2018). It has been estimated that between 21% and 67% of MHPs experience burnout (Morse et al., 2012) and also estimated that up to 40% of MHPs experience EE, 22% experience DP, and 19% experience a sense of LPA (O'Conner et al., 2018). These numbers highlight the urgency and importance of burnout prevention and mitigation for MHPs.

It has been suggested that burnout is the result of the interaction between an individual and their work (Maslach, 2017). This may include how an individual's

motivational traits interact with their work, such as when there is incongruence in implicit motivation (IM) and work environment (Rawolle et al., 2016). In this study, I sought to better understand trait motivation as predictive of MHP burnout so that it can be better prevented and mitigated.

Background of Problem

MHP burnout is not only an area of major concern for the wellness and well-being of MHPs but has also been associated with negative treatment outcomes for clients. Burnout can strain an individual's psychological, emotional, and physical condition (Gutierrez & Mullen, 2018). In the case of MHPs, burnout can cause a loss of job satisfaction, lower competence, decreased morale, emotional numbing, loss of flexibility, and cause them to want to leave the profession (Gutierrez & Mullen, 2018). This strain can also cause MHPs to perceive their clients in a devaluing manner and cause them to have negative emotions about their clients (Gutierrez & Mullen, 2016). A study conducted by Delgadillo et al. (2018) found that MHP burnout is associated with poorer treatment outcomes of client's depression and anxiety.

Burnout can be caused by both internal factors and external factors (Cieslak, 2016). External factors that contribute to burnout may include factors in organizations such as an incongruent job-person fit, overly burdensome workload demands, insufficient reward and recognition at the job, lack of community, lack of perceived fairness in treatment, and incongruent values between the individual and the organization (Maslach, 2017). Internal factors may include trait level factors and motivational factors such as those of the IMs of Achievement (*n*Ach), Power (*n*Pow), Affiliation-Intimacy (*n*Aff), and

Autonomy (*n*Aut) (Alsleben & Kuhl, 2011; Rawolle et al., 2016; Schoch et al., 2018; Schüler et al., 2009). IMs can be the sources of positive emotions as well as negative emotions. The lack of hope to achieve a motivational goal or the fear of failure to reach a motivational goal can elicit strong emotional reactions as well as the motivation to keep striving to meet a goal (Alsleben & Kuhl, 2011; Rawolle et al., 2016; Schoch et al., 2018; Schüler et al., 2009). Therefore, it would be important to explore how these IMs can impact burnout in MHPs in different ways.

There has not been research literature that focuses upon the impact of IMs upon the burnout of MHPs. The aim of this study was to examine the potential connections between IMs with the dimensions of burnout, especially as it relates to MHPs and their work in the mental health field, which involved examining if any of the distinct IMs of *n*Ach, *n*Pow, *n*Aff, and *n*Aut (Alsleben & Kuhl, 2011; Rawolle et al., 2016; Schoch et al., 2018; Schüler et al., 2009) are correlated with any of the distinct dimensions of burnout that include EE, LPA, and DP (Maslach, 2017; Maslach, et al., 2018).

Given that the work of MHPs comes with factors that contribute to burnout, it is important to better understand these factors in order to help prevent and mitigate burnout from occurring in MHPs (Cieslak, 2016). Currently, most of the literature has focused on the degree of burnout that a MHP is experiencing and how it is related to client outcomes and professional performance (Alsleben & Kuhl, 2011; Cieslak, 2016; Delgadillo et al., 2018; Gutierrez & Mullen, 2018), rather than how the trait motivations of MHPs can influence burnout. The understanding of how burnout can be addressed and mitigated both during MHP training and during field work through the lens of IM can help to

reduce turnover, improve client outcomes, and increase overall wellbeing of those in the mental health profession. (Alsleben & Kuhl, 2011; Cieslak, 2016; Delgadillo et al., 2018; Gutierrez & Mullen, 2018).

Statement of Problem

Burnout has long been a common and problematic issue that plagues MHPs (Maslach, 2017). As high as between 21% and 67% of MHPs experience burnout (Morse et al., 2012). Burnout involves a strain on an individual's psychological, emotional, and physical state (Gutierrez & Mullen, 2018). For MHPs, this often leads to reduced self-efficacy, loss of job satisfaction, lowered morale, emotional numbing, decreased competence, loss of flexibility, and an increased desire to leave the profession (Gutierrez & Mullen, 2018). Burnout can also impact a MHP's perception of their clients, such as devaluing them and cause MHPs to have negative feelings towards their clients (Gutierrez & Mullen, 2016). Additionally, MHP burnout has been found to be correlated with more negative treatment outcomes for their clients, such as poorer outcome in clients with depression (Delgadillo, 2018). This extends to the MHP's perception of their interaction with others. In a study conducted by Salyers et al. (2015), 93% of the participants with burnout described increasing negative interactions with colleagues, 87% described increasing negative interactions with clients, and 68% described increased negative impact on treatment outcomes.

According to Maslach (2017), an important framework to use to conceptualize and approach solutions to burnout is the areas of worklife model. This is a framework that integrates personal factors as well as job context factors in order to better understand

burnout and create interventions. The areas of worklife model examines not just the individual *or* the job that leads to burnout, but how interaction between the individual *and* the job contribute to burnout (Maslach, 2017).

One manner in which the individual and the job may interact with their job is through the incongruence of motivation. Rawolle et al. (2016) found that the incongruence between implicit and explicit motivation was a contributor to increased burnout. Maslach and Leiter (2017) also identified that two contributing situational factors to burnout that include (a) whether the reward an individual receives is consistent with expectations and values and (b) the motivation and ideals that an individual connects initially to the job. Both of these situational factors can be seen as motivational contributors to burnout. One major theory that can be drawn upon to understand IMs is the motive disposition theory. This study aims to explore if there are IM related factors that specifically contribute to burnout in the mental health profession (Schüler, et al., 2013).

Motive disposition theory suggests that individuals have generally stable and unconscious motivations at differing strengths that influence an individual's experiences and emotions as they seek fulfill those motivations (Schüler, et al., 2012). The theory also suggests that there are four main IMs of nAch, nAff, nPow, and nAut, which are dispositional and further strengthened through childhood experiences instead of only being reactions to present and external situations (Schüler, et al., 2013).

Furthermore, it is suggested that it is beneficial to understand the impact of IM on emotions through the personality systems interaction theory (Alsleben & Kuhl, 2011;

Baumann et al., 2010). This theory proposes that there are seven hierarchal levels of personality functioning that explain an individual's experiences and behaviors and that they are the manifestation of the interaction between these personality functions (Kazén & Quirin, 2018; Ritz, 2018).

Personality systems interaction theory also examines the guidance of behavior through the interaction between the simple and complex cognitive-emotional systems of intentional memory, extension memory, intuitive behavior system, and object recognition system (Baumann et al., 2018; Kazén & Quirin, 2018; Kuhl, 2000a, 2000b). Additionally, personality systems interaction focuses upon two primary personality processes: volitional control and self-growth. These personality processes have to do with the way an individual respond and cope with challenges that arise. It has been proposed that IM play an important part in the personality systems interaction process (Alsleben & Kuhl, 2011; Baumann et al., 2010; Koole & Kuhl, 2007; Kuhl, 2000). Understanding the impact of emotional process through IM and personality systems interaction can help give insight to aspects of burnout and ways that individuals may respond behaviorally to the challenges that contribute to burnout. The personality systems interaction theory further supports the benefit of exploring if IM related factors can contribute to MHP burnout.

In this study, I sought to better understand MHP burnout through the lens of trait and dispositional motivation. The specific problem is that there is currently a lack of awareness of how the IM of a MHP may impact the different dimensions of burnout that they may experience. The study on burnout of MHPs has primarily been focused on the

impact of burnout on client outcomes as well as non-motivation related factors may influence burnout (Cieslak, 2016; Delgadillo et al., 2018; Gutierrez & Mullen, 2018).

An understanding of the correlation of specific IM with distinct burnout dimensions can help to inform specific interventions and treatments to help reduce the rate of burnout among MHPs. No studies were found on IM as it relates to MHP burnout. This study was aimed at filling that gap in the literature.

Purpose of Study

The purpose of this quantitative study was to evaluate whether IM can be predictive of burnout among mental health clinicians. Burnout is defined as "a syndrome of three types of feelings that encompass the entire experience, which include Emotional Exhaustion (EE), Low Personal Accomplishment (LPA), and Depersonalization (DP)" (Maslach et al., 2018, p. 1). The specific IM types to be examined were *n*Achievement, *n*Power, *n*Affiliation-Intimacy, and *n*Autonomy (Baum & Baumann, 2021; Baumann & Kuhl, 2020; Sokolowski et al., 2000).

I used a quantitative study design. The degree of IM of MHPs was collected through the Operant Motive Test (OMT; Kuhl & Scheffer, 2012) and the degree to which they are experiencing burnout was collected through the Maslach Burnout Inventory–Human Services Survey (MBI-HSS; Maslach, 2018). A multiple regression analysis was used to examine whether the distinct IMs are predictive of the dimensions of burnout as measured by the MBI-HSS (Creswell & Creswell, 2018; Frankfort-Nachmias & Leon-Guerrero, 2018).

Theoretical Support of Study

The theory behind burnout to be examined arises from the parameters set forth by Maslach et al. (2018). This theory postulates that burnout is an overall experience and syndrome that includes a variety of factors. These factors include EE, DP, and LPA. These are all factors that can be impacted by external sources such as organizational pressures and lack of resources as well as internal mental conditions and patterns (Maslach, 2017).

The areas of worklife model postulates that burnout occurs as the result of an individual's personal factors (such as personality) interact with their job context related factors rather than solely being influenced only by individual personal factors or only by job context work life factors (Leiter & Maslach, 2004; Maslach, 2017). While the focus of this study was not to examine the particular job context factors as proposed by the areas of worklife model, this study focused on the individual factor of IMs and how an individual's motivation is one of the primary ways that an interacts with their work context.

Additionally, I drew upon the personality systems interaction theory to better understand the impact of IMs on behavior and negative emotions as it relates to burnout. This theory examines the interaction between the simple and complex cognitive-emotional macrosystems that guide behavior, which includes the macrosystems of the intention memory system, extension memory system, intuitive behavior system, and object recognition system (Baumann et al., 2018; Kazén & Quirin, 2018; Kuhl, 2000a; Kuhl, 2000b). Personality systems interaction theory also proposes a hierarchal model of

personality that increases in complexity, liberty, and freedom. The levels of personality starting from the most elementary are (a) elementary systems/habits (where the object recognition system and intuitive behavior system reside), (b) temperament (sensory arousal and motor activation), (c) affect (influence of positive and negative emotions on behaviors and experiences), (d) progress-regression (coping with stress), (e) motives (implicit and explicit motivations), (f) complex systems/cognitive functions (where intention memory and extension memory reside), and (g) self-management (Kazén & Quirin, 2018; Ritz, 2018). The motivation level of the personality systems interaction theory has drawn upon the concepts of IM and motive disposition theory and incorporated it into its overall framework and have proposed that focusing upon the IM level of personality systems interaction can be beneficial for self-awareness, counseling, and psychotherapy (Alsleben & Kuhl, 2011; Baumann et al., 2018; Chasiotis & Hofer, 2018).

Personality systems interaction theory also examines cognitive-emotional systems that guide behavior and focuses upon two personality aspects of this process: volitional control and self-growth. Volitional control is related to an emotional change from a lessened positive affect that is usually the result of being confronted with a difficult task or intention to a high positive affect when the possibility of succeeding in that task or intention can be foreseen (Alsleben & Kuhl, 2011). Self-growth is related to the change from a high negative affect to the lessening of that negative affect through the means of coping effectively. Effective coping in this case is related to a self-confrontation with the negative experience rather than the defensive avoidance of that negative experience. Both

of these personality factors can be related to burnout as the burnout experience can be seen as a form of repeated confrontation with difficult tasks (Alsleben & Kuhl, 2011).

In seeking to better understand the internal mental conditions and patterns of individuals experiencing burnout, I examined the relationship between an individual's IMs through the lens of the motive deposition theory (Schüler, et al., 2012). Motive disposition theory postulates that individuals have fairly stable and unconscious motives at differing strengths which influence an individual's emotions and experiences as they seek to attain specific types of incentives (Schüler, et al., 2012). Motive disposition theory suggests that there are four main IMs of nAch, nAff, nPow, and nAut. It is proposed that these IMs are a part of an individual's disposition and further strengthened through childhood experiences rather than simply a reaction to present external situations (Schüler, et al., 2013).

Given that personality systems interaction theory examines the interaction between the simple and complex cognitive-emotional macrosystems and personality levels that guide behavior, it could be beneficial to understand burnout from this perspective. Additionally, since this theory draws upon the concepts of IM and motive disposition theory for its personality level of motivation and proposes applications in counseling, psychotherapy, and self-awareness (Alsleben & Kuhl, 2011; Baumann et al., 2018; Chasiotis & Hofer, 2018), it would be beneficial to understand how IM through the lens of personality systems interaction may be related to burnout.

The purpose of this study was to examine the internal factors of MHPs through the lens of motive disposition theory and personality systems interaction in ways that

could contribute to their experience of burnout dimensions. There has not been any literature examining how individual personality differences in trait motivation in regard to IM that could contribute to MHP burnout.

Research Question and Hypothesis

Research question: Do implicit motives (*n*Achievement, *n*Power, *n*Affiliation-Intimacy, and *n*Autonomy) as measured by the OMT predict levels of burnout dimensions (Emotional Exhaustion, Depersonalization, and Low Personal Accomplishment) as measured by the MBI-HSS among mental health clinicians?

H_0a - The implicit motive of *n*Achievement as measured by the OMT will not have a positive correlation with the burnout dimensions of Emotional Exhaustion and not have a negative correlation with the dimension of Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_1a - The implicit motive of *n*Achievement as measured by the OMT will have a positive correlation with the burnout dimension of Emotional Exhaustion and have a negative correlation with the burnout dimension of Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_0b - The implicit motive of *n*Power as measured by the OMT will not have a positive correlation with the burnout dimensions of Emotional Exhaustion and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_1b - The implicit motive of *n*Power as measured by the OMT will have a positive correlation with the burnout dimensions of Emotional Exhaustion and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_0c - The implicit motive of *n*Affiliation-Intimacy as measured by the OMT will not have a positive correlation with the burnout dimensions of Emotional Exhaustion as measured by the MBI-HSS among mental health clinicians.

H_1c - The implicit motive of *n*Affiliation-Intimacy as measured by the OMT will have a positive correlation with the burnout dimension of Emotional Exhaustion as measured by the MBI-HSS among mental health clinicians.

H_0d - The implicit motive of *n*Autonomy as measured by the OMT will not have a negative correlation with the burnout dimensions of Emotional Exhaustion, Depersonalization, and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_1d - The implicit motive of *n*Autonomy as measured by the OMT will have a negative correlation with the burnout dimensions of Emotional Exhaustion, Depersonalization, and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

Definitions of Terms Used

Achievement (nAchievement; nAch): One of the implicit motives that describes an individual's desire for improving one's performance and the rewarding affective experience that is accompanied by such attainment (Pang, 2010). As an implicit motive, this energizes behaviors and moves individuals to accomplish objectives that are related to fulfilling this need (Fordor, 2010).

Affiliation-Intimacy (nAffiliation-Intimacy; nAff): One of the implicit motives that describes an individual's desire for close and warm relationships with others as well as

having a positive relationship with groups (Hofer et al., 2017). This implicit motive is often also called the affiliation-intimacy motive due to the multiple dimensions this motive may include (Hofer et al., 2017; Weinberger, et al., 2010). As an implicit motive, this energizes behaviors and moves individuals to accomplish objectives that are related to fulfilling this need (Fordor, 2010).

Autonomy (nAutonomy; nAut): One of the implicit motives that describe an individual's desire for self-organized behavior and experiences that are aligned and consistent with their integrated sense of self (Baum & Baumann, 2021). As an implicit motive, this energizes behaviors and moves individuals to accomplish objectives that are related to fulfilling this need (Fordor, 2010).

Burnout: A syndrome in which and individual experiences EE, DP, and LPA that occurs in the context of how and individual interacts with their work (Maslach, 1982/2003; Maslach et al., 2018).

Depersonalization (DP): One aspect of burnout whereby the individual views others in a way that can be, cynical, expecting the worst of them, detached, calloused, unempathetic, and possibly with active dislike (Maslach, 1982/2003).

Emotional exhaustion (EE): One aspect of burnout whereby an individual becomes emotionally over-involved, experiences a feeling of being overwhelmed by the emotional needs and demands of others, and is emotionally overextended to the point of feeling drained and exhausted (Maslach, 1982/2003).

Extension memory system: The mental system within personality systems interaction theory that contributes to the integration of congruent and incongruent

experiences of an individual as well as helps to form the sense of identity and the self. These processes occur primarily on the unconscious level but at times the content can be made conscious (Kazén & Quirin, 2018).

Intention memory system: The mental system within personality systems interaction theory that contributes to the creation and maintenance of intentions on a conscious level. It is considered on the level of being complex and analytical and involved with conscious intention that is not immediately enacted until the opportune time (Kazén & Quirin, 2018).

Intuitive behavior system: The mental system within the personality systems interaction theory that contributes to the executing of intentions and behavioral routines (Kazén & Quirin, 2018).

Low personal accomplishment (LPA): One aspect of burnout whereby an individual feels and believes that they are inadequate in their abilities to be competent in the work that they are doing. This is accompanied by a reduction in self-esteem, a questioning of their traits in relation to their work, and question their choice in profession (Maslach, 1982/2003). This aspect of burnout is often also referred to as low personal accomplishment (Maslach, 1982/2003).

Mental health professional (MHP): This refers to professionals within the mental health field that work directly with clients in a therapeutic setting or mental health treatment capacity such as mental health therapists, counselors, psychologists, psychiatrists, social workers, and mental health clinicians. This excludes mental health paraprofessionals.

Object recognition system: The mental system within the personality systems interaction theory that contributes by focusing on singular objects and separating them from the larger context. It helps to isolate information that alerts the individual to discrepancies that are not congruent to their needs or expectations. One example is the avoidance of danger. It is suggested that the object recognition system is facilitated by negative affect (Kazén & Quirin, 2018).

Power (nPower; nPow): One of the implicit motives that describes an individual's desire to control, influence, or impress others as a means of receiving recognition and acclaim. As an implicit motive, this energizes behaviors and moves individuals to accomplish objectives that are related to fulfilling this need (Fordor, 2010).

Assumptions

One assumption that was made in this study was that MHPs do experience burnout at their job. It was also assumed that the participants in the study would truthfully respond to the survey and assessment items. Furthermore, it was assumed that the assessment instruments utilized in the study are appropriate to examine the factors and variables of concern.

Limitations, Challenges, and/or Barriers

Barriers to this study include the willingness of MHPs to participate in a study that could create a negative perception on their performance. An additional barrier may be to obtaining rights and secure delivery method for the survey instruments. Limitations in this study include that the results may not be generalizable to individual practitioners and would only apply to mental health clinicians working within organizations.

Positive Social Change

In this study, I sought to provide insight into how an MHP's dispositional motivations can influence their risk of burnout. This would allow for more precise interventions to be created on an individualized level to support MHPs in the field, which would ultimately lead to better treatment outcomes for clients as well as stability within mental health organizations. These methods could also be used during mental health graduate programs to help students increase their self-awareness in regard to their risk for burnout before they go into the field. They could gain greater insight into the influences of their trait factors as well as implicit motives that could impact their satisfaction in their career.

Summary

Burnout was introduced as an observed phenomenon by Herbert Freudenberger in 1974. He described it as a condition that included both physical and mental exhaustion that was the result of an individual's professional life in the human services profession (Freudenberger, 1974; O'Conner et al., 2018). Subsequent research further broke down the components of burnout to include EE, DP, and LPA, and proposed that burnout was the result of the interaction between the individual and the work environment (Maslach, 2017). Personality traits are one such form of individual factor that could influence the experience of burnout. This can include motivational traits and dispositions such as IMs (Rawolle et al., 2016).

In this study I examined whether IMs (nAch, nPow, nAff, and nAut) can be predictive of dimensions of burnout (EE, DP, and LPA). In being able to predict ways

that a MHP or prospective MHP can experience burnout, preventative measures and measure for mitigation may be implemented to reduce the burnout experienced by MHPs. For example, Alsleben and Kuhl (2011) suggested that personality systems interaction theory applied in conjunction with IM can form an effective framework for counseling, psychotherapy, and self-awareness. This could potentially reduce turnover, improve client treatment outcomes, and increase overall wellbeing of MHPs (Cieslak, 2016; Delgadillo et al., 2018; Gutierrez & Mullen, 2018). Chapter 2 will be a literature review of MHP burnout and IM, examining the dispositional and trait motivations that can influence the risk of MHP burnout. Chapter 3 will include a discussion of the approach and methodology of the study as well as an examination of the assessment instruments utilized in the study such as the MBI-HSS and the OMT. Chapter 3 will also consist of information regarding methods of data collection, selection of participants, and the methodology of data analysis. Chapter 4 will examine the methodology utilized to interpret the data analysis. Lastly, Chapter 5 will examine the findings of the study and discuss the implications.

Chapter 2: Literature Review

MHP burnout constitutes a major issue within the mental health profession as it leads to greater turnover rate, decreased clinical efficacy, and reduced well-being of MHPs (Delgadillo, 2018; Gutierrez & Mullen, 2016; Morse et al., 2012; Salyers et al. 2015).

In this literature review, I examine the theories and three dimensions behind burnout as well as the implications for burnout within the interactions between the individual and their work (Leiter & Maslach, 2004; Maslach, 2017; Maslach & Jackson, 1981; Maslach & Leiter, 2017). Additionally, I review literature on the three major IMs (McClelland, 1985/2009). This literature review will demonstrate how the trait motivational goals of IM may be a manner through which individuals interact with their work and influence MHP burnout. There is currently a gap in the literature that examines how these motivations and trait- oriented factors may influence burnout in MHPs. Understanding the relationships that may exist between the IM and burnout may help to reduce burnout within the MHP profession. This chapter will examine the literature relevant to the topics of burnout and IMs, including the theoretical frameworks of burnout, areas of worklife model, motive disposition theory, and personality systems interaction theory.

Literature Search

A literature review was conducted through databases accessible to Walden University, primarily through the EBSCO databases. I used databases such as PsychINFO, ProQuest, and PsycARTICLES, as well as Thoreau multidatabase search. In

the search of the literature, I used terms such as *burnout*, *dispositional motivation*, *trait motivation*, *implicit motives, motives, motivation, personality, personality systems interactions, therapist*, *counselor*, *clinician*, and *mental health clinician.* Articles were obtained exclusively in the electronic format. Published books were also used in the literature search and obtained through both electronic and print formats. The terms searched were used to create a comprehensive literature review of burnout in MHPs and IM. The years of literature searched ranged between 1930 and 2022.

Burnout

Burnout as a phenomenon was first conceptualized and introduced by Freudenberger in 1974 (Freudenberger, 1974; O'Conner et al., 2018). Freudenberger (1974) first identified this phenomenon as afflicting those professionals who worked directly with patients in alternative institutions for mental health care. He described burnout as involving physical symptoms such as a sense of exhaustion and fatigue, while often accompanied by other symptoms such as having headaches, sleeplessness, gastrointestinal issues, as well as shortness of breath (Freudenberger, 1974). Furthermore, Freudenberger observed that there were behavioral signs that accompanied burnout, including being prone to quickly experiencing and expressing intense negative emotions, a sense of suspicion and paranoia about those around them, a feeling of omnipotence that is accompanied by engaging in risk-taking, and potential use of barbiturates and tranquilizers, and that a person afflicted by burnout may also act in a manner that is similar to depression.

In his observations about burnout in mental health institutions, Freudenberger (1975) attributed many of the causes of burnout to internal values and emotional processes of mental health workers. He cited reasons such as being overcommitted, feelings of guilt in not doing enough for patients, boredom at work, the need to constantly be open to other's needs, the extreme emotional needs of the population served, becoming overinvolved with the work and sacrificing personal life, the desire for control, feeling like they are the only ones qualified for certain tasks, and believing that they are indispensable to the point where they become overworked.

Subsequent researchers, such as Maslach (1982/2003), expanded observations about burnout beyond the mental health field into other career fields such as law enforcement, health care, and included contributing elements such as interactions with coworkers and supervisors. Burnout researchers further proposed that there were organizational contributors to burnout that were important to examine beyond only examining the individual. Cox et al. (1993/2017) examined the impact of social comparison, affiliation, and isolation as individuals went through stress and concluded that organizational factors were also contributors to burnout.

Through works such as these, three dimensions of burnout were found: exhaustion, depersonalization, and low professional efficacy. The depersonalization dimension has also been called cynicism and the low professional efficacy dimension has also been called reduced personal accomplishment or inefficacy, and exhaustion has also been called emotional exhaustion in the literature (Maslach & Jackson, 1981; Maslach, 2017; Maslach et al., 2018). The Maslach Burnout Inventory (MBI) was eventually

created to assess these dimensions of burnout (Maslach & Jackson, 1981; Maslach, 2017; Maslach et al., 2018).

Burnout is currently defined by the American Psychological Association (APA, 2015) as

> physical, emotional, or mental exhaustion accompanied by decreased motivation, lowered performance, and negative attitude toward oneself or others. It results from performing at a high level until stress and tension, especially from extreme and prolonged physical or mental exertion or an overburdening workload, take their toll.

Burnout as defined by the MBI is a "syndrome of three types of feelings … emotional exhaustion, depersonalization, and low personal accomplishment" (Maslach et al., 2018).

Dimensions of Burnout

For the purposes of this study, the three main dimensions of burnout in EE, DP, and LPA as proposed by Maslach (Maslach, 1982/2003; Maslach, 2017; Maslach & Jackson, 1981) and widely utilized by researchers of burnout (Simionato & Simpson, 2018) were used to examine MHP burnout. The MBI-HSS was the instrument utilized to examine these dimensions of burnout given its high reliability and validity as well as its wide use in the research of MHP burnout (Simionato & Simpson, 2018). While EE, DP, and LPA have been called other terms in the literature, these specific terms are used for the purposes of this study as they are the terms used by the MBI-HSS (Maslach et al., 2018).

Emotional exhaustion (EE)

Emotional exhaustion (EE) as a dimension of burnout that refers to a feeling of fatigue, a loss of energy, exhaustion, debilitation, drained, being emotionally over-involved, and overwhelmed by emotional demands (Maslach, 1982/2003; Maslach, 2017; Maslach & Jackson, 1981). The EE dimension appears to impact MHPs the most according to research as it is usually the measure with the highest scores when studying MHP burnout (O'Conner et al., 2018; Steel et al., 2015). In a systematic review of literature by O'Conner et al. (2018), it was found that the average MHP had a high level of EE, a moderate level of DP, and a low level of LPA. A systematic literature review conducted by Simionato and Simpson (2018) found that on the average MHP had moderate measures of EE, low-moderate measures of DP, and low-moderate measures of LPA. This reflects the observation that the EE dimension seems to impact MHP the most (O'Conner et al., 2018; Simionato & Simpson, 2018; Steel et al., 2015). The emotional nature of MHP work, especially directly with clients, is a contributor to EE (Maslach, 1982/2003). The EE dimension of burnout has also been referred to simply as exhaustion in the literature.

Depersonalization (DP)

Depersonalization (DP) as a dimension of burnout refers to an inappropriate attitude towards clients that is cynical, negative, irritable, withdrawn, an inappropriate dislike, and expecting the worst from the client (Maslach, 1982/2003; Maslach, 2017; Maslach & Jackson, 1981). In a study conducted by Delgadillo et al. (2018), it was found that MHP disengagement, the domain that is theoretically akin with the DP dimension of

burnout, had the most significant impact on treatment outcomes for clients. Delgadillo et al. suggested that the reduced ability to empathize and express empathy for clients as well as reduced ability to form a therapeutic alliance as a result of DP cause the most negative impact on treatment outcomes as empathy and therapeutic alliance are both predictors of treatment outcomes (Wampold, 2015). A systematic literature review conducted by O'Conner et al. (2018), discovered that the average MHP had a high score in EE, a moderate score in DP, and a low score in LPA. Simionato and Simpson (2018) conducted a systematic literature review in which they discovered that the average MHP had moderate scores of EE, low-moderate scores of DP, and low-moderate scores of LPA. Given that DP has a direct impact on client treatment outcomes (Wampold, 2015), it is important to acknowledge that the average MHP has about a moderate score on DP, which suggests that clients on average may not be receiving the best possible care possible. The DP dimension of burnout has also been called cynicism in the literature.

Low Personal Accomplishment (LPA)

Low personal accomplishment (LPA) as a dimension of burnout refers to the feeling of inadequacy, reduction in productivity, failure in the job, believing that their skills or personal character is insufficient to competently carry out the task, and decreased morale (Maslach, 1982/2003; Maslach, 2017; Maslach & Jackson, 1981). O'Conner et al. (2018) found in a systematic literature review that the average MHP scored high in EE, moderate in DP, and a low in LPA. In another systematic literature review, Simonato and Simpson (2018) found that the average of studies conducted on MHP yielded moderate levels of EE, low-moderate levels of DP, and low-moderate levels of LPA. While LPA is

a crucial element of burnout that impacts MHPs and their work, these findings would suggest that LPA tends to be the dimension of burnout that impacts MHPs the least when compared to the other two dimensions. O'Conner et al. (2018) proposed that even if MHPs were feeling exhaustion and depersonalization related to burnout, they still remain confident in their skills and accomplishments. The LPA dimension of burnout has also been called reduced personal accomplishment, low professional efficacy, or inefficacy in the literature (Maslach, 2017).

Demographic Variables Related to Burnout

Research in burnout has yielded findings that suggest a variety of demographic variables may also impact burnout for MHPs. These variables include age and years in clinical experience, gender, and education level. In Simionato and Simpson's (2018) systematic literature review, it was found that younger age and less clinical experience was consistently associated with higher risk for burnout (see also Rupert et al., 2015; Rupert & Morgan, 2005). It is suggested that younger therapists are more likely to set unrealistically high expectations for clinical efficacy and likely to have reduced personal resources to cope with complex job demands, thus leading to an increased risk for burnout (Rupert et al., 2015; Simonato & Simpson, 2018). While the research is less clear on the implications of gender in MHP burnout, Simonato and Simpson found that women tended to report higher rates of burnout when compared to men despite a small amount of studies indicating that men tended to report higher rates of burnout. Simonato and Simpson also found that in general women were more at risk of experiencing EE when compared to men, but suggested that this may also be attributed to increasing demands of

women to juggle work and family as well as the overall larger population of women in the mental health field compared to men. Rupert and Ken (2007) found that women tended to experience more EE when working in a group practice when compared to women who worked in independent settings. Rupert and Ken proposed that this difference may also be attributed to women having more flexibility when working in independent settings to have more resources to juggle work and family demands.

Areas of Worklife Model

Another conceptual framework that has been created out of burnout research is the areas of worklife model, which proposes that burnout is the result of the interactions between individual personal factors and job context work life factors as opposed to being influenced only by individual personal factors or only by job context work life factors (Leiter & Maslach, 2004; Maslach, 2017). Although the focus of this study was not specifically on the six areas of worklife in this model, it is relevant and important to understand the model's emphasis on the interaction between the individual and work life and work environment as the primary lens for predicting burnout. For the purposes of this study, the trait motivational aspects of IM were examined as a primary lens to view the interaction between an individual and their work life as it relates to burnout. Maslach (2017) suggested that one major issue that causes burnout is a problematic relationship between the person and the job environment. It is proposed in the areas of worklife model that when an individual is in this type of misalignment in the person-job fit, the stressors from the job may negatively impact the levels of burnout that the individual experiences

(Maslach, 2017). The purpose of this study was to examine whether an individual's trait motivation impacts their levels of burnout in the specific job context of an MHP.

The areas of worklife model proposes six main areas, or *domains*, of job context worklife relevant to burnout: workload, control, reward, community, fairness, and values (Leiter & Maslach, 2004; Maslach, 2017). Each domain represents how the organization in which an individual works may impact their burnout and engagement with work (Leiter & Maslach, 2004). The workload domain is relevant to burnout especially when an individual has job tasks that exceed the limits that the individual is able to produce and meet (Leiter & Maslach, 2004; Maslach 2017). The control domain is related to the degree of autonomy and control that an individual is allowed at the job to freely solve problems and make choices. When there is a sense of a lack of control, an individual's degree of burnout tends to increase (Leiter & Maslach, 2004; Maslach 2017). The rewards domain is related to the degree of both intrinsic and extrinsic rewards, such as monetary compensation and social rewards, that an individual receives in relation to their expectations. A lack of consistent and sufficient rewards increases the chances of burnout (Leiter & Maslach, 2004; Maslach, 2017). The community domain is related to the quality of social interactions an individual may experience at work, including team dynamics, interpersonal conflicts, feelings of closeness with others, and support felt. Negative social interactions at work and a feeling of lack of social support from coworkers and supervisors are correlated with greater rates of burnout (Leiter & Maslach, 2004). The area of fairness is related to whether an individual perceives that the decisions being made at work are fair and that people are being treated with respect. This is

connected with an individual's perception of self-worth and an individual's relationship with supervisors, and a lack of perceived fairness is correlated with increased risk of burnout (Leiter & Maslach, 2004; Maslach, 2017). Lastly, the values domain is related to the motivating connection between an individual and their work, including the ideals, meaning, and personal goals that an individual has attached to their work that goes beyond monetary compensation. When there are conflicts between and individual's values and the values of their job, there is a reduction in job engagement and increased risk of burnout (Leiter & Maslach, 2004; Maslach, 2017).

Leiter and Maslach (2004) suggested that the workload and control domains are related to the demand-control model aspect of work life while the reward domain is related to reinforcement of behavior in work life. Furthermore, Leiter and Maslach (2004) proposed that the community domain is related to social support and interpersonal conflict in work life, the fairness domain is related to social justice and equity, and that the values domain is related to the cognitive-emotive relationship an individual has in relation to expectations and job goals.

Although I did not examine the six areas of worklife as variables in this study, it is still important to acknowledge the overall proposed viewpoint of this model in that burnout is caused by the interaction between the person and the job context rather than solely caused by individual personal factors or only caused by job context work life factors (Leiter & Maslach, 2004; Maslach, 2017). For the purposes of this study, IM was examined as the manner in which an individual's personal factors interacts with the job context of MHPs in relation to burnout.

In a study conducted by Brandstätter et al. (2016), it was found that incongruence between an individual's IM and motive specific job characteristics were correlated with burnout. Additionally, it has been found that IM has an association with response to stress and an individual's health (Busch, 2018; Fodor & Wick, 2009; Fordor et al., 2006; Jemmott, 1987; Schultheiss et al., 2014; Weinberger et al., 2010; Yang et al., 2015). This finding is supportive of the idea behind the areas of worklife model in how individual factors and job factors interact to influence burnout (Leiter & Maslach, 2004; Maslach, 2017). There has not been any research exploring the relationship between IM and MHP burnout.

Implicit Motives

One of the major overarching issues related to MHP burnout is a general loss of motivation and disengagement from clients (Maslach, 2017). As such, it could be helpful to understand the relationship between motivation and burnout dimensions. The purpose of this study was to explore how personality architecture in trait motivation as defined through implicit motives (IM) is correlated with burnout dimensions.

Alsleben and Kuhl (2011) suggested that IM play a very important part in the context of therapy and counseling in that they contribute to an individual's development. They proposed that motives are core to the needs, driving forces, and the strategies an individual learns in order to manage their motivations. Motivations and developed through the interaction an individual's needs has with that individual's environment (Alsleben, 2018). As such, it can be reasonable to examine an individual's IM in relation to their burnout because according to the areas of worklife model, burnout occurs as a

result of how individual factors interact with job factors to influence burnout (Leiter & Maslach, 2004; Maslach, 2017). Alsleben (2018) suggested that motivations do not only serve to drive behavior, but also serves as lenses of perception that an individual would view the world through. As such, an individual may not immediately recognize the implicit nature of their motivations and how it impacts their emotions, perceptions, and states that are centered around a core desire or need. Therefore, an understanding of how an individual's IM may be related to their burnout may yield greater self-awareness and motive-specific interventions for MHPs. Alsleben and Kuhl (2011) suggested that IM can be used to do functional analysis on the chronic struggles of an individual as well as be used as personal resources in counseling.

History of Implicit Motives Research

IM research originated with David McClelland and his graduate student, John Atkinson, in the 1940s. McClelland believed that there were unconscious and implicit values and motivations that guided their behaviors despite their explicit thoughts or awareness of these motivational needs (Atkinson & McClelland, 1948; McClelland, 1985; McClelland et al., 1949; McClelland et al., 1953/2020; Schultheiss & Burnstein, 2010). McClelland and Atkinson began their research first with hunger motivation with a version of the Thematic Apperception Test (TAT) in 1948 and concluded that the TAT concept as put forth by Murray (1943) was appropriate to measure implicit aspects of motivation (Atkinson & McClelland, 1948; Schultheiss & Burnstein, 2010). McClelland then turned this attention from hunger to studying the need to achieve as a motivation due to its relevance in vocations and general life issues utilizing the TAT (McClelland et al.,

1949; McClelland et al., 1953/2020; Murray, 1943; Schultheiss & Burnstein, 2010). McClelelland et al. (1953/2020) proposed that due to the nature of IM, indirect assessment methods such as the TAT must be used since individuals cannot explicitly and consciously report on their own motivational needs in a valid manner (Schultheiss & Burnstein, 2010). Other assessment tools that utilize an indirect and operant approach such as the picture story exercise (PSE), the operant multi-motive test (OMT), and the multi-motive grid (MMG) have also been used to assess IM (Schüler et al., 2015; Schultheiss et al., 2008; Sokolowski et al., 2000). For this study, I used the OMT as the primary instrument to examine IM.

Basic principles of IM research include the following:

- Implicit motives are nonconscious and cannot be measured through self-report.
- Situational arousal of a motivational need is associated with characteristic changes in thought content and other nondeclarative markers of motivation.
- Motives represent capacities for specific affective experiences; they orient, select, and energize behavior.
- Motives interact with situational incentives to shape behavior.
- Motives have pervasive effects across several levels of psychological functioning.
- There is a limited number of implicit motives.

The major focus of implicit motive research has been on the major IM systems of power, achievement, affiliation, and autonomy (Baum & Baumann, 2021; Heckhausen & Heckhausen, 2018; Schultheiss & Burnstein, 2010).

Individual differences in IM have been found to be associated with a variance in response to stress and health (Busch, 2018; Fodor & Wick, 2009; Fordor et al., 2006; Jemmott, 1987; Schultheiss et al., 2014; Weinberger et al., 2010; Yang et al., 2015). Furthermore, Brandstätter et al. (2016) found that incongruence between an individual's IM and motive specific job characteristics were predictive of burnout. As such, it is worthwhile to explore how stress responses due to IM differences may impact MHP burnout.

Motive Disposition Theory

Motive disposition theory proposes that individuals generally have dispositional and IMs that are stable in strength that guide their emotions and behaviors (McClelland, 1985; Schultheiss & Burnstein, 2010; Schüler et al., 2013; Sheldon & Schüler, 2011). McClelland (1985) defined motive disposition as "a recurrent concern about a goal state that drives, orients, and selects behavior" (pp. 183). It is proposed that these dispositional and IM lie in a "middle tier" in personality in that they are personality traits as well as incorporate aspects that are more akin to learned concepts (McClelland, 1985; Sheldon & Schüler, 2011). Research involving motive disposition theory has primarily been focused on the motive systems of achievement, power, affiliation, and more recently, autonomy (Baum & Baumann, 2021; Heckhausen & Heckhausen, 2018; Schultheiss & Burnstein, 2010).

In the measurement of IM, each motive system is also examined for the components of hope for attaining the motivation need and fear of not attaining the motivation need, which are the strength of approaching success as well as strength of avoiding of failure (Brustein & Heckhausen, 2018; Sokolowski et al., 2000). Some researchers will also calculate the "net hope" (NH) score by subtracting the fear and avoidance motive score from the hope for attaining success motive score. The "aggregate motivation" (AM) score can also be calculated by adding the fear and avoidance motive score to the hope for attaining success motive score to give a clearer picture of motivational strength (Brustein & Heckhausen, 2018).

Another approach to categorizing IM in assessment is the approach taken by the OMT. The OMT was the instrument used in this study to examine IM in relation to burnout. The OMT further breaks down the IM categories mentioned above into more categories. For example, the "hope" category is divided into two parts: "self-regulated" and "incentive-driven". The "fear" component remains a single category as "fearful" (Baumann & Kuhl, 2020). The "self-regulated" category is related to how an individual can more consciously and on a deeper level self-involve to meet an IM. "Incentive-driven", on the other hand, requires the situation to be favorable for an individual to move towards meeting a need driven by an IM. "Fearful", in contrast, inhibits the self and functions related to self-regulation and in a sense attempts to prevent an individual from feeling the pain of not meeting a need of an IM. This may be done by not allowing the individual to act on an IM so that they cannot 'fail' in their approach (Baumann & Kuhl, 2020). The approach and theory of the OMT are based in personality systems interactions

theory and the way IMs are nested within that theory. The personality systems interaction will be further explored later in this chapter.

IM may be relevant to burnout as individual differences in IM have been found to be correlated with stress response and health (Busch, 2018; Fodor & Wick, 2009; Fordor et al., 2006; Jemmott, 1987; Schultheiss et al., 2014; Weinberger et al., 2010; Yang et al., 2015). There is, however, currently a gap in the literature in regard to IM stress response and burnout or IM stress response and MHPs. The stress responses of each IM will be discussed below. Additionally, it is suggested that IM play a role in an individual's volition and self-growth in the framework of the personality systems interactions theory that is related to reactions to challenges (Alsleben & Kuhl, 2011). The personality systems interaction theory will be discussed later in this chapter.

IM Systems

Research in IMs has primarily been focused on what would be considered the main motivational systems of achievement, power, affiliation, and autonomy (Baum & Baumann, 2021; Heckhausen & Heckhausen, 2018; Schultheiss & Burnstein, 2010). The following section will examine each of these IM systems in detail.

Achievement Motive

The IM of achievement is also often termed "*n*Achievement" (nAch) for "n(eed) Achievement" as it describes a "psychogenic need" as first described by Murry in the 1930's (Bruenstein & Heckhausen, 2018; Murray, 1933). nAch describes an individual's need and desire for improving performance and seeking after the affective experience of reward resulting from attainment (Pang, 2010). nAch energizes an individual's behaviors

related to accomplishing objectives that are relevant to reaching achievements (Fordor, 2010). The standard of excellence that nAch can vary for each individual as they may compare their own performance against others' performance, their present performance against their own previous performances, or perform well or the best at an activity (Bruenstein & Heckhausen, 2018).

Individuals with higher strength of "hope for success" (HS) and were success-motivated were found to prefer goals that were a little bit above their previous performance while individuals with a higher strength of "fear of failure" (FF) and were failure-motivated tended to either set very low goals for themselves or set unrealistically high goals for themselves (Brustein & Heckhausen, 2018). It has been found that individuals with a high strength in nAch tend to think about task difficulty different when compared to individuals with a low strength in nAch as those with high nAch tended to focus upon the possible rewarding future of successfully accomplishing the difficult task, thereby experiencing less stress than their counterparts who have weaker strength of nAch (Schultheiss et al., 2014; Yang et al., 2015). It has also been found that individuals with a stronger nAch tended to have a weaker reaction to stress in terms of cortisol levels as well as generally reported that their mood was more positive (Schultheiss et al., 2014; Yang et al., 2015).

Therefore, it may be worthwhile to examine if a correlation exists between nAch and the dimensions of burnout such as EE and LPA. It is possible that differences in a MHP's level of nAch may influence their LPA as both are related to accomplishment and

competency. It is also possible that the level of MHP nAch is correlated with EE especially in regard to a MHP's perception of success as it relates to treatment outcomes.

Power Motive

The IM of power is also often termed "*n*Power" (nPow) for "n(eed) Power" as it describes a "psychogenic need" as first described by Murry in the 1930's (Fodor, 2010; Murray, 1933). nPow is described as the need or desire to control, influence, impact, or impress others, or to feel superior to them. nPow energizes individuals to seeking recognition, acclaim, and reputation for the power related behaviors as previously described (Fodor, 2010; Schüler et al., 2018).

It has been found that individuals with higher strength of nPow tend to look for circumstances where power tends to have a more significant role (Busch, 2018). Interestingly, it was found that individuals with high nPow tend to turn away from facial expressions of anger, which indicates dominance, but turn towards facial expressions of surprise, which indicates that the individuals of those faces can be influenced (Busch, 2018; Schultheiss & Hale, 2007). Additionally, nPow was found to be correlated with the recognition speed of changes in emotional expression or others in emotions that are related to nPow (Donhauser et al., 2015). Further pursuit of power in social dynamics can be seen in that higher nPow individuals have been found to prefer friends who were not as well known by others likely because there would be less competition for power and prestige (Winter, 1973). It was also found that men who were higher in nPow tended to have a preference for wives who were not assertive and more dependent (Winter, 1973).

High nPow individuals have also been found to have the tendency to experience 'power stress' when their motive for power is hindered or thwarted. This may be the result of negative affective response from others such as when others are being assertive, angry, or other negative reactions (Busch, 2018; Fodor & Wick, 2009; Fordor et al., 2006). The high nPow individual would experience negative emotions such as stress and anxiety when power stress. When power stress is chronically experienced, the individual will suffer from adverse physical issues such as cardiovascular symptoms (Busch, 2018; Fodor & Wick, 2009; Fordor et al., 2006).

Therefore, it may be worthwhile to explore the correlation between nPow the burnout dimensions of as EE and DP. It may be possible that the perceived lack of control in clinical progress or therapeutic alliance by the MHP contributes to their experience of power stress as influenced by the MHP level of nPow. This can potentially lead to correlated levels of EE as a result. Additionally, it may be possible that the perceived lack of control of clients and their situations as influenced by the level of MHP nPow leads to reactions of burnout DP.

Affiliation-Intimacy Motive

The IM of affiliation is often termed "*n*Affiliation" (nAff) for "n(eed) Affiliation" as it describes a "psychogenic need" as first described by Murry in the 1930's (Hofer & Hagemeyer, 2018; Murray, 1933). nAff is described as the need or desire to form, restore, or maintain positive relationships with other individuals or groups of people. This includes the desire for affectively positive, harmonious, and peaceful interactions (Hofer & Hagemeyer, 2018; Weinberger et al., 2010). High nAff individuals have been found to

seek to avoid conflicts, avoid competitive activities, and value relationships over performance and logic (Hofer & Hagemeyer, 2018; Weinberger et al., 2010).

It is further suggested that there are actually two aspects to nAff. One proposed aspect is the affiliative motive, whereby the main concern is toward any kind of social contact. The other proposed aspect is intimacy, whereby the main concern is for relationship closeness, warmth, deep connection, deep communication, and primarily focused on dyadic relationships (Hofer & Hagemeyer, 2018; Weinberger et al., 2010). Therefore, nAff is often conceptualized as the "affiliation-intimacy motive" to emphasize the two different aspects that it encompasses (Hofer & Hagemeyer, 2018; Weinberger et al., 2010).

There are conflicting results on the health of individuals with high nAff. Some research have demonstrated that high nAff individuals tend to have lower severity of illness and when the nAff is artificially aroused in experiment, an individual's salivary immunoglobulin (S-IgA) increases. S-IgA is correlated with lower rates of respiratory infections as well as illness (Jemmott, 1987; Weinberger et al., 2010). It has also been found that high nAff individuals who did not have strong assertiveness tend to have type I diabetes and low behavioral and physiological adaptability to adapt to their illness (McClelland, 1989). Weinberger et al. (2010) proposed that this duality in health impact is due to the duality of the affiliative motive and intimacy motive that exists within nAff. It is suggested that those with high affiliative motive tend to struggle with more adverse health issues while those with high intimacy motive tend to experience better health (Weinberger et al., 2010).

Therefore, it may be worthwhile to examine if a correlation exists between nAff and the burnout dimensions of EE and DP. It may be possible that a draining therapeutic relationship exists between the MHP and client and is influenced by the level of MHP nAFF, leading to EE. Additionally, it may be possible that a perceived lack of a therapeutic relationship by the MHP with their client as influenced by level of MHP nAff impacts the degree of burnout DP.

Autonomy-Freedom Motive

The implicit motive of autonomy-freedom is often termed "*n*Autonomy" (nAut) for "n(eed) Autonomy" as it describes a "psychogenic need" as first described by Murry in the 1930's (Baum & Baumann, 2021; Murray, 1933). nAut is described as the need or desire for self-integration. Self-integration is described as the process through which an individual decides which aspects are a part of themselves, including components such as self-definition, self-growth, and self-preservation. This may also include the need to experience self-worth, internal congruency, and self-awareness (Baum & Baumann, 2021). Alsleben and Kuhl (2011) suggested that nAut is also important for an individual to establish a boundary between things that are a part of self and things that are not a part of self. Where the other three IM have an external component that is dependent on the environment or other people, nAut is distinct in that the need of nAut is focused upon the self (Alsleben & Kuhl, 2011).

It has been found that individuals who score high in nAut tend to commit less errors in a concentration task that is difficult when compared to those high in nPow. They also been found to demonstrate better general ability in affect regulation (Alsleben &

Kuhl, 2011). It has also been found that those with higher nAut disposition tend to present with lower stress reactions as measured through salivary alpha-amylase when they were given vignettes that were supportive of autonomy compared to when they were given autonomy restrictive or neutral vignettes. Conversely, those who had lower nAut disposition were found to experience greater stress reactions when given vignettes that were supportive of autonomy when compared to when they were presented vignettes that were autonomy restrictive or neutral (Sieber et al., 2016). Positive correlative relationship between nAut and spontaneous creative production as well as innovative behavior has also been found in adolescents (Baum & Baumann, 2018).

Therefore, it is worthwhile to explore the correlation between a MHP's nAut with all dimensions of burnout. It may be possible that MHPs with higher levels of nAut experience less burnout overall and that MHPs with lower levels of nAut experience greater degrees of burnout overall. This may especially be true as it has been found that MHP's generally experience a lesser degree of burnout associated with LPA, which is likely associated with nAut due to LPA's association with mastery (Simonato & Simpson, 2018).

Personality Systems Interactions Theory

Although the personality systems interaction theory as a whole was not the primary focus of this study, it is important to understand its framework in relation to IMs and self-regulation. While most traditional frameworks surrounding self-regulation and motivation focus upon the explicit cognitive content and beliefs, the personality systems interaction theory focuses instead upon the functional architecture of motivation and self-

regulation (Kuhl, 2000a). As such, it could be potentially helpful to understand the interaction of the functional architecture of motivation in relation to burnout dimensions since one major overarching issue surrounding burnout is related to a general loss of motivation in work (Maslach, 1982/2003; Maslach, 2017; Maslach & Jackson, 1981).

Personality systems interaction theory proposes that personality can be arranged into a hierarchal model that increases in complexity, liberty, and freedom. These levels of personality starting from the most elementary are 1) Elementary Systems/Habits- where the object recognition system and intuitive behavior system reside, 2) Temperament- which involves sensory arousal and motor activation, 3) Affect- the influence of positive and negative emotions on behaviors and experiences, 4) Progress-Regression- related to coping with stress, 5) Motives- including implicit and explicit motivations, 6) Complex Systems/Cognitive Functions- where intention memory and extension memory reside, and 7) Self-Management (Kazén & Quirin, 2018; Ritz, 2018).

As such, the focus of this study was on the motives level of the personality systems interaction theory, which explicitly incorporates the concepts within motive disposition theory and IM. It further suggests that a focus upon the motivation level of personality systems interaction, through the lens of IM, can be beneficial for counseling, psychotherapy, and self-awareness (Alsleben & Kuhl, 2011; Baumann et al., 2018; Chasiotis & Hofer, 2018). Furthermore, IMs have been found to be correlated with intention memory and explicit motivations have been correlated with extension memory (Baumann et al., 2005; Baumann et al., 2018).

Cognitive Macrosystems

Kuhl (2000a) suggested that in order to understand the dynamics of motivation, there are cognitive macrosystems that must first be explored. He proposes that there these cognitive macrosystems include a pair of macrosystems that are related to and support object recognition and performance of behavioral routines while another pair are related to and support implicit self-representations and explicit representations of behavioral intentions (Kuhl, 2000a). These cognitive-emotional macrosystems include intention memory, extension memory, intuitive behavior system, and object recognition system (Baumann et al., 2018; Kazén & Quirin, 2018; Kuhl, 2000a; Kuhl, 2000b; Ritz, 2018). The functional profile of these systems can be arranged on two axis with one axis ranging from elementary to complex and the other axis ranging from analytical to holistic. These systems will be explored in greater detail below.

Intention Memory System

The intention memory system contributes to the creation and maintenance of intentions on a conscious level. It is considered on the complex and analytical levels of processing in the of hierarchy in the personality systems interaction mental systems. Conscious intentions occur when automatic behavior programs that have been previously built are not immediately carried out (Kazén & Quirin, 2018). Additionally, it is a sequential-analytic form of thought that is action-ready. An intention will stay in the intention memory until a situation occurs where it is opportune for the behavior to be carried out. It is suggested that the enactment of the intention is facilitated by positive affect (Kazén & Quirin, 2018; Kuhl & Kazén, 1999). As such, there is an inhibitory

component to intention memory as the enactment of an intention is held off until the opportunity arises (Kazén & Kuhl, 2005). In a study conducted by Kazén and Kuhl (2005), it was found that priming nAch with nAch related cues helps to more strongly activate intention memory in comparison to other IM such as nPow, nAff, and nAut. Based upon these findings, Kazén and Kuhl (2005) suggested that the positive affect related to the different IM may be distinct from one another in functional profile and may help to determine if the intention memory system is activated or if automatic routines are activated instead.

The functional profile of the intention memory system includes that it is related to goal-focused attention, consciousness, explicit knowledge, affect isolation, fast learning, slow implementation, being sequential-analytic processing, and involving either-or character (Kazén & Quirin, 2018). Overall, the functional profile of the intention memory system is complex and analytical. (Kazén & Quirin, 2018).

Intuitive Behavior System

While intention memory system is responsible for the conscious formation and maintenance of intentions, the intuitive behavior system is involved with executing upon intentions as well as behavioral routines (Kazén & Quirin, 2018). The intuitive behavior system works in conjunction with the intention memory system to execute the actions behind the intentions. Furthermore, the intuitive behavior system is a parallel-processing system that takes into account contextual, movement, and orientation information of the moment and integrates it with the intention memory system to create a form of intuition that occurs without conscious thought (Kazén & Quirin, 2018).

The functional profile of the intuitive behavior system includes that it is related to sensorimotor programs, the non-conscious, a focus upon the here-and-now, is prototypical and contextualized (Kazén & Quirin, 2018). The intuitive behavior system can also be activated through priming, imitation, and specifications related to a contextual parameter. Additionally, if the actual physical behavior that is activated is one that is familiar and well-learned to the individual, the intuitive behavior system can cause action without the involvement of intention memory as well as override intention memory (Kazén & Quirin, 2018). Overall, the functional profile of the intuitive behavior system is elementary and holistic (Kazén & Quirin, 2018).

Extension Memory

The extension memory system contributes to the integration of congruent and incongruent experiences that an individual may have and helps to form the sense of identity and the self (Kazén & Quirin, 2018). These processes occur largely on the unconscious level, but the contents that the extension memory system processes can be made conscious. It is considered on the complex and holistic levels of processing in the hierarchy in the personality systems interaction mental systems. The extension memory system allows for enactment of tasks in creative and novel ways while also aiding in goal pursuit when information related to the global context is involved. Global context may include meaningfulness of the task to the individual, autobiographical experiences, the individual's internal and external needs, and alternative actions (Kazén & Quirin, 2018). The extension memory system contributes to the integration of both positive and negative experiences to create schemas and meanings for the individual (Kazén & Quirin, 2018).

Alsleben (2018) proposed that nAut and nAff play a regulative function between the extension memory system and object recognition system in personality systems interaction theory. Personality systems interaction theory suggests that when negative affect is low, the extension memory system is activated and the object recognition system is inhibited. Alsleben (2018) suggested that given nAff is involved with providing social contact, safety, and support, it is related to the reduction of negative affect and allows the extension memory system to be more active. Furthermore, Alsleben (2018) suggested that since nAut aims to develop the identity and self-integration of an individual, it helps to more effectively process novel and provoking stimuli either as self-congruent or self-incongruent and would thereby help to inhibit the object recognition system.

The functional profile of the extension memory system includes that it is related to congruence-related attention, that it is non-conscious, it is related to affective perception and regulation, involves implicit configurational knowledge, integration of opposites, is involved with slow learning, fast implementation, and is parallel-holistic oriented processing. Overall, the functional profile of the extension memory system is complex and holistic (Kazén & Quirin, 2018).

Object Recognition System

The object recognition system functions through focusing on singular objects and isolating them from the larger context. It serves to aid in the detection of information that alerts the individual to discrepancies that are not congruent to needs or expectations. It is proposed that this function serves to help with the avoidance of danger and is facilitated by negative affect (Kazén & Quirin, 2018). It is also proposed that when the object

recognition system becomes the dominant system, it can cause a fixation on information or objects that are related to discrepancy (i.e. failure, painful experience, accident, etc.) and persistent focus on the past (Kazén & Quirin, 2018).

The functional profile of the object recognition system includes that it is related to attention that is discrepancy focused, conscious, past oriented, categorical, and decontextualized. Overall, the functional profile of the object recognition system is elementary and analytical (Kazén & Quirin, 2018).

Volitional Control and Self-Growth

In contrast to other theories that would postulate that cognitive contents such as beliefs, values, expectancies, and intentions that drive behaviors, the personality systems interaction theory instead focuses upon a need driven and affect driven process that interact with motivational systems. This theory proposes that there are two primary personality processes involved with motivation that drive behavior: volitional control and self-growth (Alsleben & Kuhl, 2011).

Volitional control is the personality function related to the facilitation of an emotional change from a diminished positive affect that is often the result of an individual being faced with a difficult task or intention to aroused high positive affect when the possibility of succeeding in that particular task or intention can be expected (Alsleben & Kuhl, 2011). This type of emotional change is can often be correlated with the nAch (McClelland et al., 1953/2020).

Self-growth the personality function related to the change from a high negative emotion to a diminishing level of that negative emotion through the means of coping

effectively. The effective coping in the context of self-growth is connected to the self-confrontation with the negative experience instead of defensively avoiding the negative experience (Alsleben & Kuhl, 2011). This type of emotional change can often be correlated with nAff and nAut (Alsleben & Kuhl, 2011).

Given that both volition and self-control are related to the way an individual can respond to difficult situations and the ability to regulate their emotions and the relationship between these personality processes and IM (Alsleben & Kuhl, 2011), it can be seen why it may be beneficial to understand the relationship between IM and burnout. The experience of burnout can be seen as a reaction to confrontation with difficult tasks that is constantly repeated as well as the reduced desire to continuously confront these situations in the work setting (Alsleben & Kuhl, 2011; Maslach & Jackson, 1981; Leiter & Maslach, 2004; Maslach, 2017; Maslach & Leiter, 2017).

While the personality systems interaction theory is not the focus of this study, it is important to understand the role that this theory plays in its view of IM and the way that the OMT involves its theoretical basis. This is particularly important when taken into consideration that the OMT lens of IM is the basis that Alsleben and Kuhl (2011) believed to be of value in the context of counseling and self-awareness.

Summary

Overall, this literature review demonstrates the gap in understanding of burnout through the lens of IM on MHPs. It is important for a greater understanding of burnout in the MHP through these lenses as it can be helpful in preventing MHP burnout and fostering both greater well-being for MHPs as well as improve clinical outcomes for the

clients of the MHPs. An understanding of the impact of IM on burnout may also be helpful for MHPs in training as it would help foster a greater self-awareness and help aspiring MHPs to be better prepared for the field. In Chapter 3, I discuss the design as well as methodology of the study in regard to the procedure, research question, and measurement instruments.

Chapter 3: Research Method

The purpose of this quantitative research study was to examine whether IMs are predictive of burnout dimensions among MHPs. A quantitative survey design and multiple regression approach was used to examine the relationships between the IMs and their impact on the dimensions of burnout in MHPs. In this chapter, I will discuss the research design as well as the rationale behind the design approach. An explanation of the power analysis conducted to determine sample size as well as the procedures for population sampling will also be discussed. The chapter also includes the steps involved with participant recruitment, participation, the details of the informed consent, as well as procedures behind data collection from MHPs. The data were collected with three instruments as well as a demographic survey. Details behind each instrument as well as their reliability and validity will be examined. A data analysis plan will also be discussed as well as a review of the research questions involved with this study. Lastly, ethical concerns and threats to the validity of the study will be examined.

Research Method and Design

For this study, I used a correlational quantitative research design with a multiple regression analysis. The quantitative method involves collecting and generating numerical data to be analyzed through statistical methods (Creswell & Creswell, 2018). I selected a quantitative approach because a qualitative design would not have been appropriate especially as the study is not examining experiences but, rather, constructs derived from validated instruments. Additionally, the purpose of the study was to examine correlative and predictive factors associated with a particular phenomenon,

which is not the goal of qualitative research designs but, rather, of quantitative designs (Creswell & Creswell, 2018; Edmonds & Kennedy, 2017; Frankfort-Nachmias & Leon-Guerrero, 2018).

The study utilized the quantitative approach of a correlational survey design. A survey design approach "provides a quantitative or numeric description of trends, attitudes, or opinions of a population by studying a sample of that population" (Creswell & Creswell, 2018, p. 11). Survey design can help shed light on three major types of questions: descriptive questions, the relationships between variables, and predictive relationships between variables over time (Creswell & Creswell, 2018). A survey design was appropriate for this study because the purpose of the study was to examine the trait motivations of IM and to understand their predictive relationships to the major dimensions of burnout in a specific population. Multiple linear regression was utilized to test the hypothesis of the study. Multiple linear regression helps to examine whether significant correlational relationships exist between the independent variables (IV) of IM trait motivations and the dependent variables (DV) of the major dimension of burnout (Creswell & Creswell, 2018; Frankfort-Nachmias & Leon-Guerrero, 2018).

Sample and Setting

The purpose of this study was to examine the relationship between trait motivation and burnout in MHPs. MHPs were defined as licensed professions within the mental health field that work directly with clients in a therapeutic setting such as mental health therapists, counselors, psychologists, and mental health clinicians. The participants for this study were a convenient sample recruited through research panel companies. The

setting the survey was taken through was an online survey format whereby the participants filled out the survey with their own computers. Informed consent was provided to participants in a consent form that contained information about the study so participants could have a full understanding of the study before agreeing to participate. Contact information about the research and the university was given to the participants so that the participants could have support needs met before, during and after the study.

In order to determine the minimum size of the participant sample necessary to make a valid statistical inference in a study, I conducted a statistical power analysis based upon the significance criterion (α), the population effect size (F^2), the sample size (N) and statistical power ($1 - \beta$; see Cohen, 1992; Kraemer & Blasey, 2016). The type of power analysis conducted before a study to determine the minimum target sample size is an a priori analysis and target parameters are set in the computer software to help with calculation. Target parameters include a significance criterion of .05 as per psychological research standards, the population effect size of .15 in the intermediate range, and a statistical power of .8 (see Creswell & Creswell, 2018; Kraemer & Blasey, 2016). These parameters were entered into the G*Power 3.1.9.6 software and the minimum participant sample size was calculated to be 85 participants.

Measurement Instruments

There were two instruments and a survey utilized in this study: (a) the MBI-HSS (Maslach et al., 2018), (b) the OMT (Kuhl & Scheffer, 2012), and (c) a brief demographic information survey.

The MBI-HSS

The MBI-HSS was used to examine the level of burnout experienced by the MHP participants. I chose this instrument for the study because of its created intent to examine burnout in the human services field as well as its wide use in the literature for such purposes (see Lee et al., 2011; Maslach et al., 2018; Maslach & Jackson, 1981; Sorce Moreira & de Lucca, 2020).

The MBI-HSS examines the three major dimensions of burnout: Emotional Exhaustion (EE), Depersonalization (DP), and Personal Accomplishment (PA). It is worthwhile to note that the actual dimension of burnout as discussed in literature is called Low Personal Accomplishment (LPA). The MBI-HSS measures PA, and the lower the PA score the higher the degree of burnout. The MBI-HSS consists of 22 items with a Likert-scale response format (0 = *never*, 1 = *a few times a year or less*, 2 = *once a month or less*, 3 = *a few times a month*, 4 = *once a week*, 5 = *a few times a week*, and 6 = *every day*). The MBI-HSS is appropriate for professionals and paraprofessionals working directly with clients in fields such as mental health, healthcare, police, lawyers, and clergy. Each of the burnout dimensions are measured on separate scales (Maslach, 2018).

Reliability and Validity of the MBI-HSS

According to the MBI Manual, the internal reliability of the MBI-HSS as measured by Cronbach's coefficient alpha is at .90 for EE, .79 for DP, and .71 for PA (Maslach et al., 2018). Additionally, the test–retest reliability was .82 for EE, .60 for DP, and .80 for PA (Maslach et al., 2018). The MBI Manual cited several external studies of test–retest reliability, such as one conducted over an 8-month interval that found a test–

retest correlation of .74 for EE, .72 for DP, and .65 for PA (Lee & Ashforth, 1993; Maslach et al., 2018), a study over 6-month interval that found the test–retest correlation of .59 for EE, .50 for DP, and .63 (Leiter, 1990; Maslach et al., 2018), and a study over a 3-month interval that found a test–retest correlation of .75 for EE, .64 for DP, and .62 for PA (Leiter & Durup, 1996; Maslach et al., 2018).

To examine the validity of the MBI-HSS, a study asked 140 mental health workers to give an anonymous evaluation of another coworker who had been assessed through the MBI-HSS. These mental health workers were asked to give behavioral ratings of coworkers with questions correlated with the EE, DP, and PA dimensions. The study revealed that those who were rated as more emotionally drained and physically fatigued had presented with higher measures on EE and DP. Additionally, DP was correlated with more frequent complaints about their clients. There was no statistical correlation found between the hypothesized job satisfaction with PA (Maslach et al., 2018).

The OMT

The OMT was used to assess the level of IMs of an individual (Kuhl & Scheffer, 2012). The OMT does not use explicit questions to elicit self-report responses and therefore does not constrain the participant's responses. Instead, it functions through the basis of operant tests. It focuses upon mechanisms that are connected to spontaneous behavior instead of conscious thoughts or explicit stimuli and cues (Kuhl & Scheffer, 2012; McClelland et al., 1989).

The OMT differs from other IM assessments in that it not only assesses for each of the IMs (nAch, nPow, nAff, and nAut), it further breaks them down into five levels. The OMT distinguishes between four elements of approach and one element of avoidance (Kuhl & Scheffer, 1999, 2012). Levels 1-4 of each motive make up the "hope" aspect of the motive and Level 5 makes up the "fear" aspect of the motive (Baumann & Kuhl, 2020).

Level 1 is *self-regulated positive affect* whereby IMs are acted upon intrinsically. Level 2 is *incentive-drive positive affect* that involves more incidental occurrences. Level 3 is *self-regulated coping with negative affect* and is related with being flexible and creative ways of coping with threats to motives. Level 4 is *incentive-driven reduction of negative affect,* which involves more rigid, suppressive, and compulsive ways to cope with threats to motives. Levels 1 and 3 represent self-regulatory processes and Levels 2 and 4 represent processes that are driven by incentives and operates separately from self-regulatory processes. Lastly, Level 5 is *fear* and within the personality systems interaction framework represents the inhibition of the self and self-regulatory processes.

The OMT originally assessed only for nAch, nAff, and nPow, but recently incorporated assessment for nAut (Baum & Baumann, 2021; Baumann & Kuhl, 2020; Kuhl & Scheffer, 1999; Kuhl & Scheffer, 2012). This study utilized the updated version of the OMT that incorporates nAut. This version of the OMT incorporates 20 ambiguous pictures of everyday life situations that have been validated to arouse the four IMs. For each of the pictures, the participant is asked to pick a person in the picture to play the

leading role and answer questions from that person's perspective. The participant is asked three short answer questions for each of the pictures:

1. What is important for the person in this situation and what is that person doing?
2. How does this person feel?
3. Why does the person feel this way? (Baum & Baumann, 2021; Baumann & Kuhl, 2020; Kuhl & Scheffer, 1999; Kuhl & Scheffer, 2012)

The responses are then coded for each implicit motive. After coding, the number of responses correlated with each of the implicit motives are then added up to indicate a raw score of how much each of the implicit motive is endorsed by that individual, thereby translating the responses into quantitative data. The OMT has the option of further coding the level of each of the motive responses 1–5. For the purposes of this study, only the overall scores of each major implicit motive were used, not the levels.

Reliability and Validity of the OMT

To examine the validity of the OMT, Kuhl and Scheffer (1999, 2012) looked at discriminate validity to ensure that the OMT was truly assessing IMs rather than explicit motivations or other personality factors. They conducted studies comparing a sample of 88 German armed forces officers and no significant correlations were found between the IMs of the OMT and any of the Big 5 personality factors as measured by the Neuroticism, Extraversion, Openness Personality Inventory-Revised (NEO-PI-R) scales, such as extraversion, conscientiousness, openness, agreeableness, and neuroticism. Additionally, no significant correlations were found between the big five personality

measures as assessed by the Hogan Personality Inventory (HPI) and the IMs as measured by the OMT (Kuhl & Scheffer, 1999, 2012).

In a study conducted by Schüler et al. (2015), the convergent and discriminant validity was examined between the OMT, the Multi-Motive Grid (MMG), and the Picture Story Exercise (PSE; Schultheiss et al., 2008), all instruments that assess the IMs of nAch, nAff, and nPow. Schüler et al. (2015) utilized scales from the Personality Research Form (PRF) that examines explicit motivations related to achievement, affiliation and power (Stumpf et al., 1985) and compared them to the scales of nAch, nAff, and nPow as measured by the IM instruments. Schüler et al. (2015) found that between the OMT and PRF, no significant correlations were found, which validated the discriminant validity of the OMT as a measure for implicit rather than explicit motivation. In terms of convergent validity, the only significant correlation found were between OMT-nPow and PSE-nPow at $r = .15$, $p < .01$. The authors ascribed the discrepancies in convergent validity to the methodology that the assessments were presented as the MMG was a semi-closed response format, the OMT was a short-response format, and the PSE was a long-response format (Schüler et al., 2015).

The coding of the OMT (Kuhl & Scheffer, 1999; Kuhl & Scheffer, 2012; Scheffer, 2001) was compared with the *Manual for Scoring Motive Imagery in Running Text* (Winter, 1991) that is the used to score the Thematic Apperception Test (TAT; Atkinson & McClelland, 1948; McClelland et al., 1949, 1953/2020; Murray, 1943; Schultheiss & Burnstein, 2010) and the PSE (Schultheiss et al., 2008), which had become the initial and standard assessment for IMs (Schüler et al., 2015). Significant association

was found between the OMT scores and TAT scores with correlations of the main IMs of nAch with $r = .47$, nAff with $r = .31$, and nPow with $r = .47$. As such, Kuhl and Scheffer (1999; 2012) concluded that there was sufficient convergent validity for the OMT as an assessment for IMs.

The OMT asks participants to write out short answers that are their associations with the pictures in words and phrases rather than entire narratives. According to the OMT manual, this approach has advantages over the approach taken by the TAT and PSE whereby the participant is asked to write out entire narratives about a picture because participant fatigue in answering questions must be considered. Additionally, with the extended narrative format, the participants may begin to attempt to produce a socially desirable story (Kuhl & Scheffer, 1999, 2012).

The internal reliability of the OMT for nAff has been found to have the Cronbach's alpha of .74, for nAch at .70, and for nPow at .78 for all four of the levels of each of these IMs. The test–retest stability has been found to be around $r = .72$ (Baumann et al., 2010; Scheffer et al., 2003). Several other studies have used the OMT also examined the test–retest reliability of the OMT. For example, a study conducted to examine the relationship between achievement flow and nAch found a test–retest reliability of nAch with the OMT at .50 over a two-year period (Baumann and Scheffer, 2011; Denzinger & Brandstätter, 2018). A study conducted to examine nAff found a test–retest correlation of between .41 to .72 over a 2-week period with the differences being accounted for by modulation due to intelligence (Denzinger & Brandstätter, 2018; Scheffer et al., 2007).

Kuhl and Scheffer (2012), however, proposed that since this type of implicit assessment requires a participant to translate an implicit narrative into explicit stories, distortions may occur in the process. As such, they suggested that traditional methods for examining reliability such as Cronbach's alpha may be inappropriate for assessments that examine IMs through a thematic apperception approach such as taken by the TAT, PSE, and OMT.

Instead it was proposed that internal reliability for assessments such as the OMT is better measured through item–response theory (IRT; Runge et al., 2016, 2018). In a study conducted by Runge et al. (2016) on the reliability of the OMT, the dynamic Thurstone IRT (DTM; Lang, 2014) model was utilized. The DTM approach was also previously utilized by Lang (2014) to examine the reliability of the Picture Story Exercise (PSE; Schultheiss et al., 2008), another IM measure assessment that utilized an open-ended story format. The study conducted by Runge et al. (2016) that also utilized populations from several different countries found that the DTM approach yielded the squared correlation reliability for nPow of the OMT at .73, for nAch at .62, and for nAff at .52. Ellis (2013) estimated that reliabilities around .60 are generally sufficient for the purposes of research.

Research Question and Hypothesis

The research question and hypothesis for this study was:

Research question: Do implicit motives (*n*Achievement, *n*Power, *n*Affiliation-Intimacy, and *n*Autonomy) as measured by the OMT predict levels of burnout

dimensions (Emotional Exhaustion, Depersonalization, and Low Personal Accomplishment) as measured by the MBI-HSS among mental health clinicians?

H_0a - The implicit motive of *n*Achievement as measured by the OMT will not have a positive correlation with the burnout dimensions of Emotional Exhaustion and not have a negative correlation with the dimension of Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_1a - The implicit motive of *n*Achievement as measured by the OMT will have a positive correlation with the burnout dimension of Emotional Exhaustion and have a negative correlation with the burnout dimension of Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_0b - The implicit motive of *n*Power as measured by the OMT will not have a positive correlation with the burnout dimensions of Emotional Exhaustion and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_1b - The implicit motive of *n*Power as measured by the OMT will have a positive correlation with the burnout dimensions of Emotional Exhaustion and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_0c - The implicit motive of *n*Affiliation-Intimacy as measured by the OMT will not have a positive correlation with the burnout dimensions of Emotional Exhaustion as measured by the MBI-HSS among mental health clinicians.

H_1c - The implicit motive of *n*Affiliation-Intimacy as measured by the OMT will have a positive correlation with the burnout dimension of Emotional Exhaustion as measured by the MBI-HSS among mental health clinicians.

H_0d - The implicit motive of *n*Autonomy as measured by the OMT will not have a negative correlation with the burnout dimensions of Emotional Exhaustion, Depersonalization, and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_1d - The implicit motive of *n*Autonomy as measured by the OMT will have a negative correlation with the burnout dimensions of Emotional Exhaustion, Depersonalization, and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

Data Collection

In order to collect the data for this study, a convenient sample was used. Emails were sent out to MHPs on a research panel to invite volunteers to participate in the study. The list of emails was obtained through research panel companies. A survey site was created through a third-party collection site. The email included the invitation for voluntary participation, a link to the survey site, and statement of informed consent. It also included a brief introduction and overview to the study as well as the purpose of the study. The survey was anonymous and participants were given a randomly generated identification number so it will be impossible for the researcher to identify the participants. The informed consent for this study included information such as the nature and purpose of the study, criterion for participant selection, description of instruments used, the general expected time for survey completion, and potential risks and benefits for participation. The data collection process was expected to take between 4-8 weeks. All data collected were downloaded onto an excel sheet and then an additional step of

scoring and coding of the OMT by the researcher was done. This data was entered into a spreadsheet for import into IBM SPSS Statistics v.25 computer software for analysis.

Ethical Considerations

The proposal for the study was submitted to the Institutional Review Board (IRB) of Walden University for review and to ensure that this study would be conducted in a manner that is ethical. It was important to adhere to ethical guidelines when conducting studies involving human participants in order to ensure that there is minimal harm and risk to the participants. Approval for the study was obtained from the IRB with the approval number 08-08-22-0748630. Contact information for both the research as well as the university were provided to the participants to ensure that the participants can have support needs met before, during and after the study. Informed consent was given to participants in a consent form that includes information regarding the study so participants can have a full understanding of the study prior to agreeing to participate. Data collected in this study will be kept in a secure manner for a length of 5 years and then destroyed according to policy set forth by Walden University. The data will only be accessible to me and committee members working with me. While MHP is not a vulnerable population, it was still important to consider if any harm may come to the participants during this study. Given the potentially sensitive nature of the level of burnout that a MHP may be experiencing, it is of utmost importance that information collected during the study remain anonymous as well as confidential. The possibility that a mental agency may ask the researcher for data on the burnout status of their MHP

employees also exists. It would be unethical for data on employees obtained through informed consent for research purposes only to be released to employers.

Summary

This study utilized a quantitative research design to examine if IMs were predictive of burnout dimensions among MHPs. MHPs included those working directly with clients such as mental health therapists, licensed psychologists, licensed professional counselors, and licensed clinical social workers. They were recruited through research panel companies. An anonymous online survey was sent to them that includes a demographic questionnaire, the OMT to assess their levels of each IM, and the MBI-HSS to assess their level of burnout in each of the dimensions of burnout. The assessments were scored and the data will be analyzed through the IBM SPSS Statistics v.25 computer software utilizing a multiple regression analysis approach to examine if distinct IM were correlated with specific dimensions of burnout. Ethical considerations for the MHP population relevant to the nature of this study included keeping the identities of the participants confidential, denying any mental health agencies' requests about their employee's burnout status, providing contact information to the participants to ensure that the participants can have support needs met before, during and after the study, and providing participants informed consent on the nature of the study before they agree to participation.

In Chapter 4, I describe the data collected from the study, explain the analysis of the data, and discuss limitations and conclusions obtained from the data.

Chapter 4: Results

The purpose of this quantitative study was to examine the relationship between the dimensions of burnout (EE, DP, and LPA) and IM (nAch, nAff, nPow, and nAut) in MHPs to address the gap in the literature in regard to the relationship between dispositional trait motivation and professional burnout in this population. The study was conducted in order to examine the following research question and hypotheses:

Research question: Do implicit motives (*n*Achievement, *n*Power, *n*Affiliation-Intimacy, and *n*Autonomy) as measured by the OMT predict levels of burnout dimensions (Emotional Exhaustion, Depersonalization, and Low Personal Accomplishment) as measured by the MBI-HSS among mental health clinicians?

H_0a - The implicit motive of *n*Achievement as measured by the OMT will not have a positive correlation with the burnout dimensions of Emotional Exhaustion and not have a negative correlation with the dimension of Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_1a - The implicit motive of *n*Achievement as measured by the OMT will have a positive correlation with the burnout dimension of Emotional Exhaustion and have a negative correlation with the burnout dimension of Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_0b - The implicit motive of *n*Power as measured by the OMT will not have a positive correlation with the burnout dimensions of Emotional Exhaustion and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_1b - The implicit motive of *n*Power as measured by the OMT will have a positive correlation with the burnout dimensions of Emotional Exhaustion and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_0c - The implicit motive of *n*Affiliation-Intimacy as measured by the OMT will not have a positive correlation with the burnout dimensions of Emotional Exhaustion as measured by the MBI-HSS among mental health clinicians.

H_1c - The implicit motive of *n*Affiliation-Intimacy as measured by the OMT will have a positive correlation with the burnout dimension of Emotional Exhaustion as measured by the MBI-HSS among mental health clinicians.

H_0d - The implicit motive of *n*Autonomy as measured by the OMT will not have a negative correlation with the burnout dimensions of Emotional Exhaustion, Depersonalization, and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_1d - The implicit motive of *n*Autonomy as measured by the OMT will have a negative correlation with the burnout dimensions of Emotional Exhaustion, Depersonalization, and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

Data Collection

Demographics

Data were collected from 90 MHPs (i.e., mental health therapists, counselors, psychologists, psychiatrists, social workers, and mental health clinicians). The participants were recruited by Qualtrics through their research panels that met the

criterion of a MHPs that include those working directly with clients such as mental health therapists, licensed psychologists, licensed professional counselors, and licensed clinical social workers. The study survey remained open for 8 days before meeting the minimum threshold of 85 participants. The study survey was closed at 90 participants. The data of one participant were removed from the pool as they chose not to answer several of the OMT survey questions and put nonrelated statements such as “bored of this survey” and “this survey is too long.” The final number of participants in the study was 89 respondents. Of the participants who responded to and participated in the study, 56.18% were male and 43.82% were female; 64.04% were White/Caucasian. Only 13.48% were practicing part-time, whereas 86.52% were practicing full time. The majority of the participants (78.65%) were psychiatrists; 17.98% have been practicing for 1 to 5 years, 15.73% have been practicing for 5-10 years, and 64.04% have been practicing for more than 10 years. As for the age of participants, 17.98% were between the ages of 25 and 34, 19.10% were between 35 and 44, 28.09% were between 45 and 54, 21.35% were between 55 and 64, and 13.48% were over 65. A full summary of the demographic data collected for this study can be seen in Table 1.

Table 1

Demographics Data

Demographic characteristic	*n*	%
Gender		
Male	50	56.18
Female	39	43.82
Ethnicity		
American Indian or Alaskan Native	0	0
Asian Indian or South Asian	10	11.24
Asian or Pacific Islander	6	6.74
Black/African American	6	6.74
Latino or Hispanic	8	8.99
Multi-Ethnic	2	2.25
White/Caucasian	57	64.04
Age		
18-24	0	0
25-34	16	17.98
35-44	17	19.10
45-54	25	28.09
55-64	19	21.35
65+	12	13.48
Education		
Bachelor	10	11.24
Masters	11	12.36
Doctorate	68	76.40
Licensure		
Masters in Counseling	2	2.25
Licensed Professional Counselor	5	5.62
Licensed Clinical Professional Counselor	3	3.37
Masters of Social Work	2	2.25
Licensed Social Worker	3	3.37
Licensed Clinical Social Worker	2	2.25
Licensed Marriage and Family Therapist	0	0
Psychology Ph.D./Psy.D.	1	1.12
Licensed Clinical Psychologist	0	0
Psychiatrist	70	78.65
Practice Status		
Currently not practicing	0	0
Currently practicing part-time	12	13.48
Currently practicing full-time	77	86.52
Years Active in Profession		
0-1	2	2.25
1-5	16	17.98
5-10	14	15.73
10+	57	64.04

Study Variables

The dependent variables selected for this study were the dimensions of burnout as measured by the MBI-HSS, which include Emotional Exhaustion (EE), Depersonalization (DP), and Personal Accomplishment (PA). Scores for EE, DP, and PA were calculated utilizing the sums of items scores of each subscale, where a higher degree of burnout was indicated if participants endorsed high scores in EE and DP and a low score in PA (hence the full term generally used in literature when discussing burnout as "Low Personal Accomplishment (LPA)"). Table 2 shows a summary of the descriptive statistics of the dimensions of burnout.

Table 2

Summary of Descriptive Statistics of Dependent Variables of Burnout

Variable	*M*	*SD*	Min	Max
Emotional Exhaustion (EE)	20.21	13.74	0	54
Depersonalization (DP)	8.09	7.39	0	26
Personal Accomplishment (PA)	41.03	5.32	23	48

The independent variables for this study include the IMs of Achievement (nAch), Affiliation-Intimacy (nAff), Autonomy (nAut), and Power (nPower). The degree of IM endorsed by a participant is obtained by adding up the number of items the participant responded as picturing the corresponding motive as coded by the OMT manual. Table 3 shows a summary of the descriptive statistics of the IM constructs of this study.

Table 3

Summary of Descriptive Statistics of Independent Variables of Implicit Motives

Variable	*M*	*SD*	Min	Max
Achievement (nAch)	3.78	1.61	0	9
Affiliation-Intimacy (nAff)	3.54	1.56	0	9
Autonomy (nAut)	7.75	1.90	4	12
Power (nPow)	4.93	2.33	0	11

I then examined the Cronbach's alpha for each scale within both instruments for internal consistency. The Cronbach's alpha for the MBI-HSS scales in this study were found to be .950 for EE, .873 for DP, and .685 for PA. According to the MBI Manual, the internal reliability of the MBI-HSS as measured by Cronbach's coefficient alpha is at .90 for EE, .79 for DP, and .71 for PA (Maslach et al., 2018). The Cronbach's alpha as found in the study were similar to that found by Maslach et al. (2018). The Cronbach's alpha for the OMT scales are not reported because each item is meant to be a projective response to be coded and interpreted rather than to assess a particular measure. Runge et al. (2018) suggested that it would be difficult to interpret the internal reliability of the OMT with Cronbach's alpha since it is a projective test, and while the selected picture items are meant to evoke motivational answers, they are not entirely specific to a specific implicit motive.

Statistical Model Assumptions

To select the appropriate analysis methodology, I tested the assumptions of correlation and regression for each variable. A test for linearity was conducted for each variable utilizing scatterplots and comparing each independent variable of IM with the

dependent variables of burnout dimensions. A linear relationship was found between all the independent variables of IM as measured by the OMT with the dependent variables of MBI-HSS (see Figures 1–12).

Figure 1

Scatter Plot of MBI EE by OMT nAch

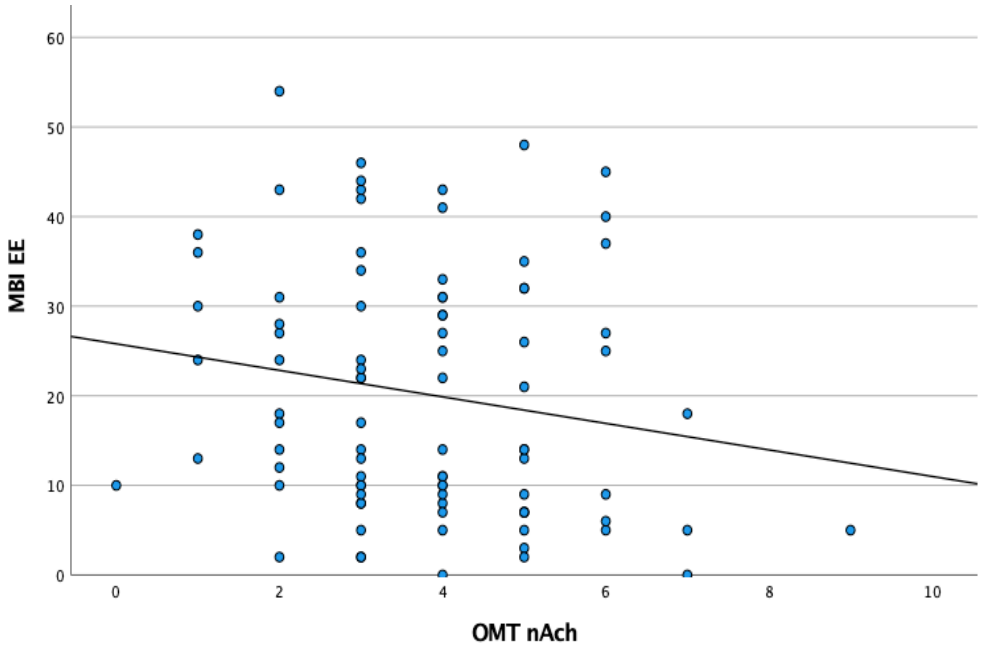


Figure 2

Scatter Plot of MBI EE by OMT nAff

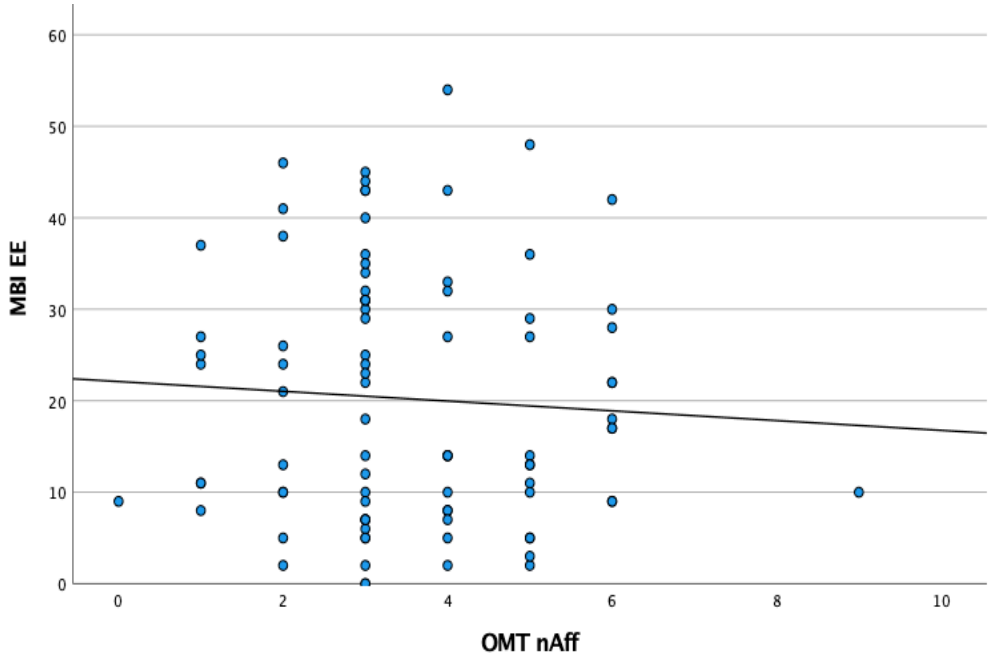


Figure 3

Scatter Plot of MBI EE by OMT nAut

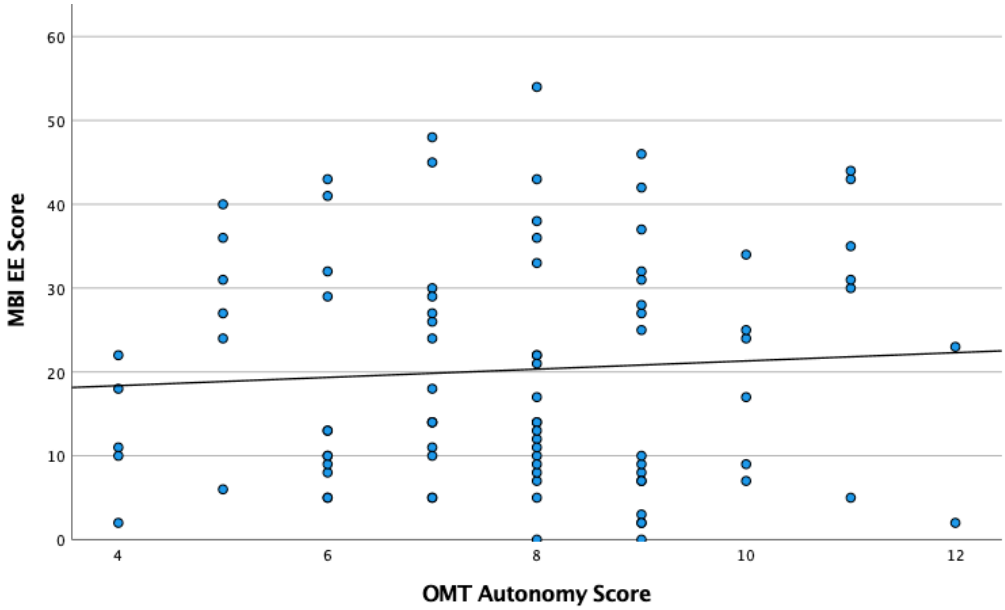


Figure 4

Scatter Plot of MBI EE by OMT nPow

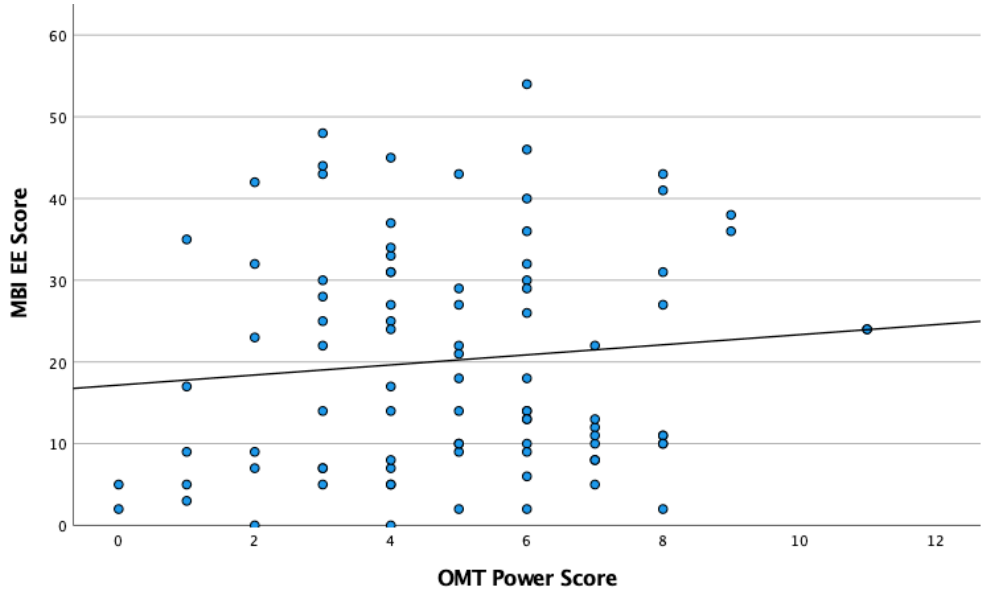


Figure 5

Scatter Plot of MBI DP by OMT nAch

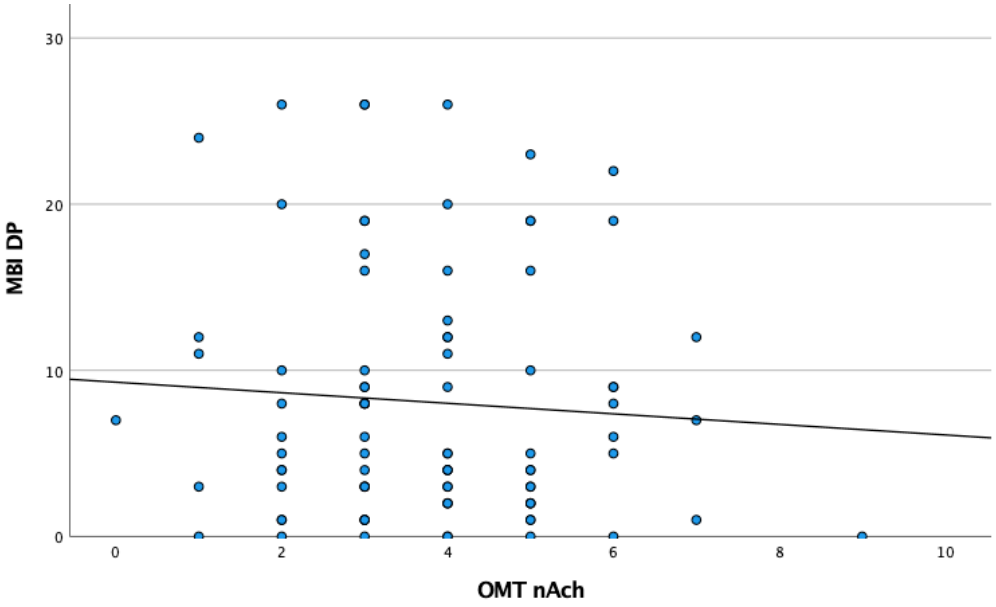


Figure 6

Scatter Plot of MBI DP by OMT nAff

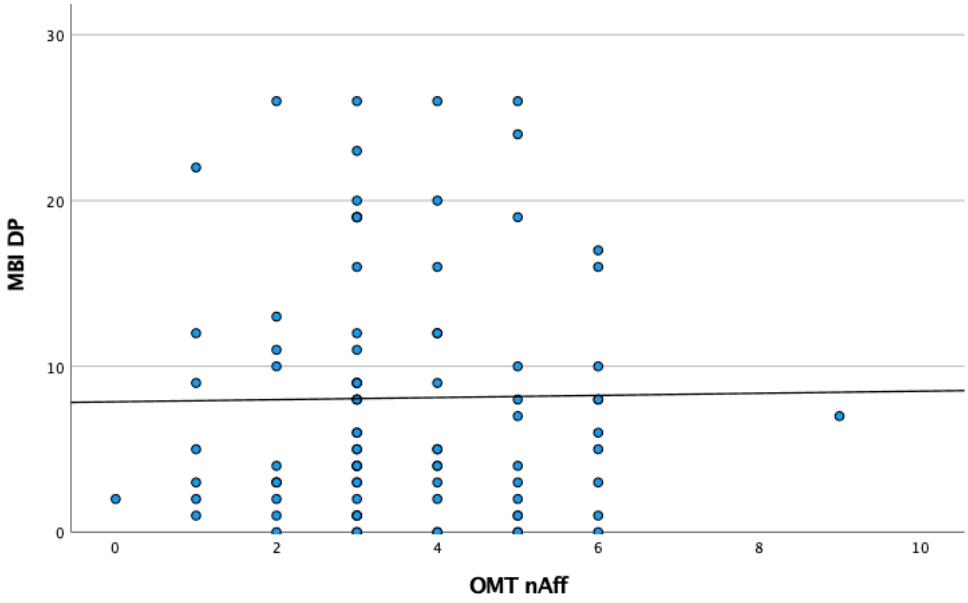


Figure 7

Scatter Plot of MBI DP by OMT nAut

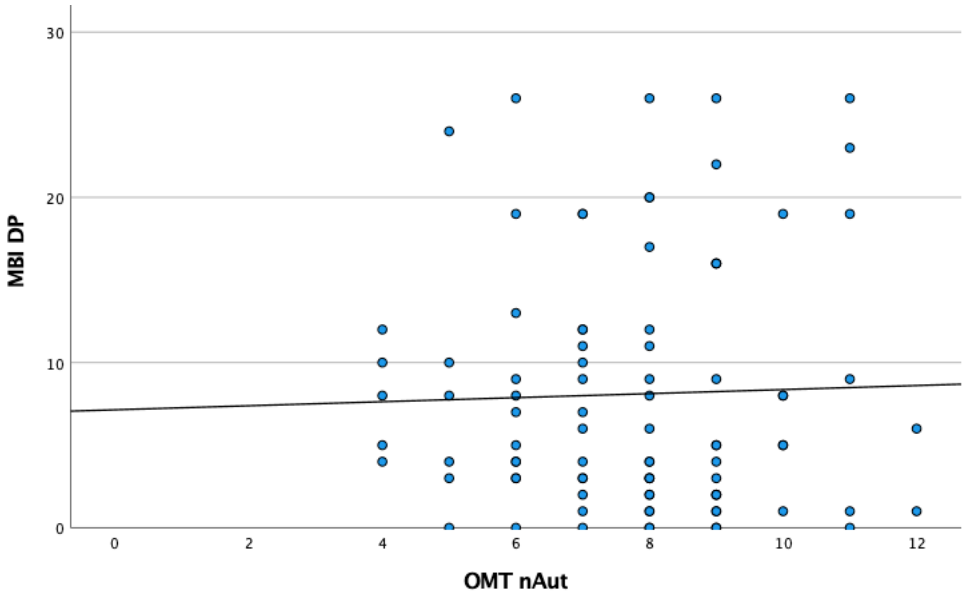


Figure 8

Scatter Plot of MBI DP by OMT nPow

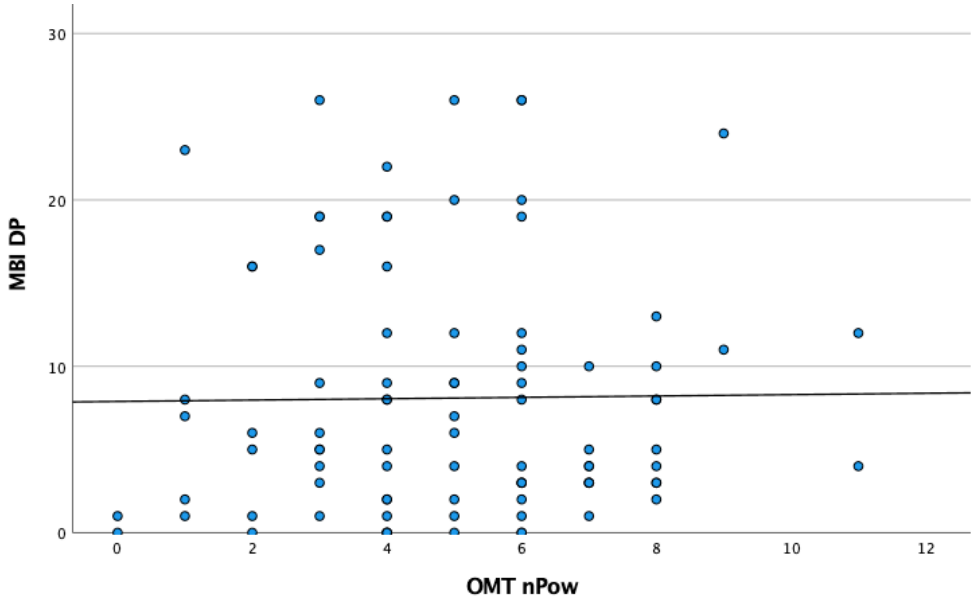


Figure 9

Scatter Plot of MBI PA by OMT nAch

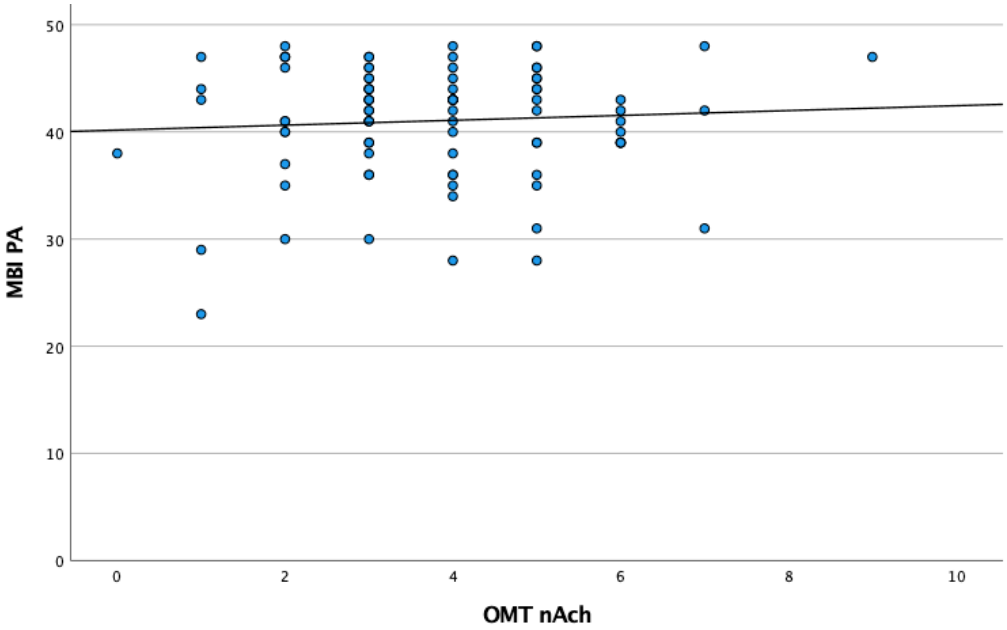


Figure 10

Scatter Plot of MBI PA by OMT nAff

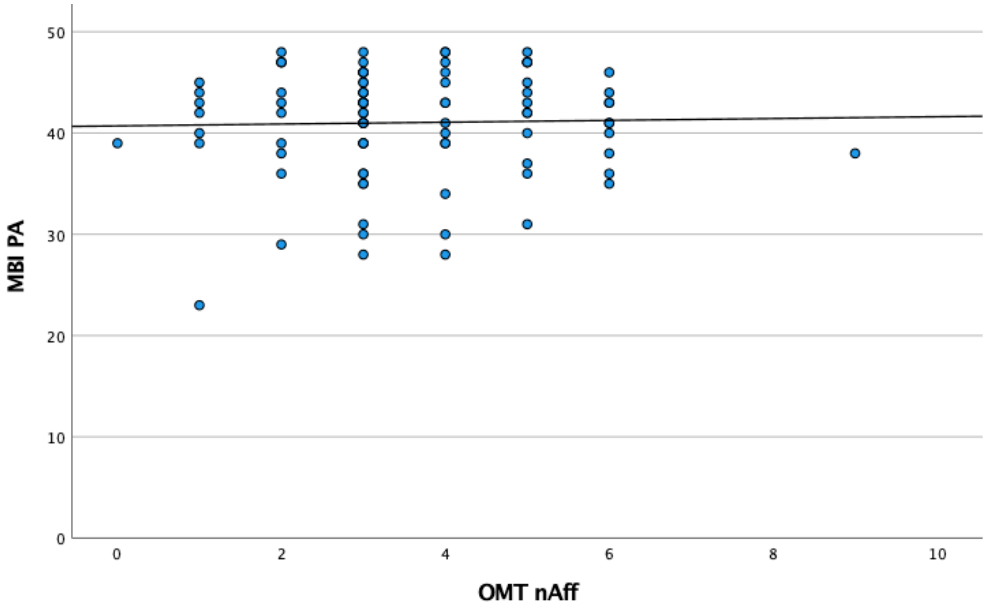


Figure 11

Scatter Plot of MBI PA by OMT nAut

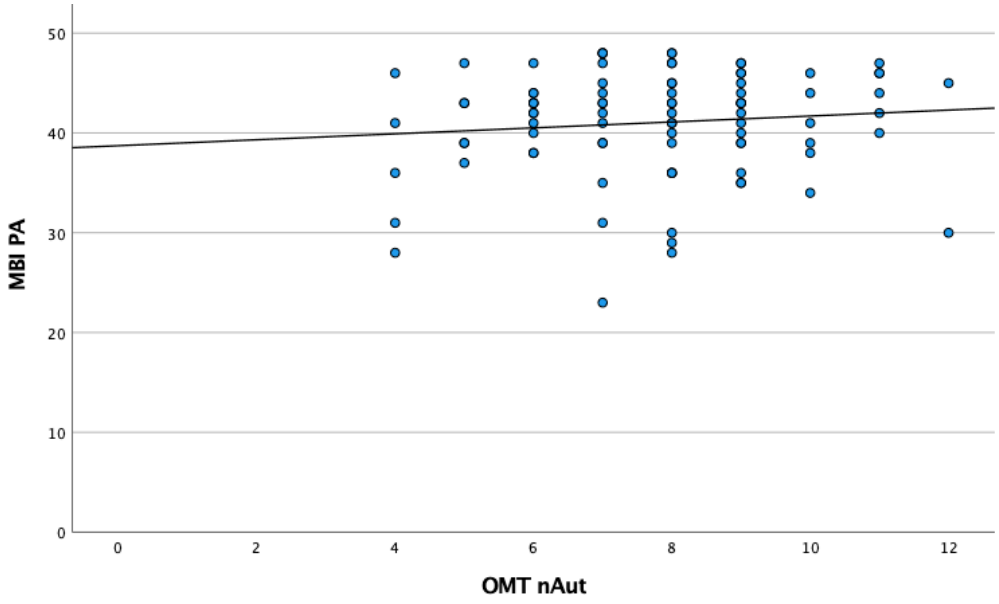
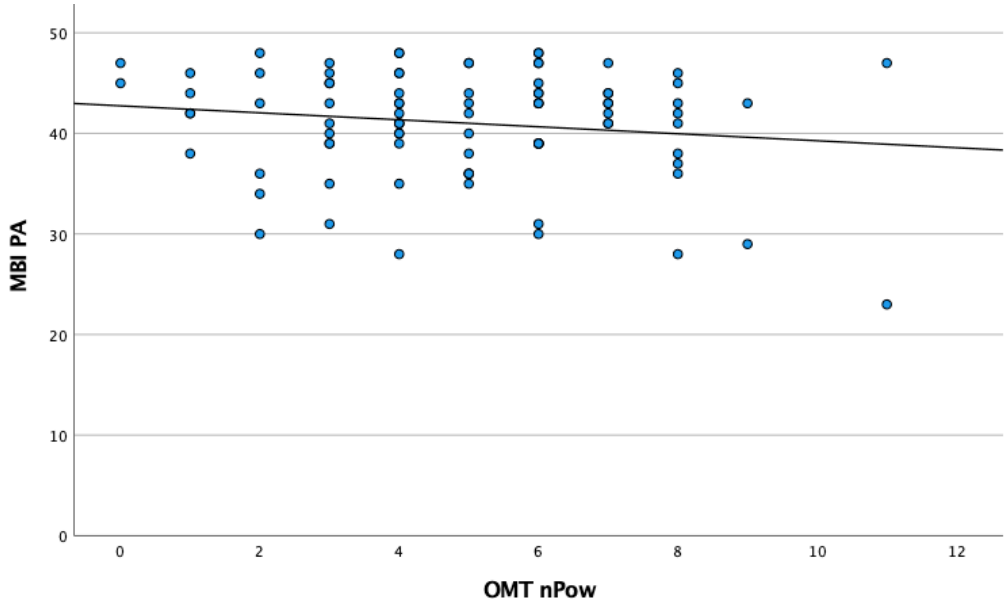


Figure 12

Scatter Plot of MBI PA by OMT nPow



After it was determined that the independent variables of IM and the dependent variables of burnout dimensions had a linear relations, the scatter plots were also examined for homoscedasticity. In examining the scatter plots, I determined that there was no presence of heteroscedasticity, and the assumption of homoscedasticity was maintained to be true.

The presence of a normal distribution of the dependent variables were then examined. In order for a Pearson correlation approach to be utilized, the variables to be correlated need to follow a normal distribution. In order to examine if a variable followed a normal distribution, a Shapiro-Wilk test ($p > .05$ indicates that a dataset follows a normal distribution) as well as the skewness and kurtosis of each variable were examined.

Table 4 shows a summary of the checks for normality utilizing Shapiro-Wilk's test for Skewness and Kurtosis for each dependent variable. EE was able to pass the Skewness and Kurtosis test for normality but variations from a normal distribution were found for DP and PA.

Table 4

Checking for Normality of Variables Using Shapiro-Wilk, Skewness, and Kurtosis

Variable	*W*	*p*	Skewness	Kurtosis
EE	.940	*<.001	.471	-.872
DP	.872	*<.001	1.01	.019
PA	.916	*<.001	-1.07	1.03

*$p < .05$.

Due to the deviation from a normal distribution in the dependent variables, the data was transformed to achieve normality. A rank-case method was found to be effective to transform the data to a normal distribution. After utilizing a rank-case transformation, all the dependent variables of EE, DP, and PA were found to be normally distributed. A summary of the transformed data results utilizing a rank-case method can be seen in Table 5. The figures of histogram and normal Q-Q plots of the transformed data for the dependent variables can also be found below.

Table 5

Transformed Data for Normality of Variables Using Rank-Case Transformation

Variable	*W*	*p*	Skewness	Kurtosis
EE	.994	.950	.019	-.371
DP	.974	.073	.184	-.416
PA	.985	.397	.022	-.320

*$p < .05$.

Figure 13

Histogram with Distribution Curve for Rank-Order Transformed EE

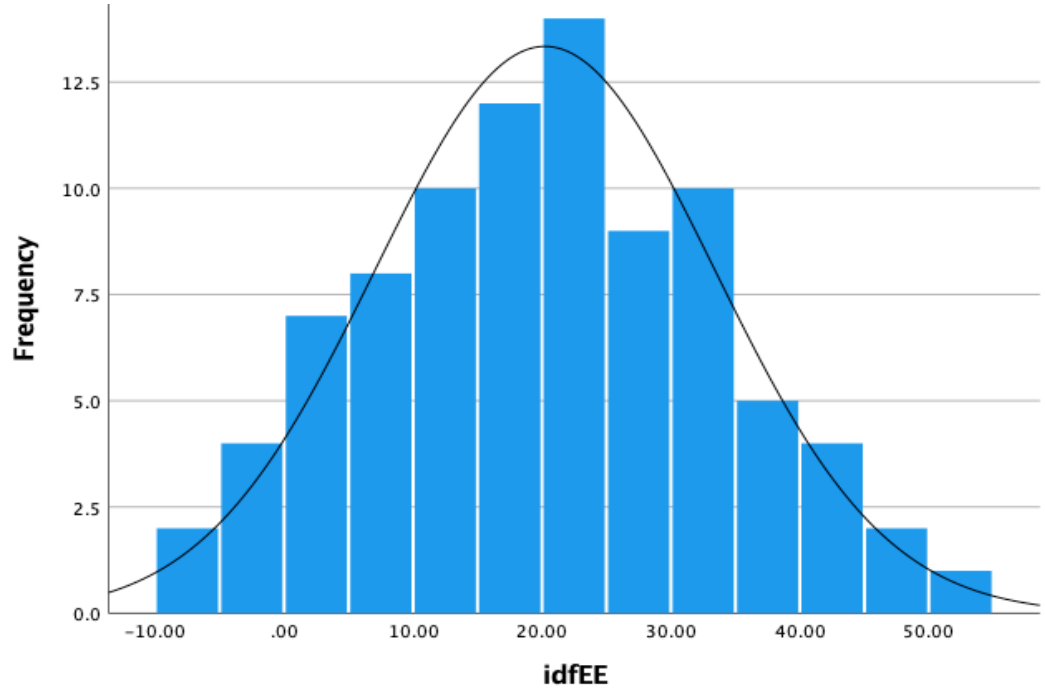


Figure 14

Normal Q-Q Plot of Rank-Order Transformed EE

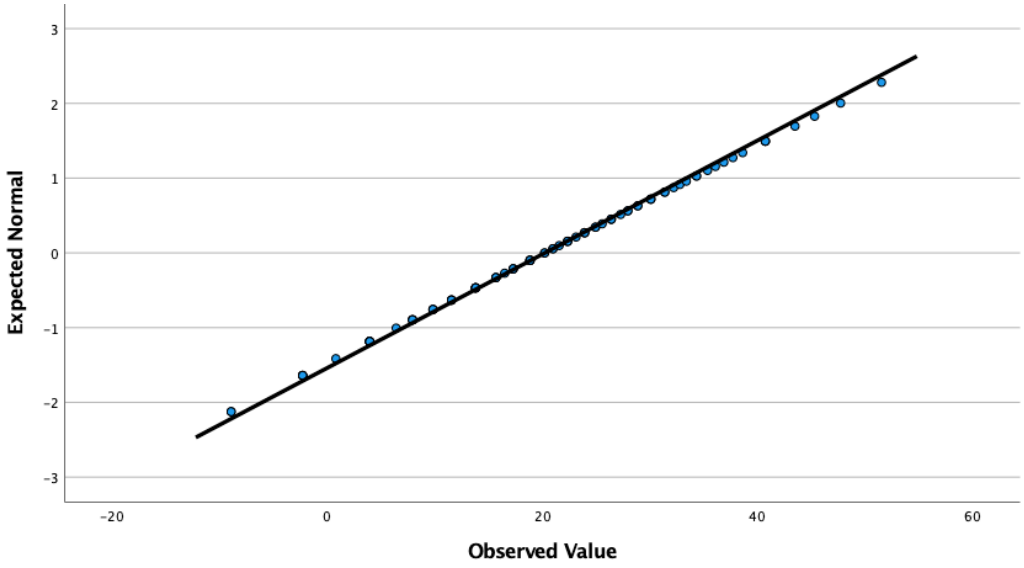


Figure 15

Histogram with Normal Distribution Curve for Rank-Order Transformed DP

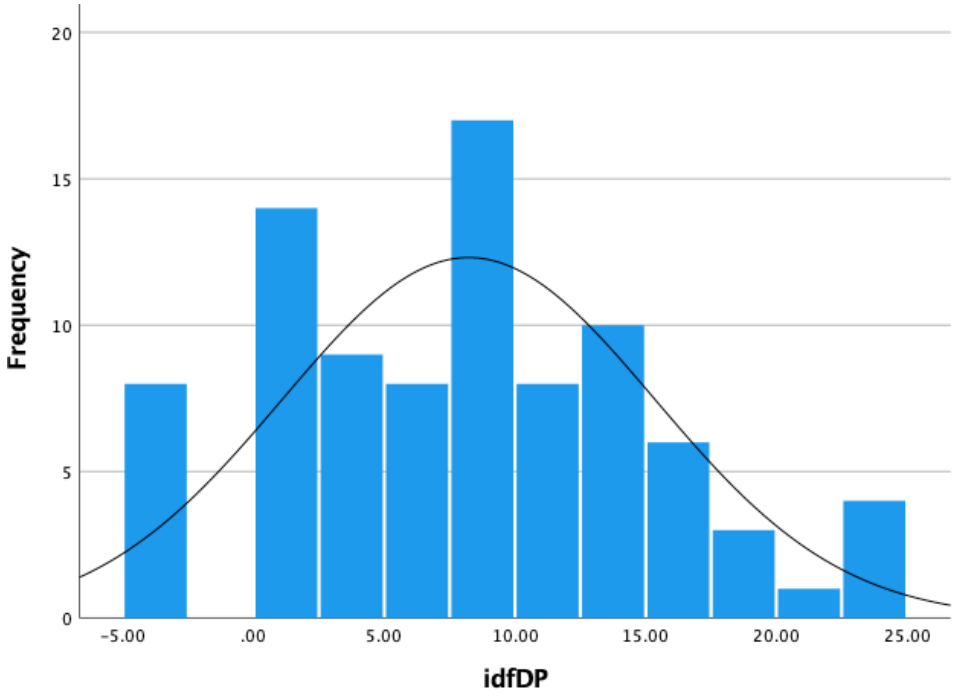


Figure 16

Normal Q-Q Plot of Rank-Order Transformed DP

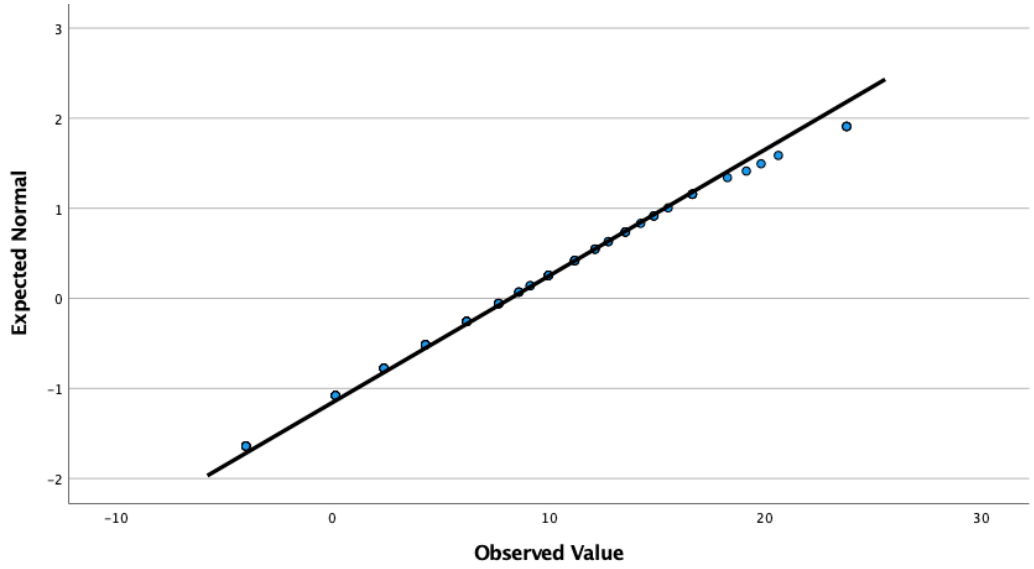


Figure 17

Histogram with Normal Distribution Curve for Rank-Order Transformed PA

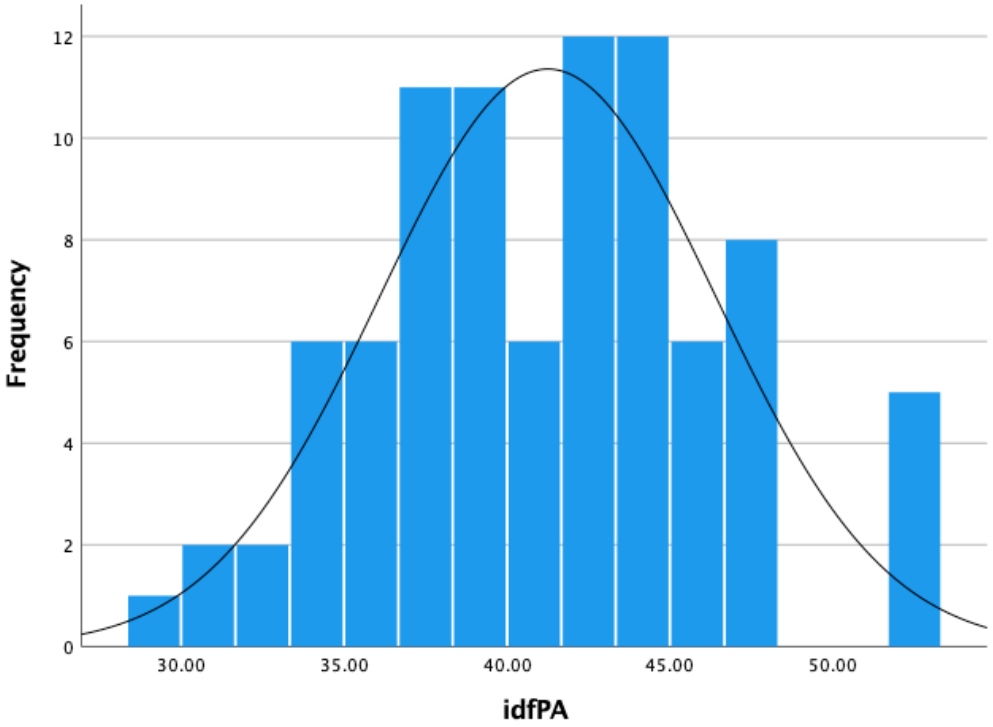
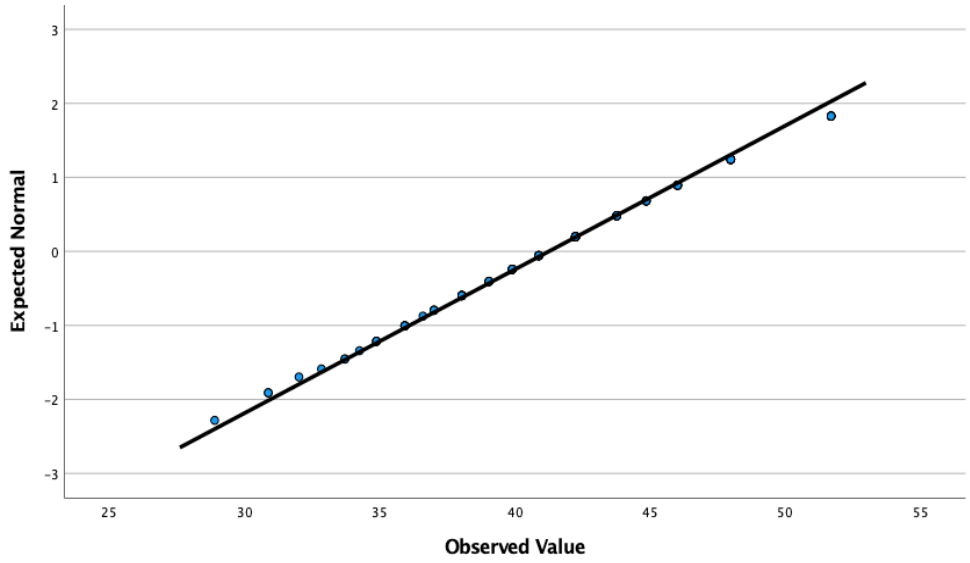


Figure 18

Normal Q-Q Plot of Rank-Order Transformed PA



Given that the data for the dependent variables were found to be normally distributed after transforming the data, a Pearson's correlation was utilized to examine the relationship between the dimensions of burnout (EE, DP, and LPA) and the dimensions of IM (nAch, nAff, nAut, nPow) utilizing the transformed data. Correlations were found between nAch and nAff with $r(87) = -.318$, $p < .05$, between nAch and nPow with $r(87) = -.383$, $p < .05$, between nAff and nPow $r(87) = -.324$, $p < .05$, between nAut and nPow with $r(87) = -.634$, $p < .05$, between EE and DP with $r(87) = .748$, $p < .05$, and between DP and PA with $r(87) = -.209$, $p < .05$. Table 6 below shows a summary of the correlations between IM constructs and burnout dimensions.

Table 6

Summary of Correlations Between Implicit Motives and Burnout Dimensions

	nAch	nAff	nAut	nPow	EE	DP	PA
nAch	-	*-.318	-.115	*-.383	-.184	-.093	.057
nAff	*-.318	-	-.154	*-.324	-.047	.004	.001
nAut	-.115	-.154	-	*-.634	.025	-.036	.097
nPow	*-.383	*-.324	*-.634	-	.137	.091	-120
EE	-.184	-.047	.025	.137	-	*.748	-.127
DP	-.093	.004	-.036	.091	*.748	-	*-.209
PA	.057	.001	.097	-.120	-.127	*-.209	-

*$p < .05$

The presence of multicollinearity was then examined. Multicollinearity was found for nPow and SPSS indicated that there as a tolerance of .000 for nAut. A summary of the multicollinearity findings for Tolerance and VIF can be found in Table 7.

Table 7

Collinearity Between Independent Variables of IM

Variable	Tolerance	VIF
DV = EE		
nAch	.637	1.569
nAff	.666	1.502
nAut	.000	-
nPow	.663	1.580
DV = DP		
nAch	.634	1.577
nAff	.665	1.503
nAut	.000	-
nPow	.631	1.584
DV = PA		
nAch	.634	1.577
nAff	.665	1.503
nAut	.000	-
nPow	.631	1.584

Given that it was found that collinearity was found for nAut, it was determined that the independent variable of nAut will not be used in the regression model.

In review of the examination of the model assumptions, it was found that there was a linear relationship between the independent variables of IM and the dependent variables of burnout dimensions. It was found that the assumption of homoscedasticity was true. The data of the dependent variables were found to not be normally distributed so a rank-order transformation of the data was completed and successfully produced a normal data distribution of the dependent variables. Multicollinearity was examined and it was found that nAut had collinearity with the other independent variables and was determined to be excluded from the regression analysis.

Given that the model assumptions for a regression were fulfilled, it was determined that regression analysis would be appropriate to use with the aforementioned adjustments to test the proposed hypotheses. Simple regressions were first conducted to determine if there would be a model of statistical significance of IM constructs, excluding nAut, that would be predictive of each of the burnout dimensions.

The first set of hypotheses examined were as follows:

H_0a - The implicit motive of *n*Achievement as measured by the OMT will not have a positive correlation with the burnout dimensions of Emotional Exhaustion and not have a negative correlation with the dimension of Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_1a - The implicit motive of *n*Achievement as measured by the OMT will have a positive correlation with the burnout dimension of Emotional Exhaustion and have a negative correlation with the burnout dimension of Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

To test the null hypotheses, three separate simple linear regressions were conducted using nAch as the independent variable with the dependent variables of the three burnout dimensions. It was found that there was no significant correlation between nAch and any of the burnout dimensions, thus confirming all of the null hypothesis. A summary of the three separate simple regressions can be found in Table 8.

Table 8

Simple Regressions of nAch and Burnout Dimensions

Variable	B	SE(B)	β	*t*	*p*	R^2
IV = nAch						
EE	-1.504	.868	-.184	-1.732	.087	.034
DP	-.414	.476	-.093	-.870	.386	.009
PA	.185	.346	.057	.535	.594	.003

The second set of hypotheses examined were as follows:

H_0c - The implicit motive of *n*Affiliation-Intimacy as measured by the OMT will not have a positive correlation with the burnout dimensions of Emotional Exhaustion as measured by the MBI-HSS among mental health clinicians.

H_1c - The implicit motive of *n*Affiliation-Intimacy as measured by the OMT will have a positive correlation with the burnout dimension of Emotional Exhaustion as measured by the MBI-HSS among mental health clinicians.

To test the null hypotheses, three separate simple linear regressions were conducted using nAff as the independent variable with the dependent variables of the three burnout dimensions. It was found that there was no significant correlation between nAff and any of the burnout dimensions, thus confirming all of the null hypothesis. A summary of the three separate simple regressions can be found in Table 9.

Table 9

Simple Regressions of nAff and Burnout Dimensions

Variable	B	SE(B)	β	*t*	*p*	R^2
IV = nAff						
EE	-.394	.904	-.047	-.436	.664	.002
DP	.019	.493	.004	.039	.969	.000
PA	.005	.357	.001	.014	.989	.000

The third set of hypotheses examined were as follows:

H_0b - The implicit motive of *n*Power as measured by the OMT will not have a positive correlation with the burnout dimensions of Emotional Exhaustion and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_1b - The implicit motive of *n*Power as measured by the OMT will have a positive correlation with the burnout dimensions of Emotional Exhaustion and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

To test the null hypotheses, three separate simple linear regressions were conducted using nPow as the independent variable with the dependent variables of the three burnout dimensions. It was found that there was no significant correlation between nPow and any of the burnout dimensions, thus confirming all of the null hypothesis. A summary of the three separate simple regressions can be found in Table 10.

Table 10

Simple Regressions of nPow and Burnout Dimensions

Variable	B	SE(B)	β	*t*	*p*	R^2
IV = nPow						
EE	.772	.600	.137	1.286	.202	.019
DP	.280	.328	.091	.851	.397	.008
PA	-.268	.237	-.120	-1.128	.263	.014

This fourth set of hypotheses were not examined due to the collinearity that was discovered for nAut:

H_0d - The implicit motive of *n*Autonomy as measured by the OMT will not have a negative correlation with the burnout dimensions of Emotional Exhaustion, Depersonalization, and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

H_1d - The implicit motive of *n*Autonomy as measured by the OMT will have a negative correlation with the burnout dimensions of Emotional Exhaustion, Depersonalization, and Low Personal Accomplishment as measured by the MBI-HSS among mental health clinicians.

Multiple regression analyses were also conducted to examine if there were predictive correlations with burnout when all the IMs were taken into account together. Given the collinearity of nAut, the IM of nAut was excluded from the multiple regression analysis. The multiple regression analysis between the IM constructs and the burnout dimension of EE did not find any statistically significant models of IM constructs that would be predictive of EE, thereby confirming all of the null hypothesis. nAut was excluded from the analysis due to collinearity. Table 11 shows a summary of the multiple

linear regression analysis conducted for the constructs of IM and the burnout dimension of EE.

Table 11

Summary of Multiple Linear Regression Analysis for IM and EE

Variable	B	SE(B)	β	t	p	F	p	R^2
Model						1.36	.260	.046
nAch	-1.70	1.09	-.208	-1.56	.124			
nAff	-.879	1.10	-.105	-.803	.424			
nAut	-	-	-	-	-			
nPow	.136	.753	.024	.180	.857			

*$p < .05$.

A multiple linear regression analysis between the IM constructs and the burnout dimension of DP was conducted. The multiple regression analysis between the IM constructs and the burnout dimension of DP did not find any statistically significant models of IM constructs that would be predictive of DP. nAut was excluded from the analysis due to collinearity. Table 12 shows a summary of the multiple linear regression analysis conducted for the constructs of IM and the burnout dimension of DP.

Table 12

Summary of Multiple Linear Regression Analysis for IM and DP

Variables	B	SE(B)	β	t	p	F	p	R^2
Model						.351	.789	.012
nAch	-.291	.603	-.065	-.483	.631			
nAff	.024	.607	.005	.040	.968			
nAut	-	-	-	-	-			
nPow	.208	.417	.068	.498	.620			

*$p < .05$.

A multiple linear regression analysis between the IM constructs and the burnout dimension of PA was conducted. The multiple regression analysis between the IM

constructs and the burnout dimension of PA did not find any statistically significant models of IM constructs that would be predictive of PA. nAut was excluded from the analysis due to collinearity. Table 13 shows a summary of the multiple linear regression analysis conducted for the constructs of IM and the burnout dimension of PA.

Table 13

Summary of Multiple Linear Regression Analysis for IM and PA

Variable	B	SE(B)	β	t	p	F	p	R^2
Model						.462	.709	.016
nAch	-.037	.437	-.011	-.085	.933			
nAff	-.158	.440	-.048	-.360	.719			
nAut	-	-	-	-	-			
nPow	-.312	.302	-.140	-1.033	.305			

*$p < .05$.

Summary

The purpose of this study was to examine the relationship between the constructs of IM (nAch, nAff, nAut, nPow) and dimensions of burnout (EE, DP, and LPA). Results of the study suggested that the none of IM constructs were predictive of burnout dimensions, thus confirming all of the null hypothesis.

Chapter 5 will examine and interpret the findings of the study, the limitations of the study, recommendations for future studies, and discuss the implications of the study.

Chapter 5: Discussion, Conclusions, and Recommendations

The purpose of this quantitative study was to examine if there was a predictive relationship between the dimensions of burnout (EE, DP, and LPA) and IM (nAch, nAff, nPow, and nAut) in MHPs to address the gap in the literature in regard to the relationship between dispositional trait motivation and professional burnout in this population. Burnout in the mental health context differs from other types of work stress as it primarily results from social interaction that occurs between a helper and a recipient (Maslach, 2003). It has been found that burnout in MHPs contributes to issues related to decreased wellbeing, an increase in turnover rate, and loss of effectiveness in client treatment outcomes (Cieslak, 2016; Delgadillo et al., 2018; Gutierrez & Mullen, 2018). Given the proposed idea that burnout is the result of the interaction between an individuals and their work (Maslach, 2017), the aim of this study was to understand if an individual's motivational traits also interact with their work. This may include existing incongruence in an individual's IM and work environment (Rawolle et al., 2016). This study sought to examine if trait motivation was predictive of MHP burnout so that burnout can be better prevented and mitigated.

The results of this study found that there were no significant correlations between IMs of nAch, nAff, nPow and nAut of MHPs and the degree of burnout that they experienced in the dimensions of EE, DP, and LPA. The research question of the study was:

Research question: Do implicit motives (*n*Achievement, *n*Power, *n*Affiliation-Intimacy, and *n*Autonomy) as measured by the OMT predict levels of burnout

dimensions (Emotional Exhaustion, Depersonalization, and Low Personal Accomplishment) as measured by the MBI-HSS among mental health clinicians?

In examining the assumptions of the statistical model, collinearity was found to existed between nAut and the other independent variables of nAch, nAff, and nPow. As such, nAut was excluded from the regression analysis when testing the research questions and null hypotheses.

Regression analysis was then conducted with the IMs of nAch, nAff, and nPow as independent variables and the dimensions of burnout of EE, DP, and LPA as dependent variables. No significant correlations were found between the IM of nAch and the burnout dimensions of EE, DP, and LPA. No significant correlations were found between the IM of nAff and the burnout dimensions of EE, DP, and LPA. No significant correlations were found between nPow and the burnout dimensions of EE, DP, and LPA.

Interpretation of Findings

The results of the study contributed to the existing body of knowledge related to IMs and burnout among MHPs. It was found that despite the different degrees of IM a MHP may have, it does not specifically contribute to their burnout. This means that there are no motivational dispositions that are more or less prone to burnout and would exclude this motivational trait as a risk factor for MHPs entering the field. Although other trait dispositions, such as those of the Big 5 Personality Traits, can be predictive of burnout among counselors (Lent & Schwartz, 2012), the IM traits are a dimension of the individual where this is not an issue.

Additionally, it was found that nAut had a collinearity with the other IMs of nAch, nAff, and nPow among MHPs. It is possible that those who choose the profession of being a MHP tend to be more motivated by autonomy and freedom. The implicit motive of autonomy-freedom is described as the need or desire for self-integration. Self-integration is the process through which an individual discerns which aspects and components are a part of themselves, including aspects such as self-growth, self-preservation, and self-definition. This can also include the desire and need to experience internal congruency, self-worth, and self-awareness (Baum & Baumann, 2021). Given this description of nAut, it is reasonable to suggest that MHPs tend to be motivated by self-awareness, self-growth, self-worth, and self the need to experience internal congruency in their values and the vocation that they choose in helping others. This can also contribute to their desire to help clients engage in growth, gain self-worth, gain self-awareness, and experience internal congruency in their client's lives. The skew towards higher levels of nAut among MHPs in this study could be seen in Figure 7, further supporting this possibility. As such, it is possible that no significant correlations were found between the IMs of MHPs and burnout due to nAut being a greater and likely primary driving IM for individuals who enter the mental health field.

Additionally, since nAut is related to a desire for high internal congruency, the results of nAut being high in MHPs and demonstrating collinearity could suggest that MHPs tend to find congruency in their vocation and personal values and motivations.

Given that no other studies have been conducted on IMs and burnout among MHPs, this study has helped to contribute to the gap in the literature in this intersection

of concepts. This study has helped to identify that it is possible that individuals with higher nAut are more likely to be drawn to the mental health field. This knowledge can help guide and support additional research in IM among MHPs in the future.

Limitations of the Study

Several factors in this study could be potential limitations that would impact its generalizability to the MHP population. One major factor is that a disproportionately large number of psychiatrists responded to the survey, making up 78.65% of the entire sample. This means that the results of the study were largely skewed towards psychiatrists. Given that psychiatrists tend to have medication management appointments that only last 15–20 minutes and are more focused upon symptom treatment (Cruz et al., 2013) rather than engage in psychotherapy, it is possible that psychiatrists experience less burnout. This is compared to generally 45–55 minutes for an average therapy session (APA, 2002) or 60–90 minutes for specific treatment modalities in cases such as trauma treatments (Foa et al., 2019). This can have a high impact on the degree of burnout a non-psychiatrist MHP can experience as the sessions are both longer and more emotionally intensive.

Another factor that could be a potential limitation to this study includes the length of the survey, especially as the OMT was an open-ended questionnaire where participants had to generate their own answers in describing the pictures. One participant's results were excluded from the data as the participant wrote in answers such as "bored of this survey" and "this survey is too long." It is possible that other participants also harbored similar sentiments and did put forth effort to give thoughtful answers to the OMT.

Recommendations

Based upon the findings in this study, several recommendations can be made for future research. One recommendation is to conduct the same analysis of IMs and burnout in MHPs with the exclusion of psychiatrists. It is possible that psychiatrists in general experience less burnout than other MHPs and that a more distinct and pronounced correlation between the IMs and burnout can be seen. Another recommendation is to verify if the finding that MHPs tend to have higher levels of nAut as a part of their self-selection to entire the field still holds true with the exclusion of psychiatrists. It may be that it is actually psychiatrists who have a higher level of nAut rather than all MHPs. If it is verified that MHPs tend towards having higher nAut, further research into the impact of nAut in MHPs and other aspects of their work can be helpful to examine. This may help to provide further insight into MHPs as a population and ways to improve their motivation in the field with interventions focused upon nAut.

Future research should also focus on other aspects of MHP and IM, such as treatment outcome efficacy. While it was found that IMs do not impact burnout and therefor the burnout does not negatively impact treatment outcomes, it could be worthwhile to examine of IMs can be predictive of factors such as the therapeutic alliance and treatment outcomes.

Implications

Given the results of the study finding that IMs were not predictive of burnout among MHPs, one implication is that regardless of the IM of an individual that drives them towards the mental health field, it does not place them at risk of burnout. Although

it is still likely to be helpful and beneficial for students preparing for the mental health field to understand their dispositional motivations for other potential factors in the way that they are motivated for the vocation, it is likely not as helpful for them to understand the way it negatively impacts them in the area of burnout. Given that MHPs in the study tended to have high nAut and that collinearity was found, the results can that MHPs tend to find congruency in their vocation and personal values and motivations. This can be helpful for students preparing for the field to examine in themselves during the course of their studies. This can also be helpful for practicing MHPs to reexamine if they find themselves losing motivation in their vocation and to find areas of incongruence or stagnation especially as nAut has a component of growth involved (Baum & Baumann, 2021).

Conclusion

The purpose of this quantitative study was to examine whether there was a predictive relationship between the dimensions of burnout (EE, DP, and LPA) and IM (nAch, nAff, nPow, and nAut) in MHPs to address the gap in the literature in regard to the relationship between dispositional trait motivation and professional burnout in this population. The results of this study found that there was no predictive relationship between IMs and dimensions of burnout among MHPs. The study further revealed that collinearity existed between nAut and the other IM of nAch, nAff, and nPow, and that the study population tended to have higher levels of nAut. This suggested that nAut could be a motivational trait that the MHP profession selects for. An implication for this finding is for future research to be focused on nAut in students entering the MHP field and existing

MHPs and how this IM can be targeted to improve the well-being and effectiveness of MHPs, in areas such as therapeutic alliance and treatment outcomes.

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