

TITLE: Burnout and Leadership in Community Mental Health Systems

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OBJECTIVE: To investigate the nature of professional burnout, specifically whether aspects of burnout in clinical staff in community mental health agencies were systematically related to aspects of leadership behavior and quality of supervision of clinical supervisors.

METHODOLOGY: The sample consists of 151 volunteer respondents of whom one-third are men, ranging in age from 23 to 73 years with the average being 44. Three-quarters are caucasian, with 11% Latino, 5% Asian, 4% African American, and 3% Native American Indian. They are employed in Community Mental Health agencies in five counties in Northern California. They completed the LPI, the Maslach Burnout Inventory (Maslach et al. 1996), and a Clinical Supervisor Rating Scale (CSRS) designed by the authors.

KEY FINDINGS: Composite scores for the five leadership practices and the composite score of the CSRS were correlated with the three indicators of burnout: Personal Accomplishment, Emotional Exhaustion, and Depersonalization; although only the latter two were statistically significant. All of the leadership practices were inversely related to Emotional Exhaustion, and four out of five (except for Encouraging) were also inversely related to Depersonalization. In addition, a significant difference was found between ethnic groups on the LPI, with an ethnic minority grouping of African Americans, Asian Americans, Native Americans, and Others rated their supervisors lower on the LPI compared to groupings of Caucasians and Latinos. Clinicians working primarily with children rated their supervisors higher in regards to Encouraging and Enabling than those primarily working with adult populations.

"The result suggest that clinical supervisors can provide leadership which may contribute to the development of a positive working climate. This, in turn, may reduce an employee's sense of emotional exhaustion and depersonalization" (p. 10).