

# Factors Influencing Job Satisfaction in Certified Peer Specialists

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## Abstract

The role of Certified Peer Specialist addresses the growing need for mental health services and improves quality of mental health services. In order for CPSs to successfully fulfill their role they must be satisfied with their work setting. This study examines the impact of communal orientation, workplace integration, job activities, personal job history, and demographics on CPS's job satisfaction. Results indicate CPSs reporting higher organizational support, workplace integration, and a history of lengthy employments report higher job satisfaction than other CPSs. Interestingly, demographic characteristics, sharing personal recovery story, communal orientation and workload did not demonstrate an impact on job satisfaction.

**Key Words:** Job Satisfaction, Peer Support, Mental Health Workforce

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## Introduction

Many state mental health care systems have been forced to operate under deep budget cuts and more budget

cuts are expected in coming years (Honberg, Diehl, Kimball, Gruttadaro & Fitzpatrick, 2011). At the same time, the demand for mental health services is higher than it was in the past (Vernon, Salsberg, Erikson, & Kirsch, 2009). Mental health centers are challenged with meeting this increased demand with fewer resources. Employee retention is imperative for effective service delivery, especially at this critical time. When employees are satisfied with their job, they are less likely to voluntarily discontinue employment (Chen, Ployhart, Cooper Thomas, Anderson, & Bliese, 2011; Griffeth, Hom & Gaertner, 2000). Continuation of employment is beneficial not only to the employee who remains gainfully employed, but also to those who seek services at the agency, as well as the agency itself (Woltmann, et al., 2008; Ben-Dror, 1994; Hargrove, Fox, & Goldman, 1991; Bloom, 1977).

This study examines survey responses regarding job satisfaction from persons who are currently employed in the mental health service field as Certified Peer Specialists (CPS). This population is of particular interests because it is a relatively new role in mental health service delivery. A requirement of the CPS position is having personal experience with a mental health diagnosis. Thus CPSs are in a unique position as they are a minority among the mental health staff, but a member of the exclusive population being served. The integration of CPSs into the mental health system has the potential to create synthesis, collaboration and a greater understanding in providing well rounded support and services to those who are recovering from mental illness (Doughty & Tse, 2011; Repper & Carter, 2011). CPS services can also help to reduced cost of care for the mental health system (Doughty & Tse, 2011; Repper & Carter, 2011; Sledge, Lawless, Sells, Wieland, O'Connell & Davidson, 2011). Understanding the factors that contribute to the job satisfaction of CPSs could lead to greater viability of the position, allowing employers to reduce factors that negatively impact job satisfaction and increase the factors that have a positive impact.

#### *Job Satisfaction*

Meta-analysis of more than 100 studies has documented the relationship between low job satisfaction and intention to leave a job (Griffeth et al., 2000). Job satisfaction is believed to play a critical role in employee retention (Chen et al., 2011). However, they suggest that role of job satisfaction may actually be indirect involving complex moderating relationships with other job factors.

### Factors Related to Job Satisfaction

#### *Job Expectations*

The relationship between employee expectations of the job activities and actual job requirements is an important factor to job satisfaction (Acker, 2011; Chen et al., 2011, Porter, Steers, Mowday and Boulian, 1974). Employees experience role stress when their job demands are inconsistent with their job expectations (Acker, 2011). Employees who have their expectations met are more likely to stay on the job (Porter et al., 1974). Expectations about future work experiences also influence job satisfaction (Chen et al., 2011). New employees are at greater risk for decreasing job satisfaction based on expectations of future work experiences because they lack the ability to rely on past work experiences and outcomes in estimating future experiences (Chen et al., 2011).

#### *Workplace Integration and Perceived Organizational Support*

Integration into the workplace is both a formal and informal process. Formally, information is provided through mission statements, employee handbooks and policy manuals. Informally, information is obtained through staff interactions, gossip, norms and rituals. Both formal and informal information is important to a new employee (Teboul & Cole, 2003). Individuals in a workplace take into consideration the possible value others may have for future exchange and coordination, often looking for those who they find similar to themselves when exploring relational opportunities in the workplace (Teboul & Cole, 2003). Therefore, experiencing stigma or minority status could diminish perceived future value and increase perceived differences. Feeling that one is accepted by fellow co-workers and fully integrated into the work system is important for job sat-

isfaction (Kirsh, 2000). Issues facing CPSs, such as stigmatization could therefore negatively impact workplace integration.

A study of more than 300 clinical psychologists in the United States suggests that persons with mental illness diagnoses are viewed as undesirable and different than mental health professionals that do not have a mental health diagnosis (Servais & Saunders, 2007). This finding is alarming, being that so much work has been done to reduce stigma facing this population. The current framework that many clinical psychologists work within revolves around assigning negative diagnosis to persons in order to begin care, which may provide a partial explanation of these findings (Servais & Saunders, 2007). Certified peer specialists, who are often employed in mental health centers (Grant, Swink, Reinhart & Wituk, 2010), may have coworkers and/or supervisors who hold such biases against persons with a mental health diagnosis. If the CPSs are viewed as “different” or “undesirable” by others in the workplace, it could have a detrimental impact on workplace integration and perceived organizational support, and thereby job satisfaction.

Perceived organizational support is the extent to which the employee believes that the organization cares about them as individuals (Allen, Shore, & Griffith, 2003; Rhoades & Eisenberger, 2002). An organization demonstrates its support through fairness, supervisory support, organizational rewards and job conditions (Rhoades & Eisenberger, 2002). Perceived organizational support has been negatively associated with employee turnover (Allen et al., 2003) and positively related to job satisfaction (Acker, 2011; Miao et al, 2011; Rhoades & Eisenberger, 2002).

#### *Personal Characteristics*

Those who are communally oriented, gaining satisfaction and fulfillment from helping others, may be able to avoid job “burnout” better than those who report low communal orientations (VanYperen, 1996). Other employee characteristics, such as age (Acker, 2004), education (Acker, 2004; Ford & Honnor, 2000) and gender (Clark, 1997) may also influence job satisfaction (Chou, Kroger & Lee, 2010). Previous job changes, or job mobility, can increase the likelihood for job turnover (Becton, Carr, Judge, 2011). This finding encourages us to examine previous job changes in relationship to reported job satisfaction.

This study seeks to build a better understanding of the elements that can impact an employee’s reported level of job satisfaction. To do this, communal orientation, workplace integration, job activities, personal job history, and employee demographics were analyzed to determine their effect on job satisfaction.

#### *Methods*

##### *Participants*

Fifty-nine people who are currently working as a CPS and who attended the five day CPS training program held by Wichita State University between 2007 and 2009 participated in this research. Participation in the research was available to all those who attended these training sessions. Of those who participated in the research, the gender composition of Certified Peer Specialists was 68% female (n = 40) and 32% male (n = 19). Their race/ethnicity was 81% Caucasian, 12% African American, 2% Hispanic, 2% Asian and 3% identified as belonging to a racial/ethnic category that was not listed. Average age of CPSs was 47 years old (SD = 11.02 years), ranging from 22 to 67 years of age. When asked of highest level of education obtained, 21% reported they had graduated high school (n = 12), 4% reported receiving a G.E.D. (n = 2), 5% went to technical school (n = 3), 40% had some college (n = 23), 23% had graduated college (n = 13), and 7% had received a graduate degree (n = 4).

### *Measures*

*Job Activities and Services.* A 10 item scale was developed for this research that included the aspects of the CPS job description as defined by the state of Kansas. Participants who were currently working as a CPS were asked to rate how frequently they engage in each job related activity. Sample questions from this scale include “Share my personal story of recovery with consumers” or “Help consumers gain support from others”. Participants rated these items on a six point scale ranging from: (1) “not at all” (2) “rarely” (3) “some of the time” (4) “frequently” (5) “very frequently” and (6) “all of the time”. The scale was found to have high internal validity (Cronbach’s alpha = .85).

*Workplace Integration.* The level of integration into the mental health center was assessed by the Workplace Integration scale. The Workplace Integration Scale was developed for this research and consisted of 14 statements such as “I fit in at the mental health center” or “I am part of a team at the mental health center”. Participants were asked to rate how much they agreed with the statement on a 6 point likert scale ranging from (1) “strongly disagree” to (6) “strongly agree”. The Workplace Integration scale was found to have high internal validity (Cronbach’s alpha = .91).

*Indiana Job Satisfaction Survey.* The participant’s satisfaction with their employment at the mental health center was determined by responses on the Indiana Job Satisfaction Survey (IJSS) (Resnick & Bond, 2001). The 32 item questionnaire was developed specifically for employees who have mental illness (Resnick & Bond, 2001). The IJSS is comprised of 6 subscales, 1) General Satisfaction; 2) Pay; 3) Advancement and Security; 4) Supervision; 5) Coworkers; and 6) How I Feel On This Job. Questions were answered using a 4 point likert scale ranging from (1) “Strongly Disagree” to (4) “Strongly Agree”. The Indiana Job Satisfaction Survey was found to have high internal validity (Cronbach’s alpha = .90).

*Survey of Perceived Organizational Support.* The participant’s perceived level of organizational support was measured with the 8 item version of the Survey of Perceived Organizational Support (SPOS) derived from the original 32 item SPOS created in 1986 by Eisenberger, Huntington, Hutchison & Sowa. Examples of items from this scale are “The organization values my contribution to its well-being” or “The organization would ignore any complaint from me”. Questions are answered on a 7 point Likert scale which ranges from (1) “Strongly Disagree” to (7) “Strongly Agree”. This Survey of Perceived Organizational Support has been shown to have high internal validity (Cronbach’s alpha = .97) (Eisenberger, Huntington, Hutchison & Sowa, 1986). Following the recommendation of Rhoades and Eisenberger, the 8 item version of the SPOS was used “Because the original scale is unidimensional and has high internal reliability, the use of shorter versions does not appear problematic” (Rhoades and Eisenberger, 2002 page 699).

*Communal Orientation.* The participant’s level of communal orientation was assessed using the 14 item Communal Orientation Scale (COS) developed by Clark, Ouellette, Powell, & Milberg, 1987. The COS measures the degree to which a person governs their relationships with other-oriented behavior, considering the needs and feelings of the other person (McCall, Reno, Jalbert, & West, 2000). Examples of items from this scale are: “When making a decision, I take other people’s needs into account” and “I expect people to be responsive to my needs and feelings”. The response scale ranges from (1) “extremely uncharacteristic” to (5) “extremely characteristic”. The COS has a Cronbach’s alpha of .78, which was considered adequate (Clark, et.al, 1987).

### *Procedure*

*Interviews.* An email was sent to participants one week in advance to notify them that they would be called to participate in an interview about their experiences of being a CPS. Interviews took approximately 30 minutes to complete. At the beginning of the interview, consent was read over the phone to the participant and if they agreed, the interview was then conducted. Researchers read the interview questions to the participant and recorded the participant’s responses on a paper copy of the interview. Interviews were also digitally recorded for transcription purposes. Participants received 10 dollars (check by mail) for completing the interview. This study was approved by the Institutional Review Board at Wichita State University. All authors approved this manuscript and certify responsibility for the research.

## Results and Discussion

### *Descriptive Statistics*

Majority of the CPSs worked 20 hours per week, saw 10 peers per week, and 29% held another position at their work setting in addition to being a CPS. Thirty five percent of the CPSs in the sample first heard about the CPS position from their current supervisors and 26% found about about the CPS position from someone they are not professionally associated with.

### Regression Analysis

Four multiple regression models were estimated to evaluate the impact of communal orientation, perceived job satisfaction, and workplace integration on job satisfaction. In addition, other possible predictors were added to models 2-4 in order to examine their contribution to explaining variance in job satisfaction in relation to the three previously mentioned predictors (of communal orientation, perceived job satisfaction, and workplace integration). All predictor variables and the dependent variable were standardized as z-scores to improve interpretation and screen for univariate outliers. All univariate outliers with a z-score greater than 3.29 were replaced with the next closest value (Tabachnick and Fidell, 2007). Mahalanobis distances were calculated for each case in order to detect multivariate outliers (Tabachnick and Fidell, 2007). No multivariate outliers were detected in the dataset adjusted for univariate outliers.

### Model 1

The first model was constructed in order to examine the impacts of communal orientation, perceived organizational support, and workplace integration on CPS job satisfaction. The overall model was statistically significant  $R^2 = .59$ , adjusted  $R^2 = .57$ ,  $F(3, 55)$ ,  $p < .001$ . This means that the combination of the three predictors in the model explained 57% of variance in job satisfaction. According to the results both perceived organizational support ( $b = .38$ ,  $p < .001$ ) and workplace integration ( $b = .32$ ,  $p < .05$ ) were positively and significantly associated with job satisfaction. It appears that CPSs who felt integrated and perceived their current work setting as supportive were more likely to be satisfied with their job.

These findings are consistent with past literature (Acker, 2011; Miao et al., 2011; Allen et al., 2003; Rhoades & Eisenberger, 2002; Kirsh, 2000). Among other researchers, O'Reilly et al. (1991) found that individuals usually pick work setting based on how congruent they are with their job interests and values. He also added that this congruency affects job turnover. It appears that this person-work setting might also be true for CPSs. Further, communal orientation ( $b = -.05$ ) did not have a statistically significant relationship with job satisfaction in this model. However, it should be noted that although the communal orientation variable was normally distributed, there were no CPSs who reported absence of communal orientation. Without having a full range of responses, it's difficult to determine the true importance of communal orientation or job satisfaction.

### Model 2

The second model was constructed to investigate how the impact of communal orientation, perceived organizational support, and workplace integration on job satisfaction would change if we added CPS's demographic information (age, race, and education). Like the previous model, the second model was also statistically significant  $R^2 = .63$ , adjusted  $R^2 = .59$ ,  $F(6, 50)$ ,  $p < .001$ . None of the variables which were added to the model (age, race, and education) were significantly related to job satisfaction.

The impact of communal orientation, perceived organizational support, and workplace integration on the job satisfaction was not meaningfully changed by adding CPS's demographic predictors. This means that perceived organizational support and workplace integration have a positive effect on job satisfaction regardless of age, race, and education. Previous research findings have not been in a consistent agreement about the impact of demographic characteristics of individuals with mental illness on their job outcomes and job tenure. Wewiorski & Fabian (2004) in their review of literature found that some studies found that young age and being white were associated with getting and keeping job, but that this finding was inconsistent among the studies that they reviewed. There is even less consistent evidence about the impact of education, with some studies finding that education is not linked to unemployment or long term employment of individuals with mental illness, and some that both higher and lower education status are linked to unemployment (Wewiorski & Fabian, 2004).

A possible explanation for this study's inability to find the true impacts of the demographic variables on employment could be the lack of variability of demographic variables as the average age of this study's population was 47 and majority of the respondents were white. On the other hand, most previous studies only surveyed individuals in supported employment settings or a mix of supported and competitive employment. The expectations for individuals who work as CPSs, which is a competitive employment position, are very different than for individuals working in supported employment. This realization might make comparing factors that affect job satisfaction or job outcomes of CPSs and other individuals with mental illness not appropriate.

### Model 3

The purpose of the third model was to examine how adding the number of people CPS assists per week (indication of work load) and whether the CPS shared their personal story of recovery (indication of job description/job activity congruence) would improve the amount of variance in CPS's job satisfaction. Like the previous two models, the third model was also statistically significant  $R^2 = .64$ , adjusted  $R^2 = .58$ ,  $F(7, 49)$ ,  $p < .001$ , but did not explain more variance than Model 1 and 2. Neither the number of people CPS assists per week nor sharing the recovery story was significantly related to job satisfaction. Feldman (2001) found that emotional exhaustion, which is partly caused by high caseload, is a big concern for individuals delivering mental health services and one of the contributors to burnout. One reason that this study might have failed to find a link between caseload and job satisfaction is that the study population have not been employed long enough to experience problems associated with heavy caseloads.

### Model 4

The last model was created to investigate how CPS's previous work history would help in explaining variance in CPS's job satisfaction. In order to account for CPS's previous work history two variables were added to the combination of predictor variables from Model 1: (1) number of previous jobs, and (2) the length of longest employment. Like the previous three models, the overall model was statistically significant but this model accounted for more variance than the previous three models  $R^2 = .65$ , adjusted  $R^2 = .62$ ,  $F(5, 52)$ ,  $p < .001$ . As can be seen in Table 1, both a number of previous jobs ( $b = -.35$ ,  $p = .058$ ) and length of the longest employment ( $b = .40$ ,  $p < .05$ ) had a strong impact on job satisfaction, though only length of longest employment was statistically significant.

As one would expect, CPSs who had worked in more jobs in the past, were less likely to be satisfied with their current job, and CPSs who have had long time jobs in the past were more likely to be satisfied with their current job. This finding is similar to past research that has suggested that history of frequent job changes is positively related to job turnover (Becton et al., 2011), which is often connected to job satisfaction. Though this study did not examine job outcomes, current findings support previous research that indicated that stability/pattern of previous employment is related to vocational outcomes of individuals with disabilities (Baron, 2000, Goldberg et al., 2001). It appears that job satisfaction and job outcomes are highly dependent on how an individual approached employment in the past, which shapes one's expectations and performance in the current positions.

### Workplace Integration and Perceived Organizational Support

Though perceived organizational support and workplace integration have strong and stable predictors of job satisfaction, the large  $R^2$  (Table 1) as well as the large correlations between the two predictors (Table 2) and job satisfaction suggests that the four models might have issues with multicollinearity. In addition, both perceived organizational support and workplace integration have Tolerance scores below .4 and VIF scores above 2.5 (Table 4), which are further evidence of multicollinearity (Allison, 1999).

Table 1  
*Regression models of Job Satisfaction of CPSs*

Variable	Model 1		Model 2		Model 3		Model 4	
	b	$\beta$	b	$\beta$	b	$\beta$	b	$\beta$
Age			.04 (.07)	0.07	.09 (.06)	0.12		
Education			-.11 (.07)	-0.15	-.11 (.07)	-0.15		
Race			-.11 (.07)	-0.14				
Communal Orientation	-.05 (.06)	-0.07	-.09 (.07)	-0.12	-.06 (.07)	-.09	-.07 (.06)	-0.09
Perceived Organizational Support	.38** (.13)	.44	.39** (.13)	0.45	.42** (.14)	0.49	.39** (.12)	0.45
Workplace Integration	.32* (.13)	0.36	.28* (.13)	0.32	.30* (.10)	0.35	.29* (.12)	0.34
People Assisted per Week					.09 (.08)	0.09		
Personal Recovery Story					.09 (.08)	0.12		
Number of Previous Jobs							-.35 (.18)	-0.16
Longest Job							.40* (.16)	0.21
Constant		-0.16		-0.16		-0.16		-0.53
R <sup>2</sup>		0.59		0.63		0.64		0.65
Adjusted R <sup>2</sup>		0.57		0.59		0.58		0.62

\*p<.05 \*\*p<.001

Table 2  
*Correlations between predictors and dependent variable*

	Job Satisfaction	Communal Orientation	Perceived Organizational Support	Workplace Integration	Number of Previous Jobs
Job Satisfaction					
Communal Orientation	-.15				
Perceived Organizational Support	.59**	-.04			
Workplace Integration	.61**	-.05	.84**		
Number of Previous Jobs	-.09	-.16	-.06	-.19	
Longest Job	.03	.12	-.01	-.03	.03

Table 3  
*The Bivariate and Partial Correlations of the Predictors with Job Satisfaction*

Predictors	Correlation between each predictor and job satisfaction	Correlation between each predictor and job satisfaction controlling for all predictors
Communal Orientation	-.08	-.15
Perceived Organizational Support	.73	.40
Workplace Integration	.72	.31
Number of Previous Jobs	-.20	-.26
Longest Job	.20	.33

Table 4  
*Multicollinearity Statistics*

Predictors	Tolerance	VF
Communal Orientation	.95	1.1
Perceived Organizational Support	.33	3.0
Workplace Integration	.32	3.1
Number of Previous Jobs	.94	1.1
Longest Job	.98	1.0

This means that contributions of both perceived organizational support and workplace integration to higher job satisfaction should not be examined separately since they are highly correlated. Even though they are highly correlated, their individual contributions to job satisfaction, when we account for the contributions of all other variables (Table 3) are still large, which means that both perceived organizational support and workplace integration are nonetheless important for CPS's job satisfaction.

#### *Limitations*

This study had several limitations. Most importantly, since this study was cross sectional in nature, the cause and effect relationship between predictors and dependent variable cannot be established. In addition, our sample consisted mostly of white individuals with an average age of 47, CPS demographic characteristics that might not be similar to individuals in other states. Further, our study is based on a sample from one US state; therefore the findings of this study might not be generalizable to CPSs from other states.

#### *Future Research*

Future research should examine the relationship between prior job history, current job expectations and vocational outcomes and job satisfaction of individuals with mental illness. In addition, in order to gain more confidence in the findings from this study, future studies should try to replicate these findings on a national sample of CPSs. Future research should also longitudinally examine the effects of caseload on job satisfaction, to further examine the potential existence of a link between CPS's caseload and job satisfaction. Finally, future research should examine how CPS's job satisfaction affects their job turnover intentions, and compare the effect of job satisfaction to other possible factors affecting job turnover.

## Conclusion

This study was designed to build a better understanding of the elements that impact CPSs reported level of job satisfaction. According to the results, CPSs who report higher perceived organizational support, workplace integration, and have a history of more lengthy past employments report higher job satisfaction than other CPSs. Because of the high correlation between workplace integration and perceived organizational support, their impact on job satisfaction should not be considered independent from each other. Demographic characteristics, sharing personal recovery story, communal orientation and workload didn't have a statistically meaningful impact on job satisfaction. This might mean

that CPS employers should pay particular attention to the way new CPSs are integrated to their workplace. In addition, CPS managers might consider providing more supervision and guidance to CPSs who have held more jobs in the past.

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